

# Programme Update 2007



International Federation  
of Red Cross and Red Crescent Societies

## CAMBODIA

Appeal No. MAAKH001

Programme Update No. 5

This report covers the period of 01/01/2007 to 31/03/2007  
of the 2006-07 appeal.

In a world of global challenges, continued poverty, inequity, and increasing vulnerability to disasters and disease, the International Federation with its global network, works to accomplish its Global Agenda, partnering with local community and civil society to prevent and alleviate human suffering from disasters, diseases and public health emergencies.



**A family in Kep with their new rain water catchment unit provided by the water and sanitation project**

### In brief

**Programme Summary:** Cambodia Red Cross (CRC) and the Federation took important steps to disseminate and put into action the Federation of the Future at a retreat in February. The retreat resulted in renewed commitment from all actors, including the CRC, the Federation secretariat and partner Red Cross National Societies working in Cambodia, to scale up programmes and improve service delivery.

The first quarter of the year was light on activities as most programmes are in the preparation phase. The exceptions were the HIV/AIDS and water and sanitation programmes where significant outputs have been achieved.

The 2007 Appeal is generally well-funded by a supportive group of donors including the Australian, British, Danish, New Zealand, and Swedish Red Cross societies, the Global Appeal for Avian Influenza, and the Federation's capacity building fund. Total budget for 2007 is CHF 1,068,643 out of which 39% is covered at the end March 2007.

**Needs:** Total 2006-2007 budget CHF 2.32 million (USD 1.89 million or EUR 1.40 million) out of which 64% is covered. [Click here for the attached financial report.](#)

Note: The Global Avian Influenza Appeal covers reporting on the avian influenza programme in Cambodia.

**No. of people we help:** 3,000

**Our Partners:** 45

## Operational Context

The major event in Cambodia during the first quarter was the successful community-level elections held at the end of March 2007. While voter turnout was the lowest since the first United Nations Transitional Authority in Cambodia (UNTAC) overseen elections in 1993, voting monitors and independent observers stated that the elections proceeded peacefully, compared to previous elections that had several incidents of violence. The ruling party, the Cambodia People's Party (CPP) won more than 98% of the country's communes, with the Sam Rainsy Party (SRP) tallying a distant second.

In March, the Cambodia Demographic Health Survey 2005 (CDHS), the most comprehensive survey to date on health issues throughout Cambodia, was released. Findings show a marked improvement in several key health indicators since the last survey in 2000, including a notable decrease of 30% in infant and child mortality rates. The survey also highlighted improvements in important areas such as the number of births attended by a skilled physician, rates of exclusive breastfeeding of babies under six months old, wider vaccine coverage and improved nutritional status of children under five. However, the maternal mortality rate deteriorated in the last five years, with a rate of 472 deaths during childbirth per 100,000 (as compared to 432 in 2000), the second highest in the region next to Laos. A copy of the report can be downloaded [here](#).

Activities under way include programmes in avian influenza, water and sanitation, HIV/AIDs, disaster response and preparedness, and organizational development. The table below highlights the financial breakdown (excluding avian influenza):

Programme	2007 Appeal Budget	Funding (CHF)	Funding vs. appeal budget	Expenditure Jan – March	
				CHF	% of funding
Disaster Management	32,501	37,996	117%	-1,422	-4%
Health and Care	503,441	149,822	30%	83,710	56%
Organizational Development	208,369	125,908	60%	14,547	12%
Promotion of Humanitarian Values	19,303	5,231	27%	4,278	82%
Implementation and Coordination	305,029	99,371	33%	84,156	85%
<b>Total</b>	<b>1,068,643</b>	<b>418,328</b>	<b>39%</b>	<b>185,269</b>	<b>44%</b>

**Figure 1: Financial analysis for 2007 only**

## Health and Care

**Overall Goal:** Improved health status of the most vulnerable in Cambodia

**Overall Objective:** To provide health care and improve wellbeing of vulnerable people by reducing the mortality rate of the most vulnerable in Cambodia.

CRC has been guided by its Health Strategic Plan 2002-2007 over the past few years. The plan identifies key directions and interventions in which CRC remains committed. Recently, a fundamental shift towards community-based programmes is emerging, supported by partners, and aligned with the ministry of health policies as well as the Cambodia Millennium Development Goals.

CRC enjoys the support of a wide range of donors including the American, Australian, British, Danish, French, New Zealand, Swiss and Swedish Red Cross national societies, as well as multi-lateral funding and technical

support through the Federation. The HIV/AIDS project is also supported by the Asian Regional Task Force on HIV/AIDS (ART) network, Global Fund, Family Health International and DFID (United Kingdom's Department for International Development) through the World Education organization.

In quarter one, a one-year funding for the avian influenza project was secured and finalized through the Federation global appeal. The HIV/AIDS anti-discrimination and stigma project successfully shifted its project sites to the new provinces of Koh Kong and Bantey Meanchey. The water and sanitation project completed all planned construction activities for water facilities at targeted households, schools and health centres.

**Expected Result 1:** CRC has the capacity and resources to deliver effective health services to the vulnerable in Cambodia.

The CRC director of health has revived the process of calling regular health working group meetings with CRC health programme managers and Partner National Society (PNS) representatives. The terms of reference and expected outcomes from these meetings have yet to be formalised; however, some suggestions are as follows:

- Develop by end of 2007 the revised CRC health strategy:  
It has been decided that a consultant will be appointed to assist the CRC to review its health strategy, the terms of reference will be developed by the director of health and it is hoped that the consultant will be appointed to carry out this task in the third quarter of 2007.
- Develop guidelines for water and sanitation projects:  
A workshop is being planned for the third quarter of 2007 (see below under Expected Result 3):
- Increase information and experience sharing between the various health projects (see below under Looking Ahead).

#### Working in partnership

In addition to the regular health working group meetings mentioned above, discussions were held on how to exchange information between the various health programmes. Exchange visits have been planned for quarters two and three. In addition, programme managers for Public Health in Emergencies (PHiE) and for water and sanitation regularly attend the appropriate coordination meetings.

#### Contributing to longer-term impact

The CRC director of health also attended two important meetings in the first quarter : the Federation of the Future Retreat that was held in Cambodia in February and the Regional Health Meeting which took place in March. Both these meetings addressed the issue of operational alliances and progression from project to programme approach so as to enhance quality and harmonization of programmes. This includes addressing the importance of looking at common objectives and indicators to measure success and sharing of resources. With this in mind, discussions are ongoing on how to develop programme frameworks for various aspects of the CRC health department, in particular community-based health, public health in emergency (including pandemic influenza) and HIV/AIDS.

#### Looking ahead

- Appoint a deputy director of health – May 2007;
- Draft the terms of reference (ToR) for a consultant to facilitate the health strategy review and revision – 1st draft to be presented at the HWG meeting in May;
- First draft of the programme framework for community based health development - to be presented at the CRC planning workshop at the end of June;
- Arrange a field trip for the programme managers from the CRC water and sanitation project, the British RC/CRC primary health project and the Danish RC/CRC community-based health development programme to visit the American Red Cross/CRC integrated child health (ICH) programme in Siem Reap. The intention of this field trip will be to gain knowledge of two aspects of the ICH programme, namely the promotion of oral rehydration salts (ORS) and the use of mosquito nets – visit due to take place in June or July;
- Commence planning process for the 2008-09 appeal;

- Participate in the CRC three year planning process and workshop – end June.

**Expected Result 2:** To improve the quality of life of people living with HIV/AIDS (PLHIV), orphaned vulnerable children (OVC) and their families by reducing stigma and discrimination in public health settings in their communities. Furthermore, to strengthen the capacity of the national society staff in order to achieve a sustainable and well-functioning HIV/AIDS programme.

In 2007, with funding from the Swedish Red Cross, the project sites have been relocated from Kampot and Siem Reap to Koh Kong and Banteay Meanchey respectively, as the former provinces are now being financed by the Global Fund (GFATM).

As planned in quarter one, two provincial project coordinators were recruited in the two targeted provinces (Koh Kong and Banteay Meanchey). Twenty-five Red Cross volunteers (RCVs) in Banteay Meanchey were recruited, six being people living with HIV (PLHIV). In Koh Kong, the project will use RCVs trained during the previous project cycle.

Activities in quarter one include:

- nine community education workshops with a total of 630 participants (five in Koh Kong with 350 participants and four in Banteay Meanchey with 280 participants), facilitated by the project coordinators, RCVs, and monks. The purpose of the education workshops is to provide basic knowledge of HIV/AIDS, dissemination of anti-stigma and discrimination messages, blood testing, gender and needs of PLHIV;
- 500 food kits provided to 220 PLHIV and OVCs (120 in Koh Kong and 100 in Banteay Meanchey);
- Eight PLHIV shelters repaired, and 20 PLHIV cases referred to health centres;
- 1560 home visits to PLHIV by RCVs (985 in Koh Kong and 575 in Banteay Meanchey). The purpose of home visits is to provide informal education to PLHIV's relatives and neighbours in an effort to reduce stigma and discrimination, as well as providing counselling to PLHIV and encourage them to access health service;
- Sending 4 OVC to public schools;
- Bi-monthly meetings attended by 120 PLHIV and facilitated by RCVs with the purpose of sharing information on self-care and treatment options, and receiving peer counselling.

Gender is an integral component of the project. In total, the project has 14 women RCVs out of 34. During community education workshops, gender issues are discussed with participants. As a result, women who are living with HIV/AIDS are increasingly contributing their experiences of living with the disease during these forums. These forums are mixed groups, which highlight the increased confidence of PLHIV women in sharing personal experiences. Furthermore, the project also targets women to join as RCVs during recruitment drives.

#### **Challenges:**

- PLHIV are very poor and many say they have little time to get treatment. They also added that they face discrimination from other patient at the health centres;
- The limited size of the project budget is constraining the project's ability to include other activities needed to support PLHIV (ie. supporting PLHIV who live in the pagodas with food and transport to health centres);
- The newly recruited provincial project coordinator is unfamiliar with the provinces.

#### **Working in partnership**

At the community level, the project is collaborating with operational district authorities, the relevant health department, and health workers in the target area. One challenge has been to adequately educate all stakeholders on the objectives and activities of the project, in order to achieve common understanding and sense of purpose. These challenges have been overcome by inviting stakeholders to participate in a sensitization workshop, aimed at briefing the participants on the activities and outcomes of the project, as well as ways to work together effectively.

#### **Contributing to longer-term impact**

As discussed above, the project is focused on reducing stigma and discrimination which is directly related to

the Global Agenda Goal #4. As a result of these activities in previous project sites (Seam Reap, Kampot and Battambang provinces), PLHIV have stated that they are experiencing a reduction in stigma and discrimination in their daily lives. The project hopes to replicate this success in the new project sites in Koh Kong and Banteay Meanchey.

The location of the project in Koh Kong and Beantey Meanchey are also contributing to long-term impact on PLHIV as the project sites have no presence from other aid organizations. As such, the CRC is the only organizations providing long-term support to PLHIV and their families, as well as working to reduce discrimination in these localities.

Gender plays an important role in the project. Half of the project volunteers are women. Gender topics are discussed at all community meetings, and as a result, women are contributing more on their experiences of living with HIV/AIDs and the impact on their families and livelihoods. Women are also encouraged to be facilitators at these community meetings. These women have reported that the confidence gained as a result of these actions and support have allowed them to broach the sensitive subject of HIV/AIDs with their husbands and families.

As an indication of further impact, PLHIV families reported that they are able to save additional income as a result of project support in shelter repairs, referral services and other benefits from the community forums. Many of these families use the extra funds to send their children to school.

#### Looking ahead

- Community support visits targeting 600 people;
- Community support emergency assistance;
- Self-care workshop for PLHIV and caretakers in June in Koh Kong and Banteay Meanchey for 100 participants;
- Self-help group meeting in June for a total of 200 people;
- Team leaders' meetings (seven participants) and RCV monthly meetings (34 participants).

**Expected Result 3:** The health status of rural people living in the area of Koh Kong and Kep municipality is improved and their susceptibility to disease caused by poor water quality and sanitation is permanently reduced.

All activities proceeded according to plan in quarter one, including a needs assessment in December 2006 in Kep municipality which included village mapping, drafting seasonal charts and collecting baseline data. Delivery of all necessary materials for construction of rain water catchments (RWCs) and latrines was completed in the targeted villages of Ampeng and Angkul in January. The number of RWCs and latrines completed to date in quarter one in Kep are as shown in following table:

Province/ Municipality	No. Planned	Jan	Feb	Mar	Cumulative to date
<b>Kep</b>					
<b>RWC</b>	<b>325</b>	<b>0</b>	<b>50</b>	<b>75</b>	<b>125</b>
<b>Latrines</b>	<b>325</b>	<b>0</b>	<b>0</b>	<b>65</b>	<b>65</b>

**Figure 2: Rain water catchments and latrines completed in Quarter 1**

In addition, RWCs and hand-washing facilities were constructed in three schools in the Angkul commune.. Furthermore, three health centres benefited from installed rain water catchments. All households, health centres and school staff also received training from the RCVs on maintenance and repair of the water facilities.

Refresher first aid training was provided to 40 RCVs in Kep and 15 RCVs in Koh Kong. It is important to note that for 2007, targeted villages in Koh Kong province are currently receiving hygiene education only.

Project monitoring is done on a monthly basis through regular field visits by water and sanitation project manager and staff. The project also seeks to incorporate beneficiaries into project monitoring and review through monthly meetings where villagers use participatory hygiene and sanitation transformation (PHAST) to

provide feedback on project progress, identify problems, prioritize problems and seek solutions.

The project car breaks down often in the field, causing high repair costs and difficulties in reaching project sites. The project requires a new vehicle in order to conduct their activities in an efficient manner, particularly with the onset of the rainy season in June.

#### Working in partnership

The project works closely with three health centres in the targeted areas. Health centre staff contributed information and expertise to produce the curriculum used to train the Red Cross volunteers on hygiene promotion. In return, the project is providing rain water catchments, latrines and hand washing areas to the health centres. The team is also working closely with primary schools in the targeted area to provide hygiene promotion to students and teachers as well as water facilities. By developing these partnerships over time and providing essential facilities, this has allowed better access to staff and students in disseminating key hygiene messages.

#### Contributing to longer-term impact

The project is aiming to contribute to the Global Agenda, to reduce the number of illnesses and deaths from disease by providing better access to safe water for households, schools and communities, as well as providing health education to raise awareness and change unhygienic practices. This year, the project will focus on gathering reliable impact data through the creation of a robust monitoring and evaluation (M&E) system, as well as bringing in outside expertise to conduct impact assessment.

#### Looking ahead

In quarter two, planned activities include:

- Constructing 2 RWC units in two schools and 56 flush latrines in April;
- Constructing 56 family latrines in Kep municipality;
- Providing hygiene training to RCVs in targeted areas;
- Providing health education to families beneficiary;
- Monitoring the construction process, quality of water facility, behaviour change of the beneficiary.
- Developing plans for the 2008-09 appeal. Moving from a water and sanitation project approach to a community based health development programme which will include water and sanitation, hygiene promotion, maternal and child health promotion, and HIV/AIDS. This new programme approach will combine two existing projects that of the current CRC water and sanitation project and the other being the primary health care project which is supported by the British Red Cross whose funding is due to end in December this year.
- Develop the objectives and expected outcomes for the water and sanitation workshop to be held in quarter three and appoint a consultant to facilitate the process.

**Expected Result 4:** Beneficiaries belonging to high risk groups to have modified their behaviour to reduce the risk of contracting Avian Influenza. Further to this, community leaders to have developed capacities to effectively prepare and respond to possible public health emergencies including pandemic influenza.

(PLEASE NOTE: Below is a brief update for the first quarter. Future reporting will be done via the global appeal)

With technical support from the Federation delegation in Cambodia, particularly from the health delegate, CRC's health department secured funding support for avian influenza/pandemic Influenza programme (AI/PI programme) through the Federation's Global Appeal. This programme will be implemented in twelve of Cambodia's 24 provinces beginning in March 2007 until April 2008.

In quarter one, key project preparation activities were implemented including:

- Developed job description for AI/PI project staff including programme manager, programme officer and branch project officers and launched recruitment process for the positions;
- Conducted project planning meetings with branches in targeted provinces, target districts, communes

and villages. In addition, discussions are underway to integrate the project into the existing community-based disaster programme and align with the National Committee for Disaster Management (NCDM) plans;

- Defined the criteria for selection of RCVs for the AI awareness project (2 per village making a total of 960 across the 12 provinces)

### Working in partnership

In quarter one, the CRC's health coordinator and Federation's health delegate attended an avian influenza partnership meeting organized by the UNDP for updating and coordinating AI efforts in Cambodia.

In addition, the Pandemic Working Group (PWG) was established in November 2006, coordinated by NCDM and the Ministry of Health (MoH) in which the CRC and Federation are permanent member of this working group. Additionally, UNICEF has committed to provide the education materials to the AI/PI programme to distribute to the community via the Red Cross network. Also, in order to develop the AI/PI training curriculum for Red Cross staff and RCVs, the programme will seek technical support from relevant stakeholders including the Ministry of Agriculture (MAFF), MoH, and the NCDM.

### Contributing to longer-term impact

Through the implementation of this programme, the CRC and its volunteers will add value to Red Cross visibility and recognition through strengthened collaboration with involved stakeholders including NCDM, MoH, MAFF, local authorities, communities and relevant UN bodies (UNICEF, UNDP, WHO, and FAO). These efforts will contribute to more productive partnerships for future disaster management at all levels.

Strong links will be established between the CRC and the NCDM, from village and community up to the national level. The CRC will be part of an integrated national response to a pandemic and, as such, will have a clear role and function agreed in a memorandum of understanding between the CRC and NCDM which will help to ensure a more effective and efficient response to any future pandemic or national public health emergencies (PHEs).

A key element of the programme is the RCVs who are members of the very villages where they work and who will be a permanent local resource. The programme is designed to link RCVs with existing community structures, such as village chiefs, village animal and human health workers, farmer's unions, women's unions, youth unions, etc. to assist them in identifying ways in which they can develop long term strategies and change key behaviours and practices in order to reduce their AI-related risks. The programme also aims to assist these communities to build capacities to prepare for, and respond to, Pandemic Influenza and other public health emergencies.

With increased awareness, information and knowledge of safe hygiene and bio-security practices, the communities will be encouraged to pass on messages in their neighbouring communities on how best to avoid the transmission of H5N1 and the importance of timely reporting for suspected animal or human AI cases to the National Hot Line for Avian Influenza and also to their nearest health and/or veterinary units.

## Disaster Management

**Overall Goal:** To better ensure individuals and communities affected by natural disasters have access to basic needs in supporting their recovery after disaster events

**Overall Objective:** To strengthen the capacity of the CRC in efficiently meeting the basic needs of individuals and communities affected by natural disasters.

Based on CRC's Strategy 2003- 2010, the disaster management (DM) programme is responsible for implementing disaster response and disaster preparedness projects. In recent years, the DM experience and learning, mostly through the implementation of the community-based preparedness programme (CBDP), has indicated an increasing trend in the number and needs of disaster survivors in Cambodia within a context of decreasing resources to respond to those needs. Thus, to adequately meet the needs of the most vulnerable,

CRC is now moving beyond disaster relief to incorporate increased disaster preparedness activities. This is to focus on longer-term and more sustainable efforts to decrease people's vulnerability and strengthen their individual and community coping capacities.

Consequently, CRC, with financial support from the New Zealand Red Cross through the Federation, is implementing a disaster response preparedness (DRP) in 2007. The objective of the project, which is closely aligned with the Global Agenda goals (see impact section below) is “to strengthen the capacity of the Cambodia Red Cross in efficiently meeting the basic needs of individuals and communities affected by natural disasters”. The estimated number of beneficiaries is 17,000. CRC views 2007 as an inception phase with a focus on developing stronger coordination with external partners by developing roles and responsibilities for disaster response. Additionally, there will be a focus on strengthening CRC's internal capacity through CRC departmental integration.

Quarter one was light on activities while the project focused on filling key project positions (one project manager, two support staff). Funds have been transferred to CRC and activities are planned to begin in early April.

**Expected Result 1:** Effective coordination with internal and external partners is established through development of roles and responsibilities for disaster response

There were no activities implemented for this expected result in quarter one.

**Expected Result 2:** Disaster preparation and response is strengthened through CRC's departmental integration, and DRP structure development

There were no activities implemented for this expected result in quarter one.

### Working in Partnership

Creating strong partnerships is a fundamental component of the project. Both expected results in 2007 focus on strengthening internal and external coordination to better prepare for disasters. With external partners, activities will focus on revising roles and responsibilities with the NCDM from the national down to the community-level. Internally within the CRC, the DRP project will seek to establish inter-department guidelines and working groups aimed at clarifying how the various departments will function in times of disasters. Furthermore, the project will seek to coordinate more effectively with regional Federation structures.

### Impact

The project is aligned to the International Federation's Global Agenda (specifically #1 and #3) by ensuring better coordination between stakeholders for disaster response, as well as creating more efficient and robust internal structures at all levels within the CRC. These actions should translate into promoting community, civil society and Red Cross and Red Crescent capacity to address the most urgent situations of vulnerability during disaster times.

To measure the success of these activities, the DRP team is currently drafting a monitoring and evaluation plan to best be able to track progress against the indicators set in the logframe. The results will be communicated through regular CRC and Federation reporting. Furthermore, a disaster response working group will be formed to review progress of the project against its stated objectives throughout the life of the project.

### Looking ahead

- Develop job description for DRP project staff at NHQ and branch level;
- Develop structures and job descriptions of the DRP project for NHQ and branch levels;
- Study existing documents (including inter-institutional MoU) relevant to role and responsibilities of NCDM & CRC ;
- Study and review the existing document relevant to DRP policies and guidelines;
- Translate the drafted disaster response guideline and other relevant docs;
- Study and draft the standard of operations for disaster response, assessment guideline and minimum

standard for relief.

## Humanitarian Values

**Overall Goal:** Greater awareness, respect and application of humanitarian values in Cambodia.

**Overall Objective:** The movement's fundamental principles and humanitarian values is disseminated to, and understood by, a larger proportion of the Cambodian population.

Funding through the Federation Appeal process in 2007 continues to be limited for CRC's humanitarian values programme. Support from ICRC continues to be the primary outside source for CRC's activities in this area. The British Red Cross is also partially supporting funding for the public image survey (along with the ICRC) which will be implemented in May 2007.

**Expected Result 1:** CRC has the capacity and resources to communicate actively with stakeholders and to advocate on key issues/concerns

The following activities were conducted in quarter one:

- **Dissemination on basic Red Cross principles and international humanitarian law (IHL):**  
Dissemination of Red Cross principles and IHL has been carried out in a total of 5 schools, reaching 506 teachers and students in both Phnom Penh and Sihanoukville.
- **Public Relations and marketing**  
2,000 desk calendars were printed and distributed to government ministries, civil society organizations and the Red Cross, and seven programmes on the CRC were produced for broadcast on national TV stations.
- **Fundraising:**  
In the first quarter, CRC received donations totalling 107,500 US dollars from a variety of sources. There were 2,041 new members at the national level.
- **Tracing and message service**  
In the first quarter of 2007, one case was solved, 24 new requests were received, 24 new tracing cases were opened and 101 cases are being processed. A total of 2,437 Red Cross messages (RCMs) were collected, including from persons in detention to their family members (1,834), from family members to persons in detention (602) and from civilian to civilian (one). The team sent a total of 1,504 RCMs (958 from persons in detention to their family members, 546 from family members to persons in detention). Currently, 68 RCMs are not yet sent because of unclear address, the recipient changed their address and others were not able to be delivered.
- **Landmine risk education (LMRE)**  
The CRC implemented landmine risk dissemination in targeted locations in six provinces (Pursat, Battambang, Pailin, Banteay Meanchey, Oddar Meanchey and Preah Vihear) through the RCV network and distributed 500 first aid kits and 6 digital camera to the six target branches. Furthermore, a workshop was organized to produce CRC's strategy for landmine action called "CBMAP



**Douen You (far right) and his family receive a new water pump, purchased with a loan from Cambodian Red Cross. Also pictured (left) Van Heang, the local Red Cross branch director of Pursat province, and the National Society's development officer. Ten Rom**

Strategy”. This strategy is an attempt by CRC and partners to begin scaling up their activities through a programme approach. Currently, the four overall objectives are finalized. The CRC also organized “Mine Awareness Day” on the 24 February with partners including CMAC, UNICEF, MAG, Halo Trust, CMAA, and HIB.

A story of the micro-credit scheme for landmine victims was also posted on the Federation and ICRC websites.

The CRC also assisted in credit loan activities to support livelihood and reduce the risk of landmine victims; credit loan was approved for 21 families for the amount of USD 4,081 and emergency assistance was provided to three land mine victims. CRC also provided money for the hospital expenses of one family and helped repair the house of another.

- **Capacity-building**

CRC branches are being supported by their national headquarters in running their own dissemination activities. 20 branches are now conducting dissemination activities targeting the CRC network (branch committee, staff, RCV and RCY). Training on media production for six communication department staff has commenced. The course will run from February until June 2007. In addition, an internal retreat was organized in January, where the communications department established their 2007 annual and monthly work plans. In March, review of the communications department job descriptions was conducted for the whole team with support from CRC’s secretary general and deputy secretary general.

- **Response to human trafficking**

Since mid-2006, CRC is implementing a pilot project in response to human trafficking in two high risk border provinces, Svay Rieng and Banteay Meanchey. The main focus of the programme is to raise awareness on issues pertinent to human trafficking and expand the programme into reintegration and support to women and children.

The 3<sup>rd</sup> and 4<sup>th</sup> response to human trafficking regional workshops were conducted in Phnom Penh and Monduliri respectively. Both workshops had representatives from CRC NHQ and branches, partners, relevant government ministry officials and international and local organizations active in the sector. The aim of the workshops is to introduce CRC’s programme, funded by the Danish Red Cross, creating a network and identifying areas of need where CRC could intervene. The recommendations received from participants were that CRC should make transit shelters for victims of trafficking a component of their programme, as well as the general need for dissemination of information on safe migration and legal literacy in anti-human trafficking.

A draft of provincial guidelines on human trafficking awareness raising campaign in Svay Rieng has been developed. It outlines general information on Svay Rieng, RCV and RCY policies and guidelines, numbers of beneficiaries and targeted areas, programme structure, and overall programme objective. This draft’s purpose is to guide the implementing branch to execute project activities in line with the programme document.

To establish peer educators’ networks in Svay Rieng Province, 35 RCV, 14 RCY, and 6 RC youth advisors were recruited in two selected communes: Cheul Teal and Krous in Svay Chrum district. They are the key people to convey safe migration and legal illiteracy anti-HT message to villages.

Networking and partnerships have been a key component of the project so far. In quarter one, the project team has met with implementing agencies in the capital and at project site locations including the head of anti-human trafficking department, Ministry of Interior, Save the Children, UNIAP, Friends International and IOM.

### Challenges

- Due to the resignation of the human trafficking branch focal point in Banteay Meanchey, project activities were postponed. The replacement will start working in late May 2007;
- Communication activities are crucial to the success of the Red Cross, but there has been little financial and technical support extended to the department responsible to adequately scale up or sustain activities;
- Limited staff capacity in planning and reporting means that much of the work remains ad hoc; as such, outcomes and impact of activities are difficult to capture.

### Working in partnership

Both landmine risk education and response to human trafficking programmes provide good examples of working together for better service delivery. The response to human trafficking has created a wide-ranging knowledge-sharing network with likeminded organizations both in the capital, Phnom Penh, and the targeted border provinces where the project is located. Through this network, the CRC is able to draw on the experience of stakeholders in terms of best practices, materials and support in implementation.

Landmine risk education is working on new ways to move from a project to a programme approach so as to scale up service delivery to the vulnerable and make the best use of available resources. A series of workshops and meetings, involving all stakeholders and CRC staff from the NHQ and branch, have been discussing ways to standardize their operations, share resources and harmonize planning, monitoring, evaluation and reporting systems.

### Contributing to longer term impact

Measuring impact of the programme is a complex task, one that the principles and humanitarians values (PHV) programme has not fully grasped. It is hoped that the commissioning of a public image survey, to be completed by the third quarter 2007, will provide CRC with some quantitative and qualitative data on effects of the principles and humanitarians values programme. It is expected the survey results will also be able to inform on the extent the national society PHV programme is addressing Global Goal #4.

## Organizational Development

**Overall Goal:** To have a greater number of vulnerable women and men in Cambodia have access to poverty alleviation programmes and more effective humanitarian relief.

**Overall Objective:** To enable CRC to become a well-functioning national society by 2010 in order to contribute to the reduction of vulnerability in Cambodia.

The overall focus and priority of the organizational development (OD) programme is to enable the CRC to become a well-functioning national society by year 2010, as envisioned in the CRC strategy 2003-2010. It is well understood within the CRC that the organization can only fulfil its mandate and role when it has adequate organizational capacity and human resource capabilities to face the challenges ahead. Consequently, greater ownership by the national society has been achieved through the establishment of an OD team, chaired by the deputy Secretary-General, tasked with overall strategic guidance, coordination and management of the programme.

While moving forward on the many key aspects of CRC's OD process, the OD programme will seek to align to the Federation of the Future commitments, namely the ten areas of improvement. Key to this process will be a strategic review process in the middle of the year, followed by the drafting of long term three year development plans 2008-2010. Said plans will address key OD issues such as improved leadership at governance and management, strengthening critical structures and systems such as financial development, planning, monitoring, evaluation and reporting (PMER) at the headquarters and branch levels, resource development, as well as youth and volunteer management and network. These activities and processes in 2007 are being technically and financially support by the Federation, capacity building fund, and the British, Danish, German, Swedish, and Swiss Red Cross national societies.

**Expected Result 1:** CRC leadership at governance and management levels are strengthened, and structures and systems improved by the end of 2007, to guide the CRC through the implementation of its strategic plan

In January, a member of CRC's finance working group attended the Asia Pacific Organizational Development Forum for National Societies on Finance Development in Kuala Lumpur, Malaysia. The objective of this forum was to identify strategies and solutions to strengthen approaches to finance development, thereby maximizing impact on the vulnerable. CRC's representative shared the national society's financial procedures and development process, which, upon further discussion, was reviewed as a model for developing a "minimum standard" finance procedure for NSs. Moving forward, CRC agreed to undertake the action plan developed at

the conclusion of the workshop, focused particularly at branch level during 2007.

In March, with the financial support from Danish Red Cross, and technical support from the OD delegate based in Laos and Cambodia, CRC organized a workshop at the Phnom Penh municipal branch aimed at training the M&E coordinators. 11 coordinators were invited to attend the workshop, aimed to guide the coordinators on M&E knowledge, skills and methodologies. As a result, they became familiar with their role and responsibilities as coordinators, as well as with the scope and structures of their work. Currently, the CRC has 29 M&E coordinators in their network, comprising five coordinators based at the national headquarters and 24 based in the branches.

In January, CRC’s reporting team was established. Consisting of deputy directors and administrative staff, their focus is to improve internal reporting systems and standards, and provide capacity building to headquarters and branch staff on reporting. The team is being supported by the Federation’s planning and reporting consultant. Their first output will be CRC’s Annual Report 2006, which when published will be the first report of this kind issued since 1999.

Plans for quarter two include:

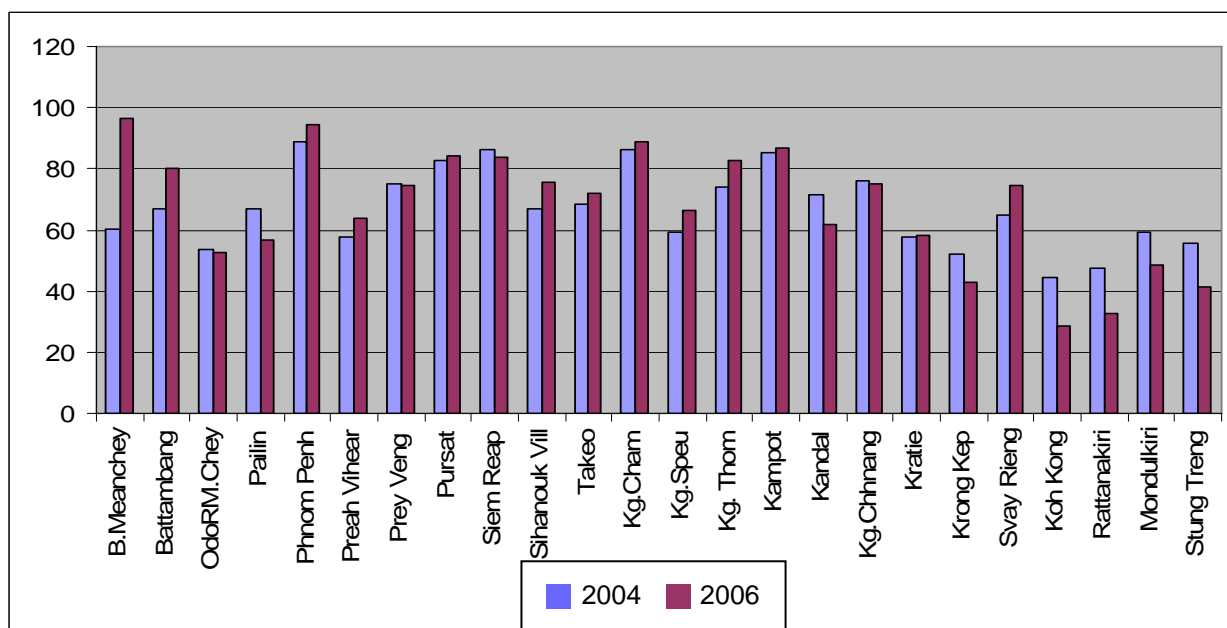
- Launch of CRC’s strategic review process and three year development plan;
- Conduct CRC’s review and annual planning meeting 2007 in June 2007;
- Organize an evaluation on the impact of CRC’s training programme, funded by the Danish Red Cross

**Expected Result 2:** The capacity of the CRC staff in the NHQ and branches to have capabilities in service delivery in the four core programme areas is systematically built by the end of 2007

There were no activities implemented in quarter one

**Expected Result 3:** The characteristics of a well functioning branch are developed through a systematic branch development approach.

The major achievement in quarter one was the finalization of the 2<sup>nd</sup> branch categorization process. Utilizing the *branch development approach* and *indicators of a well functioning branch*, all branches were categorized according to targets set in foundation, capacity and performance. Overall, most branches improved from the previous categorization conducted in 2004, as the chart below shows:



**Figure 3: Branch development progress – 2004 versus 2006**

Plans for quarter two include:

- Organize workshop on minimum package of activities for branch development in April 2007;
- Organize workshop on CRC branch development and strategy 2003-2010 in April 2007 (as part of CRC's strategic review process)

**Expected Result 4:** The Red Cross volunteering policy and guidelines are implemented in 24 provinces and the management of Red Cross volunteers is strengthened

There were no activities in quarter one and no planned activities for quarter two.

**Expected Result 5a:** The CRC Youth network consolidated and expanded in 21 provinces by the end of 2007, through increasing capabilities of Red Cross youth (RCY) leaders and members in implementing RCY policy and strategy and by improving overall programme management capacity

In quarter one, the youth programme welcomed an exchange visit from the Hong Kong Red Cross. The youth team visited the landmine projects in Pailin and Siem Reap.

Planned activities for quarter two include:

- TV quiz show on youth issues and road safety organized by the CRC communications department and youth programme to be broadcast during World Red Cross Day
- Selection of suitable Red Cross Youth candidates for a Korean scholarship to study at Hanseo University.

**Expected Result 5b:** Application of road safety methods, and capacity to influence peers, is increased among high school students and universities in Phnom Penh, Battambang and Kampong Speu.

In quarter one, activities revolved around preparing the work plan and budget for the coming year.

In quarter two, planned activities include:

- Field visits to project sites in Phnom Penh municipality, Battambang and Kompong Speu to introduce and plan the road safety projects with the implementing branches
- Conduct training of trainers in Kompong Speu to 15 Red Cross Youth Advisors who will be responsible for conducting the road safety workshops to the youth
- Print and purchase of promotional and educational materials (helmets, t-shirts etc.)

**Expected Result 6:** CRC is able to, through a higher profile and improved image, access and generate funds and resources, in addition to those it receives from the Federation and partners, to support its projects and programmes by the end of 2007

In early 2007, CRC's Central Committee formed a resource development working group composed of governance and senior management tasked with overseeing CRC's income generating projects, specifically commercial first aid (CFA), water purifiers, and the production of drinking water. The Phnom Penh branch has led the way by training an additional 15 FA trainers in January and promoting their services to factories in and around Phnom Penh. As a result of this drive, the CFA programme raised USD 5000 in February, the single highest monthly total in the project's history.

### Challenges

The branch categorization process, while complete, still has flaws in terms of design measuring the indicators. Greater care in working with the branches during the process, as well as longer-term attention in helping branches set clear targets and skills to measure and document progress, will be needed.

The reporting team can greatly improve the reporting process within CRC but with members already overburdened, momentum will be difficult to maintain.

### Working in partnership

The organizational development programme is primarily focused on internal coordination. To this end, the OD team has representation from all senior management and a great deal of effort has been given to ensuring that

OD becomes a cross-cutting issue and a concern for all departments, programmes and branches.

The road safety project, since its inception, has prioritized the creation of networks to share information and coordinate resources. The project belongs to a network comprising local and international NGOs active in road safety. Said project has also created a steering committee with participants from the various ministries and CRC governance in order to update them on project progress as well as seek commitment for future activities.

#### *Contributing to longer term impact*

The challenge for the programme will be to define what impact in OD means for the CRC. Hints of impact are now being witnessed in terms of greater ability of certain branches to design projects, draft proposals and seek donors.

CRC is currently undergoing a strategic review process by an external consultant, part of which will be looking into the results OD programme since 2003, to be completed in May 2007. The next quarterly report should have more detailed descriptions of impact of the programme.

## Coordination and implementation

### **Coordination, cooperation and strategic partnerships**

The major highlight for the CRC and the Federation delegation in terms of taking coordination and alignment forward was the Federation of the Future (FoF) retreat on February 26-27<sup>th</sup>, 2007. Participants included members of CRC's governance, leadership, and senior management, Federation representatives from country and southeast Asia regional delegations, as well as partner national societies. Through this retreat, understanding of the FoF was strengthened, and healthy discussions proved fruitful around key elements such as the global agenda goals, framework for action and operational alliances that can be applied and carried forward in Cambodia. A full report can be viewed [here](#).

### ***CRC Cooperation Agreement Strategy (CAS)***

The CAS was fully operational during the first quarter of 2007. CRC initiated workshops and other activities based on the income from the 6% charge that is provided to CRC from Red Cross partners. Said charge is linked to the CAS process and is a cost fixed to all funds flowing through the CRC accounts. Additionally, CRC is drafting a 'CAS for non-Red Cross' document as a starting point for engaging partners outside of the Red Cross into the CAS process.

### ***Operational Alliances***

CRC continues to take steps forward in facilitating a more programmatic approach. The opportunity was taken at the retreat to discuss possible programme areas that could be involved in an alliance. The discussions highlighted the need for awareness on this topic within the ONS and PNS alike. The partners in particular showed a reluctance, which seemed based on weak direction and guidance from their own headquarters, and a general lack of clarity on how an alliance would be implemented. Having said that, there still remains confidence that Cambodia is an appropriate place for an alliance, or at the very least, the implementation of some of the principles an alliance is based on.

### ***Integration Agreements***

The Australian Red Cross (ARC) and the Cambodia delegation signed an integration agreement that has been operational since October 2006. The agreement will be on hold from April 2007 until contract arrangements are agreed between ARC and its back donor. The American Red Cross renewed its integration agreement for another 12 months, while the Danish Red Cross and the delegation plan to sign an agreement in the second quarter of 2007.

CRC is optimistic that more greater synergies will be possible in the year ahead with the likely move into a new building with all partners.

### ***Delegation management***

The delegation remains with the same small structure; Federation representative, health delegate, five

national staff (primarily involved in finance, logistics and administration), a locally recruited reporting development consultant, and a shared OD delegate with Laos.

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South East Asia regional delegation in Thailand: Bekele Geleta (head of regional delegation), email: [bekele.geleta@ifrc.org](mailto:bekele.geleta@ifrc.org), phone: +66 2661 8201, fax: +66.2.661.9322.

Federation secretariat in Geneva (Asia Pacific department): Sabine Feuglet (Southeast Asia regional assistant), email: [sabine.feuglet@ifrc.org](mailto:sabine.feuglet@ifrc.org), phone: +4122 730 4349, fax: +4122 733 0395.

**To support or find out more about the Federation's programmes or operations,  
click on [www.ifrc.org](http://www.ifrc.org)**

**International Federation of Red Cross and Red Crescent Societies**

MAAKH001 - CAMBODIA

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2006/1-2007/3
Budget Timeframe	2006/1-2007/12
Appeal	MAAKH001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**I. Consolidated Response to Appeal**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
<b>A. Budget</b>	<b>1,098,059</b>	<b>153,440</b>	<b>27,115</b>	<b>441,417</b>	<b>596,966</b>	<b>2,316,997</b>
<b>B. Opening Balance</b>	<b>143,788</b>	<b>49,015</b>	<b>7,813</b>	<b>41,260</b>	<b>109,376</b>	<b>351,254</b>
<b>Income</b>						
<u>Cash contributions</u>						
<i>Australian Red Cross</i>	100,096				75,783	175,879
<i>British Red Cross</i>	2,745	0		45,420	11,700	59,865
<i>Capacity Building Fund</i>				50,000		50,000
<i>DFID Partnership</i>		72,597	0	22,167		94,764
<i>German Red Cross</i>	78,211					78,211
<i>New Zealand Red Cross</i>	239,800	34,000				273,800
<i>Swedish Red Cross</i>	115,850			49,650		165,500
<b>C1. Cash contributions</b>	<b>536,702</b>	<b>106,597</b>	<b>0</b>	<b>167,237</b>	<b>87,483</b>	<b>898,019</b>
<u>Outstanding pledges (Revalued)</u>						
<i>British Red Cross</i>					11,950	11,950
<i>Capacity Building Fund</i>				63,534		63,534
<i>New Zealand Red Cross</i>	-92,300					-92,300
<b>C2. Outstanding pledges (Revalued)</b>	<b>-92,300</b>			<b>63,534</b>	<b>11,950</b>	<b>-16,816</b>
<u>Reallocations (within appeal or from/to another appeal)</u>						
<i>Capacity Building Fund</i>				30,000		30,000
<i>DFID Partnership</i>				24,787		24,787
<b>C3. Reallocations (within appeal or</b>				<b>54,787</b>		<b>54,787</b>
<u>Inkind Personnel</u>						
<i>Australian Red Cross</i>					127,500	127,500
<i>British Red Cross</i>	55,293					55,293
<b>C5. Inkind Personnel</b>	<b>55,293</b>				<b>127,500</b>	<b>182,793</b>
<u>Other Income</u>						
<i>Services &amp; Recoveries</i>					22,352	22,352
<b>C6. Other Income</b>					<b>22,352</b>	<b>22,352</b>
<b>C. Total Income = SUM(C1..C6)</b>	<b>499,695</b>	<b>106,597</b>	<b>0</b>	<b>285,558</b>	<b>249,285</b>	<b>1,141,135</b>
<b>D. Total Funding = B + C</b>	<b>643,483</b>	<b>155,612</b>	<b>7,813</b>	<b>326,818</b>	<b>358,661</b>	<b>1,492,389</b>

**II. Balance of Funds**

	Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation	TOTAL
<b>B. Opening Balance</b>	<b>143,788</b>	<b>49,015</b>	<b>7,813</b>	<b>41,260</b>	<b>109,376</b>	<b>351,254</b>
<b>C. Income</b>	<b>499,695</b>	<b>106,597</b>	<b>0</b>	<b>285,558</b>	<b>249,285</b>	<b>1,141,135</b>
<b>E. Expenditure</b>	<b>-577,371</b>	<b>-116,195</b>	<b>-6,861</b>	<b>-215,457</b>	<b>-343,446</b>	<b>-1,259,330</b>
<b>F. Closing Balance = (B + C + E)</b>	<b>66,112</b>	<b>39,418</b>	<b>953</b>	<b>111,361</b>	<b>15,215</b>	<b>233,059</b>

**International Federation of Red Cross and Red Crescent Societies**

MAAKH001 - CAMBODIA

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2006/1-2007/3
Budget Timeframe	2006/1-2007/12
Appeal	MAAKH001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

**III. Budget Analysis / Breakdown of Expenditure**

Account Groups	Budget	Expenditure					TOTAL	Variance
		Health & Care	Disaster Management	Humanitarian Values	Organisational Development	Coordination & Implementation		
A		B					A - B	
<b>BUDGET (C)</b>		<b>1,098,059</b>	<b>153,440</b>	<b>27,115</b>	<b>441,417</b>	<b>596,966</b>	<b>2,316,997</b>	
<b>Supplies</b>								
Shelter - Relief	17,851	2,262	11,392				13,654	4,197
Clothing & textiles	3,600							3,600
Food	27,307	9,297					9,297	18,010
Seeds,Plants	16,817		457		11,891		12,348	4,470
Water & Sanitation	261,367	149,361	2,645				152,006	109,361
Medical & First Aid	1,998				461	334	795	1,203
Utensils & Tools	6,697							6,697
Other Supplies & Services	4,583	1,143	3,558				4,701	-118
<b>Total Supplies</b>	<b>340,221</b>	<b>162,062</b>	<b>18,053</b>		<b>12,352</b>	<b>334</b>	<b>192,801</b>	<b>147,420</b>
<b>Land, vehicles &amp; equipment</b>								
Vehicles	3,201							3,201
Computers & Telecom	9,058		3,886		16,681	1,317	21,884	-12,825
Office/Household Furniture & Equipm.	13,319	2,244	2,195		5,111		9,549	3,769
<b>Total Land, vehicles &amp; equipment</b>	<b>25,578</b>	<b>2,244</b>	<b>6,081</b>		<b>21,792</b>	<b>1,317</b>	<b>31,433</b>	<b>-5,855</b>
<b>Transport &amp; Storage</b>								
Storage		20				-222	-202	202
Transport & Vehicle Costs	71,636	29,123	4,067	503	4,877	5,317	43,886	27,750
<b>Total Transport &amp; Storage</b>	<b>71,636</b>	<b>29,143</b>	<b>4,067</b>	<b>503</b>	<b>4,877</b>	<b>5,095</b>	<b>43,684</b>	<b>27,951</b>
<b>Personnel Expenditures</b>								
International Staff Payroll Benefits	370,749	80,649			1,335	191,178	273,162	97,587
Delegate Benefits	171,984							171,984
National Staff	124,007	16,095	3,209		10,924	36,168	66,396	57,611
National Society Staff	338,334	141,396	24,444	776	24,833	-817	190,631	147,702
Consultants	60,972	8,503	3,293	4,000	36,170	2,375	54,340	6,632
<b>Total Personnel Expenditures</b>	<b>1,066,045</b>	<b>246,643</b>	<b>30,945</b>	<b>4,776</b>	<b>73,262</b>	<b>228,905</b>	<b>584,530</b>	<b>481,515</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	339,807	49,676	41,234	487	86,638	13,237	191,272	148,535
<b>Total Workshops &amp; Training</b>	<b>339,807</b>	<b>49,676</b>	<b>41,234</b>	<b>487</b>	<b>86,638</b>	<b>13,237</b>	<b>191,272</b>	<b>148,535</b>
<b>General Expenditure</b>								
Travel	43,424	20,078	5,927	324	2,191	7,209	35,730	7,694
Information & Public Relation	89,528	8,744	3,682	2,888	21,451	1,876	38,642	50,886
Office Costs	127,546	14,990	4,518	444	6,424	25,000	51,375	76,171
Communications	40,638	16,057	4,228		2,234	12,625	35,143	5,494
Financial Charges	25,915	341	38		107	27,344	27,830	-1,915
Other General Expenses	3,114	3,316			580	1,629	5,524	-2,410
<b>Total General Expenditure</b>	<b>330,165</b>	<b>63,526</b>	<b>18,394</b>	<b>3,656</b>	<b>32,987</b>	<b>75,682</b>	<b>194,244</b>	<b>135,921</b>
<b>Program Support</b>								
Program Support	143,544	37,296	7,553	446	14,005	21,785	81,084	62,460
<b>Total Program Support</b>	<b>143,544</b>	<b>37,296</b>	<b>7,553</b>	<b>446</b>	<b>14,005</b>	<b>21,785</b>	<b>81,084</b>	<b>62,460</b>
<b>Operational Provisions</b>								
Operational Provisions		-13,219	-10,130	-3,008	-30,454	-2,908	-59,719	59,719
<b>Total Operational Provisions</b>		<b>-13,219</b>	<b>-10,130</b>	<b>-3,008</b>	<b>-30,454</b>	<b>-2,908</b>	<b>-59,719</b>	<b>59,719</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>2,316,997</b>	<b>577,371</b>	<b>116,195</b>	<b>6,861</b>	<b>215,457</b>	<b>343,446</b>	<b>1,259,330</b>	<b>1,057,667</b>
<b>VARIANCE (C - D)</b>		<b>520,688</b>	<b>37,245</b>	<b>20,254</b>	<b>225,960</b>	<b>253,520</b>	<b>1,057,667</b>	