



COUNTRY REPORT

2009-2011

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FROM OUR CHAIRMAN

Caritas Cambodia has been committed to improving the livelihood of the poorest of the poor in the country's destitute communities. Caritas Cambodia envisions "The realisation of a just society where rights of people are respected and integral development is promoted by building communities through an empowering process". For the last two decades, we have continued to journey with the impoverished communities in Cambodia to improve their socio-economic well beings, promote their culture, enrich their educational life, as well as to promote a healthy environment. We envisage a resilient community whereby social values such as justice, peace, freedom, love, sharing, unity, mutual respect, tolerance and inclusion are upheld. Our programs have reached out to the poorest of the

poor, the most disadvantaged and vulnerable groups of Cambodia. Our determined efforts coupled with active participation from people at the community level and meaningful cooperation and collaboration from the local authorities, we have achieved substantial amount of success during the reporting years. I would like to take this opportunity to express my appreciation and thanks to all the people living in our target areas for their active participation in various aspects of our project and program activities; everyone working in Caritas Cambodia for their tireless efforts in providing quality services to the poor; all the funding partners who have brought us this far in achieving our missions; and especially to the Royal Government of Cambodia for their meaningful collaboration and cooperation.

A handwritten signature in blue ink that reads "+ E. Figaredo (Kike)". The signature is written in a cursive style and is underlined with a single horizontal stroke.

Bishop Enrique Figaredo (Kike)

FROM OUR EXECUTIVE DIRECTOR



This report provides a snapshot of the achievements and results of the activities which were implemented in our programs during 2009-2011. This is another period of successes garnered from our tireless efforts with a strong determination to empower Cambodians who are the needy, the poorest of the poor, the marginalised and the vulnerable groups in the country's impoverished communities.

During the reporting period several programs – such as community development program, community health program, disaster management program, to name a few – were implemented. The programs were effectively carried out resulted in several significant accomplishments in empowering and uplifting the livelihood of the people in our target areas reaching out to 15 districts in 8 provinces across the country. I wish to express my thanks and appreciation to everyone working for Caritas Cambodia during for their endless and untiring efforts in bringing

about these achievements into existence. I would like to also thank people in our target areas for their active participation in our programs and our funding partners for the financial support that made our programs possible.

I would like to also take this opportunity to convey my appreciation to the Royal Government of Cambodia for their ongoing cooperation and collaboration with Caritas Cambodia so that we can continue to empower and improve the livelihood of the needy, the poorest of the poor, the marginalised and vulnerable people in Cambodia's impoverished communities. I would like to express my appreciation to the Bishops of the three prefectures for their support. I am also very thankful to our donors and funding partners for their generous support without which it would not be possible to conduct these vital programs. Finally, I am very appreciative of the hard work and dedication of our committed staff and the participation of our grassroots partners.

A handwritten signature in blue ink, consisting of a long horizontal line followed by a stylized 'K' and 'R' and some smaller scribbles.

Kim Rattana

CARITAS IN CAMBODIA

Caritas, the social development arm of the Catholic Church, first began its work in Cambodia in 1972 to help the victims of war, and functioned until 1975 when it was forced to leave the country. After the interruption during the years of the Khmer Rouge regime and the following years of conflict, Caritas Cambodia was re-established in 1990.

Caritas helps the poorest of the poor. We focus on the most disadvantaged, displaced, and vulnerable. Caritas works in solidarity with all people of good will and similar vision, and assists the poor solely on the basis of need, and not creed. We strive to promote human dignity, alleviate suffering, and foster charity, justice, and peace.



We currently work in eight provinces and support Village Development Associations in 186 villages. In addition to working with one volunteer from each village, Caritas employs 265 staff in Phnom Penh and the provinces.

OUR GUIDING PRINCIPLES AND VALUES

Human Dignity

Educating and empowering the individual in order to achieve collective empowerment is the focal point of all our activities.

Gender Balance

There is a special focus on women's empowerment through education and community organization.

Ecology and Sustainable Agriculture

Community-based agricultural development is an indispensable component of our activities.

Collective Ownership

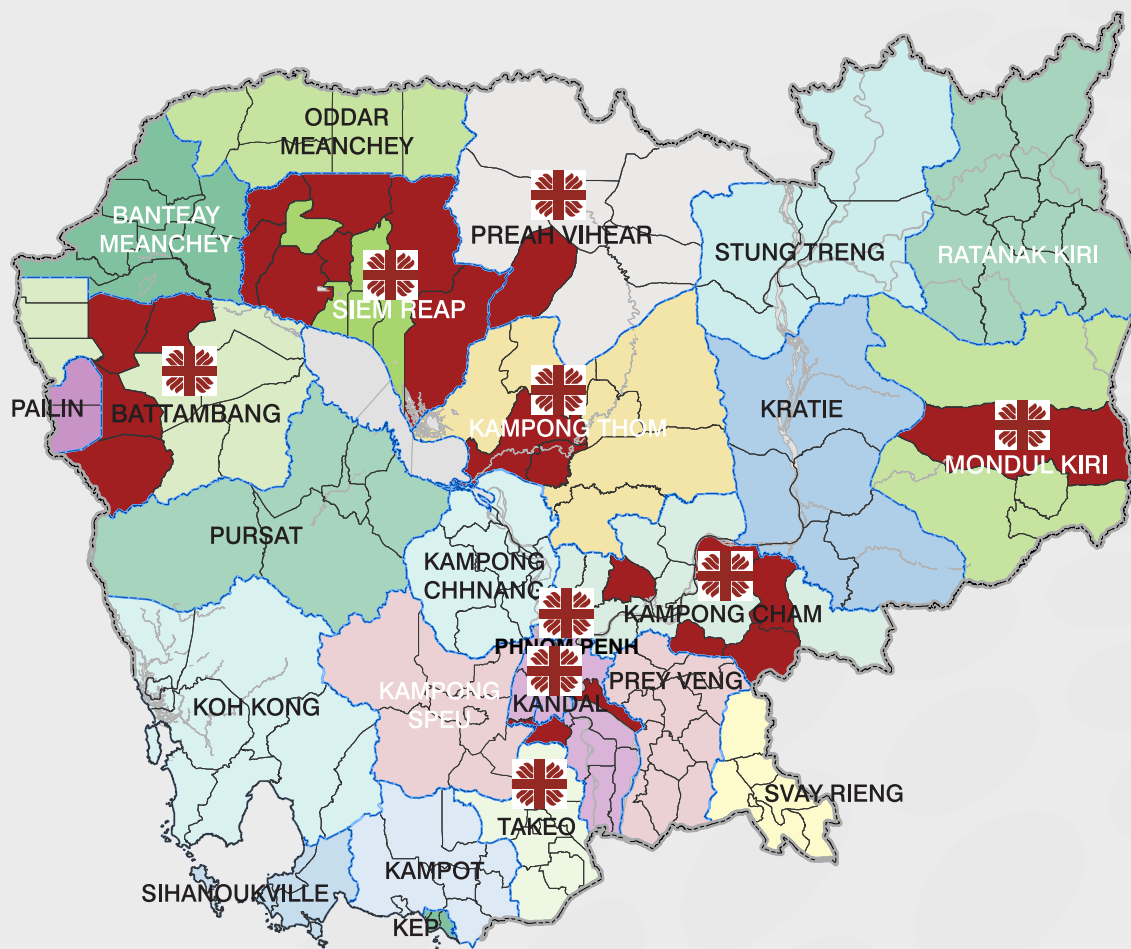
Commitment to build people into communities through the Village Development Associations is one of our priorities.

Support for the Sick

HIV/AIDS and human trafficking disproportionately affect the poor and the most vulnerable women. These issues are addressed both socially and medically.

Building Inclusive Communities

People with disabilities are often stigmatized and marginalized. Through self-empowerment we try to fulfill their needs, ensure their rights, and include them in the community development process.



CARITAS Works in 15 Districts in 10 Provinces



COMMUNITY DEVELOPMENT PROGRAMS

Caritas currently supports community development programs in 186 villages, in 15 districts, in eight target provinces. In addition to management and administrative staff, Caritas employs 42 community development workers who work closely with villagers and the Village Development Associations to foster participation in the democratic process. Our community development workers, mostly young college graduates from agricultural colleges or rural development programs, live for five days a week in the villages where they work. Our proactive inclusive approach engages the disabled, the disadvantaged, and the most vulnerable members of the community.

The focus of the Community Development Program is on community empowerment, food security and livelihoods, small infrastructure development, capacity building, and non-formal education. Through Village Development Associations people are encouraged to participate in community planning and are empowered to make decisions that will improve their lives.





COMMUNITY EMPOWERMENT

Caritas continues to support Village Development Associations (VDAs). These self-help groups are the primary decision-making organizations at the village level. The Community Empowerment Program works with 186 VDAs in eight target provinces.

We try to bring the poor and marginalized out of poverty by helping them understand their rights, become more self-reliant, and build functional communities. Through VDAs, villagers gradually gain confidence in their abilities and assume more responsibility for identifying needs, planning

activities, and implementing projects. Most VDAs promote and administer community savings plans, community rice banks, and other development initiatives for both the individual and the village.

VDA members participate in a variety of non-formal classes including adult literacy, critical thinking, financial management, needs assessment, project planning, monitoring and evaluation, bookkeeping, and leadership training. Also, exposure visits to other villages have provided an important opportunity to share knowledge and skills.





Cooperatives formed in Samlot



Samlot District, located about 90 km south of Battambang City, was a former stronghold of the Khmer Rouge. Three decades of war in the region left behind widespread disability and poverty. Caritas began its work in 2001 by mobilizing the poorest villagers to organize themselves within Village Development Associations (VDAs).

Currently, there are 15 VDAs (825 families) that have been formed into cooperatives. These in turn have joined together to form a federation. This federation with two representatives from each VDA serves as the management committee; establishing cooperatives to mobilize individual families to form producer and seller groups for their agricultural produce. There are now four production cooperatives in the district.

Caritas lends working capital to the federation which in turn lends money to the cooperatives. The cooperatives then distribute loans to individual producer groups. The production cooperative team works hard to mobilize individual families to form producer groups. They also contact local and outside middlemen to buy their produce so they have a stable and predictable market.

“Our achievement has convinced some private companies to build networks for business purposes. The CP Company came to negotiate with production cooperative representatives to provide yellow corn seeds to producer groups and agreed to buy back with a fair price according to the market price,” said Prok Yeng, stock controller.

Chhay Bun, leader of a production cooperative said “in the past we worked individually. We didn’t know how to work together or what we now call cooperative action. Since we formed a production cooperative, our members discuss and share ideas among themselves”. He added that “at first, my team and I felt reluctant to start a production cooperative as we had limited knowledge and skill. Now our members can expand their growing activities to increase income. It’s a kind of mutual help activity. We work for our people and our community, and feel very proud that we can achieve such success.”

FOOD SECURITY AND LIVELIHOOD DEVELOPMENT

The focus of food security and livelihood development is on market gardening and animal husbandry, income generation and micro-enterprise development, technical and financial support for farmers, and education through farmer visits to model farms.

Caritas agricultural development work includes many activities. Specific activities are always determined by local needs, but common activities that are supported include pig and chicken raising, digging and stocking fish ponds, composting and vegetable gardening, improved

rice planting techniques, digging wells, financing tractor plowing for the needy, and farmer education and extension services.

Establishing village rice banks is an important food security activity. Rice banks prevent indebtedness by giving villagers access to rice and rice seed when they are in need, instead of borrowing money from expensive moneylenders to buy seed for planting.

Group savings schemes, developed by Caritas and facilitated by village development associations, are used by members to start micro-enterprises.





SMALL INFRASTRUCTURE DEVELOPMENT

Poor road conditions, especially during the rainy season, make it difficult for villagers to travel to health centers, markets, and schools. Road and bridge improvements and construction lead to more social interaction and economic development. Caritas provides the money, and the villagers supply the labor.

Besides road construction, Caritas supports irrigation and sanitation projects such as digging wells and canals, constructing small dams, and installing culverts. Irrigation and other supported water projects are very important for thousands of villagers. With irrigation projects and water pumps, villagers can now grow crops in the dry season, more easily raise animals and farm fish, improve their sanitation and hygiene, and greatly improve their living standards.



Infrastructure projects are financed in a variety of ways. Some are financed with one-third of funds from the Village Development Association, one-third from the government's commune council fund, and one-third from Caritas. For other projects, Village Development Associations provide the labor while Caritas and partners provide the funds.



Rehabilitated canal irrigates two crops per year



A canal rehabilitation project has made a large difference in the lives of 31 families in Prek Reussey Village, Lvea Em District, Kandal Province. In 2010, Caritas in close collaboration with the local authorities, constructed a canal 4 meters wide, 2 meters deep, and 1250 meters long.

“Before the canal, we needed to pump water about 200 meters to our fields. Because of the distance we just couldn’t get enough. In dry years our output would decline 500 to 1,500kg per hectare”, said Khvan Sambath, Prek Reussey village chief, “but after we got the

funding for the canal from Caritas everything changed. We now have enough water and our yields have increased. We no longer need to borrow money and we can even save some money after harvesting. ”

Moeun Sna, a canal beneficiary said “I can get 1,000 to 1,500kg more rice per hectare after watering my rice field from the canal. Besides that, we now have enough water for production in March and April. I can now grow rice, vegetables, corn, and soy beans more than once a year.”

INTEGRATED DEVELOPMENT IN MONDULKIRI PROVINCE FOR INDIGENOUS PEOPLE

There are twelve indigenous groups living in the highlands of Mondulkiri. Mostly illiterate in Khmer, they have been marginalized in society, exploited by powerful interests, and have had their traditional forests illegally logged and their land stolen.

The aim of the program in Mondulkiri is to strengthen the capacity of the indigenous communities to know their rights, protect their interests, manage their natural resources, develop sustainable agriculture, and maintain their culture and traditions.

Through Village Development Associations we provide loans for micro-enterprises, training in networking and advocacy, non-formal classes in literacy and health education, support for agriculture and aquaculture projects through field visits, and water and sanitation projects.

Traditional weaving and handicrafts, resin collection, and traditional soft drink production are some of the main income generating activities that are being supported in the communities.





Water brings health and hygiene to the village



Pou Kreng village is one of three villages in the Sre Ompoum Commune, of Pechrada District, Mondulkiri Province. In the past the villagers got all their water from a small stream far from the village. A well could not be dug by hand since the water table was too low. With Caritas funding, a 16 meter deep tube well now provides for all the water needs of the 30 families in the village.

Srov Plerm, chief of a Village Development Association, is very thankful for the hard work Caritas has been doing to help relieve many of the difficulties in her village.

"I hear the sound of pumping like music to my ears. The 'music' starts everyday from 5 to 8 in the morning, and then again from 4 to 7 in the afternoon. The well is a great help to all the villagers, especially so for the elderly and the children. We are all much healthier and happier not using water from the stream."

YOUTH DEVELOPMENT PROGRAM

Every year more than 300,000 youth finish or drop out of school looking for work. Most have no skills and no employment experience. Gang membership and drug use are growing problems. Unable to find employment, many unskilled youth are drawn to prostitution or emigration where they are often exploited or trafficked into servitude.

The Youth Development Program selects poor or disabled youth from throughout the country, and provides them with the opportunity to learn a skilled trade, gain self-confidence, and become

self-reliant. Besides employment skills training through internships with local trades people and businesses, the youth program provides education in values, and opportunities to socialize and exchange information on job opportunities at its youth club. Dormitories for both boys and girls allow orphans and poor rural youth to attend the program.

There are currently 14 trade skills being offered both at the youth center and through outside internships.





"Caritas gave me a profession"



Vann Den, from Peam Chor District, in Prey Veng Province, has five siblings and his parents are farmers. Despite his obvious talents, he was working in the rice field until a friend suggested he apply for a scholarship to the Caritas Youth Development Program. This program made it possible for him to come to Phnom Penh, stay in a dormitory, and study painting.

Chhoy Sokchear, Vann Den's painting instructor, admired him greatly. "Den is a calm person. He is a good student, and he tries very hard. What's special about him is that

he does more than he says. Everyone likes and respects him."

Similar to Sokchear, Piseth, who is a friend of Vann Den, said that he likes Den very much because this young talented painter is such a kind and helpful person. Piseth added that, "he always helps his friends in their studying, and he always cares about others".

After studying for only one year, this young student has made great changes in his life and can now support himself and his family by selling his paintings. "I was so excited that I could earn money for the first time by using my brain instead of my body. I used to earn \$1 a day in the rice field, and now I can't believe that I can earn \$10 a day," said Den, then adding "all my customers like my paintings and they sometimes even order more. You know, sometimes I don't even have enough time to paint for all of my customers".

Vann Den finished his study and received his certificate in 2010. Since then he has formed a team of painters to help him meet the demand of his customers. He is very thankful to Caritas for giving him and other poor youth a chance to change their lives. "Now I can provide for myself and can even support my younger brothers and sisters so they can go to school too."



COMMUNITY HEALTH PROGRAMS

Caritas Community Health Programs are now reaching over 130 target villages in Siem Reap, Battambang, and Kampong Thom Provinces. Our staff of 40 community health workers provides both community-based health care, and in close cooperation with the Ministry of Health, a variety of services through the government health centers.

To help implement our outreach programs and make community health care sustainable, Caritas has recruited and trained a health care volunteer from each Village Development Association. These volunteers identify needs in their communities and mobilize people to participate in project activities. Caritas provides technical support and the World Food Programme provides rice support for the volunteers.

Besides our health center-based and community-based programs, Caritas supports an eye hospital, a mental health facility, and health care in Siem Reap and Kampong Thom prisons.





TAKEO EYE HOSPITAL

Ninety percent of all cases of blindness in Cambodia are considered to be avoidable, and eighty percent are curable with proper treatment. Until 1997, when the Takeo Eye Hospital started operations, tens of thousands of poor rural Cambodians went blind unnecessarily because of a lack of accessible or affordable cataract surgery.

The hospital was established by Maryknoll Cambodia to train doctors and nurses to assist the Ministry of Health in delivering quality eye care. In 2000, the hospital was handed over to Caritas, and is now being managed by the Daughters of Charity. The hospital program aims to integrate blind people into society, to eliminate preventable and treatable blindness, to train eye care specialists, and finally to train doctors and nurses so they can establish eye care units in provincial government hospitals and conduct research relevant to eye conditions in Cambodia and other developing countries.



Over the past 13 years Takeo Eye Hospital has trained 36 doctors and 79 nurses who are now working at provincial government hospitals throughout the country. The hospital has served over 230,000 outpatients, 42,000 in-patients, and has performed over 35,000 surgeries. The hospital does not turn away people unable to pay, and the poorest patients are even helped with a few dollars for transportation home after surgery.

In April 2010, the new building for the Takeo Eye Hospital was inaugurated by HM King Norodom Sihamoni, and in May the Kirivong Vision Center began to make eye care services more accessible in remote areas.



A gift of sight



Yeay Sam, 92, lives with her grandson and great grandchildren in Cheutealplous Village, Traing District, of Takeo Province. About five years ago her eyesight started to blur. As there was no pain she ignored it, assuming it was simply a symptom of ageing. Her vision continued to deteriorate until 2009, when she had reached the point of almost totally blindness. In the last two years it became very difficult to walk alone. "I really missed the times I would go to the pagodas to pray. I wanted to see my friends. It was totally difficult when I needed to go to the toilet or make food when I was blind", said Yeay Sam.

It was not until Sam attended an eye education and examination event organized by the Takeo Eye Hospital and a private clinic in her commune that she found out that maybe her vision could be improved.

When she came to the hospital she was diagnosed with mature cataracts in both eyes. She had the cataracts removed one at a time with follow-up visits a week after each surgery. After each surgery she took her eye drop medication many times a day for a week. Because Yeay Sam is poor, all her treatment was free and she was also given food at the hospital and money for transportation home.

Yeay Sam can now see everything clearly. She is so excited that she can see her grandson, grandchildren and her friends again. Moreover, she said "Nothing can make me happier than seeing everything around me again. Blindness made me live in darkness and made me live in a world of loneliness. Takeo Eye Hospital and Caritas gave me my life back. I will never forget who helped me to see again."

CENTER FOR CHILD AND ADOLESCENT MENTAL HEALTH

The Center for Child and Adolescent Mental Health is a collaborative project between Caritas and the Ministry of Health. Our aim is to foster concern, compassion, and collective community action for the sufferers of mental illness. We provide comprehensive services for children suffering from developmental delay, psychological problems, and neuro-psychiatric problems such as autism, cerebral palsy, Down Syndrome, and severe mental retardation.

We have seen over 5,000 children from 16 provinces, either at the center or through the Parents and Care Givers Empowerment Program. We have volunteers in the community-based program who work in 19 villages in three districts. Our aim is to introduce attitude changes in the

community, prevent abandonment of disabled children, and reduce distress among affected families through early identification and intervention.

The center also conducts school-based outreach programs, directed at both students and teachers. These are designed to raise the awareness of mental disabilities, promote inclusiveness in communities, and build the capacity of teachers to recognize problems, to teach life skills, and to promote mental and physical health.

To maintain our quality of service, the center is collaborating with the Singapore International Foundation for both in-service training and external training in Singapore, as part of the Continuing Professional Development Program.





CCAMH provides hope



Chann Reasey is a fourteen-month-old baby living in Steung Mean Chey with her parents. During her third month of pregnancy Reasey's mother developed a sore throat and treated it with antibiotics. Reasey was delivered premature and weighed only 2.9 kg at birth. During the first few months, Chann Reasey had difficulty breathing. She was unable to sit, stand, or even crawl. She was unable to hold or play with anything. Moreover, she often cried, suffered fevers and throat problems, and choked while eating.

When Reasey's mother heard about the Centre for Child and Adolescent Mental Health (CCAMH) from her neighbor she quickly brought in her baby. Since then CCAMH has been providing free training for the mother on stimulation techniques for gross motor skill development. Reasey's mother has been taught how to use a large ball to exercise the child's neck muscles, how to improve the feeding and carrying positions, and exercises to control drooling. All the activities above were demonstrated and she was encouraged to practice the same with her child at home and to praise the child during the activities. Reasey's mother was also given psychosocial education about her child's problem.

Sok Dearozet, community program manager of CCAMH, said that the stimulation unit, which opened in 2005, has so far treated 50 children, of which about 30 have improved. She is not sure whether or not Reasey will walk or stand up, but there is still hope as she is young and both her mother and CCAMH staff are taking good care of her.

"I'm very glad now because my daughter is stronger and healthier than before. She does not choke and she can eat more. Moreover, her spittle does not come out anymore," said Reasey's mother. She added that, "I still hope that my only daughter will walk and stand."

PRISON HEALTH CARE



Caritas has been helping prisoners with their health and psycho-social needs since 2006. We began our health care program in the Siem Reap provincial prison, and last year began providing services and material support in the Kampong Thom provincial prison.

In collaboration with the Ministry of Interior, the Provincial Health Department and prison staff, we began our program by identifying prisoner needs and building the capacity of prison staff through training and exposure visits.

Our goal is to set up a health care system in the prisons so that the rights of inmates are respected and that they have access to health care and treatment like all citizens. Our holistic approach provides physical, emotional, social and spiritual support to prisoners. Prisoners have daily access to consultation and treatments at the in-patient facility – drugs are provided by the Ministry of Health. A referral system has been developed for chronic disease management for the treatment

of HIV/AIDS, Tuberculosis, Diabetes, Asthma, and Epilepsy.

In addition to counseling and treatment, Caritas provides soap, water filters, mosquito nets, and reading glasses. In addition, prisoners receive monthly food supplements and small gifts on special holidays.

Without outside support and money from family and friends, prisoners often lack a sufficient diet. In order to sustain food security at the prison, Caritas encourages vegetable gardening, fish raising, and fruit tree production so that prisoners can supplement their ration of food.

Caritas has also constructed a small room for inmate mothers and their young children where a social development program, with a special focus on women, provides weekly education on topics such as job opportunities, life skills, domestic violence, sexual and child abuse, and human trafficking. The children are supported with food and clothing as needed.

HOME-BASED CARE FOR PEOPLE LIVING WITH AIDS

Cambodia has achieved excellent progress in reducing the HIV prevalence rates from 2 percent in 1998 to 0.9 percent in 2006. However, women are an increasing proportion of people living with HIV/AIDS – from 38 percent in 1997 to 52 percent in 2006.

Although awareness and understanding of HIV/AIDS is gradually increasing, people with AIDS are usually economically marginalized and some still face discrimination in their communities.

In collaboration with the Ministry of Health and other NGOs, the aim of the Caritas program is to improve the quality of life of poor families living with AIDS by providing comprehensive home-based care and organizing support groups. The home-based

care program provides quality nursing, as well as medical, educational, emotional, and social support. Re-integration into the community is the main goal of the program.

People affected by HIV are economically fragile and need Caritas support and skills training to help them increase their income and enable them to sustain their families. Self-help support groups help members adhere to their ARV treatments and develop savings and credit programs so they can borrow money to start small businesses or other income generating activities. After a year of support, over 85 percent of members no longer require Caritas assistance, as they become able to support themselves economically, go to the clinic regularly for treatments, and send their children to school.

“Caritas is like another parent”



Rann Keo, 32, lives with her nine-year-old son in Charmm Bork village, Prasat Barkong district, Siem Reap province. In 2000, because of her hard work, this productive woman was able to afford to buy a small plot of land and build a house. Soon after, she married a man who used to migrate to Thailand for work. During her pregnancy, her husband got seriously ill.

Because of the expensive treatment, she sold all her property and took a \$600 loan from the bank. Nevertheless, her husband still died without her knowing the diagnosis. Some of her neighbors told her that her husband died because of AIDS but she did not believe it. With her new baby, Rann Keo returned to live with her grandmother.

In 2002, she started to feel very tired and decided to get a blood test at the health center. She was shocked at the HIV positive result and felt hopeless. After registering with the Caritas Home-based Care Program, Keo was provided support and education, and is now feeling much better about her life. The Caritas health care workers visit often and remind her about her regular ARV treatments. She has been given a bicycle to use for her vegetable selling business and for trips to the hospital.

In 2009, Keo was selected as a “PLHA key farmer”. She has since attended training on fish and chicken raising and home gardening skills through exposure visits to PLHA livelihood activities in Battambang. After the training she was given vegetable seeds, money for chickens and a chicken cage, and plastic for lining a small fish pond. She has also attended leadership skills training and training of trainers organized by the NGO CEDAC. Of the 24 trained key farmers, Keo is the first producer to earn 30,000 Riels per week. She has also started training other members in her PLHA group.

Through her hard work, Rann Keo has now bought another small plot of land, and with some Caritas support has built a small house for her and her son. “Caritas is like another parent, without Caritas I don’t think I could have survived until now.”

DISASTER MANAGEMENT

Floods, drought, wind storms, landslides, and devastating fires in densely populated communities are common disasters in Cambodia. The regular occurrence of floods and droughts make Cambodia among the most disaster prone in Southeast Asia. With 80% of the population depending on fisheries and agriculture for their livelihood, even a small difference in the predictability of the weather can have a major impact on food security.

Caritas is on the scene soon after disasters to provide immediate emergency relief, and often for many more months after for rehabilitation and reconstruction.

In 2000, Cambodia experienced its worst flooding in recent history, with an estimated damage of \$150 million. It affected more than 3 million people in 22 of the 24 provinces, killing 182 people and displacing 85,000 families. In 2002, a severe drought affected 2 million people and cost \$38 million.

The most recent devastating flood, in September 2011, inundated 1,360 schools, 491 pagodas, 115 health centers, nearly 300,000 hectares of paddy, displaced 52,000 families, drowned 1,675 cows and pigs, and killed 250 people throughout the 19 provinces affected. Over 350,000 villagers faced food shortages. In addition, over 900 kilometers of national and provincial roads and 4,500 kilometers of rural roads were damaged, along with many bridges and check dams.

In collaboration with government and other NGOs, Caritas has played a very active role in providing early emergency response, and continues to help affected families back to normalcy. Our 5-months emergency and early recovery response provided food, rice and vegetable seeds, drum seeders, and health care through mobile health camps. Over 8,000 families in nine provinces, who were identified as the most vulnerable, were helped.

After our emergency response, we continue to provide rice seeds, vegetable seeds and agriculture support materials, as well as health care support and capacity building to the affected farmers.

Caritas, in collaboration with the National Committee for Disaster Management and other NGOs, is also implementing a prevention strategy in its targeted communities that builds upon existing capacities and coping mechanisms to collectively design appropriate long-term risk reduction and disaster preparedness plans.

Effective disaster management involves working with all stakeholders, especially the most vulnerable, and strengthening local capacity for prevention, mitigation, and emergency response.

Irrigation and water catchment projects, training in crop diversification, and preparing village first aid and emergency kits are some of our activities.





Caritas builds homes and hope for disaster victims



Srey Roath, 55, is a poor farmer who lives with her daughters and grandchildren in Kompong Svay district, of Kompong Thom province.

As a widow, Srey Roath's life has been a struggle. However, her life became even more difficult in 2009 when storms from Typhoon Ketsana destroyed her house, rice, vegetables, and killed her animals. There were thousands of other families in the region that were also affected.

Besides responding quickly with emergency assistance, Caritas has since given the affected villagers a training course in disaster risk reduction, and over the last year we have repaired 68 houses and have built 41 new ones. These new wooden houses, 6 meters by 6.5 meters, are roofed with ceramic tiles and have cement foundations and pillars.

"I live without fear since Caritas built a nice new house for me and my family. This house gives us happiness and hope. In the past because I lived in a small shack when I heard the strong wind I was so afraid I could not sleep at all," said Srey Roath with a bright smile. Laughing and carrying her grandchild, she added, "Caritas helped me when I was in great difficulty. Caritas is a true friend to me."

TOUL SAMBO RESETTLEMENT

In addition to providing relief for victims of natural disasters, Caritas has also helped in the resettlement of eviction victims. Toul Sambo community, on the outskirts of Phnom Penh, is now home for the displaced residents of the former Borei Keila community. These 45 families have joined 54 other resident families already living at Toul Sambo who were victims of a 2009 riverbank landslide.

In collaboration with the government and UN agencies, Caritas has supported the construction and upgrading of 45 concrete houses, a meeting hall, roads, and a children's playground, and provided short-term food security. In addition, Caritas has facilitated and supported the digging

of a large fish pond, the planting of mango trees, and the connection of water and electricity. For all the community development projects we provide the financing and the community representatives provide the workers, and if necessary hire outside contractors.

Besides infrastructure, Caritas is also supporting income generating activities through training. The community, following the government's marketing initiative of "one village, one product", now produces four kinds of liquid soaps (for dish washing, hand washing, clothes washing, and floor cleaning). Caritas has also provided training and design assistance for the production of a variety of handicrafts.



RIGHTS-BASED ADVOCACY



Worker exploitation and land grabbing is endemic in Cambodian society, and it is the voiceless poor who suffer the most. In the face of abuses by rich and powerful people, the poor have little recourse before the law. Lacking legal knowledge or money to buy legal advice they remain victimized.

The Caritas Rights-based Advocacy Program focuses on the most marginalized and excluded groups in society to strengthen their claims for social and political justice, as well as economic resources. Caritas builds communities through an empowering process that helps the poorest advocate for their rights. We also seek the support of the government, other NGOs, and local authorities to give voice to the poor to express their concerns and advocate for policy changes.

Caritas works with other NGOs and government to organize and promote advocacy events. Over the last two years we have organized two national forums. One forum was concerned with the “Impact of International Economics on the Cambodian People”, and was attended by farmers, representatives of garment workers, NGOs, and government officials. The second forum, “Together Raising Awareness on Climate

Change for Sustainable Agriculture”, was attended by over 400 representatives from NGOs and farmers from 22 provinces. Caritas also was involved in organizing a regional forum on sustainable agriculture that included participants from Asian partner agencies, national and international NGOs, and farmers from 22 provinces. The Rights-based Advocacy desk also organizes events to raise awareness on National Sanitation Day, Environment Day, and on Human Rights Day every year to promote the rights of the Cambodian people.

Rights-based advocacy and community empowerment have been mainstreamed throughout all of our programs.



GENDER AND ANTI-TRAFFICKING

Traditionally, Cambodia has been hierarchal and male-dominated. Although progress is being made, particularly among younger women, gender attitudes and relations enshrined in traditional codes of conduct for women, as well as male attitudes and behavior, remain obstacles to achieving equality in society, the economy, and politics.

Caritas is helping women, especially the marginalized, to participate in the development process. We recognize that empowering women and girls is a very important cost-effective development intervention. Whether it is educating girls or empowering women with loans and education, the results are usually favorable. It is generally acknowledged gender-related issues and concerns need to be integrated into mainstream institutions, policies, programs and services, and that gender equality objectives cannot be achieved by women, women-specific institutions or women-specific projects alone.

We are committed to women's equal rights and an equal role in contributing to social, economic, and political development. Our empowerment activities improve the socio-economic status of women, which contributes to and reinforces women's participation in politics and decision making at all levels.

Awareness training has been provided for Village Development Association members in our target areas in order to ensure that women's issues are included in village planning. The program also provided awareness training on the nature of human trafficking for the Caritas regional offices, partner NGOs, local authorities, representatives from the Catholic Church in Poi Pet, and some community members from Kandal Province. We also trained 135 students from the Caritas Youth Development Program on gender and human trafficking issues. Along with women from government, the private sector, NGOs, and students, we also celebrated International Women's Day at the Department of Women's Affairs in Kampong Thom Province.



DONORS

| | |
|----|--|
| 1 | Caritas Germany |
| 2 | Caritas Switzerland |
| 3 | Caritas Spain |
| 4 | Caritas Australia |
| 5 | Indian brazil South Africa ("IBSA") Fund-UN |
| 6 | Caritas France - Secours Catholique |
| 7 | Catholic Relief Services |
| 8 | One Body One Spirit ("OBOS") Caritas Seoul |
| 9 | Caritas Scotland |
| 10 | Misereor |
| 11 | Caritas Japan |
| 12 | Christian Blind Mission ("CBM") |
| 13 | Caritas Korea International |
| 14 | Caritas Hong Kong |
| 15 | ("YMCA's") of Korea |
| 16 | Cambodia Church |
| 17 | Caritas International Belgium |
| 18 | Caritas Czech Republic |
| 19 | Caritas Humanitarian Aid & Relief Initiative-Caritas Singapore |
| 20 | Home of Charlotte's Children Foundation |
| 21 | Malis |
| 22 | Avoidable Blindness Initiative 2 - |
| 23 | Singapore International Foundation-Meridian Junior College |
| 24 | Other / Private donor |

FINANCIAL SUMMARY 2009

| STATEMENT OF SOURCES OF FUND AND EXPENDITURES 2009 | | |
|--|---|------------------|
| | | YEAR 2009 |
| INCOME | | |
| | Funds received from Partners | 2,427,768 |
| | Other incomes | 102,444 |
| | Total Income | 2,530,212 |
| EXPENDICTURE | | |
| | Cambodia Emergency Appeal Typhoon Ketsana | 417,880 |
| | Caritas Child Mental Health Programme | 187,337 |
| | National Office-Structural Support Programme | 133,955 |
| | Kampong Thom Integrated Development Programme | 118,709 |
| | Siem Reap Home Base Care Programme | 105,334 |
| | Siem Reap Global Fund | 102,683 |
| | Battambang Rattanak Mondul Community Development Programme | 95,189 |
| | Kandal Community Development Programme | 80,737 |
| | Preah Vihear Development Programme | 71,621 |
| | Kampong Cham Community Development Programme | 67,576 |
| | Mondulkiri Community Development Programme | 50,847 |
| | Youth Vocational Training Programme | 68,470 |
| | Siem Reap Community Health Programme | 64,467 |
| | Battambang Samlot Community Development Programme | 60,088 |
| | Siem Reap Community Development Programme | 56,775 |
| | Battambang Bovel Monkul Borei Community Development Programme | 56,094 |
| | Siem Reap Chikreng Programme | 52,670 |
| | Kampong Thom Sustainable Agriculture Programme | 45,153 |
| | Battambang Community Health Programme | 30,630 |
| | Battambang Bovel Monkul Borei Community Development Programme | 26,099 |
| | Siem Reap Health Prisoner Programme | 25,596 |
| | Kampong Thom Health Programme | 25,215 |
| | Kampong Cham Leprosy Programme | 6,441 |
| | Other Expense | 248,346 |
| | Total Expenditures | 2,197,912 |

| TOTAL FUND RECEIVED BY PARTNERS FOR YEAR 2009 | | | |
|---|--|------------------|----------------|
| No. | PARNTERS | YEAR 2009 | % |
| 1 | Caritas Spain | 423,656 | 17.45% |
| 2 | Caritas Germany | 335,800 | 13.83% |
| 3 | Caritas Australia | 270,870 | 11.16% |
| 4 | Caritas France/Secours Catholique | 233,473 | 9.62% |
| 5 | Catholic Releif Service (CRS) | 196,980 | 8.11% |
| 6 | Misereor | 149,748 | 6.17% |
| 7 | United Nation Development Programme (UNDP) | 145,000 | 5.97% |
| 8 | Caritas-Switzerland | 128,199 | 5.28% |
| 9 | Caritas-Scotland | 120,584 | 4.97% |
| 10 | Caritas-Japan | 80,690 | 3.32% |
| 11 | One Body One Spirit (OBOS) | 65,708 | 2.71% |
| 12 | Caritas Canada-Development And Peace (D&P) | 46,697 | 1.92% |
| 13 | Caritas-Hong Kong | 43,745 | 1.80% |
| 14 | TROCAIRE | 42,000 | 1.73% |
| 15 | Foundation RR | 35,000 | 1.44% |
| 16 | Caritas-Asia | 26,217 | 1.08% |
| 17 | UMEA University | 21,865 | 0.90% |
| 18 | Caritas-Macau | 6,965 | 0.29% |
| 19 | Other donors | 54,571 | 2.25% |
| | TOTAL FUND RECEIVED | 2,427,768 | 100.00% |

TOTAL EXPENDICTURES BY PROGRAM FOR YEAR 2009

| No. | PROGRAMME | YEAR 2009 | % |
|-----|---|------------------|----------------|
| 1 | National Office-Structural Support Programme | 133,955 | 6.87% |
| 2 | Kampong Thom Integrated Development Programme | 118,709 | 6.09% |
| 3 | Battambang Rattanak Mondul Community Development Programme | 95,189 | 4.88% |
| 4 | Preah Vihear Development Programme | 71,621 | 3.67% |
| 5 | Battambang Bovel Monkul Borie Community Developmen Programme | 56,094 | 2.88% |
| 6 | Kandal Community Development Programme | 80,737 | 4.14% |
| 7 | Siem Reap Chikreng Programme | 52,670 | 2.70% |
| 8 | Battambang Samlot Community Development Programme | 60,088 | 3.08% |
| 9 | Kampong Cham Community Development Programme | 67,576 | 3.47% |
| 10 | Mondulkiri Community Development Programme | 50,847 | 2.61% |
| 11 | Kampong Thom Sustainable Agriculture Programme | 45,153 | 2.32% |
| 12 | Siem Reap Community Development Programme | 56,775 | 2.91% |
| 13 | Battambang Bovel Monkul Borei Community Development Programme | 26,099 | 1.34% |
| 14 | Caritas Child Mental Health Programme | 187,337 | 9.61% |
| 15 | Siem Reap Home Base Care Programme | 105,334 | 5.40% |
| 16 | Siem Reap Global Fund | 102,683 | 5.27% |
| 17 | Siem Reap Community Health Programme | 64,467 | 3.31% |
| 18 | Siem Reap Health Prisoner Programme | 25,596 | 1.31% |
| 19 | Battambang Community Health Programme | 30,630 | 1.57% |
| 20 | Kampong Thom Health Programme | 25,215 | 1.29% |
| 21 | Kampong Cham Leprosy Programme | 6,441 | 0.33% |
| 22 | Cambodia Emergency Appeal Typhoon Ketsana | 417,880 | 21.43% |
| 23 | Youth Vocational Training Programme | 68,470 | 3.51% |
| | TOTAL EXPENDICTURES | 1,949,566 | 100.00% |

SUMMARY REPORT BY SECTOR 2009

| No. | EXPENDICTURES BY SECTOR | YEAR 2009 | % |
|-------------------------|-------------------------------------|-----------|--------|
| 1 | Community Development Sector | 921,954 | 47.29% |
| 2 | Health Development Sector | 541,262 | 27.76% |
| 3 | Emergency Response Sector / CRR-CAA | 417,880 | 21.43% |
| 4 | Vocational Training Sector | 68,470 | 3.51% |
| Total Expense by Sector | | 1,949,566 | 100% |

FINANCIAL SUMMARY 2010

| STATEMENT OF SOURCES OF FUND AND EXPENDITURES 2010 | | |
|--|--|------------------|
| | | YEAR 2010 |
| INCOME | | |
| | Funds received from Partners | 2,268,946 |
| | Other incomes | 103,213 |
| | Total Income | 2,372,159 |
| EXPENDICTURE | | |
| | Rehabilitation Recovery Phase Emergency Ketsena Programme | 226,595 |
| | National Office-Structural Support Programme | 184,925 |
| | Caritas Child Mental Health Programme | 158,976 |
| | Siem Reap Home Base Care Programme | 147,690 |
| | Empowering Children and Adolescents with Special Need and Their Families towards Inclusive Development and Poverty Alleviation in Cambodia | 133,395 |
| | Kampong Thom Integrated Development Programme | 106,131 |
| | Siem Reap Global Fund | 103,475 |
| | Battambang Rattanak Mondul Community Development Programme | 96,790 |
| | Preah Viheae Development Programme | 95,530 |
| | Kampong Cham Community Development Programme | 68,040 |
| | Mondulkiri Community Development Programme | 66,443 |
| | Battambang Bovel Monkul Borie Community Development Programme | 88,172 |
| | Siem Reap Community Health Programme | 85,813 |
| | Kandal Community Development Programme | 84,143 |
| | Siem Reap Chikreng Programme | 83,341 |
| | Youth Vocational Training Programme | 82,306 |
| | Battambang Samlot Community Development Programme | 73,331 |
| | Kampong Thom Sustainable Agriculture Programme | 60,276 |
| | Siem Reap Community Development Programme | 40,144 |

| | | |
|--|---|------------------|
| | Siem Reap Health Prisoner Programme | 38,869 |
| | Battambang Community Health Programme | 34,682 |
| | Kampong Thom Health Programme | 29,600 |
| | Cambodia Emergency Appeal Typhoon Ketsana | 24,888 |
| | Kampong Thom Health Prison Programme | 9,783 |
| | Kampong Cham Leprosy Programme | 4,107 |
| | Other Expenses | 518,119 |
| | Total Expenditures | 2,645,564 |

| TOTAL FUND RECEIVED BY PARTNERS FOR YEAR 2010 | | | |
|---|--|------------------|----------------|
| No. | PARNTERS | YEAR 2010 | % |
| 1 | Caritas Spain | 560,144 | 24.69% |
| 2 | Caritas Australia | 239,880 | 10.57% |
| 3 | Caritas France/Secours Catholique | 227,761 | 10.04% |
| 4 | Caritas Germany | 216,291 | 9.53% |
| 5 | United Nation Development Programme (UNDP) | 215,541 | 9.50% |
| 6 | One Body One Spirit (OBOS) | 132,244 | 5.83% |
| 7 | Caritas-Scotland | 77,627 | 3.42% |
| 8 | Caritas-Asia | 76,167 | 3.36% |
| 9 | Caritas-Switzerland | 72,997 | 3.22% |
| 10 | Misereor | 64,085 | 2.82% |
| 11 | Caritas-Japan | 60,000 | 2.64% |
| 12 | Catholic Releif Service (CRS) | 58,759 | 2.59% |
| 13 | Caritas-Hong Kong | 56,741 | 2.50% |
| 14 | Caritas-Korea | 49,985 | 2.20% |
| 15 | Foundation RR | 40,000 | 1.76% |
| 16 | Caritas-Macau | 6,190 | 0.27% |
| 17 | Caritas-Sweden | 4,990 | 0.22% |
| 18 | Other donors | 109,544 | 4.83% |
| | TOTAL FUND RECEIVED | 2,268,946 | 100.00% |

TOTAL EXPENDICTURES BY PROGRAM FOR YEAR 2010

| No. | PROGRAMME | YEAR 2010 | % |
|-----|--|-----------|--------|
| 1 | Rehabilitation Recovery Phase Emergency Ketsena Programme | 226,595 | 10.65% |
| 2 | National Office-Structural Support Programme | 184,925 | 8.69% |
| 3 | Caritas Child Mental Health Programme | 158,976 | 7.47% |
| 4 | Siem Reap Home Base Care Programme | 147,690 | 6.94% |
| 5 | Empowering Children and Adolescents with Special Need and Their Families towards Inclusive Development and Poverty Alleviation in Cambodia | 133,395 | 6.27% |
| 6 | Kampong Thom Integrated Development Programme | 106,131 | 4.99% |
| 7 | Siem Reap Global Fund | 103,475 | 4.86% |
| 8 | Battambang Rattanak Mondul Community Development Programme | 96,790 | 4.55% |
| 9 | Preah Vihear Development Programme | 95,530 | 4.49% |
| 10 | Battambang Bovel Monkul Borei Community Development Programme | 88,172 | 4.14% |
| 11 | Siem Reap Community Health Programme | 85,813 | 4.03% |
| 12 | Kandal Community Development Programme | 84,143 | 3.96% |
| 13 | Siem Reap Chikreng Programme | 83,341 | 3.92% |
| 14 | Youth Vocational Training Programme | 82,306 | 3.87% |
| 15 | Battambang Samlot Community Development Programme | 73,331 | 3.45% |
| 16 | Kampong Cham Community Development Programme | 68,040 | 3.20% |
| 17 | Mondulkiri Community Development Programme | 66,443 | 3.12% |
| 18 | Kampong Thom Sustainable Agriculture Programme | 60,276 | 2.83% |
| 19 | Siem Reap Community Development Programme | 40,144 | 1.89% |
| 20 | Siem Reap Health Prisoner Programme | 38,869 | 1.83% |
| 21 | Battambang Community Health Programme | 34,682 | 1.63% |
| 22 | Kampong Thom Health Programme | 29,600 | 1.39% |
| 23 | Cambodia Emergency Appeal Typhoon Ketsana | 24,888 | 1.17% |

| | | | |
|---------------------|--------------------------------------|-----------|---------|
| 24 | Kampong Thom Health Prison Programme | 9,783 | 0.46% |
| 25 | Kampong Cham Leprosy Programme | 4,107 | 0.19% |
| TOTAL EXPENDICTURES | | 2,127,445 | 100.00% |

| SUMMARY REPORT BY SECTOR 2010 | | | |
|-------------------------------|------------------------------|-----------|--------|
| No. | EXPENDICTURES BY SECTOR | YEAR 2010 | % |
| 1 | Community Development Sector | 1,051,373 | 49.42% |
| 2 | Health Development Sector | 742,283 | 34.89% |
| 3 | Emergency Response Sector | 251,483 | 11.82% |
| 4 | Vocational Training Sector | 82,306 | 3.87% |
| Total Expense by Sector | | 2,127,445 | 100% |

FINANCIAL SUMMARY 2011

| STATEMENT OF SOURCES OF FUND AND EXPENDITURES 2011 | | |
|--|--|------------------|
| | | YEAR 2011 |
| INCOME | | |
| | Funds received from Partners | 3,637,316 |
| | Other incomes | 168,919 |
| | Total Income | 3,806,235 |
| EXPENDICTURE | | |
| | Other Emergency Responses and Institutional Programme | 733,898 |
| | Rehabilitation Ketsana Phase Programme | 310,483 |
| | Empowering Children with Special Needs towards Inclusive Development and Poverty Alleviation in Cambodia | 263,806 |
| | National Office Structural Support Programme | 180,822 |
| | Caritas Child Mental Health Programme | 163,803 |
| | Siem Reap Global Fund Programme | 162,729 |
| | Kampong Thom Integrated Development Programme | 136,455 |
| | Kandal Community Development Programme | 135,344 |
| | Battambang Rattanak Mondul Community Development Programme | 127,311 |
| | Siem Reap Community Health Programme | 119,294 |
| | Siem Reap Home Based Care Programme | 117,251 |
| | Siem Reap Community Development in Chikreng Programme | 86,492 |
| | Youth Development Programme | 86,471 |
| | Kampong Cham Community Development Programme | 85,459 |
| | Mondulkiri Integrated Development Programme | 79,012 |
| | Preah Vihear Community Development Programme | 77,983 |
| | Siem Reap Community Development Programme | 66,260 |
| | Battambang Community Health Programme | 60,729 |
| | Battambang Samlot Community Development Programme | 57,848 |
| | Kampong Thom Community Development Programme | 56,787 |
| | Battambang Borvel Community Development Programme | 51,402 |
| | Kampong Thom Community Health Programme | 51,100 |
| | Community Based Disaster Preparedness Programme | 35,060 |

| | | |
|--|--|------------------|
| | Siem Reap Prison Health Programme | 29,738 |
| | Toul Sambo Livelihood Development Programme | 17,943 |
| | Kratie Prison Health Programme | 17,360 |
| | Battambang Rukiri Community Development Programme | 12,924 |
| | Kampong Thom Prison Health Programme | 10,580 |
| | Seim Reap Linked Respond Programme | 9,066 |
| | Mondulkiri Prison Health Programme | 8,416 |
| | Preah Vihear Community Health and Prison Programme | 7,986 |
| | Total Expenditures | 3,359,812 |

TOTAL FUND RECEIVED BY PARTNERS FOR YEAR 2011

| No. | PARNTERS | YEAR 2011 | % |
|-----|---|------------------|----------------|
| 1 | Caritas Spain | 607,414 | 16.70% |
| 2 | Caritas Germany | 392,587 | 10.79% |
| 3 | United Nation Development Programme (UNDP) | 387,778 | 10.66% |
| 4 | Caritas Australia | 382,797 | 10.52% |
| 5 | Caritas France/Secours Catholique | 372,092 | 10.23% |
| 6 | Catholic Relief Service (CRS) | 301,831 | 8.30% |
| 7 | Misereor | 293,386 | 8.07% |
| 8 | Caritas Switzerland | 288,874 | 7.94% |
| 9 | Caritas Scotland | 149,779 | 4.12% |
| 10 | Caritas Japan | 73,578 | 2.02% |
| 11 | RR Foundation | 50,000 | 1.37% |
| 12 | One Body One Spirit (OBOS) | 48,459 | 1.33% |
| 13 | Caritas Sweden | 44,943 | 1.24% |
| 14 | TROCAIRE | 42,410 | 1.17% |
| 15 | Caritas Netherland | 40,914 | 1.12% |
| 16 | Caritas Hong Kong | 38,539 | 1.06% |
| 17 | Catholic Agency for Oversea Development (CAFOD) | 31,692 | 0.87% |
| 18 | Malis | 22,637 | 0.62% |
| 19 | Caritas Singapore | 19,985 | 0.55% |
| 20 | Caritas Korea | 13,682 | 0.38% |
| 21 | Caritas International - Belgium | 13,197 | 0.36% |
| 22 | Caritas Internationallis | 10,341 | 0.28% |
| 23 | Caritas Czech Republic | 6,834 | 0.19% |
| 26 | Other Donors | 3,567 | 0.10% |
| | TOTAL FUND RECEIVED | 3,637,316 | 100.00% |

| TOTAL EXPENDICTURES BY PROGRAM FOR YEAR 2011 | | | |
|--|--|-----------|--------|
| No. | PROGRAMME | YEAR 2011 | % |
| 1 | Other Emergency Responses and Institutional Programme | 733,898 | 21.84% |
| 2 | Rehabilitation Ketsana Phase Programme | 310,483 | 9.24% |
| 3 | Empowering Children with Special Needs towards Inclusive Development and Poverty Alleviation in Cambodia | 263,806 | 7.85% |
| 4 | National Office Structural Support Programme | 180,822 | 5.38% |
| 5 | Caritas Child Mental Health Programme | 163,803 | 4.88% |
| 6 | Siem Reap Global Fund Programme | 162,729 | 4.84% |
| 7 | Kampong Thom Integrated Development Programme | 136,455 | 4.06% |
| 8 | Kandal Community Development Programme | 135,344 | 4.03% |
| 9 | Battambang Rattanak Mondul Community Development Programme | 127,311 | 3.79% |
| 10 | Siem Reap Community Health Programme | 119,294 | 3.55% |
| 11 | Siem Reap Home Based Care Programme | 117,251 | 3.49% |
| 12 | Siem Reap Community Development in Chikreng Programme | 86,492 | 2.57% |
| 13 | Youth Development Programme | 86,471 | 2.57% |
| 14 | Kampong Cham Community Development Programme | 85,459 | 2.54% |
| 15 | Mondulkiri Integrated Development Programme | 79,012 | 2.35% |
| 16 | Preah Vihear Community Development Programme | 77,983 | 2.32% |
| 17 | Siem Reap Community Development Programme | 66,260 | 1.97% |
| 18 | Battambang Community Health Programme | 60,729 | 1.81% |
| 19 | Battambang Samlot Community Development Programme | 57,848 | 1.72% |
| 20 | Kampong Thom Community Development Programme | 56,787 | 1.69% |
| 21 | Battambang Borvel Community Development Programme | 51,402 | 1.53% |
| 22 | Kampong Thom Community Health Programme | 51,100 | 1.52% |
| 23 | Community Based Disaster Preparedness Programme | 35,060 | 1.04% |
| 24 | Siem Reap Prison Health Programme | 29,738 | 0.89% |
| 25 | Toul Sambo Livelihood Development Programme | 17,943 | 0.53% |

| | | | |
|----------------------------|--|------------------|----------------|
| 26 | Kratie Prison Health Programme | 17,360 | 0.52% |
| 27 | Battambang Rukiri Community Development Programme | 12,924 | 0.38% |
| 28 | Kampong Thom Prison Health Programme | 10,580 | 0.31% |
| 29 | Seim Reap Linked Respond Programme | 9,066 | 0.27% |
| 30 | Mondulkiri Prison Health Programme | 8,416 | 0.25% |
| 31 | Preah Vihear Community Health and Prison Programme | 7,986 | 0.24% |
| TOTAL EXPENDICTURES | | 3,359,812 | 100.00% |

| SUMMARY REPORT BY SECTOR 2011 | | | |
|--------------------------------|------------------------------|------------------|-------------|
| No. | EXPENDICTURES BY SECTOR | YEAR 2011 | % |
| 1 | Community Development Sector | 1,172,042 | 34.88% |
| 2 | Health Development Sector | 1,021,858 | 30.41% |
| 3 | Emergency Response Sector | 1,044,381 | 31.08% |
| 4 | Disaster Preparedness Sector | 35,060 | 1.04% |
| 5 | Vocational Training Sector | 86,471 | 2.57% |
| Total Expense by Sector | | 3,359,812 | 100% |



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