POVERTY ASSESSMENT

FOR URBAN POOR COMMUNITIES IN PHNOM PENH

Report issued in February 2022

Sahmakum Teang Tnaut Organization · a Cambodian Urban NGO

Sahmakum Teang Tnaut

Sahmakum Teang Tnaut (STT) was founded in 2005 and officially registered in 2006 as a local NGO supporting urban poor communities. STT started as a small NGO that focused on technical upgrades in poor communities and since grown to produce community maps, research and advocacy in order to achieve its goal of helping urban poor and vulnerable communities realize their rights to land and housing.

Research was funded by:

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The location of urban poor community

Currently living conditions of poor communities in Boeung Trabek, village 4

List of Abbreviations

EBA	Everything but Arms
EU	European Union
FGD	Focus Group Discussions
GDP	Gross Domestic Product
GSP	The Generalized System of Preferences
HHS	Household Survey
MoT	Ministry of Tourism
NGO	Non-Governmental Organization
SUPF	Squatter Urban Poor Federation
STT	Sahmakum Teang Tnaut
TOR	Terms of Reference
UNICEF	United Nations Children's Fund
WB	World Bank
WFP	World Food Programme

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Executive Summary

This report is an assessment of poverty in urban poor communities in Phnom Penh. This study was supported by Sahmakum Teang Tnaut (STT) and 42 communities in and around Phnom Penh. The communities were selected for this study because they were previously categorized as urban poor in previous STT research. Interviews were conducted with 958 households. This number of respondents represent about 14% of the total households in the 42 communities selected for research.

There have been several studies over the past twenty years to assess the poverty and living conditions of people in urban poor settlements throughout Phnom Penh. These studies indicate that numbers of urban poor communities in Phnom Penh have fluctuated since 1997. In 1997, there were 379 urban poor communities, 410 by 2009, 340 in 2013, and finally, 277 by 2018. Some research indicates that urban poor communities may be on the rise again – possibly due to rural-to-urban migration caused by climate change, microfinance indebtedness, and COVID-19[1].

A lack of basic services, including poor road conditions, lack of safe water and not being connected to state electricity, are the key issues facing urban poor communities in Phnom Penh. A report by the Phnom Penh Municipality in 2012 found that 60% of families were living below the poverty line. In 2019, a research study titled "Urban Vulnerability in Phnom Penh" conducted by World Food Program revealed major improvements in the people's access to electricity and clean water. However, other issues, such as debt continued to be a major issue for people in all communities engaged in the survey, across Phnom Penh.

Perhaps the unifying inequity that urban poor communities face is the threat of eviction. Almost all studies have reported this as a significant barrier for communities to improve their livelihoods and gain security in their way of life.

This study, however, has confirmed some progress With regards to key challenges faced by urban poor communities in Phnom Penh. Today, almost all urban poor communities in Phnom Penh have access to government provided cleanwater and state electricity (87% and 98% respectively).

A significant improvement has also been seen through people's capacity to access health care. For example, about 82% of children aged under 12 months received vaccinations, while 82% of pregnant women were given regular health checks. At the same time, up to 85% of the respondents received Covid-19 vaccines. Among them, 84% have been double-vaccinated, 11% received three doses, and 6% received one dose of the vaccine. A major improvement was also found in children's education, where almost all children at school ages have gone to school (90% for children aged between 6-11 yrs old, and 93% for children aged between 12-14 yrs old).

Major progress has also been found in the areas of family housing. A significant number of people involved in this study now own their homes (75%). This finding may be in part due to selection bias, which is discussed further below. Many homes were observed as safe and well built. Nearly half of all families live in wooden houses with tin roofs, and 20% live in brick houses.

Amid these major improvements, however, significant issues persist. For example, many communities continue to be at risk of eviction or live in areas where the law suggests they are unlikely to be provided with land titles. These areas include riverbanks, railroads and on the shores of lakes. Indeed, forced eviction is a fear reported by many communities. Poverty has not been uniformly improved either. Many families continue to struggle with low incomes and indebtedness, while the price of electricity and fuel has increased and remains high. Communities also complained about not being provided with ID Poor and having to take out loans to pay for medical bills.

Lastly, a further exacerbating issue is the lack of collective community action for effective solutions and advocacy. The lack of strong community organizing and community mobilization make it impossible for effective collective action to take place. Many community leaders and

[1] STT database and records.

members said that they did not have enough training or support to raise their issues with Government in an effective manner.

Based on the findings of the research, some key recommendations are proposed:

A. The role of NGOs:

1. Collective Advocacy: Based on the geographical conditions of many communities listed in this study, many communities might not be able to live where they are indefinitely. These communities include those that are located along the streets, next to riverbanks, and along the railway road. It is more likely that, sooner or later, these communities will be forced to relocate, and give way for city development to take place. In this respect, it is recommended for NGOs to assist these communities as a priority and to help them access information regarding all necessary policies, legal requirements, and procedures. This will help communities to prepare and to make sure that any evictions or relocations are implemented with transparency.
2. Family economy: As this study shows, family debt is a critical issue for the key respondents. Debts are mostly accrued for supporting income through small businesses. It is recommended that the economic issue should be referred to NGOs with expertise on social enterprises and entrepreneurial development, rather than to be dealt with directly from NGOs with an advocacy role.

B. Connection with Media:

The role of independent media is crucial for voicing community concerns and issues beyond their locality. In this case, key community leaders must be aware of all independent media and media outlets, then communicate with them for interviews when needed.

C. The Government/Municipality:

Forced evictions often involve some financial compensation or a new resettlement site. Observations show that, processed evictions are often carried out with no consultation with people in the community. Instead, they are usually done via intimidation. Rather than negotiations, community consultations, transparency, and good governance, community members often face the threat of receiving nothing. Ongoing consultation between the community and relevant government institutions involved in the compensation and family resettlement are recommended. This is to make sure that the livelihoods of the families affected are not so badly affected as to push them further backwards into debt and poverty.

I. Introduction

Over the past 20 years, Cambodia has had significant economic success. With a steady growth of 7.7% annually from 1998 to 2019, Cambodia became a "Low Middle Income Country" in 2015 and was forecasted to reach "Upper Middle-Income Country" by 2030[2]. Agriculture, garment exports, services and tourism are key industries contributing to this economic progress. Agriculture represents 22.84 % of GDP, followed by 34.67% in combined export industry; with the rest (36.21%) coming from the service sectors.[3]

Amid this economic progress and based on an update report provided by the Ministry of Planning (2021), the country has successfully reduced the poverty rate from almost 50% in the mid-1990s to 17.8% by 2019.[4] However, a recent socio-economic survey from 2019-2020, found that the level of people who live under the poverty line has once again increased to 17.8% as result of the COVID-19 outbreak.[5]

COVID-19 badly affected Cambodia's economy. In 2020, the GDP dropped to 2.2%.[6] Tourism has been severely affected. Prior to the outbreak, around 15,990 tourism businesses were registered with Ministry of Tourism (MoT).[7] In May 2020, over 50% of these businesses were closed.[8]

Garment exports were also badly affected, both from COVID-19 and for political reasons. In August 2020, following Government action to dissolve the main opposition party, the European Union (EU) decided to suspend up to 20% of garment exports to all EU Countries. The export products that have been affected by this preferential cut or suspension include garments, footwear, travel goods, and sugar, which could reduce Cambodia's annual exports to the EU by around one-fifth (1 billion Euros).[9] The garment industry was also impacted when many factories were closed down due to COVID-19 or the lack of orders from importing countries.

Agriculture remains somewhat stable. There were 4,221,153 tons of agricultural products exported to foreign markets during the first ten months of 2021, despite the global COVID-19 crisis. These products included cassava, cashew nuts, corn, fresh banana, pomelos, mangos, pepper, and chili.[10] According to a report from the Ministry of Agriculture, Forestry, and Fisheries, this figure represents an increase by 47.72 % compared to the same period in 2020.[11]

However, although the agriculture sector has not been as severely affected as other sectors, small farmers continue to suffer from the lack of access of their products to the market. A lack of access to marketing information and inconsistent purchasing has also been hampering small farmers.[12]

[2] The World Bank: Country Review, Updated on 20 October 2021, https://www.worldbank.org/en/country/cambodia/overview#1
[3] Statista: Cambodia: Share of economic sectors in the gross domestic product (GDP) from 2010 to 2020; Published by Aaron O'Neill , Jul 22, 2021. https://www.statista.com/statistics/438728/share-of-economic-sectors-in-the-gdp-in-cambodia/
[4] Khmer Times: Cambodia's poverty line updated: 17.8 percent Cambodians under the poverty line, November 2021.
[5] Khmer Times: Cambodia's poverty line updated: 17.8 percent Cambodians under the poverty line, November 19, 2021. https://www.khmertimeskh.com/50973518/cambodias-poverty-line-updated-178-percent-cambodians-under-the-poverty-line/
[6] The World Bank: Country Review, Updated on 20 October 2021, https://www.worldbank.org/en/country/cambodia/overview#1
[7] The Asia Foundation: Revisit the Pandemic, in Cambodia, Rapid-Survey-on-the-Impact-of-Covid-19-on-MSMEs-in-the-Tourism-Sector-and-Households-in-Cambodia; Cited from MOT (Ministry of Tourism) statistic 2020, https://asiafoundation.org/wp-
[8] Ibid.
[9] The Diplomat: Will Cambodia's Shift in Focus to Small-Scale Farming Work? By Len Ang, July 29, 2020. https://thediplomat.com/2020/07/will-cambodias-shift-in-focus-to-small-scale-farming-work/
[10] Khmer Times: Cambodia's agricultural exports up over 47 percent in first 10 months; November 2, 2021; https://www.khmertimeskh.com/50963305/cambodias-agricultural-exports-up-over-47-percent-in-first-10-months/
[11] Ibid…
[12] Open Development Cambodia (ODC): Cambodia's Agriculture sector amid of Covid.19, 27th April 2021 https://opendevelopmentcambodia.net/cambodias-agriculture-sector-amid-covid-19/

II. Urbanization: The Contextual Situation and Trends

Urban development is a pull factor for migration from rural areas to the city. Poverty in the rural areas acts as a push factor, driving people to the city to find work and a better life. The urban population in Cambodia has increased steadily by the year. In 1995, over 1, 844,685 people were living in urban areas. Ten years later, in 2005, that number increased to 2,545,033 people. By 2020, with consistent urban population increases of over 3.2 % per year, more than 4, 051,341, or roughly a quarter of the population, now live in urban areas.

[13] The Macrotrends: Cambodia Population in Cambodia 1960 to 2020; https://www.macrotrends.net/countries/KHM/cambodia/urban-population

III. Urban Poor Communities in Phnom Penh: Trends and Future Challenges

Urban poor communities have been researched for more than 20 years in Phnom Penh. One of the early studies was completed by the Squatter Urban Poor Federation (SUPF) "The State of Poor Settlements in Phnom Penh, Cambodia". In 2009, a study by STT titled "The 8 Khan Survey" expanded upon the SUPF report. In 2012 and 2013, two more assessments were completed by the Phnom Penh Municipality, "The Phnom Penh Urban Poor Assessment", and STT, "The Phnom Penh Survey". Finally, the most recent research available is the assessment conducted by the World Food Program in 2019 - "Urban Vulnerability in Phnom Penh".

The Phnom Penh Municipality's research in 2012 showed that 60% of families were living below the poverty line. It also demonstrated that settlements often lacked basic infrastructure and services, such as proper sewage systems (30%) and garbage collection (40%).[14] While the living conditions of urban poor families were stated as desperate and hard, the research also found that forced evictions were increasing. Other research has shown that the relocation of communities from inner khans to the areas outside the city was also carried out, but with very limited assistance from the Government. STT's report described the living conditions of those who moved to the resettlement sites as worsened than they were in the inner city.[15]

In 2009, STT research had demonstrated that close to 40% of settlements had been threatened with eviction and/or pressure to relocate.[16] Another issue that emerged from the studies was that, although the communities are fighting hard against eviction, they had little hope in remaining through legal avenues, but would still stay on and fight to protect their land.[17]

In 2018, the World Bank pointed out a stable GDP growth at 6.9%, but for urban poor communities in Phnom Penh there were still issues with sanitation, crowded living spaces and a lack of proper and safe housing/shelter. Other issues included toilets and waste problems due to the lack of access to rubbish collection services.[18]

In the most recent research study "Urban Vulnerability in Phnom Penh", conducted by the World Food program in 2019, major progress in people's access to electricity and clean water had been achieved. Nearly all key respondents had access to electricity and clean water. However, indebtedness was reported as a major issue for families living in both inner and outer Khans areas (39% -11%, respectively). This level of debt, however, is still lower than levels recorded in rural areas (55%).[19]

[14] UNICEF: Phnom Penh, Multiple Indicator Assessment of Urban Poor, 2012.

[15] Sahmakum Teang Tnaut; THE PHNOM PENH SURVEY; A Study on Urban Poor Settlements in Phnom Penh, 2014.

[16] Ibid.

[17] Based on STT report, cited by Cambodianess/Thmey Thmey: Community Under Siege: Fighting Eviction in Phnom Penh, July 8 2020; https://cambodianess.com/article/community-under-siege-fighting-eviction-in-phnom-penh

[18] Khmer Times: Phnom Penh's Urban Poor, by Hiezle Bual, September 21 2018.

[19] World Food Program: Urban Vulnerability in Phnom Penh, May 2019.

IV. Purposes of The Study

This study aims to achieve the following objectives:

1. To provide an overview of the current situation of the urban poor communities in Phnom Penh based on the three dimensions of poverty: health, education, and standard of living.
2. To review and assess the social protection measures available to the urban poor.
3. To review and assess bilateral and multilateral funding projects targeting the urban poor.
4. To identify any risks relevant to policy level with all actors in terms of urban poverty.
5. To obtain an understanding of reasons for migration to Phnom Penh from rural areas.
6. To make clear recommendations to stakeholders on how projects can be targeted for the urban poor communities based on the findings of this research.
7. To identify any evidence of improvement or deterioration in living conditions in urban poor communities

V. Methodology of Research

The methodology was designed to correspond with the Global Multidimensional Poverty Index. Based on the context of target areas, the consultant team decided to select three methods for use – Literature Review, Household Survey and Semi-structured Interviews.

A. Literature Review:

The literature review was used as an integral part of the whole research process. In the context of this study, the literature review serves several functions as follows:

- Helps to clarify what is to be studied.
- Enables the development of sound and suitable methodology and questionnaires.
- Ensures that all key findings are contextualized, realistic and highly acceptable by key stakeholders.

To have an in-depth understanding about the nature of this project, the study team has reviewed the following documents:

- Various reports related to urban poor communities.
- The Global Multidimensional Poverty Index.
- Statistical reports from various sources relevant to the project background.
- Relevant Cambodian Government reports and other relevant Government policy.

B. Household Survey (HHS):

958 households were surveyed for this research. This is between 10 to 15% of the total population in the areas selected for this study and the sample size was selected to build a strong representation amongst the studied population.

The structured questionnaires were developed mostly as closed-ended questions. These aimed to measure the following key family, community, socio-economic and political conditions:

- Family background.
- Current family socio-economic conditions and incomes.
- Family's loan and debts.
- Children's education.
- Living conditions.
- Health care.
- Migration.
- Sustainable livelihood supports.
- Social Security scheme.
- Access to information.

Questionnaires were first piloted and adjusted to ensure that they were functional before being used with the key respondents selected for this study.

C. Sampling Selection:

958 key respondents were selected for interviews. Sampling is the process of selecting a few (a sample) persons from a bigger group of the population to become the basis for estimating or predicting the prevalence of an unknown piece of information, situation, or outcome regarding the bigger group.[20] Sampling was used here to provide an insight into key issues faced by urban poor communities.

Based on the logistical, such as COVID-19 and flooding, the study team decided to employ a snowball approach to sample selection. This involved asking community members to point out other members that could be interested in completing a survey and using a Transact Walk for discussions with community leaders and local authorities.

D. Semi-structured interview:

Individual Interviews

Based on the scope of this research study, semi-structured interviews were carried out with key community leaders and some Focus Group Discussions were also arranged. However, due to the COVID-19 outbreak in Phnom Penh group meetings were prohibited, so instead individual interviews were carried out via phone call.

Approach of Data Analysis

All data collected through surveys was computerized through Excel Spreadsheet. An analysis was carried out through a triangular method where all key findings were confirmed by at least three sources.

[20] Ranjit Kumar, Research Methodology; A Step-by-Step Guide for Beginners

VI. Constraints and Limitations

While undertaking this field survey, the Research Team encountered a few issues that may impact the quality of information collected. Some researchers were not allowed to conduct interviews with community members. In this case, the Team decided to select new communities. Furthermore, as this assessment was conducted amid the COVID-19 outbreak in Phnom Penh, several interview sessions were cancelled. This also included cancellation of the FGDs.

It is arguable that the change of this study method, from FGD to individual interviews, could lead to a lack of full participation from other community members, and, indeed, their opinion and input might have been overlooked.

The flood was also listed as another constraint. The study team decided to skip some interviews because certain areas were not easily accessible. As a result, some of the most impacted community members may not be represented by these findings.

Finally, a key limitation is the disproportionate number of interviews in five communities (see Table 1. below). This disproportionate number may skew some of the findings towards trends in these five communities that do not exist, or are different, in other communities. An example of this may be land titles. Prek Takong 1, where more than 5% of all respondents are from, is an urban poor community where most families have land titles. This is unusual for an urban poor community. This may skew the data to suggest that most urban poor families in Phnom Penh have land titles.

VII. Target Areas Selected for This Study

The research was carried out in 42 urban poor communities across all districts in Phnom Penh (see Table 1).

Table 1: List of communities selected for this study

No.	Description	Number	Percentage	No.	Description	Number	Percentage
1	Chraing Chamreah	114	11.9	22	Boeung Trabek Phum 4	16	1.67
2	Steung Chrouv	97	10.13	23	Samaki 3.1	15	1.57
3	Steung Meanchey	56	5.85	24	Borey Santipheap	15	1.57
4	Prek Takong 1	55	5.74	25	Russey Sros	14	1.46
5	Sen Reak Reay	45	4.7	26	Samaki Rung Roeung	13	1.36
6	Stung Kambot	41	4.28	27	Ruom Mith	13	1.36
7	Phum 23	39	4.07	28	Boeung Chhouk A	11	1.15
8	Trapaing Raing	30	3.13	29	Rolous Cheung Ek	11	1.15
9	Chamroeun	28	2.92	30	Borey Mithpheap	11	1.15
10	Chamreun Akphiwat	25	2.61	31	Koh Norea	10	1.04
11	Smor San	24	2.51	32	Prek Takong 60 Metres	9	0.94
12	Sam Rong Thbong	23	2.4	33	Strey Klang Sang	9	0.94
13	Cheung Ek Group 3	23	2.4	34	Reak Chamreun	8	0.84
14	Tuol Pongro Senchey	22	2.3	35	Reaksmey Chroychangva	8	0.84
15	Tuol Svayprey Muoy	21	2.19	36	Cheung Ek Group 4	7	0.73
16	Phlov Roth Phleung	20	2.09	37	Boeung Chhouk	7	0.73
17	Deum Sral	20	2.09	38	Boeung Chhouk Meanchey…	6	0.63
18	Community 104	19	1.98	39	Aphiwat Thmey	6	0.63
19	Community 105	18	1.88	40	Borey Keila	6	0.63
20	92 Communtiy	18	1.88	41	Sre Ampil Thmey	4	0.42
21	Toul Sangke A	17	1.77	42	Prek Takong 3	4	0.42
Total						**958**	**100%**

VIII. Key Findings

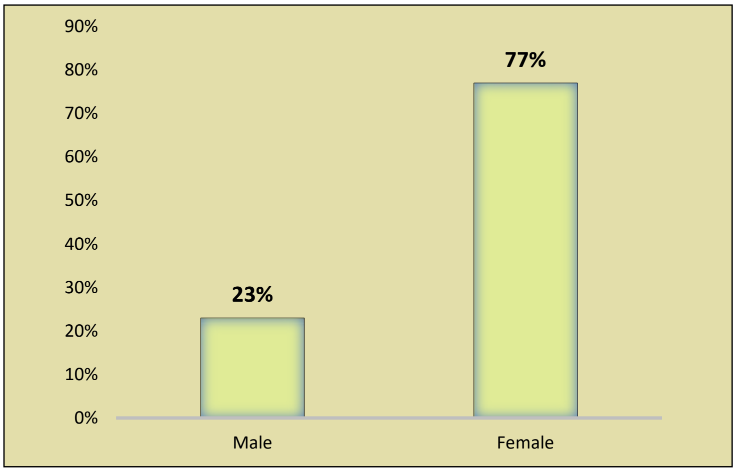
This section provides details of the key findings of this research. The findings are divided into the following sub-sections:

1. General background of key respondents.
2. Family socio-economic situation.
3. Housing conditions.
4. Family documents.
5. Heath care support and services.
6. Children's education.
7. Family vulnerability.
8. Personal Hygiene and Sanitation.
9. Family assets.
10. Access to electricity, water, and energy for cooking.

A. Background of key respondents

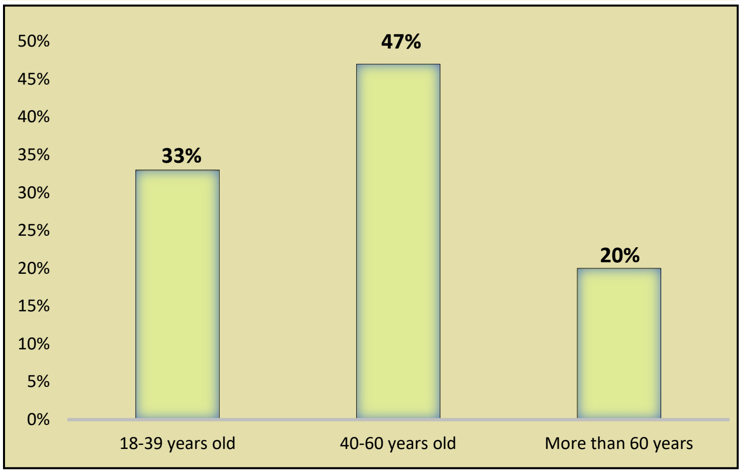
As indicated in Table 1 above, there were 958 respondents involved in this study. Amongst them, 77% were female and 23% were male (see Graphic 1). Mostly women were available for the interviews, largely because, according to community leaders, most men from selected communities were working outside of the community at the time of survey. This finding provides insight into the gender-dynamics of urban poor communities, where men are often working away from home during the day or had emigrated outside of the community for work. Community leaders also informed researchers that this finding may be in part because many workers (mostly men) were not allowed to travel freely between the workplace and home due to COVID-19 restrictions.

Graphic 1: Sex among key respondents



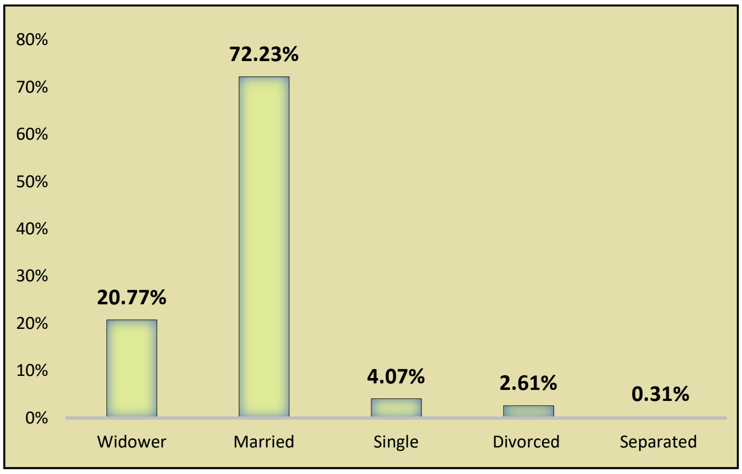
Around 33% of respondents were aged between 18 – 39 yrs and another 47% are aged between 40 to 60 yrs old. Nearly 20% of respondents were aged over 60 yrs (see Graphic 2 below). Most people involved in this study (80%) are of an age where they can still work (not in their retirement).

Graphic 2: Age of key respondents



Interestingly, as shown in the table below, over 20% of the respondents claimed to be widowers (see Graphic 3). This will have implications for incomes across urban poor families, as is discussed below. Further, it should also be noted that the average amount of family members in this study is five persons per family unit. This finding reflects the data found in the "National Census Survey 2019", published by the Ministry of Planning.

Graphic 3: Family status



Levels of education amongst key respondents reveal that more than 21% of respondents identify as having had no formal education. A further quarter (25%) responded that they had only completed lower primary education, while 22% had reached upper levels of primary education. 21% said they had completed secondary education, with only 7% having entered high school levels (see Table 2 below).

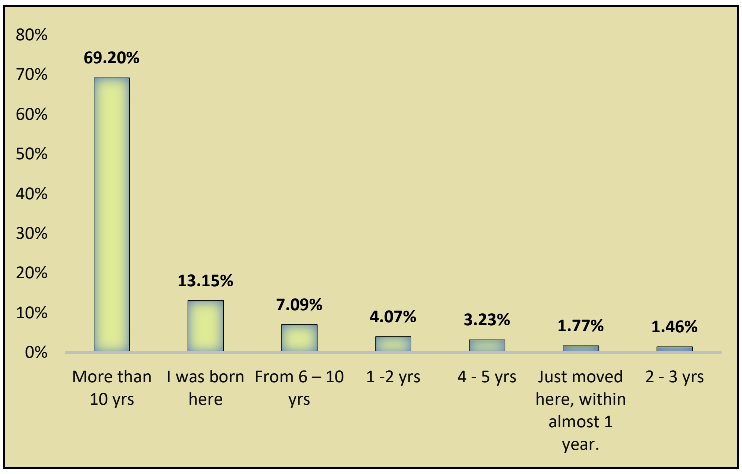
Education levels are important when considering the impacts of eviction or relocation or where work may be negatively impacted. Persons with lower levels of education have less options available to them in searching for new work.

Table 2: Level of education amongst key respondents

No.	Description	No	Percentage
1	No education	208	21.76
2	Primary 3	112	11.72
3	Primary 5	99	10.36
4	Primary 7	86	9.00
5	Primary 2	81	8.47
6	Primary 9	76	7.95
7	Primary 6	54	5.65
8	Primary 4	53	5.54
9	Primary 8	49	5.13
10	Primary 1	46	4.81
11	Primary 12	44	4.60
12	Primary 10	22	2.30
13	University graduated	10	1.05
14	Primary 11	7	0.73
15	Post graduate degrees	7	0.52
16	3rd Year university	3	0.31
17	1st year University	1	0.10
Total		**958**	**100%**

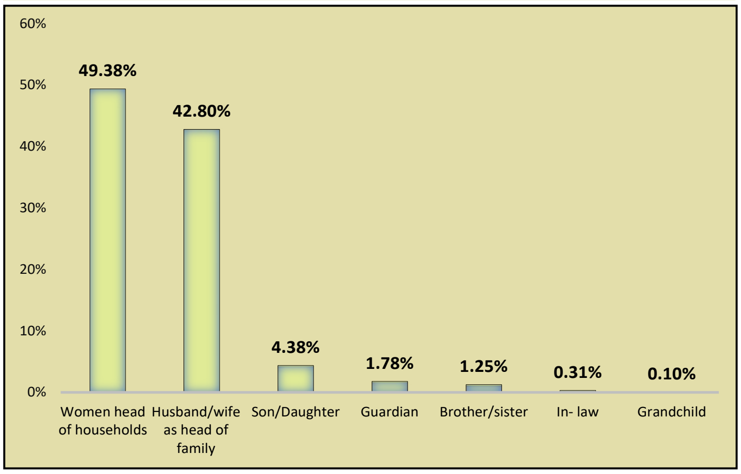
More than 69% of respondents reported living in their present community for more than 10 years. About 13% reported being born in their community, with 3% having lived in their community for less than 10 years. Seven per cent of respondents had moved to the community within the last 5 years (see Graphic 4). This figure appears to be agreeable to the observation of some community leaders engaged in the interviews. Leaders recalled that people in their community are generally less mobile, compared with 10 years prior. On the other hand, 7% of community residents had recently (within the last 4 years) emigrated or moved into the community, providing some evidence that people continue to move to urban poor areas.

Graphic 4: Duration of stay in the community



Almost all respondents engaged in this study (91%) are the women head of households (or one of the heads) (see Graphic 5 below). This figure is to be expected and reaffirms that women are often heads of families. In addition, respondents often claimed to be able to answer all questions with confidence because of their role within their family.

Graphic 5: Relationship in the family



B. Socio-economics in the family

During interviews, the respondents were requested to select three main sources of income that families have (see Table 3). The findings show that 21% of family income is obtained from 'shops,' such as food and drinks shops. 13% is earned through multiple sources of irregular income (remittances, repairing cars, domestic work...), and 13% is earned from factory work. Another 13% is earned from construction work, 11% from private company income, and 9.19% from moto-taxi and tuk-tuk income. Income from farming, government work, collecting recycling scraps, and handicrafts, were also listed, but were among the least reported.

It should be noted that some of the urban poor communities selected for this research, such as Prek Takong 1, have a higher-than-average percentage of farmers, due to their proximity to farmland in Phnom Penh's south. This may mean that farming incomes are disproportionately reflected in the research, but it is also worth noting that many communities that live on or near lakes and wetlands regularly farm those areas for fish and aquatic agriculture.

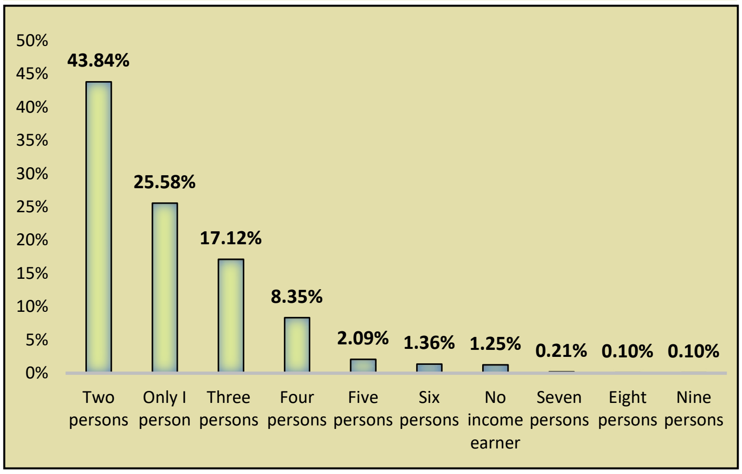
Table 3: Kind of incomes among key respondents

No.	Description	No	Percentage
1	Selling shop in the village	280	21.08
2	Multiple occupations*	185	13.93
3	Factory workers	181	13.63
4	Construction worker	180	13.55
5	Staff in company	148	11.14
6	Moto Doup	122	9.19
7	Farmer	80	6.2
8	Government staff	57	4.29
9	Collect the recycle scrabs	37	2.79
10	Handicraft	21	1.58
11	Entertainment	16	1.20
12	Work for NGOs	14	1.05
13	Laundry service	7	0.53
Total		**1328**	**100%**

*labor works, working in factory, relay on money sent by their children, old age cannot work, keep on land of other families, car repair, selling traditional cakes, fishing, work as motor taxi, online sells, selling eggs, clean the dishes, working as domestic labor and cleaner.

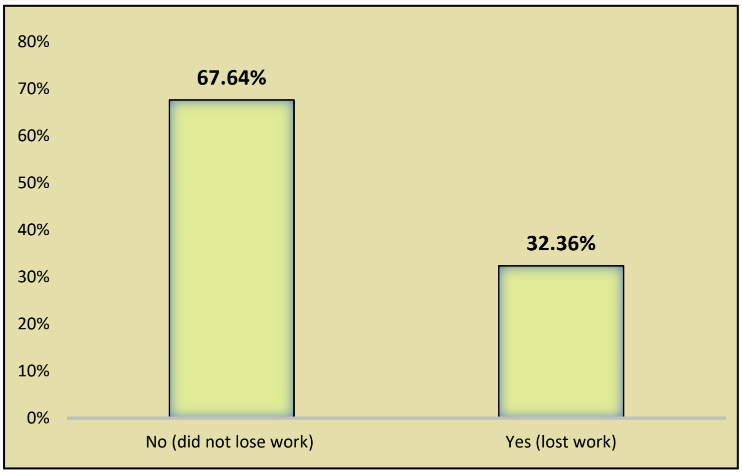
Graphic 6 provides insight into the total earners in a family unit before COVID-19. A major finding is that 44% of the total respondents had at least 2 income earners in their family. The table also shows that another 3% have between 5 to 10 income earners in the family. Based on interviews with community leaders, these are not typical family units, but rather households occupied by laborers, often young migrants, who live together to save on costs, such as rent.

Graphic 6: Earners in the family before COVID-19



As Graphic 7 shows, COVID-19 affected job retention. More than 32% of respondents had suffered job losses during COVID-19, while 68% claimed to have not been affected (see Graphic 7 below). This figure confirms that more than a third of urban poor households lost one significant source of income during the COVID-19 pandemic.

Graphic 7: Percentage of respondents that lost work because of COVID-19



Of the families that did lose work, more than half (56%) had one person in their family lose their job. Nearly a third (32%) of family/household units had two persons lose work, with 8% reporting that three individuals had lost their jobs.

Graphic 8: Number of family members who lost jobs because of COVID-19

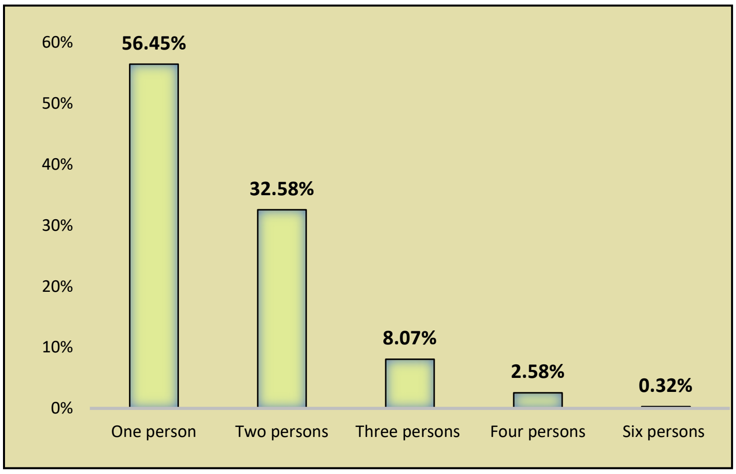


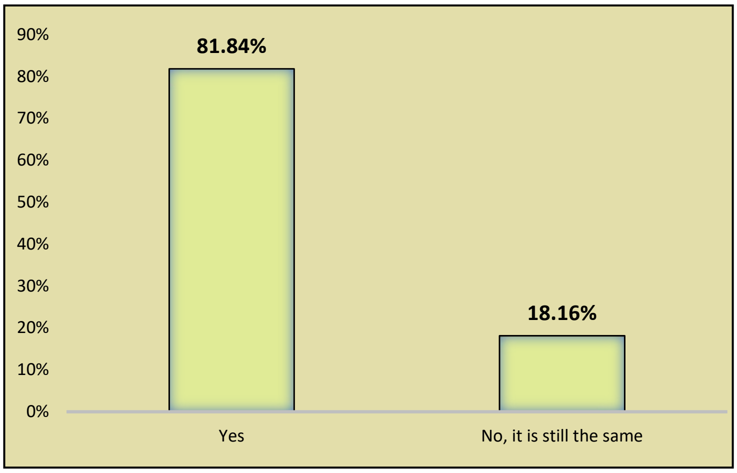
Table 4 outlines the economic costs of the job losses discussed in Table 11. 31% of respondents lost between 1,000,000 to 2,000, 000 riel (or between USD $250 to $500) per month because of COVID-19 job losses. Nearly 31% reported losing earnings of over 2,000,000 riel (over USD $500) per months.

Table 4: Economic cost of job loss during COVID-19

No.	Description (Riel)	No	%
1	Between 1,000,000 and 2,000,000	301	31.42
2	More than 2.000.000	293	30.54
3	Between 800,000 and 1,000,000	118	12.32
4	Between 700,000 and 800,000	74	7.72
5	Between 600,0000 and 700,000	55	5.74
6	Between 500,000 and 600,000	42	4.38
7	Between 400,000 and 500,000	24	2.51
8	Between 300,000 and 400,000	21	2.19
9	Between 200,000 and 300,000	13	1.36
10	Between 100,000 and 200,000	7	0.73
11	Less than 100,000	6	0.63
12	No income	4	0.42
Total		**958**	**100%**

Following the COVID-19 outbreak, more than three quarters of the studied respondents (or 81%) said that their family incomes were negatively affected (see Graphic 9).

Graphic 9: Family incomes affected by the COVID-19?



This survey clearly demonstrates that most urban poor households have suffered job loss and income reduction during the COVID-19 pandemic, but not for every family. As the Table 5 shows below, families that had earned over 2 million riel per month has dropped from nearly 31% before COVID-19 to up to 5% since. Similarly, for those who earned between 1 to 2 million riel per month, earnings dropped from up to 31% before the COVID-19 to up to 20%, during the COVID 19.

However, for those who earned between 800,000 to 1,000,000 riel per month before the COVID,earnings increased from up to 12% to over 18% respectively, during the COVID 19, whereas, for families/households that earned between 700,000 to 800,000 riel per month also increased from up to 8% to nearly 11%.

Interviews with some community leaders revealed that Government employees and factory workers were amongst those whose income might not be affected or less affected during the pandemic.

Table 5: Level of income per month over the period of COVID-19 outbreak

No.	Description (Riel)	No	%
1	From 1,000,000 to 2,000,000	166	21.17
2	From 800,000 to 1,000,000	142	18.11
3	From 700,000 to 800,000	86	10.97
4	No Income	82	10.46
5	From 500,000 to 600,000	57	7.27
6	From 600,0000 to 700,000	59	7.53
7	From 300,000 to 400,000	44	5.61
8	From 100,000 to 200,000	36	4.49
9	From 400,000 to 500,000	38	4.85
10	More than 2.000.000	42	5.36
11	From 200,000 to 300,000	27	3.44
12	Less than 100,000	5	0.64
Total		**784**	**100%**

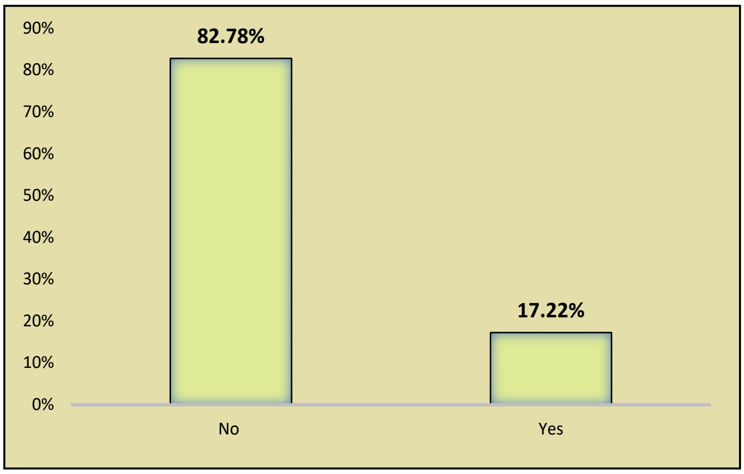
Among the households interviewed, 27% live on typical streets in or around Phnom Penh. More notably, 17% live along riverbanks, 14% live on railways, and 13% live along the city sewage and open drainage canals.

Table 6: Location of families in the community[21]

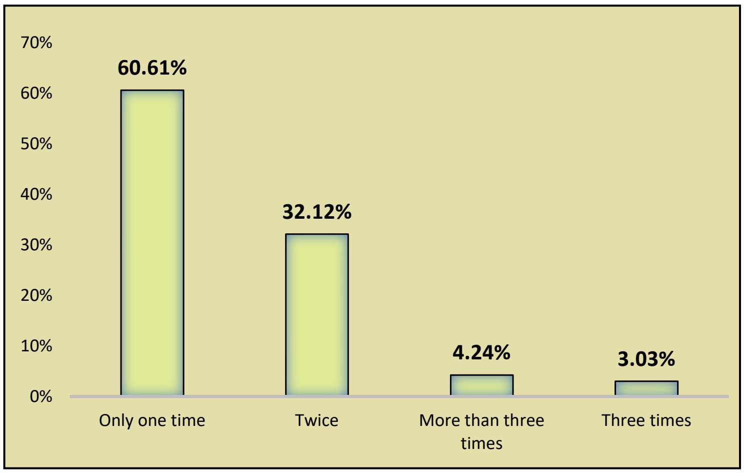
No.	Description (Riel)	No	%
1	On the side of the street	286	29.85
2	Along the river bank	164	17.12
3	Along the railway road	131	13.67
4	Along the city sewage canals	126	13.15
5	On state land	119	12.42
6	On the lake	97	10.13
7	On land that owned by other persons	31	3.24
8	land that is owned	3	0.31
9	In the stupa (inside the pagoda)	1	0.10
Total		**958**	**100%**

Nearly 83% of the respondents had not moved from their primary residence in the past 5 years (see Graphic 10). Of those who had recently moved residence (17%), 61% had moved only once and 32% moved at least twice. However, almost 4% of the respondents had moved more than three times (see Graphic 11). The reasons for moving are explored further below.

Graphic 10: Family mobility over the past 5 years



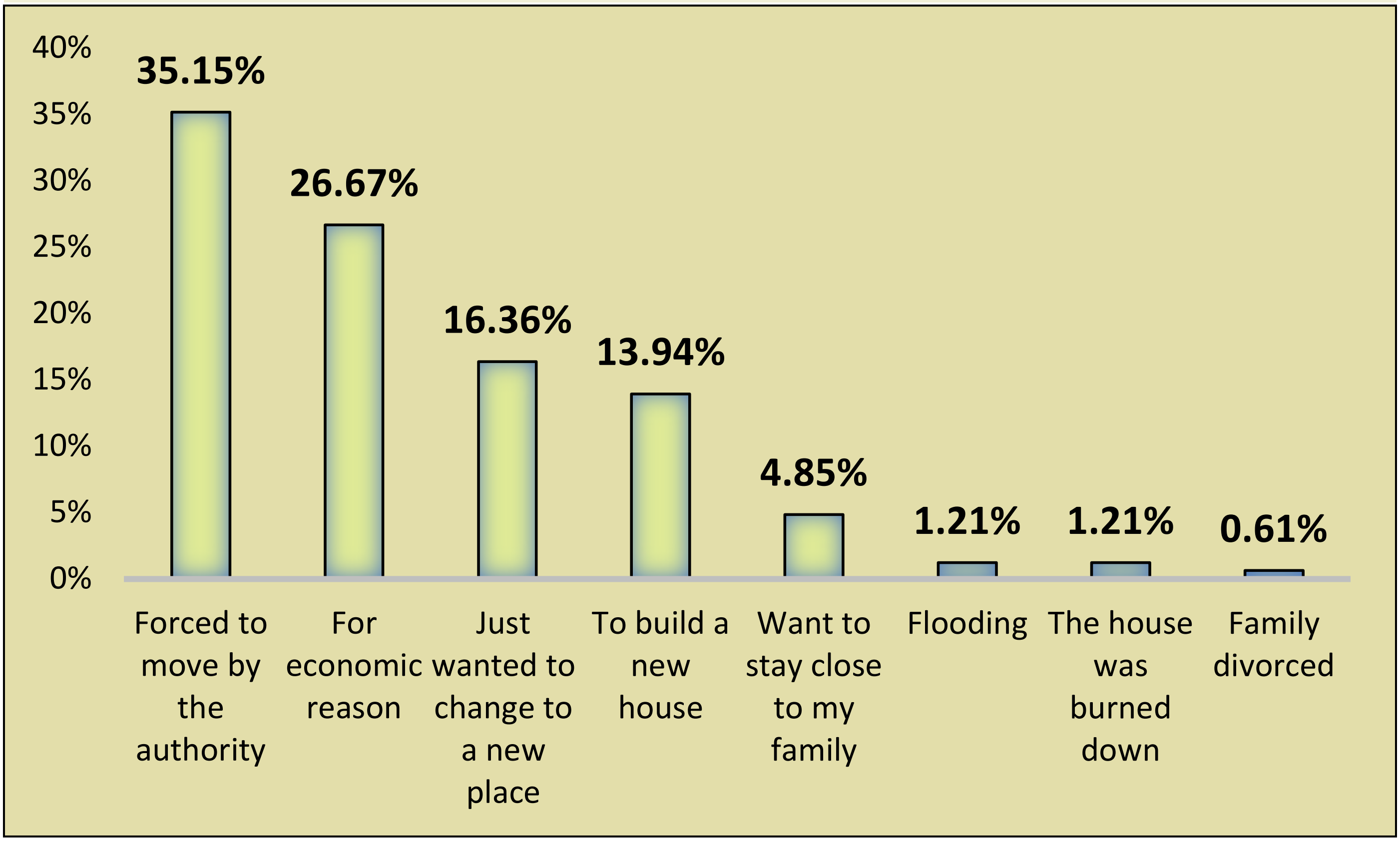
Graphic 11: How often they had moved their home over the past 5 years



[21] The list in the table refers particularly to the location of the community, not to the category of land (such as public or private own etc…).

Of the 165 respondents who had moved in the last five years, 35% stated that they were forced to leave by the authorities. This indicates that the practice of eviction and relocation may be contributing to changing numbers of people in urban poor communities. Another 27% decided to move due to economic reasons, such as for work, and 38% had moved because of “other” reasons, including to join their family members.

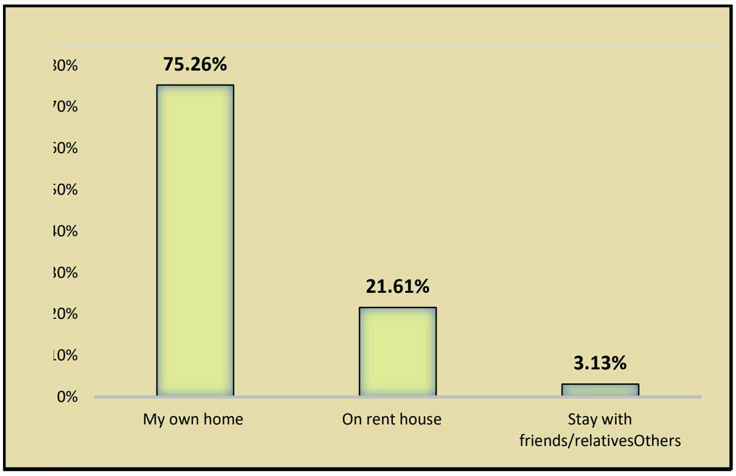
Graphic 12: Reasons of moving (only for the latest moves)



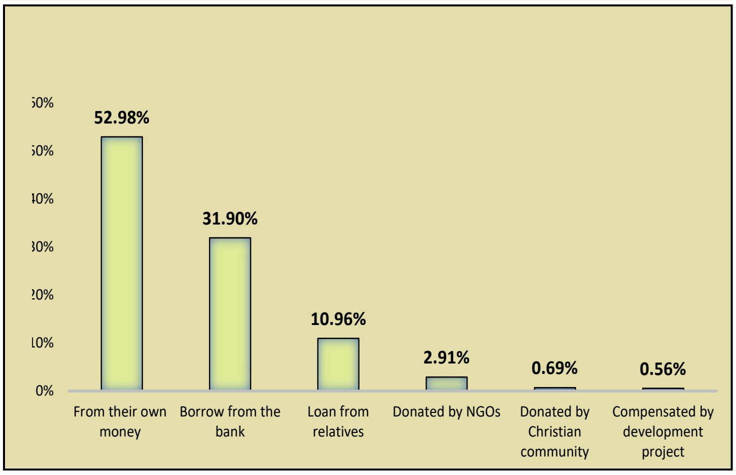
C. Housing/shelter

The report also investigated the housing situation of respondents. A majority (or 75%) of respondents claimed to have "owned" their home[22], while another 22% rent their houses or live with relatives or friends (See Graphic 13). A research question was also formulated to learn more about the sources of money to build houses. In this context, 53% said that they used their own money to source materials and build their homes. Another 32% reported borrowing money from the bank or other institution. Finally, 11% of respondents took out personal loans from their relatives (see Graphic 14 below).

Graphic 13: Relationship to the house

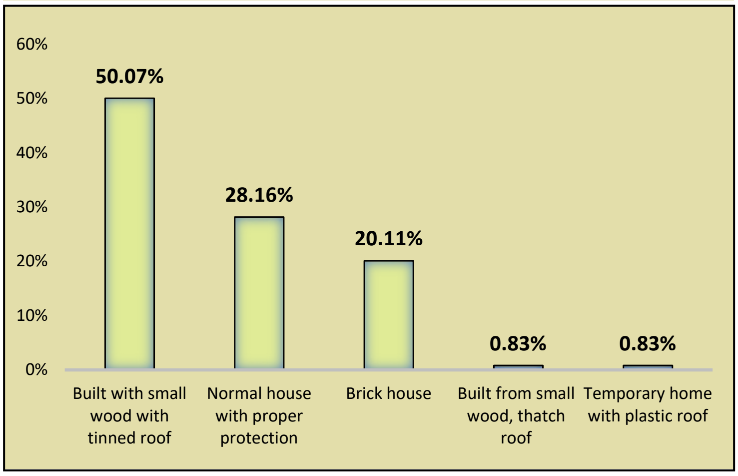


Graphic 14: Source of money to build the house



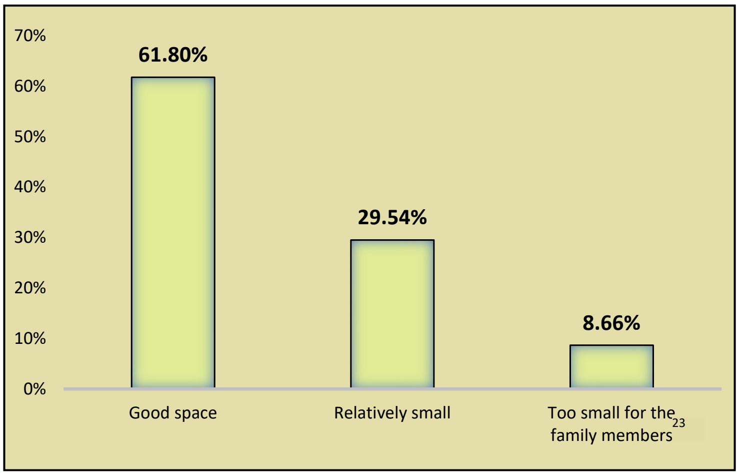
Home conditions of those involved in the study, both for families that owned their houses and those who were renting, were observed. Both observation and discussions with key respondents revealed that about half (or 50%) of respondents live in houses constructed of wood with tinned roofs.

Graphic 15: Housing Conditions



Around two thirds of respondents (62%) felt satisfied that they have enough space for all family members. Another 30% reported feeling cramped, with around 9% feeling that they did not have enough space.

Graphic 16: Size/Space in the house



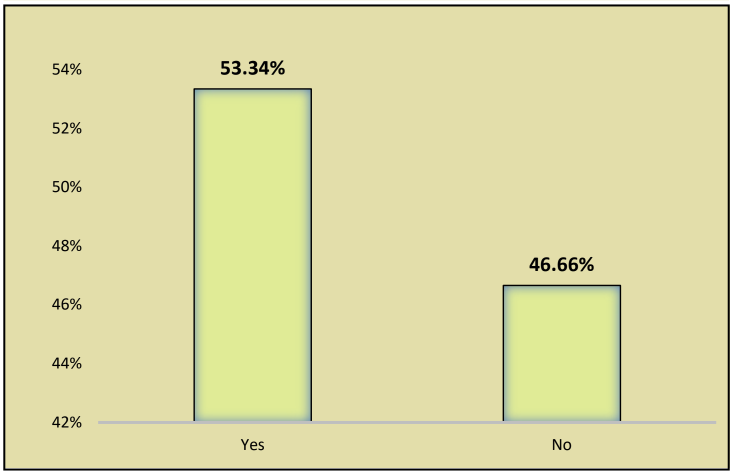
[22] "Own" here does not refer to legal ownership, such as having a land title. Many families reported being the owners of their home, but had no land titles, and their home was built on state-public property.

[23] Refers to overcrowded.

D. Family documents

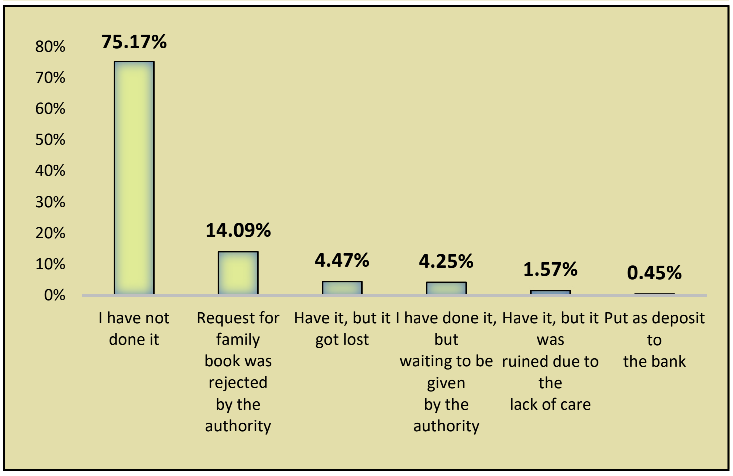
Family documents are essential for all Cambodian citizens to access Government services. Generally, family documents include a family book, residential records, and an identity card. Without these documents, a person cannot vote or be registered for ID poor, amongst other things. However, based on the result of this survey, only 53% of respondents have their family book at home. The other 47% said that they did not have their family book yet (see Graphic 17). Some doubts were raised over the high percentage of people who claimed not having family book.[24]

Graphic 17: Does your family have a family book?



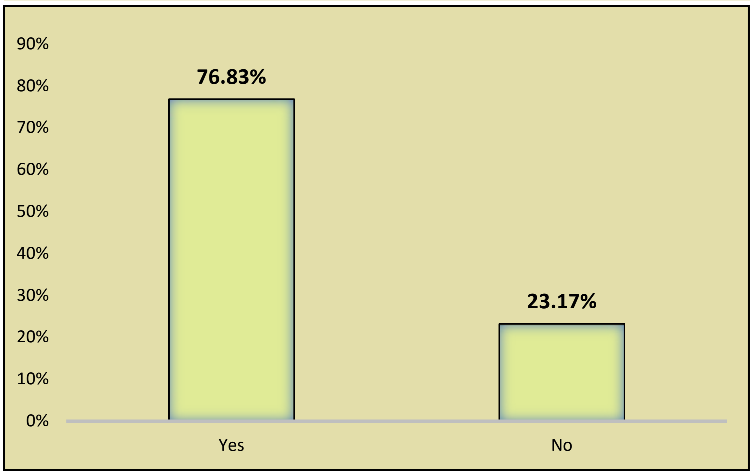
Further investigation of respondents who do not possess a family book reveals that most (75%) reported they have not yet approached officials to begin the process (see Graphic 18).

Graphic 18: Reasons for not having a family book



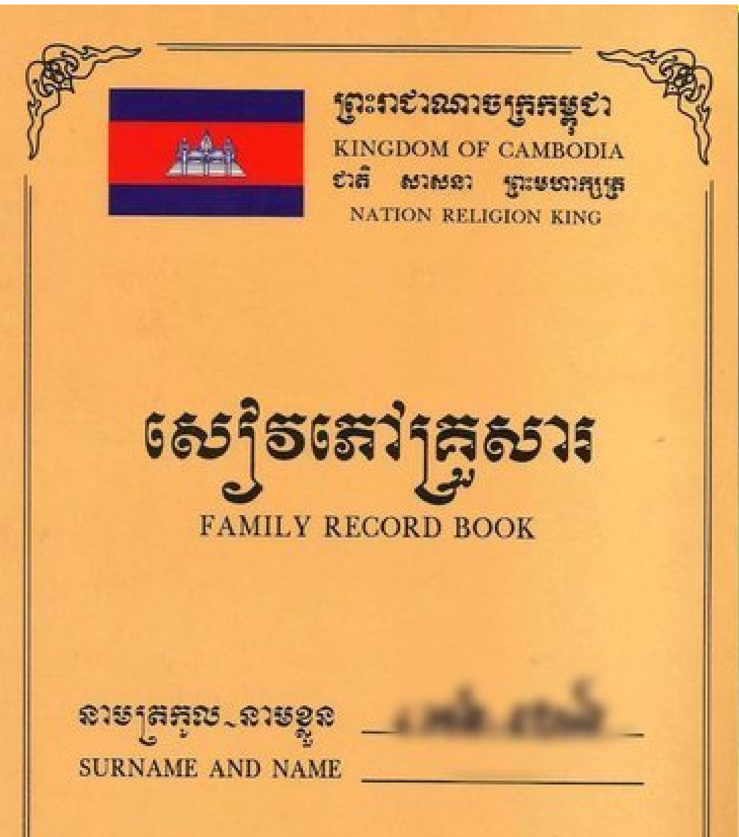
Like family books, about 23% of respondents do not have a residential record book for the family (see Table 25 below). This does not correspond with the above finding re family books. It should be noted, without a family book, a family cannot begin the process for a residential record book. Furthermore, without a family book, it is impossible for a family to obtain an ID poor status or fulfill administrative requirements required by the Municipality.[25] Meanwhile, a residential record book is not necessary for a loan deposit, so this document can stay with the family. If the above assumption about loans is correct, then it would be assumed that respondents would have a high proportion of residential record books in their possession. This suggests that the data for family book possession may be affected by mistruths because of the use of family books in taking out loans.

Graphic 19: Do you have a residential book?



[24] This level of % among the respondents without family book appears to be high and might be exaggerated. For example, if they do not want to tell the truth about their personal loans with the family book deposited with the loaner (MFI, loan shark, or bank).

[25] Normally, the residential record book is not needed for a loan deposit. This is not always the case.

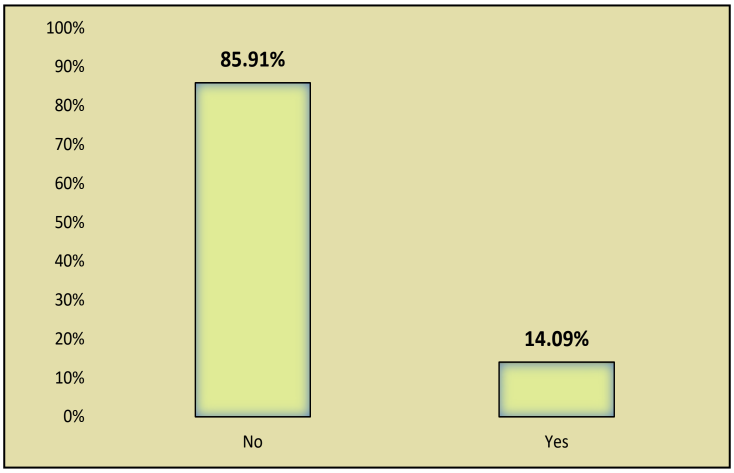

ព្រះរាជាណាចក្រកម្ពុជា
KINGDOM OF CAMBODIA
ជាតិ សាសនា ព្រះមហាក្សត្រ
NATION RELIGION KING
សៀវភៅគ្រួសារ
FAMILY RECORD BOOK
SURNAME AND NAME
No


ព្រះរាជាណាចក្រកម្ពុជា
ROYAUME DU CAMBODGE
ជាតិ សាសនា ព្រះមហាក្សត្រ
NATION RELIGION ROI
សៀវភៅស្នាក់នៅ
CARNET DE RESIDENCE
NOM ET PRENOM
CHEZ . N°
VOIE
GROUPE
VILLAGE
COMMUNE QUARTIER
VILLE . DISTRICT
CAPITALE . PROVINCE
LE
N°
REGISTRE. N°
PAGE

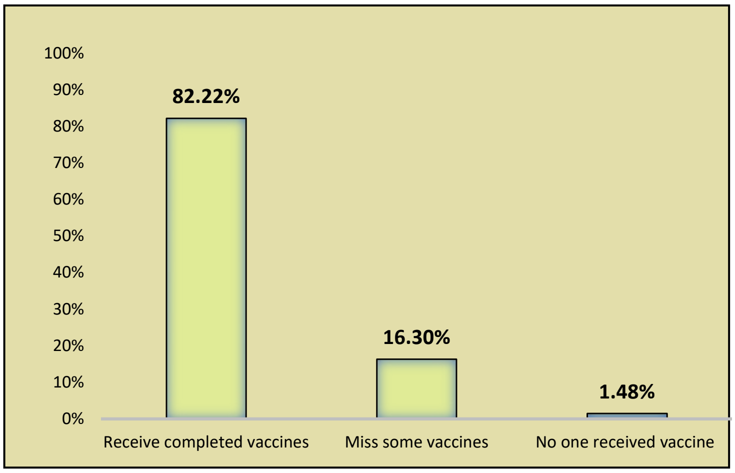
E. Access to Health Care Services

Access to health care support has also been addressed by this survey. About 14% of respondents have children aged under 12 months old in the family (see Graphic 20). About 82% confirmed that their children have completed vaccinations, while another 16% missed some doses and 1.5% did not get vaccines at all (see Graphic 21). As was confirmed by the community leaders, children who are either not receiving completed doses or not being vaccinated could come from families who are not staying permanently in the village or are among those who are choosing not to get vaccinated.[26]

Graphic 20: Family with children under 12 months old in the family

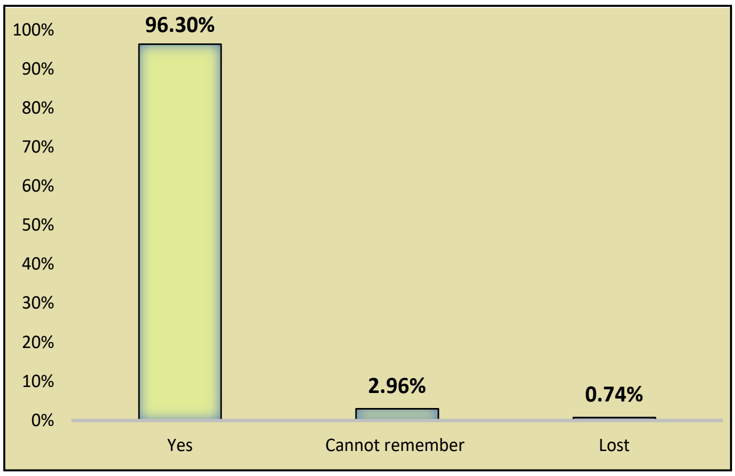


Graphic 21: Are these children vaccinated?



Almost all families (96%) confirmed that they keep their yellow vaccination cards at home (See Graphic 22).

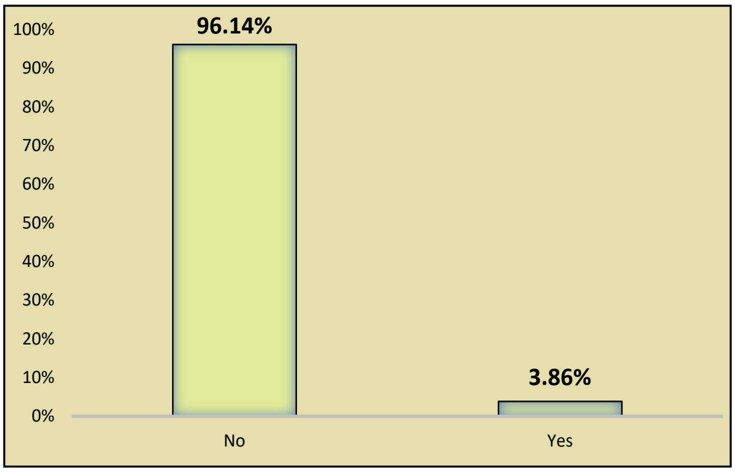
Graphic 22: Do you have your vaccination cards?



Only 4% of the key respondents had a pregnant women in the family at the time of survey (see Graphic 23). Arguably, this figure could be seen as low. Perhaps, it is a result of improved child spacing practices. Interviews with community leaders confirm the fact that most women are familiar with child spacing methods through health education provided by local health centers or NGOs.

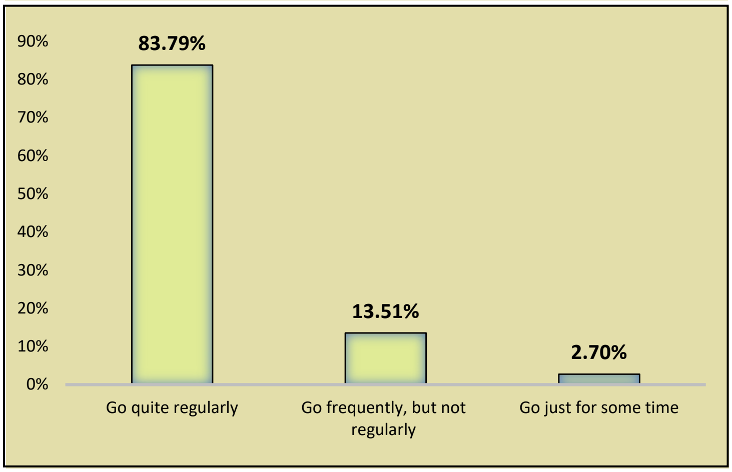
When asked if pregnant women had accessed health care support, about 82% explained that they visit health care center regularly, while 13% go frequently.

Graphic 23: Are there any pregnant women in the family?



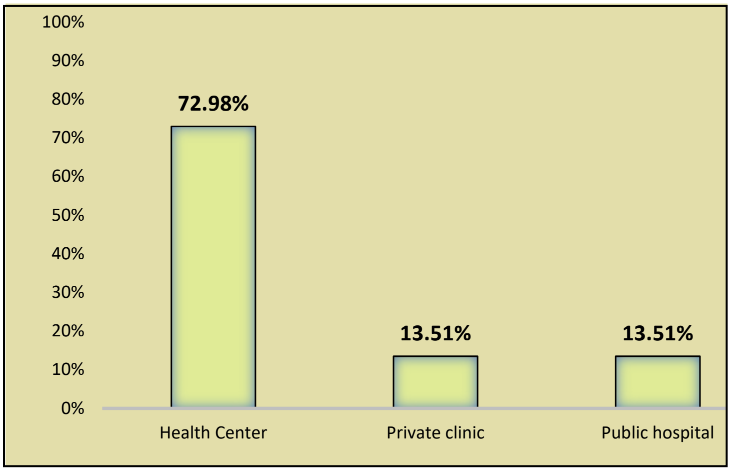
[26] In table...Q.1.8 revealed that, about 22% of the key respondents have no schooling and other evidence (see further healthcare information in tables below) suggests that links between urban poor families and Government health services are sometimes lacking.

Graphic 24: The frequency of visits by pregnant women to a health center



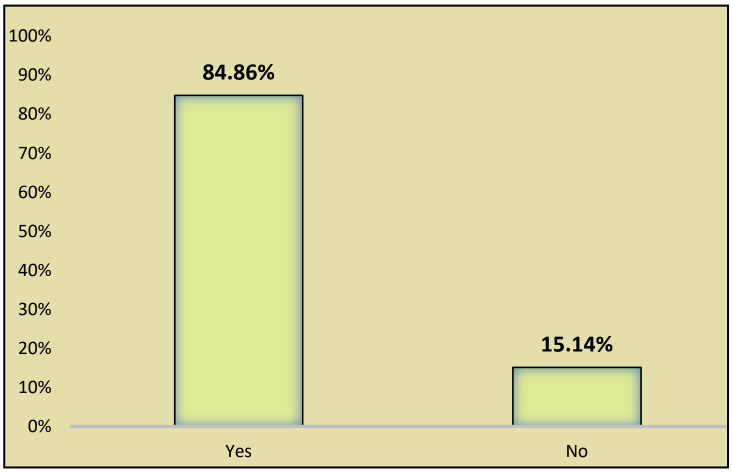
Government health centers are trusted by the community for maternal childcare support. Up to 73% of the key respondents suggested that women have accessed local health center more than private clinics (13%).[27] This may also be explainable due to the difference in cost and may reflect trust in the Government health centers.

Graphic 25: Where pregnant women went for health checks

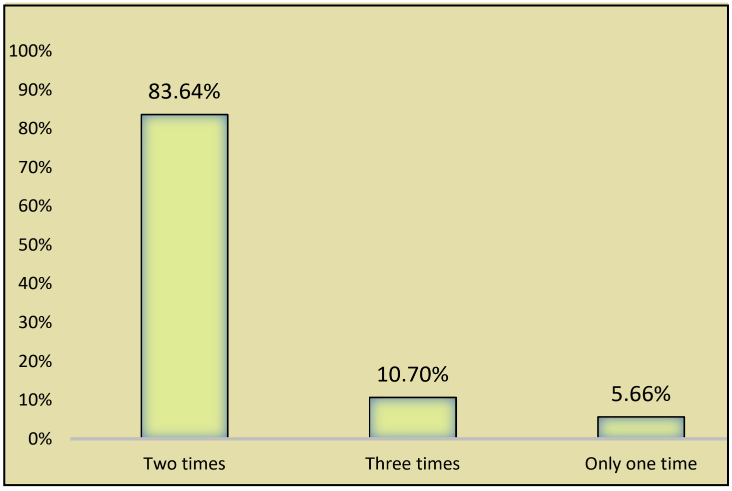


Because of the COVID-19 outbreak, the survey also checked the level of vaccination among all respondents. Up to 85% of respondents had already received their vaccine (see Table 26). Of these, 84% had received two jabs, and 11% had received three jabs. Only 6% had received only one jab (see Graphic 27).[28] This figure seems to align with Government efforts to push for vaccinations in Phnom Penh. It is unclear whether urban poor community members have higher or lower vaccination rates when compared to other groups.

Graphic 26: Have you received COVID-19 vaccine?



Graphic 27: How many jabs of the COVID-19 vaccine have you received so far?

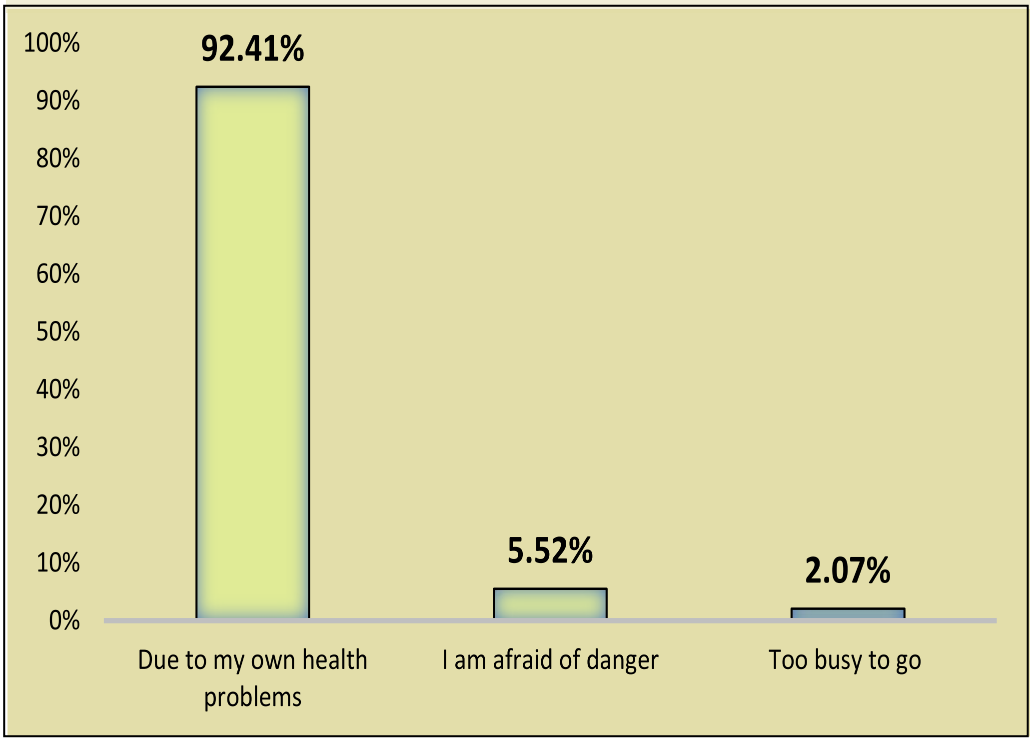


[27] In practice, the women from better off families are more likely to have their pregnancy checks and babies delivered at the private clinics/private midwifery hospital than to go to the government health care center.

[28] This number of people who have not received the vaccine might change, after this field work completed, as the government continues to step up vaccine injections to all Cambodians based in Phnom Penh as well as across the country.

Reasons for not having a COVID-19 vaccine were also briefly explored. Of those who did not get vaccinated, 92% cited "health problems" as the reason, while around 6% were afraid, and 2% said they were too busy (see Graphic 28).

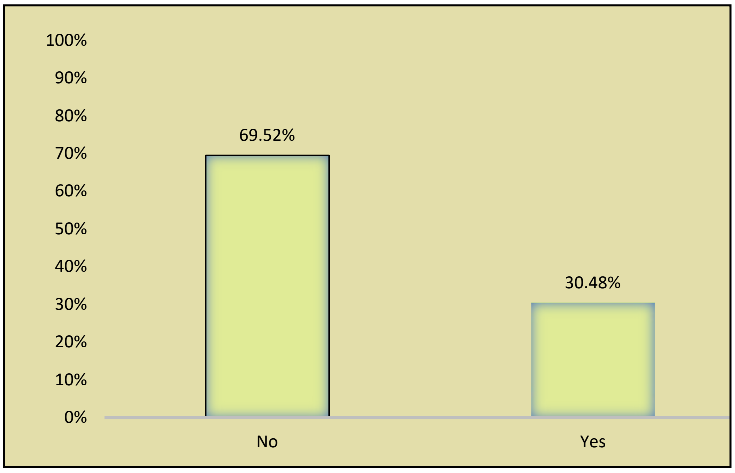
Graphic 28: Reasons for those who do not receive the COVID-19 vaccine



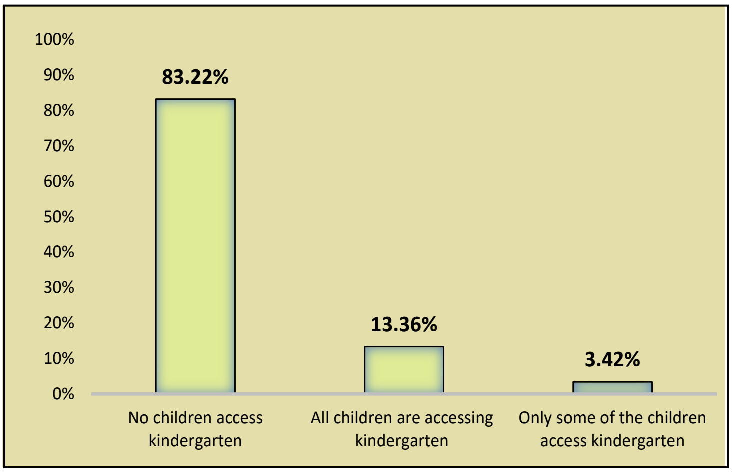
F. Children's Education

The survey attempted to assess the level of children's education. About 30% of respondents have children aged between 3-5yrs old in their family (see Graphic 29). However, only 13% of them were sent to kindergarten (see Graphic 30). Respondents explained their reasons for not sending children to kindergarten as: 76% argued their children are still too small/young to be away from the family; while 10% said they were waiting for their kids to turn 6. (see Graphic 31).

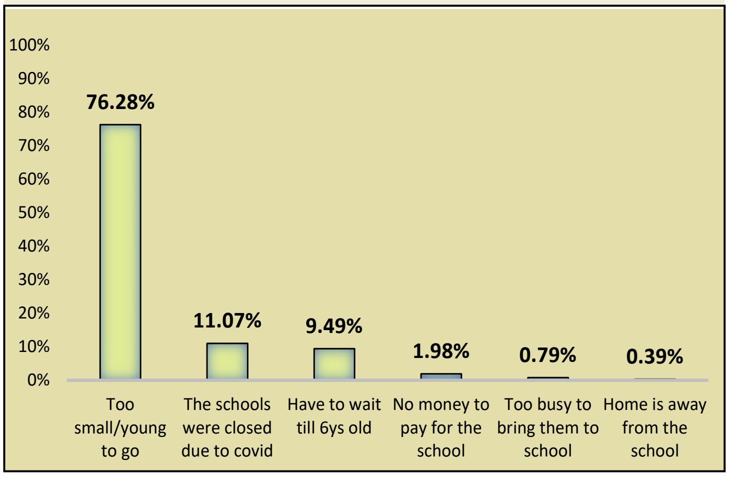
Graphic 29: Family with children from aged 3 - 5yrs



Graphic 30: Children aged between 3 to 5yrs old attending kindergarten

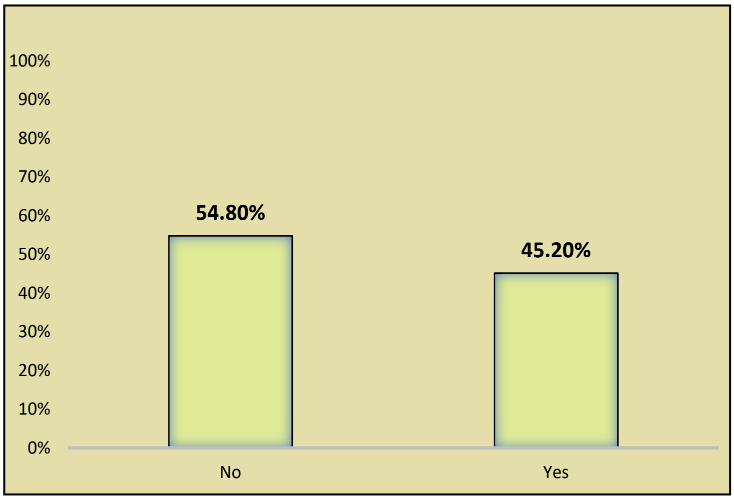


Graphic 31: Reasons for not going to kindergarten

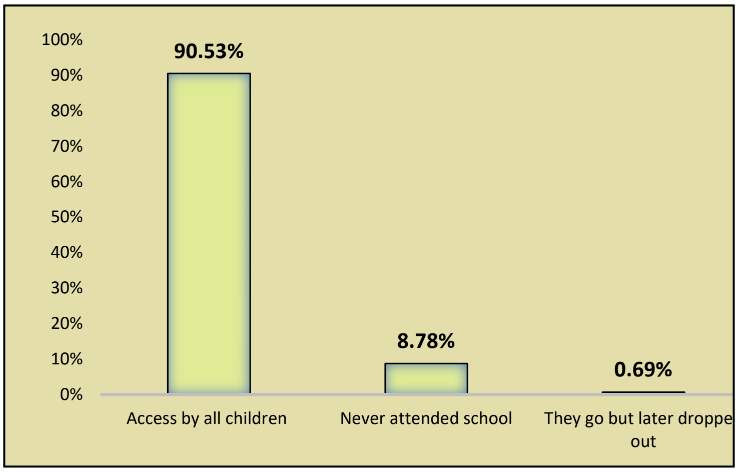


About 45% of the key respondents have children aged between 6 -11yrs in the family. Over 90% of these children have attended school regularly. Less than 1% dropped out and another 9% have never had schooling (see Graphic 32). Interestingly, while most school children go to public schools, 8% of respondents send their children to private schools (see Graphic 33 and Graphic 34). Consultations with community leaders revealed that some families can have their children placed in private schools, whereas children who have no schooling are mostly from the poorest families that have been moving residence frequently.

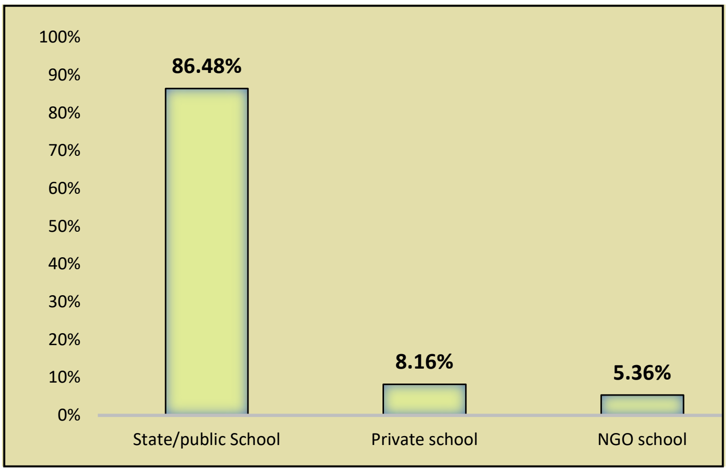
Graphic 32: Families with children aged between 6 – 11yrs old



Graphic 33: Access for children aged between 6 -11yrs to primary school

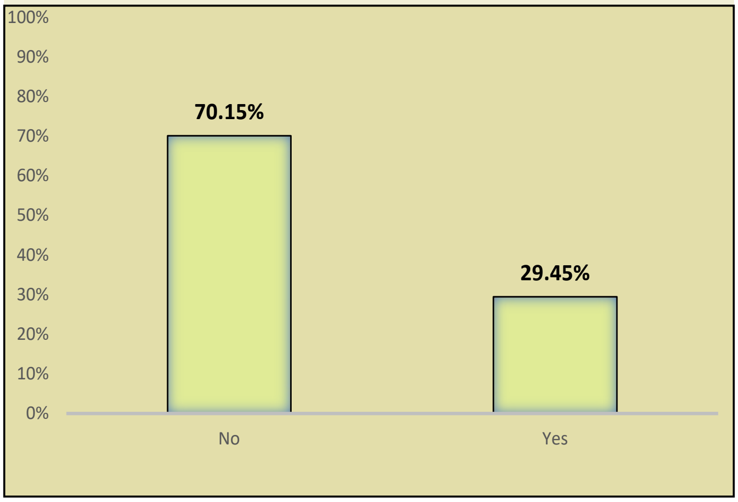


Graphic 34: Type of school (6 – 11 yrs)

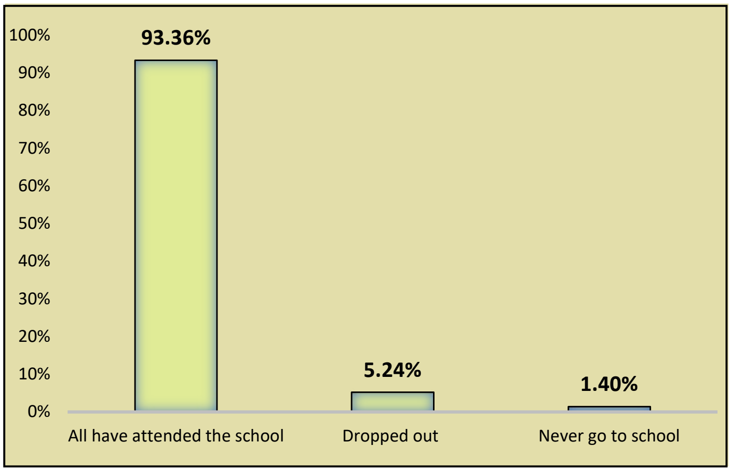


Of the 30% of the respondents who have children aged between 12 to 14yrs, 93% of children at these ages have attended their schools regularly, whereas about 6% had dropped out, and less than 2% had never been to school (see Graphic 35 and Graphic 36). Various reasons were provided for children not attending school including: not enough money to support schooling (50%), and not being able to keep up with other students (11%) (also see Graphic 37).

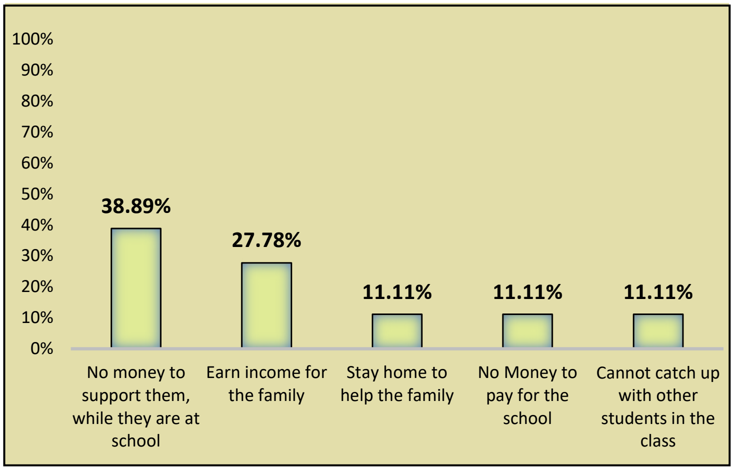
Graphic 35: Families with children aged between 12 - 14yrs



Graphic 36: School attendance 12 – 14 yrs



Graphic 37: Reasons for not attending school

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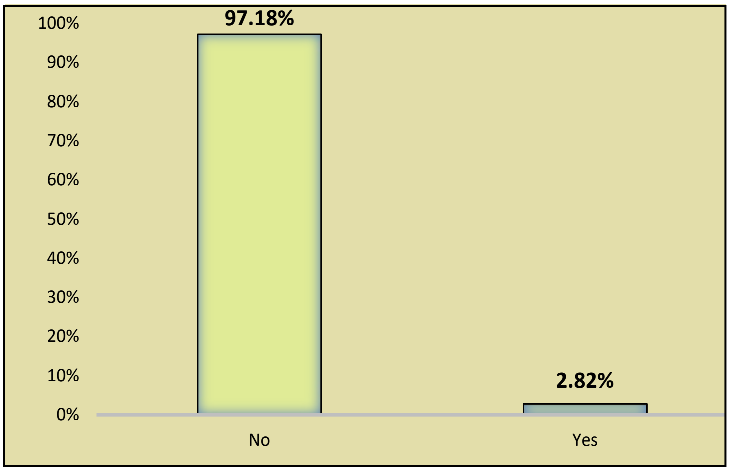
G. Family vulnerabilities

The survey also identifies the number of vulnerabilities in the families. Vulnerability issues include things such as: family members working in high-risk jobs, having orphans and abandoned children, malnourished children and children with mental and physical disabilities. About 3% of families have a member working in a high-risk environment (see Graphic 38). This includes collecting recycling scraps at night (which presents a traffic risk) and collecting vegetables in the lakes (which presents a drowning risk).

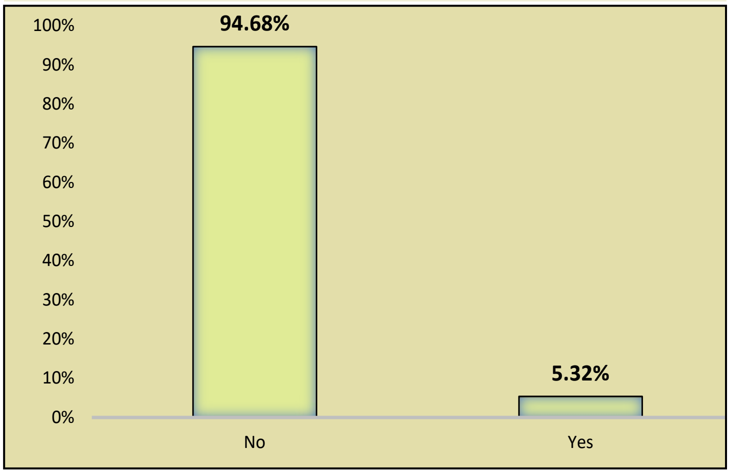
Graphic 38: Family with members working in high risks environment



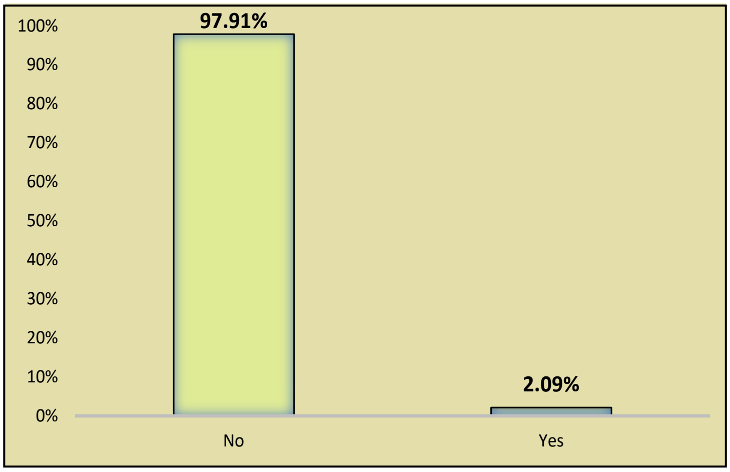
(Heavy work, working at night, working with no holidays, in dangerous zone etc).

Around 5% of families include orphans and abandoned children (see Graphic 39). Based on discussions with families and community leaders, these orphaned children live with relatives. The orphans' parents have either died or abandoned them.

Graphic 39: Are there any orphaned children that live with the family?

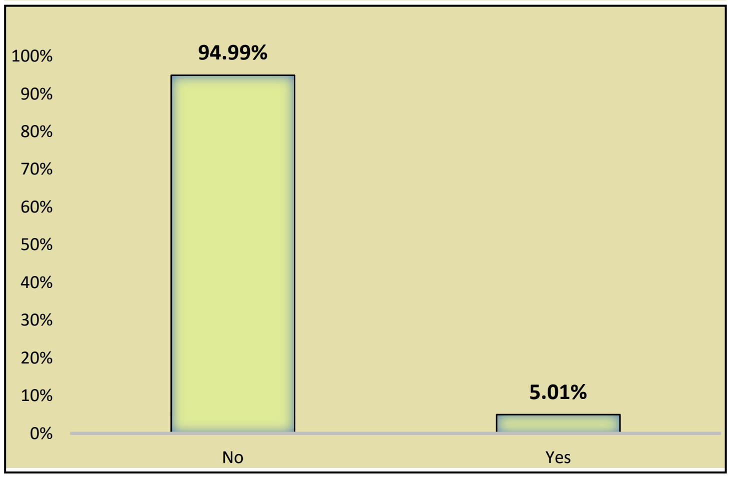


Graphic 40: Are there any malnourished children or nearly malnourish in the family?



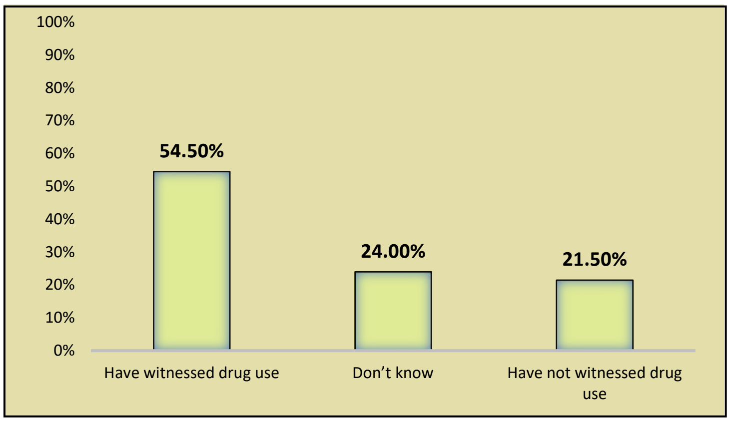
About 5% of the respondents have a family member (child) with a disability (see Graphic 41).

Graphic 41: Are any children with mental and physical disability in the family?



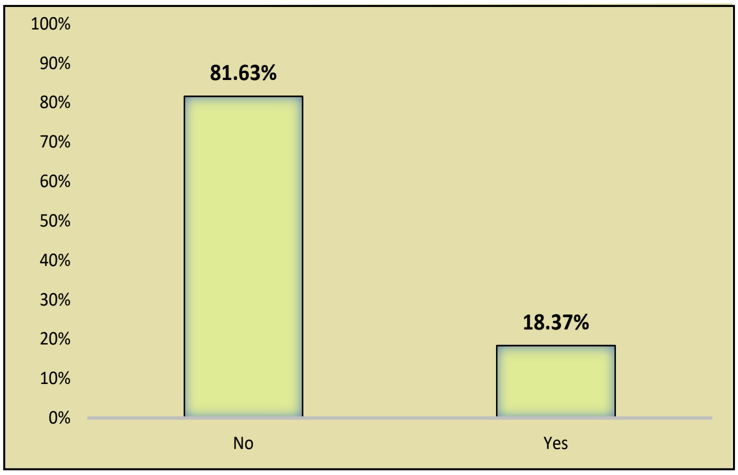
More than half of the respondents (55%) reported witnessing people using drugs within their community (see Graphic 42).

Graphic 42: Have you ever seen people using drugs in your community?

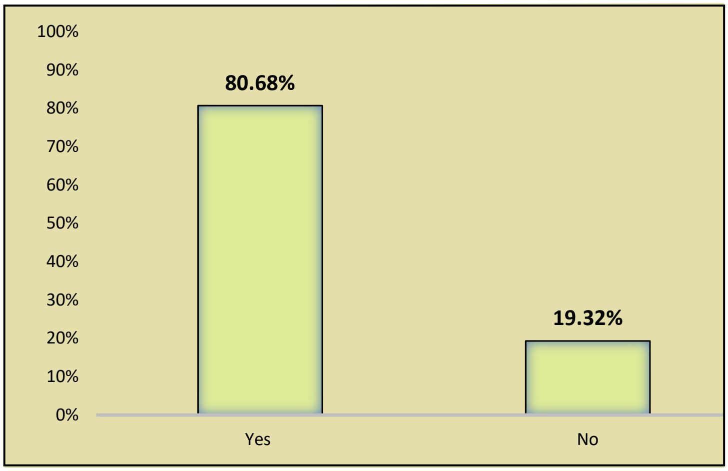


At least 18% of respondents have family members that are chronically ill (see Graphic 43). Persons with a chronic illness have mostly received health care from health care providers (82%). However, in 19% of cases, family members have provided treatment instead of health care professionals.

Graphic 43: Are any person in the family who is chronically ill?

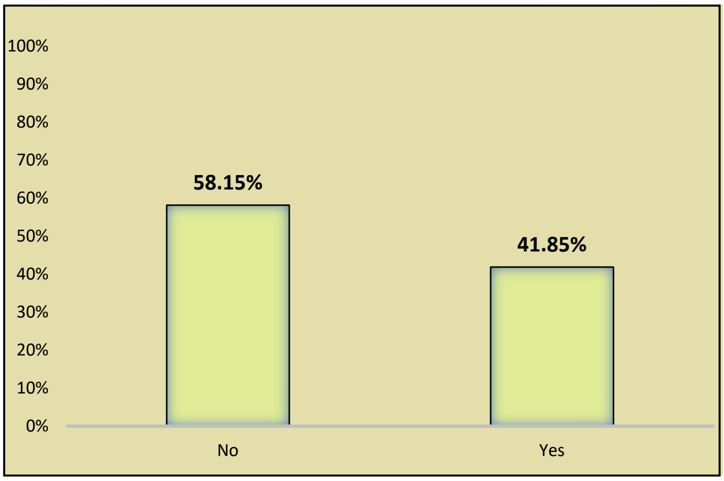


Graphic 44: If yes, have they accessed health care services/treat-



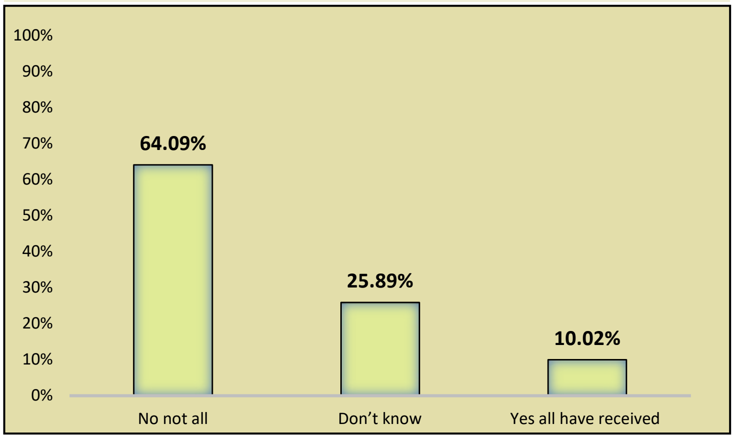
Only 42% of the respondents had obtained an ID poor card (see Graphic 45). Further analysis of the ID Poor system is required to know if this finding corresponds to a lack of other identification documents like family books or is related to other issues.

Graphic 45: Family has received identity poor card?



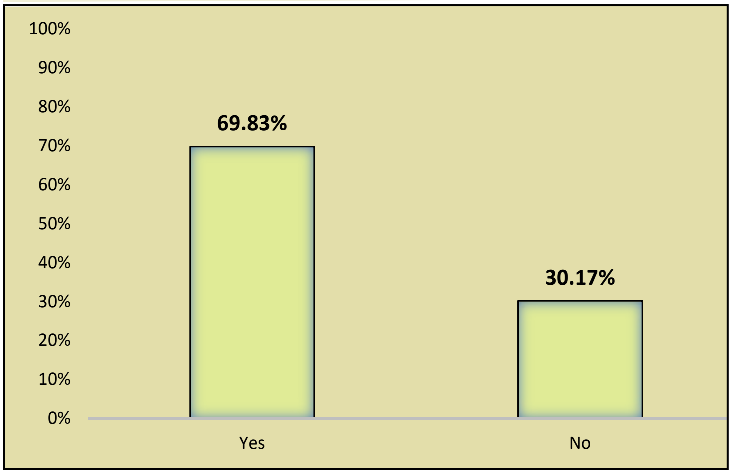
Nearly two thirds (64%) of respondents expressed the need for further assessment to be carried out for ID Poor. Respondents stated that they believe the system has missed poor families who are eligible for ID Poor. Respondents requested that all poor families be identified so support can be given to those most in need of it (see Graphic 46).

Graphic 46: Based on your observation: do all the poor receive the ID poor cards?

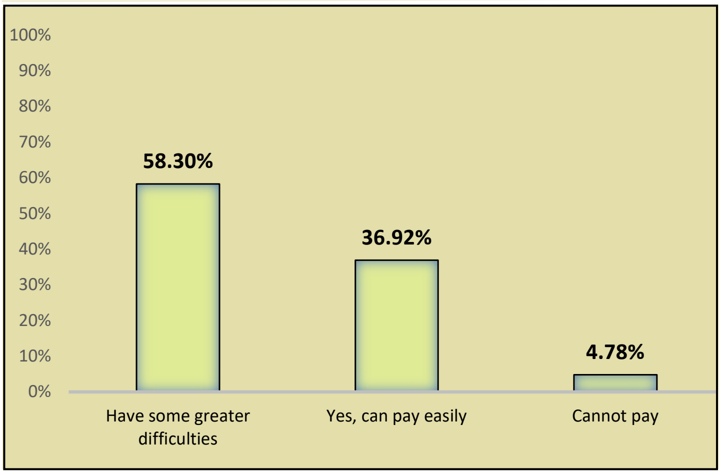


Family debt is another major concern amongst urban poor communities. At least 69% of the respondent families have engaged in the financial loans, either from money lending institutions or from private individuals (see Graphic 47).

Graphic 47: Family debts



Graphic 48: The ability to repay the debts



Up to 30% of the respondents took out a loan for starting income activities, whereas 22% used the loan for building a house. Alarmingly, 18% used the loan for buying food and 11% used it for medical treatment (see Table 7). The use of loans to buy food and medical treatment is a worrying sign. More worryingly, when asked about the ability to repay the debts, more than half of the respondents (58%) had been experiencing difficulties in repayment and 5% said that they cannot repay the loan (see Graphic 48).

Table 7: Reasons for borrowing the money

No.	Description	No	%
1	Start income activities	312	29.66
2	Build the house	232	22.05
3	Buy food	191	18.16
4	Pay for Medical treatment	118	11.22
5	Buy home materials	107	10.17
6	Pay for children school	29	2.76
7	For baby delivery	14	1.33
8	Buy land	9	0.86
9	Buy the motorbike	7	0.67
10	Repair the house	7	0.67
11	Wedding	7	0.67
12	Buy the motor remork/pass apps	5	0.48
13	Installment paid for the motor-bike	4	0.38
14	Pay another debt	4	0.38
15	Buying trees for farming	1	0.10
16	Buying soil to level up my land	1	0.10
17	Pay for renting the land	1	0.10
18	Pay off the daily consumption for my family living	1	0.10
19	Buying car and rent	1	0.10
20	Funeral	1	0.10
Total		1052	100%

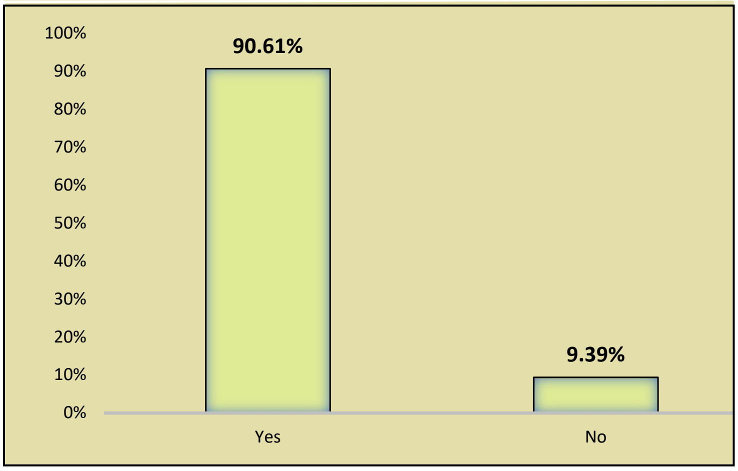
H. Personal Hygiene & sanitation

This section will look at the current practices in hygiene and sanitation as seen through the eyes and views of the community involved in this survey. The assessment here has put much emphasis on 1: family toilets, water consumption and the situation of floods.

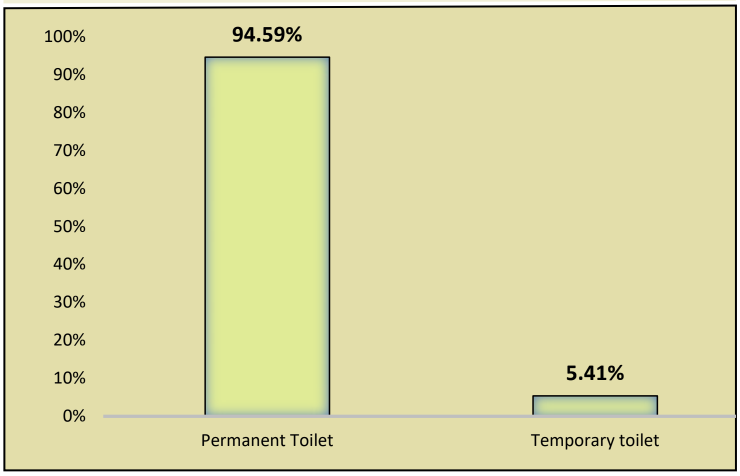
Toilets:

Up to 91% of the respondents claimed to have their own family toilets. This finding indicates a significant improvement in family hygiene as it relates to toilet facilities within the urban poor communities in Phnom Penh.

Graphic 49: Number of family with family toilets

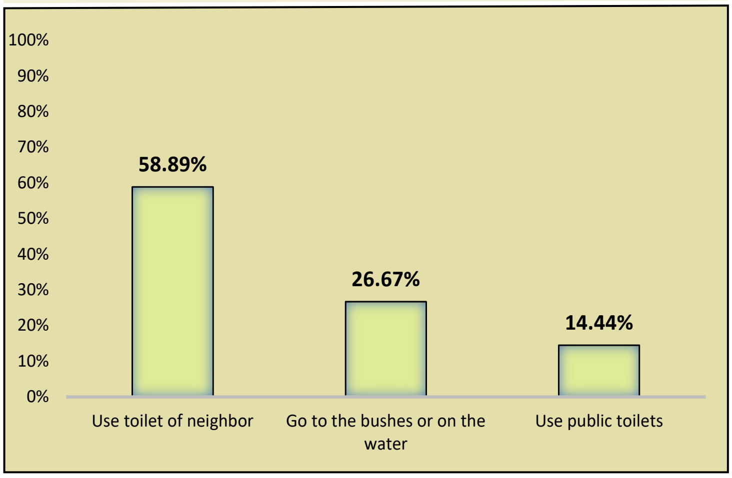


Graphic 50: Kind of toilets built by the family



Many families without a toilet in their homes share the toilets of neighbors or use public toilets. However, some families continue to use unsafe places as a toilet, such as on water sources (rivers or lakes) and in the bushes around their residential areas (see Graphic 51).

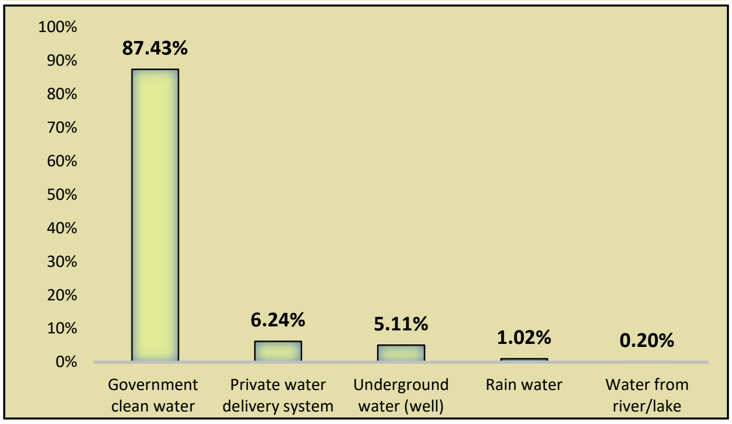
Graphic 51: Where do they go if they have no family toilets?



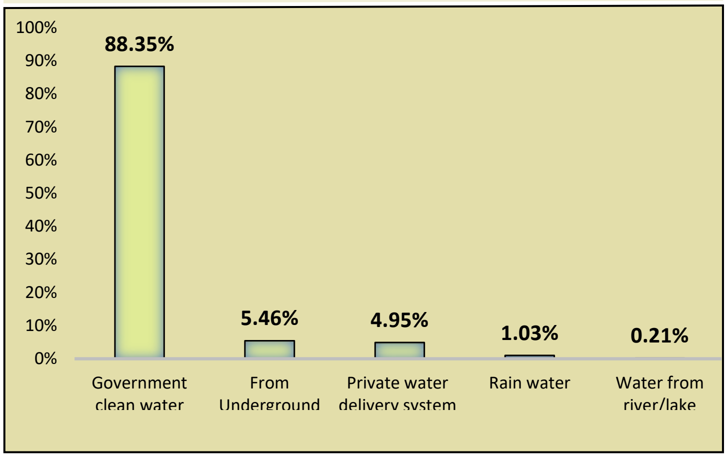
Water

The study found widespread access to clean water. At least 87% of the key respondents have been connected to the government clean water system, for drinking, cooking, and washing. Only 5% still use water from the underground well and 1% use rainwater (see Graphic 52 and Graphic 53 below). Perceptions of the cleanliness of the water differ (see Graphic 54).

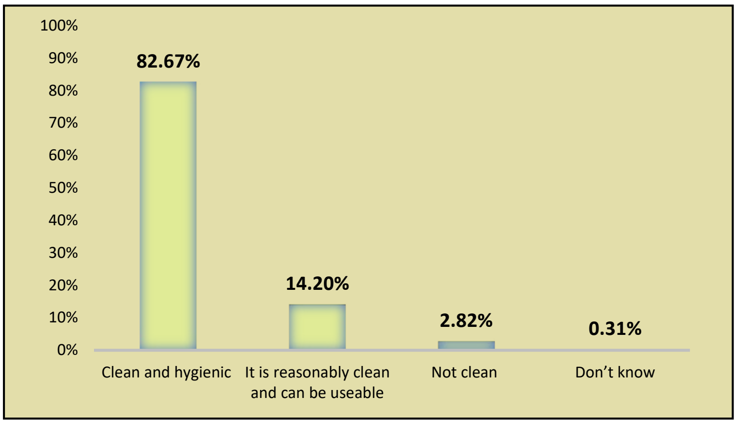
Graphic 52: Sources of water used for drinking and cooking in the family



Graphic 53: Sources of water for washing and bathing

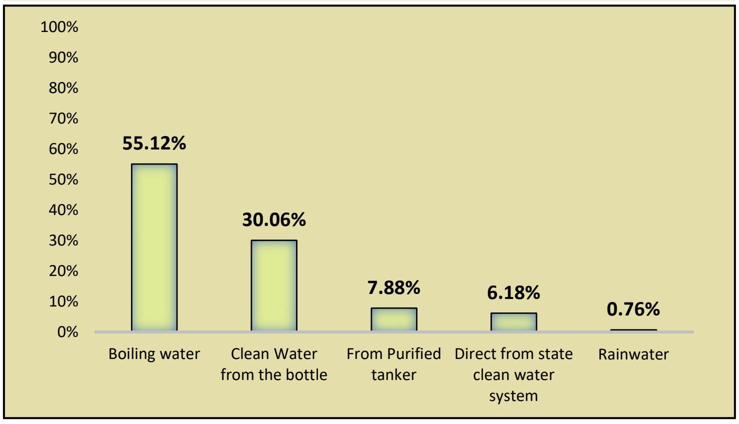


Graphic 54: Views over the current quality of water used by the family



People have also expressed concerns about the safety of drinking water. Among the participants of this study, up to 55% boil water before drinking, 30% use clean water from the bottle, and 8% drink water from a purified tank. Only 6% drink water directly from the government's clean water system (see Graphic 55).

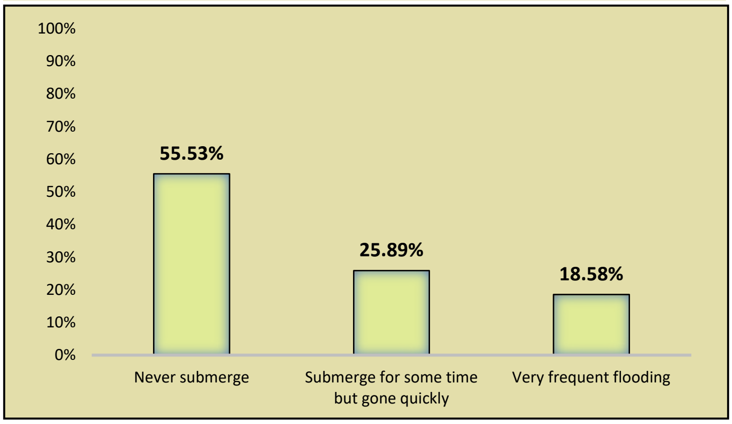
Graphic 55: Water for drinking in the family



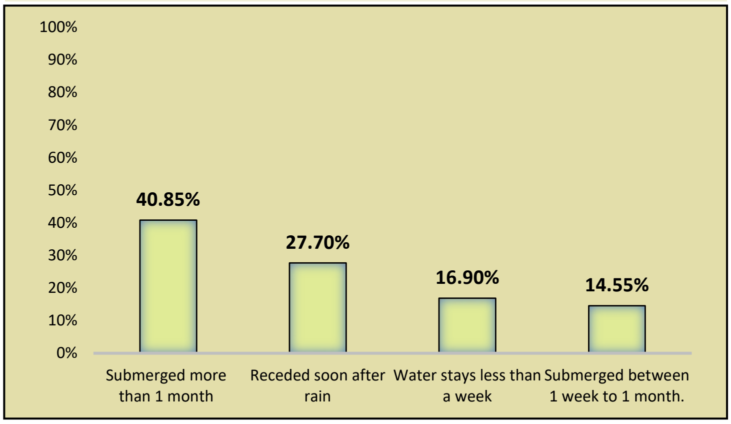
Flooding

As it is commonly reported, especially in the rainy season, many residential areas in Phnom Penh flood. Some last for a few hours, while others could last months. As this study was carried out in the middle of rainy season, some real experiences were revealed over the period of this field work. Close to half (44%) of the respondents regularly experience flooding in their communities. Among these, 28% explained that the water recedes soon after the rain stops. Another 17% said that the flood might remain for almost a week, another 15% said that floods remain from 1 week to 1 month. Alarmingly, 41% of respondents that regularly experience flooding stated that the floods lasted continuously for more than a month. It is worth noting that some of the communities in this research are on lakes and low-lying areas in Phnom Penh.

Graphic 56: The situation of flood for family home

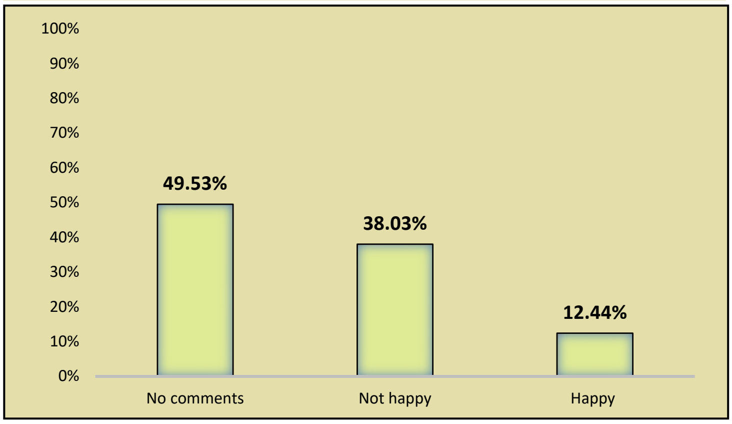


Graphic 57: How long the house is under water during each flooding period?



While discussing flooding, the study team also tried to hear the views of the respondents about the capacity of the authorities to deal with flooding issues. Only 12% expressed satisfaction with the solution being made available by the Government, whereas 38% were not happy. Almost half (49%) of all respondents declined to comment (see Graphic 58).

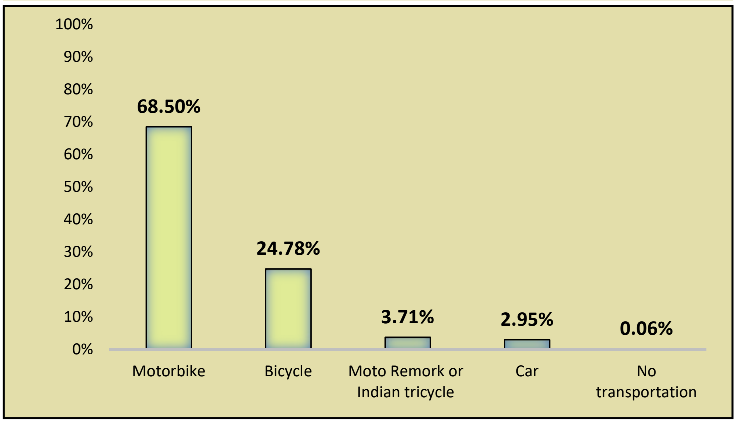
Graphic 58: Satisfaction with Government responses to flooding



I. Assets owned by the family

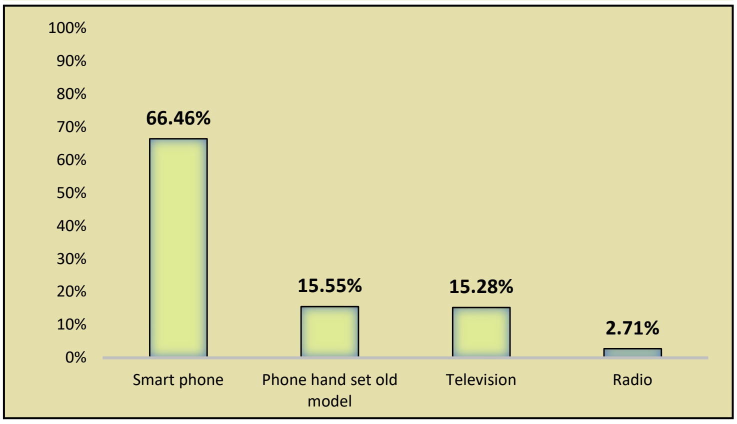
Assessment of family assets was also carried out, looking with a particular focus on means of transportation used by the family, and materials used by families for communication (communication devices and equipment). Nearly two thirds (69%) of all respondents owned a motorbike. Interestingly, only about 0.06% of the people engaged in the study claimed to have no means for transportation in their families (see Graphic 59).

Graphic 59: Means of transportation for the family



With regards to communication, up to 66% own a smart phone, and 15% use another type of handheld phone, 15% have a television, and up to 2% have a radio handset (see Graphic 60).

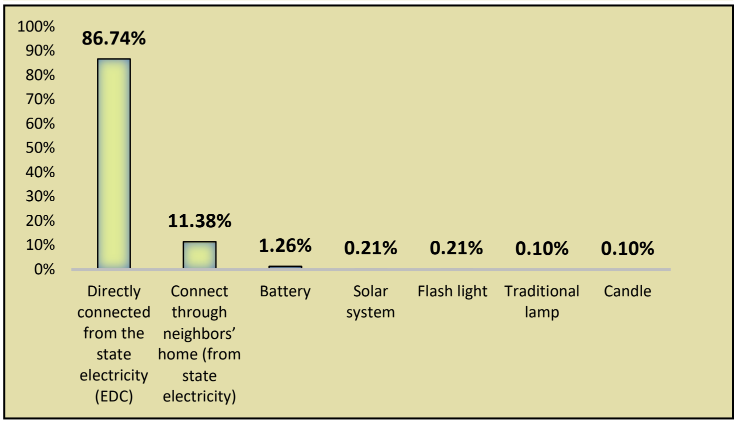
Graphic 60: Materials or devices for communication



J. Family access to electricity

There is a major improvement in urban poor communities' access to electricity. Almost all households involved in the survey have access to state-provided electricity. Among them, 87% are connected directly to the state power line, while 11% are connected via neighbors. The remaining families are using batteries, or rely on solar energy (see Graphic 61).

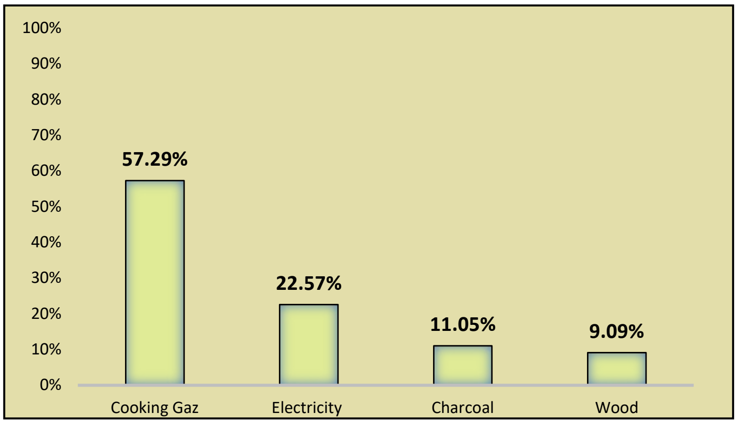
Graphic 61: Electrical connections at home



K. Energy used for cooking

Most respondents (57%) use the gas for cooking. At least, 9% of the people involved in the survey still depend on wood as a fuel source for cooking (see Graphic 62).

Graphic 62: Energy consumption for cooking in the family



IX. Conclusions

Based on the result of this assessment, urban poor communities in Phnom Penh have access to state electricity and almost all families have been connected to Government sources of clean water. Communities also have access to health care and schools.

However, urban poor communities still encounter many issues that require solutions and Government support. The geographical conditions, where families are living along the streets, along the sewage canals, railroads and riverbanks indicates a high risk of eviction. These communities are not able to realise their right to secure housing as a result.

Flooding has also been severe in many urban communities, especially where there is poor infrastructure, such as a lack of drainage. Communities living on lakes and wetlands being filled-in are also at increased risk as the water may have nowhere else to go.

Poverty has also been worrisome, with COVID-19 affecting incomes. Loans have been taken out for food and medical supplies and the respondents interviewed in this research have said that ID Poor has not been properly implemented. ID Poor, if implemented correctly, could help to reduce medical costs and provide more targeted services to the urban poor community members that need them.

X. Recommendations

I. The roles of NGOs

Capacity in Advocacy

1. As was found by this study, the communities that live near to public land may be forced to relocate and give way for city development to take place. In this respect, NGOs can play a crucial role in assisting the community to access information regarding all necessary Government policies, legal requirements and procedures, and to make sure that these are implemented transparently and with accountability.
2. Regular consultations and meetings amongst NGOs working with urban poor communities remain crucial and should be further reinforced to exchange information and support collective actions in times of need.
3. NGO support to further build the capacity of community networks as in the Recommendation 2 of the community networking section above.
4. As the debts found in this study are mostly involved in supporting and financing small businesses, it is recommended for NGOs to work closely with experts on social enterprises and entrepreneurial development.

II. Media engagement for Advocacy

The role of independent media is crucial for voicing community concerns and issues beyond their locality. In this case, key community leaders must be aware of all independent media and media outlets, then communicate with them for interviews to have their voices heard.

III. The National Government/Municipality

1. Forced evictions often involve some financial compensation or a new resettlement site. Observations show that, processed evictions are often carried out with no consultation with people in the community. Instead, they are usually done via intimidation. Rather than negotiations, community consultations, transparency, and good governance, community members often face the threat of receiving nothing. Ongoing consultation between the community and relevant government institutions involved in the compensation and family resettlement are recommended to make sure that the livelihoods of the families affected are not so badly affected as to push them further backwards into debt and poverty.
2. As was learned by this study, many urban poor communities are experiencing bad flooding. Some houses were submerged for up to months, especially in the rainy season. In this case, it is suggested for this issue to be addressed by the relevant Government or office of Municipality.

XI. Annexes

Questionnaires for Poverty Assessment
Urban Poor Communities in Phnom Penh

Code no___________________________________
Date________/_________/____________________
Time Started:______________________________
Time Finished:_____________________________
Name of the Interviewer: ____________________
Place of Interview: Community:_____________Village: __________________

Commune: _____________District: ___________________

1. PERSONAL DATA
*****in the absent of head of family, then this can be replaced by other in the family who can give the answers, but must be over 18 years old

1.1. Name__________________________________Nick name _____________
1.2. Age_______________Years, Sex: Male/Female
1.3. Marrital status

- Never married
- Married
- Separated
- Divorced
- Widowed

1.4. Your relationship to this family

- Head
- Spouse
- Brother or sister
- Son or daughter
- Son in law or daughter in law
- Grandhild
- Parent
- Other relation and household member

1.5. Present Occupation:__________
1.6. Nationality &native Language

1. Khmer
2. Chinese
3. Muslim
4. Vietnamese
5. Others________

1.7. Religion

- Buddhism
- Christian
- MuslimBahai
- Others, Please specify________

1.8. Level of your education?

- No school
- Primary 1
- Primary 2
- Primary 3
- Primary 4
- Primary 5
- Primary 6
- Primary 7
- Primary 8
- Primary 9
- Primary 10
- Primary 11
- Primary 12
- University Year 1
- University Year 3
- University Year 4
- Graduate from University

1.9. How long have you been living in this community?

- Justmove to here less than a year
- Between 1 to 2years
- 2 to 3 years
- 4 to 5 years
- 6 to 10 years
- I was born here

2. FAMILY'S SOCIO-ECONOMIC STATUS			
No	**Question**	**2Total**	**Female**
2.1	How many family members in this household		
2.2.	How many family member aged under 18 years old?		
2.3	How many family member who income earner to support the family, before the covid outbreak?		
2.4	Are there any job loses amongst these income earners, over the period of covid 19 outbreak? Yes No	 1 2	
2.5	If yes, how many people who loss their job, due to the covid 19?	Total:.............	Female:
2.6	Who is the earner? Man/Husband Female/ Wife Widow Children Grandmother/grandfather Others, please specifiy	 1 2 3 4 5	

2.7	How much income per month in the family, before the covid outbreak? No income Less than 100,000 Riel Between 100,000 to 200,000 Riel Btween 200,000 to 300,000 Riel Between 300,000 to 400,000 Between 400,000 to 500,000 Riel Between 500,000 to 600,000 Riel Betewen 600,0000 to 700,000 Riel Between 700,000 to 800,000 Over 800,000 Riel	 1 2 3 4 5 6 7 8 9 10	
2.8	Is there any change in the level of your family income, since the covid outbreak? Yes, No, it is more or less the same	 1 2	
2.9	If yes, please choose the following income your family has earned these days? No income Less than 100,000 Riel Between 100,000 to 200,000 Riel Btween 200,000 to 300,000 Riel Between 300,000 to 400,000 Between 400,000 to 500,000 Riel Between 500,000 to 600,000 Riel Betewen 600,0000 to 700,000 Riel Between 700,000 to 800,000 Over 800,000 Riel		
2.10	What are the sources of your family income? Main Occupation? (Please Choose) Factory worker Construction worker Motor Taxi driver Small shop in the community Government staff Company staff NGO staff Agriculture Handicraft Recycle scrap collector Intertainment services Laundery service Others, please specify	 1 2 3 4 5 6 7 8 9 10 11 12	

2.11	Where does your family reside/the situation of the family? Please choose) Living along the raiway Living along the walking street Living along the sewage pipe Living along the river bank Living alogn the organized land Living in zone/land not yet organized Living on the building roof Living at pagoda/stupa Living on the lake Living on the people land Living with relative Others, please specify	 1 2 3 4 5 6 7 8 9 10 11	
2.12	Has your family been moved from place to place over the past 5 years?		
2.13	If yes, how many time, over the past 5 years? Only one time, Twice More than 3 times	 1 2 3	
2.14	Reasons for moving? Economic reason Just want to choose the new location To join my family/realtive here Being forced to move by the authority	 1 2 3 4	

3. HOUSING		
3.1	Your relationship with the house ? Your own home Renting Living with Friends/ relatives Others, please specifies..	 1 2 3 4
3.2	What type of house the family has lived in? (Please choose) Temporary house with plastic tent Built from small wood with thatch roof/or cloth tent Built from small wood with zinc or cement roof Simple house with roof Concret house Other type, please specify	 1 2 3 4 5 6
3.3	Housing Condition Temporary home with plastic roof Built from small wood, thatch roof Brick house Normal house with proper protection Built with small wood with tinned roof	 1 2 3 4 5

4. INFORMATION ON FAMILY DOCUMENTS			
4.1	Does family has family record book ? Yes No	 1 2	
4.2	Why don't you have?		
4.3	Does family has residence record? Yes No	 1 2	

5. HEALTH CARE			
5.1	Currently do you have children under 12 months old? Yes No	 1 2 (if no skip the next question)	
5.2	Do your children have recieved full immunisation? Yes No Only some	 1 2 3	
5.3	Are these children vaccinated? Yes Cannot remember Lost	 1 2 3	
5.4	Currently, is there a pregnant women in your family? Yes No	 1 2 (if no skip the next question)	
5.5	If yes, does shoe receive antenatial care? Fully No Just some time	 1 2 (if no skip the next question) 3	
5.6	Where does she receive antenatal care? Health Center Hopspital Private clinic Traditional birth attendance Health agent/NGO Others, please specify	 1 2 3 4 5 6	
5.7	How does she go for antenatal care? Own means Supported by NGOs Supported by local authority Others, please specify	 1 2 3 4	
5.8	Why don't you to health check-up? Not important Health center is far from home Busy Other	 1 2 3 4	

5.9	Have you received COVID-19 vaccine?		
	Yes	1	
	No	2	
5.10	How many jabs of COVID-19 vaccine have you received so far?		
	Two times	1	
	Three times	2	
	Only one time	3	
5.11	Why don't you received the COVID-19 vaccine?		
	Lack information	1	
	Busy	2	
	Personal Health isuss	3	
	Scare	4	

6. CHILDREN EDUCATION		
6.1	Are there any children aged 3-5 years old in the family? Yes No	 1 2 (if no skip the next question)
6.2	If yes, how many?	Total:......... Female:.............
6.3	Are there anychildren aged 3-5 in the family going to pre school? Yes (all) No Some	 1 2 3
6.4	What are the reasons for those who are not go to preschool? He.she is too small to go Too busy to bring them to pre school My home is far from the pre school I have no money to pay for the pre schools Others, please specify:..............................	 1 2 3 4 5
6.5	Are there any children aged 6-11 ys old in the family? Yes No	 1 2 (if no skip the next question)
6.6	If yes, How many?	Total:......... Female:.............
6.7	Are there any children aged 6-11 going to primary school? Yes, all Yes, but already drop out No	 1 2 3
6.8	If they are attending school, which school do they study? Private school Public school Organisational school	 1 2 3
6.9	If no or drop out, please explain for the reasons? No money to pay for the school Stay home & help family Earn income for family, cannot catch up with other students Others, please specify:......................................	 1 2 3 4 5
6.10	Are there any children aged 12 to 14 in the family? Yes No	 1 2
6.11	If yes, how many?	Total:...........Female:..........
6.12	Are any children aged 12-14 going to secondary schools? Yes (all) Yes, but already dropped out No	 1 2 3
6.13	If NO or DROP OUT, please explain for the reasons? No money to pay for the school Stay home & help family Earn income for family, cannot catch up with other students	 1 2 3 4

7. FAMILY & CHILDREN VULNERABILITIES				
7.1	Do you have any children working in a risky situation? Yes No	 1 2		
7.2	If yes, what are they?			
7.3	Are there any abandone or orphans in the family? Yes No	 1 2		
7.4	Are there any children who appear to be malnurished (skinny, red hair, big belly) in this household? Yes No	 1 2		
7.5	Are there any children with disabilites, including physical and mental? Yes No	 1 2		
7.6	Have you ever seen people using drugs in your community?			
7.7	If yes, what do they do in the community?			
7.8	Are there any family members in this household who have chronic dis-ease? Yes No	 1 2		
7.9	If yes, have they got health care support/treatment? Yes, No	 1 2		
7.10	If no, why not receiving health care support/treatment? Aging illnesses, no need for treatment Do not know where to go No service available No money	 1 2 3 4		
7.11	Does the family has recieved ID poor card? Yes, No	 1 2		
7.12	If yes, who provided the card? Commune council/Sangkat NGO Don't know	 1 2 3		
7.13	What is the benifit of the ID-poor card?			
7.14	Based on your observation: do all the poor receive the ID poor cards?			
7.15	Currently is the family in in Debt? Yes, No	 1 2		
7.16	If Yes, what do you borrow the money for? To start business For medical treatment Birth delivery service To pay school fee for my children To buy emergency food To build shelter Others, please specify	 1 2 3 4 5 6 7		
7.17	Do you have ability to pay loan to the bank? Yes No	 1 2		

8. FAMILY HYGIENE& SANITATION			
8.1	Do you have your own toilet for use? Yes No	 1 2	
8.2	Types of abave toilets:		
8.3	If not, yes, where do you the toilet? Use public toilet Use neighbor/relative toilet Use a rent toilet	 1 2 3	
8.4	Where is the source of water for " drinking/ cooking" for your family? Clean water from the government Rain water River brought by truck Pond or lake From Protected Well Unprotected well Others, please specify:................................	 1 2 3 4 5 6 7	
8.5	Where is the source of water for " washing & Bathing" for your family? Clean water from the government Rain water River brought by truck Pond or lake From Protected Well Unprotected well Others, please specify:................................	 1 2 3 4 5 6 7 8 9	
8.6	How do you see the quality of water you are using? Clean Not clean	 1 2	
8.7	Do you boil the water for drinking? Boiling Not boiling	 1 2	
8.8	Flooding situation in the community: Never some time Frquency		
8.9	Period of flooding in the community: After raining Less than a week From a week to a moth More than a month		

9. KEY FAMILY ASSETS			
9.1	What means of transportation do you have/used these days in your family? Own Car Own motor bike Own remok/Tricycle Own bike cycle Cyclo No	 1 2 3 4 5 6	
9.2	What communication tools does the family have? (Please choose) TV Radio Old Mobile phone hand set Smart Phone Others, please specify	 1 2 3 4 5	
10. Family access to electricity			
10.1	Electrical connections at home Battery Solar system Flash light Tranditional lamp Candle		
11. Energy used for cooking			
11.1	Energy consumption for cooking in the family Cooking Electricity Charcoal Wood		
12. Living situation in the community			
12.1	What is the challenge in a living situation in the community?		

Thanks for your time !!

អង្គការសមាគមធាងត្នោត

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