

# Report 2006-2007



International Federation  
of Red Cross and Red Crescent Societies

## Cambodia

Appeal No. MAAKH001

7 April 2008

This report covers the period of 1 January 2006 to 31 December 2007 of a two-year planning and appeal process.



**Cambodian Red Cross:** Orientation on Participatory Rural Appraisal to Red Cross volunteers and villagers in Stung Sgnot, Kampong Chhnang

## In brief

### Programme summary:

The programmes have played a significant role in delivering quality outcomes for the people of Cambodia in health, disaster management and humanitarian values, and have greatly supported Cambodian Red Cross (CRC) towards becoming a well-functioning national society. Importantly, CRC has started a concerted effort towards a programmatic approach with its Red Cross partners; at the same time it is looking to integrate a lot of the work of departments or projects into broader learning and thinking. Over the past two years, there has been a significant improvement in the community focus of programmes and more sharing and learning between CRC and their partners.

**Financial situation:** The total 2006-2007 budget was CHF 2.3 million (USD 2.06 million or EUR 1.39 million)<sup>1</sup>, of which 93% was covered.

Click below to go directly to the attached financial report.

<a href="#">&lt;2006&gt;</a>	<a href="#">&lt;2007&gt;</a>	<a href="#">&lt;2006-2007&gt;</a>
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**No. of people helped:** 22,329

**Our partners:** CRC is working with many local and international partners, in fact, more than 45 across all programme areas. The Federation delegation in Cambodia would like to make special mention of the New Zealand, Australian, Swedish, British and Danish Red Cross Societies who have been great supporters for the

<sup>1</sup> Exchange rates: USD1.00 = CHF1.118, EUR1.00 = CHF1.65

delegation and its programmes over the past 2 years.

NB: The Global Avian Influenza appeal covers reporting on the [Avian Influenza programme in Cambodia](#). Also available as a separate report is the DREF Operation [final report of the Dengue Fever outbreak](#).

## Current context

Cambodia has had a relatively stable and peaceful two years, without major political disturbances or significant disasters. The country's macro-economic situation has continued to improve. The prevailing feeling of peace, combined with an upbeat investment environment, and sound global and regional economic prosperity is supporting strong growth in the country. GDP has averaged ten per cent for the last six years; in 2006 it was over 13 per cent, and in 2007, just under 10 ten per cent. However, the gap between rich and poor has increased in recent years and poverty for the rural Cambodians (which are some 85 per cent of the population) continues to be a real concern. This affects families' ability to deal with health crisis and other forms of hazards. According to the *2007 United Nations Human Development Report*, Cambodia has some of the lowest human development indicators in Southeast Asia, ranking at 131 on a global index of 177 countries.

There has been a general improvement in key poverty and health statistics; HIV prevalence has dropped from 1.2 per cent in 2003 to 0.9 per cent in 2006; poverty levels have dropped one per cent a year for the last ten years with 35 per cent of the population now living below the poverty line<sup>2</sup>. However, only 34 per cent of the population has access to improved drinking water sources<sup>3</sup>; life expectancy at birth is 58/54 for women and men respectively<sup>4</sup>; maternal mortality is 472 deaths per 100,000 live births; and under-five mortality is 95 per 1000 live births<sup>5</sup>.

The Cambodian Red Cross has gradually focused more attention on key health issues, such as community-based health including water and sanitation, health promotion activities to address the gaps, and more developmental disaster management practices. The national society has also taken up key advocacy issues around HIV/AIDS and human trafficking.

Road traffic accidents have increased significantly in the past two years. In 2005, the reported number of deaths and severely injured were 904 and 4,097 respectively. In 2007, it was estimated that deaths will be above 1,500, and the number of severely injured beyond 7,500. CRC responded by expanding its project into three provinces, with additional contributions being made available from their own branch funds.

The only international appeal for support came in response to the Dengue Outbreak in 2007 which resulted in a DREF allocation of CHF141,000 (USD 126,120 or EUR 85,454).

## Achievement of objectives

### Disaster Management

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, DM experience and learning has been mostly through the implementation of the community-based disaster preparedness (CBDP) programme. CRC is moving beyond disaster relief towards increased disaster preparedness activities, in order 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, initiated a disaster response preparedness (DRP) project in 2007. The project, which is closely aligned with the Global Agenda goals (Goal #1) and linked to the Hyogo Framework of Action (HFA, Priority #5) is still in the inception phase, after being designed by CRC during 2006. There is a focus on promoting

<sup>2</sup> World Bank Poverty Assessment 2006

<sup>3</sup> ADB, 2006

<sup>4</sup> Ministry of Health, 2000

<sup>5</sup> DHS 2005

stronger coordination with external partners, particularly the governmental body - National Committee for Disaster Management (NCDM) - by developing roles and responsibilities for disaster response. The project provides a key linking platform or framework from the community-based risk reduction activities to the provincial and national response mechanisms. Additionally the project hopes to strengthen CRC's internal capacity through departmental integration.

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

**Objective:** To strengthen the capacity of the Cambodian Red Cross in efficiently meeting the basic needs of individuals and communities affected by natural disasters

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

**Achievements:**

- After communications between the project coordinator and secretary general of NCDM (National Committee for Disaster Management), a MoU (Memorandum of Understanding) between NCDM and CRC (Cambodian Red Cross) has been endorsed by both organizations' leaders, and released for legal reference for each institution in applying to their disaster management programming. The final article is also disseminated to all CRC departments and is expected to be launched to the public through the CRC website.
- A national consultation workshop on development of DR (disaster response), DP (disaster preparedness) policy and principles and basic rules in disaster relief saw the participation of DMD (disaster management department) staff and CRC branch leaders and DO (development officers).
- The ER (emergency response) guideline has been drafted and agreed upon by all heads of the CRC department, and is waiting final approval.
- Standard operating procedures (SOPs) for the CRC Disaster Response Team (DRT) were developed, through desktop consultation to all CRC department heads and CRC managers and some branches with access to email. It was finalized by late December 2007.
- A package of DP/DR procedural tools including: the Principles and Basic Rules of the CRC in Disaster Relief; the Disaster Preparedness (DP) Policy; the Disaster Response (DR) Policy; the Guideline and Code of Conduct for CRC in Emergency Relief (ER) Operations, and the Standard Operating Procedures (SOPs) for CRC Disaster Response Team (DRT) have been finalized, endorsed and disseminated.
- A DRP leaflet, which incorporates a DRP tool, CRC's humanitarian service (in symbols) and the Principles of the Red Cross Red Crescent Movement, was discussed with CRC cross-departments and branches, and is scheduled to be published and disseminated by March 2008.

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

**Achievements:**

- The DRP inception phase field project is being implemented in Kampong Chhnang province.
  - The field activities were implemented in 11 villages of the Ampil Tuk commune, Kampong Tralach district and nine villages of Tuk Haut commune, Rolea Phaear district. There are 40 project volunteers selected for implementation, and it involved 20 village chiefs, two Commune Committee for Disaster Management (CCDM) chiefs and two members of the District Committee for Disaster Management (DCDM).

- The job description for each responsible person of the project was designed and agreed upon by all managers responsible (HR, DM and secretary general); except for the terms of reference (ToR) for Red Cross volunteers (RCVs) and CCDM due to the project still being in its inception phase.
- A shortage of baseline information in the target site led to the conducting of a PRA to: (i) familiarize the new project volunteers to the activities as well to the CRC humanitarian concept and, (ii) collect necessary information from the local community, particularly the impact of disaster(s) they may face and the capacity of response they have utilized in the past.
- A Training Needs Assessment (TNA) tool, which was co-developed by HR, CO and DM, has been applied to the project volunteers. The same assessment for DM staff (national headquarters) with a different tool was applied by CBDP (community-based disaster preparedness).

#### **Constraints and challenges:**

- The coordination internally and externally is a challenge; the project needs time and patience to harmonize all fragmented duties to be disaster-ready and efficient;
- The project has delivered some useful tools for system improvement as well as initiated an operational mechanism for disaster preparedness and response. Significantly, such mechanisms will improve CRC humanitarian service during disaster response. Additionally, it will enable CRC to work better with local communities who mobilize their own resources for effective self-response. Further monitoring and support is needed.
- It is a long-term challenge for CRC to keep advocating and promoting self resilience of disaster-affected communities.

#### **Best practices and lessons learned:**

The incorporation of all CRC core areas (such as the promotion of Red Cross Red Crescent Principles, DM, Health and OD) in any specific CRC project/programme being implemented at local level has begun to improve delivery and contribute to raising CRC's profile nationwide.

## **Health and Care**

The Cambodian Red Cross (CRC), in line with its Health Strategic Plan 2003-07, the Federation's 'Strategy 2010' (as well as the subsequent Federation of the Future) and the Cambodian Millennium Development Goals, has been implementing a range of projects to promote improved health; these include HIV/AIDS, Health in Emergency, and community-based health and development (CBHD). These projects are making progress against the first part of the CRC objective: 'promoting health care and well-being of vulnerable people'.

The Health and Care Programme (H&C) receives financial and technical support from the Federation, partner national societies (PNS) including the American, Australian, British, Danish, German, Japanese and New Zealand national societies, and a variety of non-Red Cross Movement stakeholders. In addition, since March 2006, a health delegate has been working with the programme to provide, together with the Federation regional office, technical support for the CBHD, avian influenza and human pandemic influenza projects. These interventions are producing results that demonstrate the effectiveness of the activities, acceptance and appreciation of the beneficiaries and progress towards changing behaviour as well as improvement of livelihoods at village level.

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

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

#### **Achievements:**

- During 2006 and 2007, the CRC replaced both the director and deputy director of the health department. Since these appointments, there have been some positive changes especially in

regard to thinking how the future of the CRC health department will coordinate projects. There is now a strong desire to move from a project to a programme approach. This is being supported and encouraged by the Federation and the CRC PNS who are assisting the NS in a number of ways including the co-funding of the new CRC health department's Strategy 2008-12 which is now underway.

- Increased coordination and cooperation between the CRC health director and various PNS has produced several beneficial results for all the health projects working on community-based health. A HIV component, with funding from the Australian Red Cross, has now been integrated into the CRC Water and Sanitation project that the Federation/New Zealand Red Cross also supports. There has been an increased cross-sharing of information between the CRC project managers supported by the various PNS and, as a result, several new ideas have been adopted and incorporated into various projects including those supported by the Federation.
- Cambodia has been internationally recognized as one among five countries in the world which effectively addressed the spread of HIV/AIDS. The prevalence has dramatically dropped from 2.0 per cent in 1997 to 1.2 per cent in 2003 and 0.9 per cent in 2007 respectively. The CRC has been both nationally and internationally recognized as a contributor to this impact.
- In addition the CRC took a lead in organizing and participating in both World Blood Donor Day and World AIDS Day, which effectively promote knowledge and behaviour change among leadership and the public.
- The CRC has also increased its coordination with leading actors from the government, UN and NGOs and this has resulted in a greater recognition and appreciation of the vital role that the CRC plays in delivering preventive health activities and humanitarian assistance in Cambodia. A recent Public Image Survey, commissioned by CRC and conducted by an independent consultancy, has strongly indicated health as outstanding activities provided by volunteers in the community, reinforcing the relevance of these activities for the community, and providing a clear call for CRC to be involved.

### Expected Result 2

To improve the quality of life of people living with HIV/AIDS (PLWHA), Orphaned Vulnerable Children (OVC) and their families by reducing stigma and discrimination in public health settings in their communities and to strengthen the capacity of national society staff in order to achieve a sustainable and well-functioning HIV/AIDS programme

### Achievements:

- During 2006 and 2007, this CRC HIV/AIDS project conducted activities supporting people living with HIV/AIDS (PLWHA) in Siem Reap, Kampot, Banteay Meanchey and Koh Kong to improve their quality of life and provide opportunities for them to access health services.

The project mobilized local authorities in communities to participate in the sensitization workshops conducted by the Red Cross branch offices and HIV/AIDS staff at headquarters. This resulted in providing a resource support mechanism to the project activities of Red Cross Volunteers (RCV) working with PLWHA in the communities.

Some of the activities conducted by RCV include having:

- Carried out over 25,000 home visits to provide counselling support and education to over 1,690 PLWHA and their families



**Coming together:** Participants present at a community education workshop for people living in the community. Workshops such as these have helped in reducing stigma and discrimination against PLWHA and their families.

- Conducted 126 community education workshops for anti-stigma and discrimination on HIV/AIDS reaching 2,942 participants
  - Assisted in establishing 154 self-help groups for, and conducted by, PLWHA throughout the four provinces.
  - Assisted 669 families with rice and non-food items
  - Supported 131 shelter repairs
  - Provided referral service for 348 PLWHA
  - Assisted 31 families with costs for funeral ceremonies
- It has been observed that during the two-year implementation of the project, all sectors of each community have an increased understanding of HIV/AIDS and the challenges faced by PLWHA. Moreover, stigma and discrimination relating to HIV/AIDS has reduced and resulted in a greater acceptance of and support provided to PLWHA and their families.

HIV+ children are now able to attend school and have more friends, small businesses owned by HIV+ men and women are able to compete on the open market for employment within their own community or work with various NGOs in the area, PLWHA are becoming speakers at public forums and more PLWHA are using the public health services where they receive care and support without discrimination

- PLWHA have learnt to help each other and are providing counselling support and information to each other as well as finding new ways for improving living conditions and developing ways to earn an income.
- Community committee forums have established what has become a 'smart team' that supports PLWHA by creating fundraising activities to cover the costs of providing nutritional support and assisting with referring PLWHA to health services, providing funding for shelter repairs, and assisting and helping to establish small income generation projects for PLWHA. These committees are the main contributing factor for improving the quality of life for PLWHA.

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

#### Achievements

In 2006-2007, the CRC Water and Sanitation project, which is jointly funded by the Federation (through New Zealand Red Cross) and the Australian Red Cross, was able to achieve its objective of providing better access of improved water and latrine facilities. The project completed all of its planned 'hardware' activities in the five selected villages in the Kep Municipality and Koh Kong province. Over the course of the two years, 1,546 families were provided rain water catchments units (RWCU), pour-flush family latrines and ceramic water purifiers, reaching an estimated 7,900 direct beneficiaries.

- The capacity of local masons who were identified by the community and trained by the Red Cross on construction techniques for both RWCU and family latrines has increased; these valuable skills will remain long after the project funding has ended. Villagers also actively participated during the construction phase by contributing additional labour and local resources.
- Training on operation and maintenance was provided to each household by RCVs. In addition, village committees composed of the village chief and branch development officer and RCV, were established to monitor the household maintenance and operation activities.

Facilities provided in Province/ Municipality	Completed In 2006	Completed in 2007	Total
RWCU - household	228	321	549
Latrines	154	325	479
RWCU - schools		10	10
RWCU - health centres		6	6
Hand washing facilities - schools		5	5
Ceramic water purifier HH	175		175

Ceramic water purifier HC		3	3
Ceramic water purifier -schools		25	25
RWC	295		295
Latrines	223		223
RWCU - Schools	2		2
RWCU - Health Centres			
Hand washing facilities Schools			
Ceramic water purifier HH	223		223

- Branch staff and volunteer team leaders conducted random water quality testing of 50 family RWCU in the target villages. The results showed that the water from the RWCU tested negative for E-coli.
- Each household that received a RWCU now has enough water for drinking and cooking to last them through the dry season. Time spent travelling to fetch water and costs have been reduced and families have used the money saved to buy a variety of things: one woman managed to save enough to buy a bicycle. Mothers have also reported that the children now have time to attend school and not have to spend time collecting water.

In addition to the "hardware" facilities provided, the project also used a range of methods<sup>6</sup> to identify the major health concerns in the target villages. The top concerns identified were diarrhoea, respiratory tract infections in children, TB, lack of use of maternal child health facilities and dengue. RCVs, trained by the Provincial Department of Health, have been reinforcing key health and hygiene messages related to diarrhoeal disease<sup>7</sup> and have also encouraged women to attend ante-natal services at their local health centre and have their children immunized.

Household interviews and focus group discussions indicate significant improvements on hygiene-related knowledge and practices of the beneficiaries as compared to base line information. Health Centre staff are also reporting an increased number of women seeking ante-natal services and an increase in the uptake for babies being immunized. There has also been a marked increase in the number of women attending community meetings to discuss the construction component of projects; the figures recorded now are up by 65 per cent.

Furthermore, a key focus of the water and sanitation project has been on increasing the management, operational and coordination capacity of the Kep Municipality and Koh Kong Red Cross branch offices. Training has been provided by the project manager on various aspects of project planning and financial management and partners including the Provincial Health Department and NGOs have been used to increase the technical knowledge and capacity of the branch staff. As a result, increased responsibility has devolved to the branch level as compared to the previous years.

### Constraints and Challenges

- The health department wants to strengthen the sharing of information on what the national society is doing, via more stories, case studies and reports on both the CRC and Federation web sites. However the communication department lacks certain capacities and this coupled with the extremely busy work schedules of programme managers and their directors means that much of the work goes unreported to a wider audience.
- A perceived lack of long-term partner commitment caused concern for programme managers and has, in some cases, resulted in year-by-year planning rather than looking at medium- to long-term programme planning. In addition, the HIV project reported in 2006 and now once again that due to less funding, coupled with increasing market prices, it could not provide as many food and non-food family kits to PLWHA as planned. The project has been working with the community committee forums to try to find solutions to this shortfall.
- Despite widespread efforts to assist CRC to develop its programme framework and approach for community-based health, there has not yet been any formalization on how to move forward with

<sup>6</sup> Household interviews, focus group discussions, key informant interviews (e.g. village leaders, health centre staff, teachers), health centre records

<sup>7</sup> Including causes, prevention, recognition of danger signs and treatment options

this process. As such, each project is using a different goal, objective, expected results and indicators as well as training, monitoring and evaluation tools. The CRC department of health is currently undergoing a revision of its health strategy and foresees that attention will then turn to developing a programme approach for community-based health. Committed partners support will be needed.

#### **Best Practices and Lessons Learned**

- The establishment of the community committee forums in the villages where the HIV/AIDS project is implemented has proved very successful in creating a sustainable system to support PLWHA. This is a practice that could be modified and used in other areas of community-based health such as mothers' clubs to support low-income families.
- Using a participatory approach and working with the communities to identify their health problems and plan for a solution, the community-based health/water and sanitation project has encouraged community ownership, which is leading to a firm commitment from the beneficiaries to appropriately use and maintain their water and sanitation facilities.

## Capacity Development

### Overview

The aim of organizational development is to enable CRC to become a well-functioning national society by 2010, through their own efforts and a wide technical and financial support from Red Cross Red Crescent partners including the **Federation, Swedish Red Cross, British Red Cross, ICRC, Danish Red Cross** and additional support from the **CAS contribution**.

In 2006-2007, the programme was led by an internal CRC organizational development taskforce with support from the Federation country delegation as well as the Federation regional office. The team met regularly to update on progress against the organizational development plan. The taskforce has prioritized better reporting mechanisms and the drafting of Three Year Development Plan 2008-2010, aligned to the *Federation of the Future*. The said plan will address the key OD issues, which cover six identified elements: governance and management, branch development, resource development, administrative and finance development, human resource management and development, and planning, monitoring, evaluation and reporting at the headquarters and branch levels.

During 2006-2007, there was significant progress made against the organizational development objectives and in addressing key issues as well as partner concerns. As a result, there are four working groups have been established to assist CRC to work with partners in specific areas: disaster management, health and care, financial development, CAS working group, and OD working group.

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

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

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

**Expected Result 2:** The capacity of the CRC staff in headquarters and branches to have capabilities in service delivery in the four core areas is systematically built by mid-2007.

**Expected Result 3:** The movement of branches from a lower category to a higher category (grade C to B, Grade B to A) is accelerated and characteristics of a well-functioning branch are developed through a systematic branch development approach by mid-2007.

**Expected Result 4:** The Red Cross volunteering policy and guidelines are implemented in 24 provinces and the management of Red Cross volunteers is strengthened in 12 provinces in branches categorized as 'B-', 'B+' and 'C' by the end of 2007.

**Expected Result 5a:** The CRC youth network is 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 the overall programme management capacity

**Expected Result 5b:** Road safety methods are applied, and capacity to influence peers is increased among high school and university students in Phnom Penh and selected provinces by mid-2007

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

## Achievements

### Governance and Management

The most significant event in 2006 was CRC's 4<sup>th</sup> General Assembly in August 2006. The General Assembly was successful in electing a new central committee composed of 23 people, with the re-election of the national society's president. A new secretary general and deputy secretary general were also appointed. The General Assembly set out the CRC's overall objectives for the upcoming 4<sup>th</sup> Mandate and approved the budget for the next four years (2007-2010). The objectives are:

1. **Promoting and enhancing ownership** through diversifying fundraising and income-generating activities, providing capacity-building to leadership and governance, improving financial management and strengthening planning, monitoring, evaluation and reporting;
2. **Strengthening the national headquarters general secretariat** by improving office management, communications and IT, restructuring the secretariat and clarifying their roles and responsibilities;
3. **Strategic review process and three-year planning process** supported by the organizational development programme and ongoing development of programme frameworks
4. **Enhancing monitoring and evaluation** by establishing an organization-wide system and adopting monitoring and evaluation policy and guidelines as well as improving skills among staff.

A major milestone in the ongoing institutional development of the CRC as the governing board approved various key policies including revised conditions of service, a human resource policy, financial procedures, staff grading and salary scale policy, retirement and pension policy as well as a cooperative agreement strategy document.

### Branch Development

There has been steady progress in branch development throughout 2006 and 2007. The branch development software (BDS), designed to monitor and track branch progress, was upgraded to include human resource profiles of both headquarters and branches. The BDS training was conducted for 24 branches with the aim to ensure that each branch can update necessary information in the system. Using the branch development software data and a questionnaire based on the indicators of a well-functioning branch, the results indicated that most branches have improved in many of the key indicators.

In 2007, recognizing the challenges to progress in branch development in some branches, CRC headquarters introduced the initiative of the minimum package of activities (MPA) to less-developed branches. Hence, there is the need to consolidate all elements together and introduce them as a single package to branches for implementation in the coming years. Characteristics of a well-functioning branch will be discussed among relevant departments and developed through consultation with the national headquarters, branches and partners. Also, during the OD working group meeting, it was recommended that a review of criteria for branch categorization is needed. A new set of criteria should be concrete, and provide more qualitative rather than quantitative information, while a means of verification (underlying resources) should be recorded. Moreover, the twinning branch concept has been proposed with coordination from CRC headquarters. As a result, the Battambang branch supported the construction of stores for the Mondol Kiri branch in the northern province of Cambodia. CRC headquarters strongly encourages strong branches to support less-developed branches.

Significant progress has been made in the expansion of sub-branches, Red Cross groups of the Phnom Penh municipality, Battambang, Kandal, Svay Rieng and Kampong Cham branches, etc.

During the last two years, the Battambang branch inaugurated a new office; in 13 sub-branches, there are three sub-branches with separate offices in which volunteers work, and one has obtained its land title already.

Branch management has been improved through provision of leadership and management, and CRC legal-based training for eleven new branch directors. The effectiveness of training will be continually conducted by the M&E unit in coordination with human resource department.

After a presentation of the project initiative of the Kampong Chhnang branch in a PNS meeting in 2006, the German Red Cross has shown their interest in supporting branches in cultivating a new community-based health care and branch development project. This project will be implemented in 2008 after considerable consultation and planning in 2007. Danish Red Cross has the intention of supporting the Rattanakiri Branch in a community-based health development programme. Field visits were conducted in late 2007 to strengthen branch capacity in project management, and develop plan of action for the aforementioned project.

### **Resource Development**

One of the overall objectives set out by the 4<sup>th</sup> General Assembly, stated **"Promoting and enhancing ownership through diversifying fundraising and income-generating activities, providing capacity building to leadership and governance, improving financial management and strengthening planning, monitoring, evaluation and reporting"**.

Various high profile events in the past year have highlighted the increased capacity of the Cambodia Red Cross to fundraise. Through the efforts of 24 branches, Red Cross Day in May netted a total of USD 453,245 (CHF 506,728 or EUR 307,108) in 2006 and more than USD 1 million (CHF 1.118 million or EUR 677,576) in 2007. Significantly, for the first time, a few of these branches will earmark these funds towards development projects in their provinces.

A key achievement was the organizational and resource development workshop held in 2006, attended by participants from CRC national headquarters and branches. The outcomes of the workshop were useful recommendations for strategies and plans on how the CRC, in particular the branches, can scale up their resource development and income-generating activities. Following this workshop, the central committee approved the establishment of a fundraising and resource development taskforce at governance level, tasked with scaling up CRC activities in these two areas. Most branches have established fundraising and income generation committees to enable branches to mobilize financial resources to support humanitarian activities.

A bottled drinking water initiative launched by Phnom Penh municipal Red Cross, attracted consumers during the last 12 months. Potential consumers are governmental entities, companies and individuals. Commercial first aid has become a traditional income generation activity that promotes service to factories in and around Phnom Penh. Ceramic water purifiers are produced by the Prey Veng branch and sold throughout the country. UNICEF, CARE, Red Cross partner national societies are purchasers of this product.

### **Administration and Finance Development**

The financial procedures manual was printed and disseminated to headquarters and branch staff during a series of three workshops on procedures, project planning process budgeting and reporting in 2006. In 2007, with the technical support from the regional finance delegate, CRC launched an activities-based accounting system, which provides significant benefit to several programmes/projects. Computerized accounting software "QuickBooks" has been introduced to more than ten branches, and relevant staff were trained.

### **Human Resource Management and Development**

The volunteer project was not able to implement a large portion of planned activities due to budget limitations. The most significant activity however, in mid-2006, was a Red Cross volunteer leader (RCVL) exchange programme conducted in Kampot. All RCVL selected from 24 branches (two from each branch) have learned and shared best practices on RCV management and continue to pass these on to other volunteers in their communities. Moreover, volunteers were motivated again by this exchange visit. Emphasis was placed on listening to the volunteers' opinions and experiences of the programme and their recommendations for future improvements and growth. This feedback will help

develop a human resource three-year plan 2008-2010, addressing key issues of volunteer retention, motivation, training and service delivery.

Five branches conducted gender training for sub-branch staff and volunteers, involving 125 participants. It is expected that this training will result in a greater awareness of gender issues at sub-branch level and among volunteers, translating into increased participation of women at community-level during service delivery.

All 24 branches received a replenishing of 3,794 first aid kits for distribution to volunteers through the community-based first aid project.

In order to improve staff knowledge and skill needed for day-to-day work, headquarters staff were trained on office management and proposal writing. Some newly trained staff had the opportunity to practice their knowledge in project proposal development with support from a local external consultant. Furthermore, 14 branch staff received training in different areas according to branch needs.

### **Road Safety:**

In 2007, the Road Safety Project was implemented in the two provinces of Battambang and Kampong Speu and the city of Phnom Penh. In Phnom Penh, the project focuses on 13 educational institutions (11 high schools and two universities) with a total of 276 CRC youth advisors and youth members; in Battambang, the project focuses on eight high schools, with 208 CRC youth advisors and youth members to be trained in road safety; and Kampong Speu targets four high schools, at which training will be provided to 208 RCY advisors and youth members.



**Youth club activities:** the youth are among the most active participants in Red Cross work, including the Road Safety Project

Phnom Penh now contributes 21 per cent of the total fund to this project while Kampong Speu contributes 11 per cent. This fund contribution indicates the commitment and initiative of the branches in implementing this project in their areas, with the ultimate goal to reduce the numbers of traffic accidents in their province.

In addition to this contribution, the Phnom Penh Red Cross branch is taking a further step of implementing this project at the branch level under the *youth guiding traffic on the roads* activity. Under this activity, trained youth devoted their Sunday morning, from 8:00 to 10:00 a.m., standing at road sides, with flags and microphones, to guide traffic. The branch implemented this activity throughout 2007, at the cost of USD 18,414.60 (CHF 20,587 or EUR 12,477). This activity will be implemented in 2008 as well.

Additional activities in 2007's Road Safety Project were the training sessions provided to selected CRC youth leaders for all three provinces (two youth leaders per school) and at road safety clubs; the club carried out training in 16 schools in all three provinces, organizing one- to two-hour sessions every month.

After each training session, evaluations were conducted. Results indicate as follows:

- The youth leaders training evaluated the *knowledge* of the participants following the workshop and on the *workshop preparations*. The result of the evaluation on the knowledge learned is 79 per cent *very good* and 21 per cent *good*. The result of the evaluation on the workshop (lessons, methodology, preparations) is 90 per cent *very good* and eight per cent *good*.
- The youth training evaluated the knowledge of the participants learned from the three days training. The results indicated that 73 per cent of the 200 participants did *very good* on the test, while 22 per cent were *good*, and five per cent, *moderate*.

## **Monitoring and Evaluation**

The Monitoring and Evaluation (M&E) unit was established in May 2006 with the approval of CRC's central committee. With the support from the Federation, the M&E unit set out objectives to be achieved in two phases. The first phase was to develop the foundation of the unit: monitoring and evaluation policy, and related guidelines and participatory approaches in monitoring and evaluation. The second phase was to strengthen the M&E unit and its network through providing training and implementing for selected projects and programmes, and conducting a midterm review of the unit.

First, 29 M&E coordinators were appointed at headquarters and branches, and trained in their role and responsibility, technical and reporting skills as well as tools to carry out their work. Their primary responsibility will be to assist the monitoring and evaluation work conducted by the programmes/projects at community level through the provision of technical expertise and guidance. One monitoring field trip on disasters response in three provinces was successfully conducted seeking recommendations for the improvement of the disaster response programme. To ensure the achievement of CRC projects and programmes, the unit set up a database to help manage implementation and produce reports.

Secondly, the M&E unit has made significant steps in playing its role and responsibility in assisting programmes/projects to be more efficient and effective for communities. Three external evaluations with technical support from a consultant (training, LMRE, water and sanitation projects) and two internal monitoring field trips were conducted successfully (AI and HT projects). The recommendations for improvement of projects were contributed to managers, and shared with branch staff for more cooperation in future. Additionally, through support from the OD delegate, the PMER findings in 2007 will help train CRC staff at national headquarters and have been distributed to all CRC project managers and branch staff. Furthermore, the reviewing of role and responsibility of M&E unit, along with new guidelines, are accepted by CRC top managers and should lead to future improvement.

To become more professional on monitoring and evaluation, and as good assistance for CRC leaders, donors and beneficiaries, the M&E unit needs more support including technical, funding and motivation from all relevant partners. However, CRC leaders and staff are committed to putting the three-year development plan 2008-2010 into practice through implementing and regularly reviewing the progress of all areas.

### **Constraints and challenges:**

- 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.
- Over the course of 2006-2007, significant progress has been achieved by the organizational development working group. The working group and governance focal point has prioritized an organizational development master plan to aid strong coordination among departments at headquarters and branches.
- Despite commitment and efforts made by the organizational development working group, there is clear indication of the necessity to have a full-time OD coordinator that is capable of assisting the group in coordination, collection of data, compiling and developing reports, as well as assisting the branches in developing plans and ensuring the delivery of critical cross-cutting elements of CRC capacity building efforts.
- CRC staff have limited reporting capacity and require more ability in order to show an impact at the community level.
- Lack of M&E staff and funding to support M&E activities. Capacity and experiences of M&E staff and coordinators are limited.
- The monitoring and evaluation unit has achieved a good deal; yet CRC has not developed a system for the national society. Consequently, project managers use different tools to monitor their projects. It will be a challenging task for the unit to introduce a standardized approach at all levels. The new terms of reference need to be developed and shared within the CRC.
- In the road safety project, there is only one staff member (the road safety coordinator) who is responsible for the whole project. This limits the amount of travelling to provinces to monitor activities regularly. The project will seek to employ an additional staff member to move the project forward in 2008.

#### **Best practices and lessons learned:**

- Branch development being implemented alongside programme/project implementation assists branches to become more self-confident and self-supported after projects phase out.
- Community and branch empowerment strengthen capacity and confidence in addressing issues in the future.

## Humanitarian Values

**Goal:** There is greater awareness, respect for, and application of humanitarian values in Cambodia.

**Objective:** The Movement's Fundamental Principles, as well as its position concerning humanitarian values, are disseminated to and understood by a larger proportion of the Cambodian population.

Funding through the Federation Appeal process in 2006-07 was limited for CRC's humanitarian values programme. Support from ICRC continued to be the primary outside source for CRC's activities in this area and in addition, the national society received one per cent of the budget from CAS (Cooperation Agreement Strategy) for increasing media information operations. In September 2006, the communications department, which is primarily responsible for activities related to the Fundamental Principles and humanitarian values, underwent a significant staffing change as the former director was promoted to deputy secretary general. She was replaced by the deputy director of the disaster management department.

Major highlights in 2006-07 included the launch of the response to the human trafficking project, financially and technically supported by the Danish Red Cross and implemented in two high-risk border provinces: Banteay Meachey and Svay Rieng. Four regional workshops were organized in three border provinces and the Phnom Penh municipality. Those workshops were participated by government, UN, NGO and CRC staff in order to identify the problems, gaps, solutions and priority interventions for CRC.

The landmine awareness project introduced micro-credit schemes as a key component of their intervention, and they are now seeking ways to scale-up activities to increase impact. CRC's first public image survey received approval from governance this year and will be conducted in selected provinces nationwide in 2007. A resource development workshop was also successful in drafting strategies to diversify resource development and income generation for the national society.

Importantly, the CRC president's role as the Asia Pacific Leaders Forum champion for HIV/AIDS in Cambodia is testimony to the national society's growing determination and confidence in advocacy issues. This role is closely linked to the HIV/AIDS programme area, and is also a step forward in the promotion of anti-discrimination.

#### **Achievements in 2006-07 include:**

##### **International humanitarian law (IHL) and Red Cross dissemination**

Training sessions conducted included:

- Red Cross Red Crescent and IHL training for 75 journalists
- Refresher training on the Red Crystal (third additional protocol) for 59 participants from CRC headquarters and all branches.
- After a recommendation from the IV General Assembly, training on basic Red Cross knowledge (Movement,

fundamental principles, IHL, and promotion of humanitarian values) was conducted for 24 branch committee members.



Red Cross dissemination activities for 118 students at "Build Bright" university

A round table talk commemorated International Women's Day on 8 March under the national theme: "Let's raise women status and family economy", with a focus on women's activities and gender training at the CRC. Several other dissemination activities occurred, including leaflet distribution, sessions with students and the screening of the ICRC film 'Story of an Idea' in Khmer.

Some 3,000 handbooks on Cambodian Red Cross' laws, statutes, rules of law and financial regulation were distributed to all provincial and municipal branches.

### **Public relations**

A regional research company with expertise in image surveys was recruited to design and conduct CRC's public image survey. Funding was secured from the ICRC and the Federation (through British Red Cross). The contract was signed in the third quarter in 2006 followed by the survey itself which was completed in 2007.

For CRC's fourth general assembly, the communications department was active in preparing documents and producing news stories for broadcast. Eleven English news stories were uploaded onto the CRC website. In addition, staff regularly went to the field to cover Red Cross news stories for broadcast, which are shown weekly on six national public channels and one radio station. Weekly broadcast of Cambodian Red Cross's activities through all television channels enables the public to understand more about Cambodian Red Cross' work and activities in providing assistance to vulnerable people in target communities thanks to generous assistance from the public, partners and CRC members.

### **Tracing**

This programme processed 189 cases in 2006-07. There were 11 successful cases of reuniting families, including a family's reunion with their mother who had been lost for 23 years. The programme also collected 11,043 Red Cross messages in 2006 and 7,416 in 2007, mostly from families who had a member imprisoned. The approach in tracing moved more in line with the overall Movement strategy of RFL (Restoring Family Links).

### **Capacity building**

During training in December 2006, the communications department staff and Phnom Penh branch participants, 16 in total, received practical skills training on producing news stories for print and television, conducting interviews and on how to use effective research methodologies. The increased capacity of the trainees will upgrade the quality of the CRC weekly news broadcast, produced by the Phnom Penh branch in cooperation with the communications department.

### **Mine Risk Education and Reduction (MRER)**

The project, funded by German Red Cross, is being implemented in six provinces in the high-risk northwest Cambodia aimed at educating the most vulnerable to change behavioural habits in order to reduce landmine or unexploded ordinance (UXO) casualties as well as maintain and improve public information campaigns, raising awareness amongst affected communities. In 2007, a mine action strategic plan was established until 2012.

The number of direct and indirect beneficiaries reached in 2006-07 was 69,869, including workers, students, former soldiers, vendors, and displaced people.

In addition, the project provides micro-finance loans (up to a maximum of USD 200 or CHF 224) to the most high-risk families in order to start income generation activity that will develop their earning capacity and secure basic needs, thereby reducing the risk of being exposed to mined areas. About 287 families benefited from these loans and have set up activities ranging from a grocery shop to household farming. Every three months, the beneficiaries attend a meeting organized and facilitated by a development officer and village leaders to share experiences and skills.

In November 2007, an evaluation trip was conducted in the Oddar Meanchey province with project and branch staff, a German Red Cross representative, and the head of the monitoring and evaluation unit.

The purpose was to gather feedback from beneficiaries, volunteers and project staff on successes and improvements needed. Community feedback was positive, stressing the effectiveness of the awareness-raising by volunteers and stating a desire to see the loan scheme extended to include more families. A key issue raised among all respondents was the need to ensure the sustainability of the loan schemes, a key priority for the programme to tackle in 2008 and beyond.

### **Human trafficking**

Implementation was from July 2006-December 2007. The second half of 2006 was primarily focused on the inception phase and building a network with partners.

Achievements include:

- Two regional inception workshops, with participants from Cambodia Red Cross, partners and stakeholders aimed at introducing CRC's programme, creating a network and sharing best practices and identifying areas of needs where CRC could intervene.
- A technical workshop with key regional and national implementing agencies giving the project manager more technical exposure, including studying the anti-human trafficking law, human trafficking in Cambodia and stakeholder activities. The CRC programme was also introduced.
- One week of training in November 2007 on project planning process (PPP), including monitoring and evaluation and reporting tools was attended by two branch focal points.
- Awareness-raising activities were carried out 71 times in villages, schools and pagodas with a total of 2,276 villagers and students attending.

### **Income generation**

Cow and goat banks were established in 2006 in the two provinces of Pursat and Kampong Cham, supported by the British Red Cross. The aim is to provide the selected families with greater livelihood security by owning livestock. However, the impact of the project has been difficult to gauge over the past two years. But it can be said that the total number of cows is increasing, from 15 in 2005 to 25 in 2007 and the number of goats from 12 in 2005 to 48 in 2007.

### **Challenges and constraints**

Measuring impact of the programme is a complex task, one that the principles and humanitarians values programme has not fully grasped. Ultimately, the level of understanding or rate of awareness could not be adequately measured, since the public image survey has yet to be established as a baseline.

### **Best practices and lessons learnt**

- Training of sub-branch staff in management, dissemination, and fundraising implies a higher number of skilled staff at sub-branch level, strengthening the grassroots network and reach of the CRC.
- Training of journalists in international humanitarian law implies greater sensitivity and exposure in media reporting on issues related to IHL in Cambodia
- *Human trafficking programme*: the regional workshops created fora for exchange of information and increased understanding of stakeholders of the Red Cross mandate and its humanitarian action helping to change the attitude of seeing the Red Cross as solely a relief distribution organization
- *Landmine risk education programme*: more villagers are expressing a desire to become Red Cross volunteers as they see the good work that volunteers are doing. Furthermore, the communities' desire to see the loan schemes expand to include more families speaks of the intervention's effectiveness.

## **Working in partnership**

At a glance, the following gives a flavour of the CRC approach to partnership:

- DM is routinely supported by the Royal Government of Cambodia through its coordination body - NCDM. The latter has played a great role in facilitating the communication, collaboration and cooperation among all DM stakeholders. The disaster-affected communities are critical components to help realize the DRP concept. The RCVs' network, the 'first to reach' local brigade in terms of

disaster preparedness and response will secure the effectiveness of the project through “learning-by-doing”.

- Both the HIV and the CBHD projects work closely with their respective provincial departments of health and rural development sharing resources and experiences, especially in regard to training. At national level, the CRC is represented at the sectoral coordination meetings which, especially in regard to water and sanitation, led to the introduction and use of several new technologies.
- The HIV/AIDS project has coordinated with NCHADS, which has included the signing of a memorandum of agreement (MoA) for the inclusion of the CRC into NCHADS and the National AIDS Authority for the sharing of new information and the development of a strategy for improving the lives of PLWHA.
- The Danish, British, Swiss, French and American Red Cross societies supported community-based health projects, and some have contributed to organizational development and branch development.
- CRC organized bi-monthly meetings with in-country partners, and annually with both in-country partners and overseas partners to review the progress made by the CRC and to discuss new issues.
- CRC developed a 'CAS for non-Red Cross' document and engaged partners outside of the Red Cross into the CAS process.
- CRC continues to take steps forward in facilitating a more programmatic approach. The Community-based Mine Action programme is a model supported by German Red Cross and Australian Red Cross.

## Implementation and coordination

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

The delegation has continued to support CRC in their efforts to strengthen coordination and cooperation through the CAS process. In 2006 and 2007, the delegation has provided guidance on partnership meetings, with both local and international partners, and has fully supported CRC in their efforts to align the work of partners. The agreement of the payment of a 6 per cent charge to CRC from their partners has been one indicator of success.

Support has also been provided through consultancies for the strategic review of the CRC Strategy 2003-2010, and the development of new strategies evolving from the review, in strong consultation with staff, volunteers and partners. Stronger efforts around the programmatic approach in thematic areas are also showing benefits in aligned efforts in programming. In early 2007, the country delegation, along with the regional delegation, supported a retreat for CRC and its Red Cross partners to discuss at length the 'Federation of the Future' and the 'new operating model', with a strong emphasis on the operational alliance approach, now being championed by CRC.

In early 2008, disaster management will be the first to take this approach forward in earnest. There will be a series of workshops and consultancies that will eventually lead to more aligned and coherent programming and partners united through an operational alliance.

Additionally the organizational development team are progressing with a consolidated OD plan to share with their staff and all partners to obtain broader support. It is hoped that a consolidated approach will eventually allow CRC to plan, monitor, evaluate and report in a more holistic manner.

### **Management of the delegation**

The delegation has integration agreements with three partner national societies (and support services with two), and is working with these partners in a building within the same compound as CRC. The delegation and the partners have found some efficiency in working closely together and will keep looking for more possibilities. Through this process, less duplication occurs between the partners and the Federation, and it is foreseen that more efficiency can be found in working together.

Sharing of information and learning has also improved considerably between partners and the Federation over the past two years. This has helped both work with CRC and facilitated the delivery of activities to beneficiaries. More can be done, and the use of technology and other fora will be explored to ensure sharing of knowledge is enhanced.

## Contributing to longer-term impact

CRC's initiatives are aligned to the International Federation's Global Agenda's four goals as well as linked to the Hyogo Framework for Action (HFA #5). They work towards 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 were translated into enhancing household and community resilience to hazards by working in partnerships with vulnerable populations (regardless of ethnicity, gender, age or disability) by supporting them to develop their capacity in awareness of disaster risk, to prevent, mitigate and/or respond to possible disasters. The programmes also promote community, civil society and Red Cross capacity to address the most urgent situations of vulnerability during times of disaster.

In terms of quality and accountability, gender plays an important role in all of the health projects. In both the HIV/AIDS and the CBHD project, more than 50 per cent of the volunteers are women. In the HIV/AIDS project, gender topics are discussed at community meetings and women report that they feel more empowered and more comfortable discussing sensitive issues such as HIV/AIDS with their husbands. Also worth noting is that, in the not-so-distant past, there was only one woman working in the HIV/AIDS team at national headquarters, whereas women now represent 50 per cent of the workforce.

Both of these projects respect the national strategies and policies, and consultation is sought from the relevant government departments. The WHO guidelines and the national guidelines for water quality assurance are followed where relevant, while Sphere standards are always considered and respected, as a minimum guide, when planning for the provision of water and sanitation supply.

Below is an example of how the water and sanitation project is making real impact on families' lives and the community in which they live:

*"I have 6 children, 2 sons and 4 daughters. Now each day all my children have time to go to school, and also I can save some money from buying water to buy a bicycle for my kids to go to school. And for the drinking water, ... my family [previously] drank direct from the pond, but now, I have a purifier unit that is easy to use, even last month my clay [filter] broke, but I can find and buy one unit from the private market to replace the broken one. "*

*- Madame **Han Khen**, 39 years old*

*Veal Tboung village, Sreambel commune, Sreambel district*



Madame Han Khen and two of her children



The local shop selling water filter parts.

CRC has progressed remarkably in 2006-2007 and its commitment to change and improve has seen it contribute to the Federation's Global Agenda as well as the millennium development goals in Cambodia. Indeed CRC is setting several marks for national societies within Southeast Asia: its innovative approach from enlightened policies regarding HIV/AIDS in the workplace; its ability to help vulnerable communities prepare for hazards such as flooding, drought, avian flu; its commitment to community 'ownership' of water and sanitation projects to ensure impact and sustainability are some of the many areas that the CRC demonstrates its role as a leading humanitarian organization within Cambodia.

## Looking ahead

In achieving the objective of the DRP project, the CRC is now developing its DM system and foundation to effectively implement its DP and DR programme at all levels, as well as to promote and strengthen the capacity of the disaster-affected communities to effectively prepare for and respond to natural and man-made disasters.

In terms of health, CRC will develop a new health strategy and move from a project to programme approach for community-based health. Continued support to both financial and technical aspects of the CBHD project is needed as is ongoing coordination and collaboration with all partner national societies involved in community-based health.

The three-year development plan 2008-2010 needs to be finalized. The national society will do this by streamlining programmes for enhanced service delivery, building capacity of staff and volunteers, supporting resource development initiatives, and the continued alignment of the national society to Movement strategies, particularly Strategy 2010 and the Federation of the Future's Global Agenda. Priorities in the four core areas reflects this approach through developing common approaches and scaling up activities in health and care, complementing the focus on community-based disaster preparedness by improving disaster response preparedness at all levels, strengthening management structures and systems through the organizational development process and increasing the integration of the promotion of humanitarian values programme.

How we work	
<p>All International Federation assistance seeks to adhere to the <a href="#">Code of Conduct</a> and is committed to the <a href="#">Humanitarian Charter and Minimum Standards in Disaster Response (Sphere)</a> in delivering quality and accountable assistance to the most vulnerable. For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at <a href="http://www.ifrc.org">http://www.ifrc.org</a></p>	
<p>The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".</p>	<p><b>Global Agenda Goals:</b></p> <ul style="list-style-type: none"> <li>• Reduce the numbers of deaths, injuries and impact from disasters.</li> <li>• Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.</li> <li>• Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.</li> <li>• Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.</li> </ul>
Contact information	
<ul style="list-style-type: none"> <li>• In Phnom Penh: Cambodian Red Cross: Men Neary Sopheak, deputy secretary-general; email: <a href="mailto:sopheak.MenNeary@crc.org.kh">sopheak.MenNeary@crc.org.kh</a>; phone +855 23 21 28 76; mobile: +855 12 81 08 54, fax +855 23 21 28 75</li> <li>• In Phnom Penh: Federation country delegation: Scott Tind Simmons, head of country delegation, email: <a href="mailto:scott.tindsimmons@ifrc.org">scott.tindsimmons@ifrc.org</a>; phone: +855 12 901 400 (mobile); fax +855 23 210 163</li> <li>• In Bangkok: Federation Southeast Asia regional office: Alan Bradbury, acting head of regional office; email: <a href="mailto:alan.bradbury@ifrc.org">alan.bradbury@ifrc.org</a>; phone: +66.2.661.8201; Fax: +66.2.661.9322</li> <li>• In Kuala Lumpur: Federation Asia-Pacific zone office: Jagan Chapagain, deputy head of zone; email: <a href="mailto:jagan.chapagain@ifrc.org">jagan.chapagain@ifrc.org</a>; phone: + 603 9207 5700; fax: + 603 2161 0670</li> </ul>	