Our journeys, our stories













A collection of Analysis of Inequalities from 2018 and Leaving no one Behind: Lived Experiences of Water and Sanitation in Kampong Chhnang







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About the Collection

The collection is made from a combination of *Analysis of Inequalities* from 2018 and *Leaving no one Behind: Lived Experiences of Water and Sanitation in Kampong Chhnang* published in 2019, together with contributions from local rights organisations in Cambodia.

WaterAid Cambodia is committed to developing a comprehensive understanding of inequalities in access to water, sanitation, and hygiene (WASH) in Cambodia. Our is guided by the desire to showcase the truth and give a platform for people's voices, especially those whose marginalisation prohibits them from actively engaging in the processes and decision-making necessary to enable them to access improved WASH services.



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Disclaimers* names in collected stories has been changed to protect the privacy of individuals featured.





Ethnic Cham Populations in Cambodia

Who are they?

The Muslim community in Cambodia, generally known as Cham or, more recently, Khmer Islam¹, is mostly descended from refugees from the ancient Kingdom of Champa who fled war and persecution in central Vietnam 500 years ago and ethnic Chvea who arrived in Cambodia in the 14th century from the Malay Peninsula and Indonesia.

Today, Cambodia is home to approximately 300,000 Muslims. Most Cham populations live in rural areas, where they are primarily engaged in fishing and farming. Most of them are concentrated along rivers in Kampong Cham, Kampot, Pursat, Battambang, Kandal and Kampong Chhnang provinces.²

Marginalisation dimension

Many Cham people live in poverty and have lower education levels, higher illiteracy rates and poorer health indicators than the rest of the Cambodian population.³ According to *The Cambodia 2015 International Religious Freedom Report*, the Cham community continues to face barriers to full integration into society, and wider Cambodian Buddhist communities reportedly continue to view them with suspicion and superstition.

Integration and economic opportunities remain a challenge for Cham communities in Cambodia, which result in a vicious cycle of poverty preventing them from accessing water, sanitation and hygiene (WASH) services.

Story of Tol

In the community where Mr
San Tol lives, the majority of old
people work in agriculture, while
the younger ones study at the
university in the provincial town.
Some of them work overseas
(mostly in South Korea), and others
go to university in Phnom Penh.
They practice the Islamic religion.
According to their tradition, Mr
San Tol said, the elderly look after
children who, in turn, must respect
their caretakers and never talk back
to them. Such respect is of utmost
importance in Islam.

WaterAirWai Sreymom

Mr San Tol and his wife raised five daughters until all of them

were married. At present, he and his wife live on their own after their children moved out to live in their respective homes. He gave each of them a house, which unfortunately, he said, does not have a toilet yet. His own house does not have a toilet either – an issue his wife constantly complains about due to the difficulty she has with open defecation. He said that often arguments break out between him and his wife over the issue of their lack of a toilet.

"Water is the main problem followed by the toilet. Each time she has to defecate, I have to accompany her to the field, especially at night and when it rains, because she is afraid of the dark and bugs. I do not have the money to build a toilet yet and because of that she always complains about it, causing an argument between us," he said. Most of the villagers earn a living from farming. In addition to vegetable gardening, Mr San Tol also raises ducks to produce eggs to supplement his income. They farm vegetables mostly during the rainy season and not at all during the dry season from January to May due to a severe shortage of water. In the dry season, the villagers must fetch water from a pond or well 300 metres away from their farms.

"I remember the time when our rice and other crops died due to the lack of water. Currently, we are staying in a hut on the farm where we grow vegetables and raise ducks after we gave up our house to our children who got married. Water shortage is a problem and not having a toilet is also a difficulty. We do not have a toilet yet since we do not know where we will go to live in the next few years, because this house is not ours. On top of that, building a toilet costs a lot of money and that is why we are not going to build it at this time," he said.

"My wife constantly complains about it because she does not like defecating in the field. She is angry about it, saying we are getting too old already but we still don't have a toilet in the house. The house is surrounded by a foul smell. In the dry season, the ground is so hard to dig and it is muddy in rainy season. Sometimes we step on somebody else's excrement which was not properly covered. Whenever there is a heavy rain, we defecate in plastic bags and wait until the rain stops or the morning to take them out to bury. Our current situation is not good and there is nothing we can do about it yet," he said.



According to Mr San Tol, in the past it was customary for most people in the village to go to defecate in the forest near their village. But the forest is now gone and, as a result, many villagers have decided to build their own toilets since they no longer have any forest for privacy like before. He said he and the villagers would like very much to have access to clean water to improve the living standard in their community. They hope that their wish will be heeded by the local authority or organisations working in water supply.











Urban migrant workers

The National Institute of Statistics estimated in 2013 that nearly one quarter of the Cambodian population (approximately 4.1 million individuals) had changed their location of residence, which led to rapid urban growth. The main migrant destination is Phnom Penh, which receives half of all Cambodia's rural migrants. Migrants to Phnom Penh are overwhelmingly young, mainly aged 20-34 (64%)⁴.

Females tend to migrate at a slightly younger age, as those in the 15-29 age range constitute 33.7% of all migrants, compared to only 22.4% for men. As of 2015, there were about 655 factories in Cambodia with 700,000 garment workers, 90% of them female migrants from rural areas⁵. Female migrants work primarily as garment workers, while male migrants as construction workers. According to a survey of the Cambodian Brick Industry by the Building and Wood Workers Trade Union Federation of Cambodia (BWTUC), there are 10,217 people living in brick factory compounds across the country, who most of them are migrants⁶.

Marginalisation dimension

Garment factory workers face exclusion due to unique gender-specific factors (such as sexual harassment, the burden of menstrual hygiene management and other reproductive health needs). Their access to WASH and other services is further diminished by exploitation both in the workforce and as tenants. Employers may not provide for them fairly, and landlords may exploit their basic needs for profit. The workers, then, find themselves caught up in a cycle of poverty, exploitation and exclusion.

Construction and brick kiln workers often have limited access to WASH services as there is a widespread lack of sanitation facilities and water provided by the company. Female construction workers are more seriously affected than male workers as they socially expected to take responsibilities in water collection, cleaning and cooking and also face harassment and the burden of menstrual hygiene management and other reproductive health needs.

Story of Kea

"Landlords do not care about the situation of room renters. They said if we can live here, we can live; but if we cannot live, please move from here because there are others who could live here," said Ms Rea Kea, a 23-year-old female garment worker who migrated with her younger sister from Prey Veng province and lives in an old building in Phnom Penh. They spend 25USD per month for a small room with an old, leaking zinc roof and no private toilet attached. (add photo of the shelter)

Ms Kea said that because the communal toilet is shared with neighbouring rooms, she always uses the toilet located in the factory instead. "It is very difficult to use the toilet. I use it only when I really need it", she said and added that, "at night, I use a chamber pot to urinate because there is



no lamp along the way to the toilet or in the toilet." She continued, "When replacing sanitation napkins, I do it in the room. And If I need to clean, I must take a bath."



She buys 300L jars of water for washing, cooking, cleaning and laundry. She said "I do not know the source of water. My sister and I use about 20 jars of water per month (0.40 USD each). So, it is a big amount. In total, we spend about 40USD for water, electricity and room fee." Alternatively, she buys water from a filter machine near her room for 0.025USD per litre. "I always wash my 20 litre bottle and take it to buy water for drinking" she said. She also said that she could not spend much for room fee and utilities, so we must to live with this kind of situation.

Access to water is a basic human right and no one should have to be at a risk just to access to toilet either. Ms Kea's story is an example of female workers' conditions in a developing country like Cambodia who struggle to gain access to basic services such as water, sanitation and hygiene.



Story of Makara

"The company does not care about our shelter; they didn't build it. They just gave us the materials and we built it by ourselves," remarked Ms Chhom Makara, who, like her husband, has been a construction worker for almost 20 years. The couple live in a makeshift shelter in an area with limited sanitation facilities and hygiene.

Ms Makara said that there were six toilets, yet only two can be used because the other four were clogged and damaged. "It is not enough. We need to wait to use the toilet," she said. "Can you imagine how more than a hundred people are using two toilets?" Because there are not enough toilets, people defecate in plastic bags and throw faeces into vacant land near the shelter, which makes the area smell bad, especially



during the rainy season, compounded by the trash surrounding the homes. Workers in the shelters appealed numerous times to the construction company for a solution regarding the toilets and rubbish issues, however, nothing has been done.

Her family uses water provided by the company. "Water and electricity are provided by the company free of charge," she said, and added that "I do not boil the water for drinking. I just take it from the water tank, then pack it into bottles to keep in a cooler

box. I do not know if it is safe, but my family drinks it every day." She also mentioned the difficulty of bathing because there was no suitable bathing station. She takes a bath in the open by the water tank which makes her feel ashamed and unsafe. "We have lived with this kind of situation almost 20 years," she said.



Story of Hout

Mrs Leang Hout is a brick worker in Kandal province. She is a widow and lives in a the brick factory compound with her seven children.

"It is very challenging to manage such a large family because I have to take the roles of both mother and father and earn money to sustain us since my husband died. My family's life is more and more difficult since I have to pay debt. Therefore, I and the other two children decided to work in brick kilns until now. We earn dependent on a number of bricks produced. We sometimes earn nothing," said Mrs Hout.

She has no choice but to defecate in broken brick piles or in the bush because there is no toilet in the house nor in the



workplace. "It is very hard for me and other ladies. Sometimes while I am defecating someone walks past. I cannot go far as I am afraid that my boss will come and see me not working. Workers used to ask the boss for toilet but he said 'Having no toilet, you defecate everywhere, so if we have a toilet, who will clean it?' Because of this, we not dare ask him anymore. However, I and other workers will ask him again in order to get appropriate toilets at our workplace and accommodation."







Urban Poor

Who are they?

In 2012, Cambodia's total urban population was estimated at 3.7 million people, over half of whom lived in the capital, Phnom Penh.⁷ The population has grown significantly since this time and is projected to increase to around eight million by 2030 (Kammeier, H.D., SinS., Tep, M, 2014).

One of the challenges is defining who 'the urban poor' are. For over 20 years, groups have used the term 'urban poor' with little or no agreement on what this actually means. In rural areas, the Cambodian Government, with support

from the German development company GIZ, and the Australian Department of Foreign Affairs and Trade, have rolled out an identification of the poor programme (IDPoor) since 2006. This has led to the identification of poor households and the issuing of IDPoor cards, which enables people to access basic services. An urban module is being rolled out from 2016

Five hundred informal settlements are reported in the three largest urban areas: Phnom Penh: 335 -340⁸ Siem Reap: 68⁹ and Battambang: 66 - 104¹⁰

Focusing on particular communities in Siem Reap provides insights into the WASH conditions of the urban poor. Of 257 urban poor households in the Kokchock and Slakram communes in Siem Reap, the majority were women over 50 (CEDT, 2016). All self-identified as Khmer, and two identified as having a disability. Average monthly household income within the communities (\$176) is above the gross national income per capita (\$89). Household income of respondents surveyed in a recent study ranged from \$45 to \$600, which better exemplifies discrepancies within communities. Two of the most commonly reported sources of income were labouring (23% of respondents) and driving a motor taxi (16%). Job insecurity amplifies barriers to WASH access, and poor health outcomes are a common consequence. 59% identified themselves as healthy, while 31% described themselves as sick or weak.

Marginalisation dimension

Urban poor communities are particularly vulnerable to exclusion as they often live in locations not served by state provisions and infrastructure such as waste collection, clean water and drainage facilities. The additional lack of economic stability, job security and land tenure reinforces poverty, further prevents access to WASH and fuels resultant ill health.



Story of Ran

About 300 km from Phnom Penh, Siem Reap is a developing province. More than a million tourists visit Siem Reap every year, which creates local employment. Along national route 6, there are high-rise buildings showing the economic growth of the area. However, behind these tall buildings, there is a poor scavenger community of around 24 households.

Mrs Ork Ran, a 50-year-old widow from Kampong Cham province, lives in a zinc house with her 16 children and grandchildren. She said, "I have lived in Siem Reap about 19 years because I escaped from my husband who used violence against me almost every day. One day during pregnancy with my 8th child, he hit and pushed me into water, and I contacted the authorities for help. After that, I decided to bring my children to Siem Reap, and find land from someone for temporary living." After living in this plot for about six years, she is not entitled to the land. She said "I do not know when we will be evicted. There were a lot of meetings with some NGOs, but there is no result yet."

"I could not afford to build a toilet. I spend 500 Riel a time for using the toilet located in the bus station near my house. At night, I use a chamber pot or plastic bag for defecation, then dispose of it at vacant land near my house. I am really disappointed with my neighbours as they always dispose of their faeces in the land near the pump well. Especially,



during rainy season, mud form that land flows to my house, and that the contaminated water was almost near my house floor, where we sleep." Because of that, she also raised that there was some illness such as dengue fever and scabies, especially affecting children in the area.

Regarding water, her family, 16 members, rely on filtered water which does not meet their demand. "I pay 30,000 riels per month for 6 months for that filter. My grandchildren insisted I buy it." Sometimes, her grandchildren drink raw water from pump well that gives them diarrhoea. Because there is no clean water system, the community

use water from the pump well for drinking and daily consuming. Moreover, because there is no sewage system, water from general use and washing flows into vacant land and becomes a muddy lake containing disposed faeces. She said that, "Because the land we live on is in a kind of slump, there is no water or sewage system."

As a member of the local sanitation committee, Mrs Ran joins meetings with the authorities and asks them to address the issues of water and sewage. She said, "There was a survey regarding the number of wells and toilets for each household, but there is no solution after that survey."







People with disabilities in Cambodia

Who are they?

WaterAid Cambodia uses the definition of disability set forth in the UN Convention on the Rights of Persons with Disabilities (UNCRPD), which emphasises a social approach rooted in human rights: "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others." In 2008, the Cambodian National Census organised its first inquiry into the disability population. Five types of impairments were addressed (regarding vision, movement, speech, hearing, and learning difficulties).

Disability is often underreported in Cambodia, and there is limited data available. The 2008 National Census identified 1.4% of the population as living with a disability. According to the 2014 Cambodia Demographic and Health Survey (CDHS), 10% of persons aged five and over have some form of disability. Difficulties in seeing, walking or

climbing stairs, and concentrating are the most common types of disabilities reported. 5% of household members have difficulty seeing, 3% have difficulty hearing, 4% have difficulty walking or climbing stairs, and 4% have difficulties with remembering or concentrating. Only 1% of the population has at least some difficulty with self-care and 2% have difficulty communicating. The prevalence of disability increases with age, from 2% among children aged 5-14 to 44% among those aged 60 and above. The prevalence of disability is 13% among people aged 35-59.

Marginalisation dimension

Exclusion may be perpetuated by the disability and WASH sectors themselves as a result of structures, policies and practices within organisations, and due to a failure to include people with disabilities in programme planning. Lack of participation by people with disabilities in programming and lack of general knowledge about disability among practitioners do not foster inclusive project design.

The stigma surrounding disability, discrimination by disabled people's families and communities and lack of motivation and initiative to promote inclusion remain among the most pervasive underlying factors in the continued exclusion of people with disabilities from WASH and other services.

The cost of installing accessible WASH facilities is a barrier for people with disabilities, for their families and for potential providers. Accessible facilities are considered a 'niche market', which may detract financial resources from 'mass sanitation' efforts. While a study (WaterAid, 2016) suggests that to make a school latrine accessible would amount to less than 3% of the overall cost, some non profit organisations have reported up to 30%. This indicates a lack of clarity and consensus on the reality of financial constraints.

A scarcity of technical WASH knowledge within the disability sector and of disability knowledge within the WASH sector is clearly a barrier. There are criticisms that certain designs are too expensive or inappropriate within the Cambodian context. The Ministry of Rural Development (MRD), however, has published a bilingual Khmer/ English guide to rural toilets with a section on adaptations for people with disabilities. This should help tackle bureaucratic inertia that is based, some have suggested, on assumptions that government lacks the technical knowhow.

Cambodia's governmental policy framework now acknowledges the rights of people with disabilities and there has been progress in supporting people with disabilities to realise these rights. The National Guidelines on WASH for Persons with Disability and Older People is in place to promote accessible WASH.

Story of Navy



Imagine you are a wheelchair-bound person with one paralysed arm, using one hand to wheel yourself along a muddy path in the rain, while trying to carry a hoe that you will need to dig a hole to defecate in.

"It was raining heavily and my stomach could not wait any longer so I had to wheel myself out under the rain," said Navy, a 29-year-old widow. "It was so difficult to wheel on the muddy path. My wheelchair got stuck in the mud along the way. When I tried digging a hole, I splashed dirty water onto myself. That was such an unforgettable moment for me. My shoulder hurt so much from digging the hole that I felt as if one of my arms was about to break apart from my body."

Navy and her six-year-old daughter share a wooden house with Navy's 58-year-old mother, 87-year-old grandmother and two brothers in a village in Kampong Chhnang province. Her father died when she was 18. Navy lost her ability to walk when she was four years old due to an illness that left one of her arms and both legs paralyzed.

With material support from donors, Navy's family had a toilet built behind her house. During the construction, Navy oversaw the work, concerned that the facility was being built in such a

way that would be inaccessible for her wheelchair. She gave the contractors some feedback but they did not listen to her or try to understand her needs at all. After the construction was completed, she tried to use the toilet by leaving her wheelchair outside. But the experience was extremely difficult, which compelled her to go back and practise the old way: by open defecation. Each time she needs to do it, she has to make a trip in her wheelchair out to the field with one hand, carrying a hoe, before making a return trip to clean herself at home afterward.

She said, "For me, health, sanitation, and washing are very important. When they were building the toilet they completely ignored the needs of people with disability like me. As a result, I still cannot use this toilet because the inside compartment is too narrow for the wheelchair to roll in. The toilet bowl is too high, making it impossible for me to move myself from the wheelchair and onto the bowl. The contractors did not bother to build a ramp for the wheelchair either. I told them about my needs when they were building the toilet but they responded that it could not be done. As a result, I still continue practising open defecation the same as before."

However, she added, "I am presently trying to save money to build another toilet, which I hope will help significantly reduce my hardship, especially when it rains or at night time. With a proper toilet I will not have to go out to the field anymore. It is an extremely difficult experience for me. I just want to have an easily accessible toilet to use like everyone else does."









People Living with HIV and AIDS

Who are they?

Cambodia has an estimated 67,000 adults living with HIV or about 0.43% of the population. New infections have been falling steadily since 1995, now reaching a steady low state of fewer than 1,000 new cases per year, while the coverage of antiretroviral therapy (ART) has been rising to 80% of affected adults.¹¹

Marginalisation dimension

Stigma and discrimination surrounding HIV and AIDS pose critical barriers to prevention, treatment, care and support programmes for people living with HIV and AIDS and their access to other social services including WASH. The manifestations of stigma and discrimination are gossiping, harassment, threats, physical violence from family members, discriminatory reactions among community members (including service providers) and internal stigma (self-loathing)¹² leading to a sense of hopelessness and poor mental health. These manifestations negatively impact on the livelihoods, housing

and education of people living with HIV and AIDS, pushing them into vicious cycle of poverty and social exclusion.

Story of Bopha

Bopha, appears skinny and pale, her eyes filled with anxiety. Already living with a chronic illness, she bears the brunt of both verbal and physical discrimination and numerous prohibitions that severely affect the daily life of her and her family. Living in a remote village in Kampong Chhnang province, she, her husband and son live with a chronic illness for which they have been discriminated against by a small group of fellow villagers.

"We have been living with HIV for a long time already. The disease bothers me physically so much especially when I do hard work. Each month we have to travel to the provincial town to receive medicines for me and my son. He is six years old but cannot speak because he was born without a uvula."



She earns income from harvesting bamboo. Her husband works as a motor-taxi driver. Because of their health conditions, several of their neighbours have discriminated against them with some hurling unpleasant words at them whenever they walk past in front of their houses. But much worse is that they have even prevented her family from using water from a communal pond in the village too.

"We are currently living on a hillside which is state property. The area has no water and even though we want to dig a well there is no water to be found as the ground is just hard and rocky. Our daily life is a hardship. It is hard to earn an income and get access to water because we have AIDS. Other people around us do not want to let us use the same water source as them. In the past they did not even wish to talk with us."



The authorities have intervened but some villagers remain unwilling to change their attitude toward the family. Concerned for their safety, the couple were compelled to persist with the hardship by walking long distances to fetch water from another source far away from home.

"We spend a lot of time collecting water. We spend up to one hour in order to collect four buckets of water because the small, rocky hole which has water is located far into the rice field and impassable to motorcycles. Sometimes some kindhearted villagers lend us a cart so that we can fetch a large quantity of water in just one trip. Otherwise, we could end up wasting the entire day



fetching water, preventing me and my husband from going to work to earn any money. We use the water for drinking, cooking, and washing dishes and clothes."

Recently, the majority of the villagers have gained access to clean water following the installation of a pipe network. Soon after, some of those families began throwing garbage or even excrement into the pond that Bopha's family still rely on for water. She has been very upset considering the long distance she and her husband have to walk to collect water and the pain their weak bodies have to endure under the weight of water they so badly need.

"A clean water network has already reached our village but we still cannot afford it because we are extremely poor. Our son is our main priority. He is sick and we have to save money for his treatment, and this is not easy since we are not able to earn much like other families. On average we make 10,000 riel (2.50USD) a day, but if the connection fee costs just around 100,000 riel (25USD), I think we can save up for the connection to be installed to our house in the future."









Communities Living in Challenging Environments

Who are they?

In Cambodia, an estimated 25-45% of the population lives in 'challenging environments' such as flood-prone areas, coastal areas and floating villages (WSP, 2011), impacting them to access better WASH service.

Many members of floating communities are stateless residents of Cambodia. They do not carry citizenship papers such as identity cards or birth certificates and as a result they face difficulties in getting access to education, employment and housing. Members of floating communities in Prek Toal, Mechrei, Twang, Kampong Prahok, and Peak Kanthiel generally rely on fishing as their main source of income, though some operate profitable shops. Families may own boats, fish cages, and televisions, given enough wealth.

According to the National Committee for Disaster Management (NCDM), around 18 provinces of Cambodia are severely affected by drought. In 2016, at least 260,000 families were in need of emergency water deliveries¹³.

During the monsoon season, Cambodia experiences flash floods usually after heavy rainfall. The provinces of Battambang, Kampong

Chnang, Kampong Speu, Kampong Thom, Kampot, Kandal, Pursat and Rattanakiri are regularly hit by flash flooding. The second type of flood, the much slower but prolonged flooding, is caused by the overflow of Tonle Sap river and Mekong tributaries¹⁴.

Marginalisation dimension

Most families living in floating communities want home renovations to improve floatation capacity, roofing, and walls, preferably done by a skilled carpenter or builder. The establishment of toilet and WASH facilities for these communities is considered a desirable renovation. For poorer families, building materials may be accrued gradually, and saving funds may be quite difficult. The cost of improved sanitation may be prohibitively expensive.

Story of Chenda

Imagine you cannot enroll your children in school because they do not have a birth certificate. You cannot get public services because you have no identification either. Your livelihood depends entirely on the water that you your wooden house floats upon.

"We migrated to Cambodia in 1970 during the American War," said an ethnic Vietnamese mother with five children, who requested to remain anonymous. "We fled for our lives and followed the course of the river. We thought we had escaped, but in 1979, we were again targeted [by the Khmer Rouge]. Many people like us [Vietnamese] died and we fled to Vietnam again but arriving finding no food, no relatives and no work. I decided to move back to Cambodia, I had nothing, so I worked in Phnom



Penh for a while in entertainment work. I had some savings and then moved to Kampong Chhnang with my husband. We decided to start living on the water again. We built a small house so we could start raising fish under the wooden platform while fishing on the river."

"None of my children can read or write. Schools refused to enroll them. Three of my daughters are now working in Phnom Penh and one of my sons is working in Vietnam now. They are all working in low-paying labour and earn barely enough to support themselves. They don't get any schooling; how can they earn good money? We are very poor."

Asked about her access to water and sanitation, she said in pure despair, "We live and depend on the water; we don't have a choice to get a toilet and clean water like people living on the land. I just survive day by day and wait for the day to die. I don't have any hope. I just pray to Buddha for the government to give my youngest son identification so he could be enrolled in school and find work." She spoke while pointing at her 13-year-old son. "It is difficult, I don't have a toilet, clean water and all, but I get used to it. The only issue I have with water is the factory dumping water into the river. Fish are just gone and when I used the water for cooking, my husband and I got sick. Also, this year, the river level is so low and there are no fish anymore. I don't know why, but it is raining as usual, but I heard there are dams along the river", she explained.

"The government asked us to move onto the land," she said. "They [the government] gave us some land, but I couldn't move. I don't have any other means of earning income if I don't live on the water," she continued.



Story of Sreisuong

The village sits on a flooded island where villagers travel by boat from one place to another. The flood occurs between July and December, followed by a dry season which last from January to June.

In the rainy season water is everywhere, spanning as far as an eye can see. Most of the houses here are built from wood with a zinc roof. The flood brings many difficulties. When a big boat passes by, it sends huge waves and the smaller houses begin to shake violently. When a big thunder storm comes, it sends

strong wind and water into the house. The families here pray often, fearing that their houses might collapse into the water.

Shortage of water is the main problem in the dry season since there is no well close to the house, so residents have to fetch it from a lake. It is less laborious in the rainy season as water is available right underneath the house. The village does not have a lot of difficulties with water, which they can collect from a nearby lake when the water level drops. But it is a different story when it comes to accessing clean drinking water, because a piped water supply network has not reached the village yet.

Ms Mak Srei Suong, 67, said, "For us, the flooding season is less troublesome than dry season. We can draw water from the lake to use for drinking, cleaning, washing, bathing, and other purposes. It is also much easier for defecating as we can just dump it from the house straight into the water or take a short boat ride to do it. We all know that doing so is unhygienic but poverty compels us to do it this way."

Although water is plentiful during the flood, a shortage of clean water remains an issue for the villagers. There is only one well for every 10 families. Ms Mak

Srei Suong and her fellow villagers hope to have access to enough clean water one day – along with better awareness about sanitation – to save time to tend to other businesses to support their families.

As far as toilets are concerned, the high cost of construction has been a major obstacle. The high cost is associated with the need to build a strong foundation in order to withstand the waves coming from passing boats. For this reason only a few well-off families are able to afford to pay for what is locally known as a 'flying toilet' inside their concrete houses. The description derives from the height of the entire facility, where the toilet compartment is located at the same level of the house and connected to a septic tank eight to ten metres below via a stack of concrete pipes. The higher the house, the more concrete pipes will have to be installed, and the more expensive the toilet will become. Building a toilet beneath the house is impractical as it will be quickly submerged during the flooding season.

The villagers hope to be able to resolve their predicament by one day having toilets that are both affordable and technically resilient to cope with the specific geographical conditions of their community.

Story of Samoeu

A Khmer adage says, "Rice farming relies on water; waging a war relies on rice". The phrase has a profound significance for farmers like Ms Nhep Samoeu and other villagers who make up a farmer cooperative in Angdaung Preng village. She and her husband have five children and make a living by farming rice.

"We are not a well-off family but we have to work very hard to save money from the farming and livestock raising in order to send our children to school. I have to support their studies until they complete at least 12th grade. Education is very important to me. It is an asset and a foundation for our family and the society, and I cannot be more delighted to see them go to school and become educated like other children," Ms Samoeu said.



Rice farming provides the family with much needed income to sustain itself, but water is a major problem facing them and other villagers. They rely heavily on rain water for farming and thus a lack of rain can severely affect their way of life. Every year, the village faces acute water shortages from February to June. During this time of year, the concrete-pipe wells across the village dry up and the villagers are forced to fetch water from a pagoda's pond located about 300 meters away.

Andaung Preng village has 138 families, most of whom rely on wells or the pagoda's pond for water for household use. Lack of awareness about safe water consumption and usage also remains a big issue among the local residents there. Most families have a habit of drinking surface water, saying that it is cooler and tastier than boiled water.

A severe drought hit the village hard in 2015. Families in the village had to make three to four trips each day to collect water from a nearby pagoda's pond for their household use. The water shortage became very acute. In the wake of that incident, the villagers desire to have a proper irrigation system in their community in order to assist them with farming and to improve their access to water for household use –

particularly for the children. They look forward to seeing a treated piped water supply network arrive in their village as it did in the neighbouring ones. In 2019, following the government's announcement about the dry season being potentially drier than normal, the villagers hope that the local authorities and other stakeholders will take necessary steps to respond to their needs in a timely manner.







LGBTIQ (lesbian, gay, bisexual, transgender, intersex and queer)

Who are they?

There is limited documentation of diverse sexual behaviours and gender identities in Cambodia. There are some studies on same sexual interests between men in 1950s and onwards and some newspaper reports of transgender females in rural Cambodia from the 1950s to the 1970s. Most behavioural studies starting in the 1990s, motivated by the global HIV epidemic, resulted in raised awareness and discussion of sexual orientation and gender identity (SOGI).¹⁵

Cambodia's LGBTIQ (lesbian, gay, bisexual, transgender, intersex and queer) community enjoy comparative visibility, with a wide range of LGBTIQ events taking place and with select support among members and institutions of the Cambodian government. Cambodia does not criminalise consensual same-sex sexual activities but does not offer positive legal protection for LGBTIQ people either. For example, there are no prohibitions against discrimination based on sexual orientation or gender identity, no sanctions for violating the rights of LGBTIQ individuals, and no legal recognition of same-sex partnerships.¹⁶



Marginalisation dimension

Compared to general populations, LGBTIQ experience higher rates of violence, including domestic violence perpetrated by family members.¹⁷ According to Being LGBT in Asia: Cambodia Country Report, LGBT people face various issues including:

Family pressure: Negative treatment of LGBT people by their families, ranging from forced marriages, attempted 'cures' for being LGBT, family rejection and controlling behaviour.

Education, employment and work: Dropout rates among LGBT youth are higher than the overall school-going population, due to bullying by peers and economic hardship from family rejection. LGBT Cambodians do not feel comfortable being open about their sexual orientation in the workplace and note limited job opportunities due to discrimination and exclusion.

Harassment and assaults: Harassment and bullying may be part of everyday life among LGBTIQ community members. For example, according to Sou Sotheavy, a transgender director of the CSO Network Men Women Development, "When they see us walking in the street, they laugh at us, and call us bad words [...] and fight us. And they look at us as if we are strange people." ¹⁸

Health including HIV: HIV is a key health issue for MSM (men who have sex with men) and transgender women in Cambodia with





higher reported rates of infection and risk. MSM and transgender persons are often treated as a homogenous group, ignoring their specific needs. Stigma and discrimination in the health sector exists towards MSM and transgender persons.

Negative stereotypes in media: Cambodia's media portrays LGBT people in a negative way, particularly transgender women.

Story of Yat

Yat is a person who has a partner from the samesex. Each time Yat needs to use a public toilet, she always asks herself which one to enter in order to avoid being discriminated against by members of the public. It isn't a problem for her when she is at home, where she has her own bathroom. But whenever she goes out she rarely avoids people's raised eyebrows or prejudice about her because of the way she looks, dresses, and the fact that she is accompanied by a female companion. In a social context where awareness about same-sex partnerships remains limited and where prejudice about sexual orientation is widespread, public bathrooms continue to be designated by the traditional identities – male and female. Yat recalled her experience by saying, "Whenever I entered a female bathroom, some people were surprised or screamed when they saw me dressed like a man. They felt embarrassed and left the bathroom without using it."

Back at her home village, Yat is very well treated by most of her fellow villagers. But a small number of them sometimes refer to her as 'neither a man nor a woman.' Even her own brother often

mocks her by dressing up and acting like a woman. Yat said she could not help it because she was born and grew up feeling the way she feels. She only hopes that one day the discrimination and the talk about her just stop.

Yat said she is not upset, nor does she regard the treatment she receives as a big deal. She said she just hopes for future construction of public bathrooms to be more inclusive, taking into consideration the needs of same-sex partners and making it more accessible to people of all kinds of social background.





Rural Poor in Cambodia

Who are they?

According to World Bank Rural Population data, in Cambodia there are approximately 12 million people living in rural areas in 2017.¹⁹ Of the total 3.16 million households countrywide, 2.5 million households were rural. These numbers confirm that Cambodia is still overwhelmingly rural.²⁰ Additionally, 90% of poor people in Cambodia live in rural areas and 66% of people living in rural area depend on agriculture for their livelihood.²¹

Poor households are larger, with an avergage of 5.6 members; while the national average is 4.5. Avergae years of education has changed little among poor households, from 3.1 years in 2004 to 3.3 years in 2011 according to ADB 2014 Poverty Analysis report. Consumption is lower in households whose working-age adults have fewer years of education.

Additionally, female-headed households with more than two children and no adult males are much more likely to be poor and the girls more likely to be working to support their families. Households headed by women are likely to be more vulnerable; they are also likely to experience shocks differently than male-headed households, largely due to social norms and more limited economic opportunities and income. Importantly, a decline in household income poverty rates does not necessarily translate into improved wellbeing for women and girls if resources are not shared equally within the household.

Marginalisation dimension

One of the most important determinants of poverty is location. Poverty is overwhelmingly concentrated in rural areas, and the gap appears to be growing. Limited social services (including WASH) and opportunities in rural areas might be a key determinant of poverty. Due to the absence of a comprehensive national social protection system, poor and near-poor people living in rural areas borrow money in times of need as a coping strategy for an array of shocks ranging from the price hikes and job losses associated with the food, fuel and financial crises of 2007–2009, to natural disasters like Typhoon Ketsana in 2009 and the devastating floods of 2011 and 2013.²²

Story of Sreymom

Sreymom is a 26 years old farmer and a village health volunteer, who lives with her ageing mother and nephew.

The strength of their desire to have clean water was on full display when a group of impoverished villagers decided to pool funds among themselves in order to get water for use for farming and household needs all year round. They believe that before getting help from others they must help themselves first. Nonetheless, their effort is unlikely to be sustainable without intervention from other stakeholders.

She has signed up to volunteer in her community, and together with other volunteers she has helped organise groups to try to address the issue of





water for farming and daily use of their community members. Their action has been prompted by the chronic shortage of water for farming and daily needs. The issue has been particularly acute for woman-headed households, the elderly, and small children in terms of consumption and maintaining body hygiene.

"I decided to drop out of school when I was in 9th grade at Phum Da School in 2008 in order to help look after our rice farm and my mother, who is in poor health. Our living standard has become much tougher since my father died in 2016," she said. She is the youngest among four siblings. Her older siblings have all got married and moved out already. Her mother is 68 years old and often sick. Srey Mom herself also struggles with poor health, and that is why she decided to quit school to return home.

"The most difficult problem facing our village is the lack of clean water and sanitation awareness. In Phum Kangkep, our village, the ground is made up of clay and rocks, which make it extremely hard and makes it difficult to find potential water sources. Most of the wells in the village either dry up quickly or have little water left. The treated pipe water network has not reached our village yet. Aside from rice farming, I have volunteered to increase health education in the village by actively joining the local authority, local network and organisations that are helping our village and neighbours."

Srey Mom said the villagers have recognised how precious water is and therefore they are always conscious of using it extremely frugally. They are careful not to waste too much water on laundry, bathing or other types of cleaning. Usually, during the rainy

season, her family and those across the village make sure to store rain water for use in dry season in case the village wells and ponds dry out. In case of severe water shortage, the villagers are forced to buy water from private vendors at 2.50USD to 5USD per 300L jar. But sometimes the vendors themselves have no water to sell when nearby wells, streams and canals dry up. For drinking, Srey Mom buys bottled water instead of using well or pond water, which contains metallic or other hard residues harmful to health. This is because her family has not yet bought a water filter for their household.

Her community is home to 400 families, who face a chronic water shortage every year. Last year, the village experienced a month-long drought, prompting the village chief and local authority to launch a water distribution drive for the villagers. However, the distribution exercise did not reach everyone as intended and many had had to put up with the hardship caused by the water shortage. In light of this experience, the villagers wished that the local authority and other stakeholders would respond with technical support and cooperation to help make clean water sustainably available for their use in the future. They are particularly interested in getting connected to a clean water supply network that is affordable, allowing the poor villagers to access the water they badly need.

Recently, the villagers have agreed to pool their funds with the aim of paying for outside contractors to dig a canal and buy two pumping generators. But the money raised has not met the amount required since many families are poor and don't have money to contribute to the fundraising. Those who have made contributions still have not received clean water because there was no money to buy diesel to operate the generators. They are hoping that the local authority will assist them with the diesel as they did in the past. They believe that a cooperative supply of clean water is the way to face their challenges as it reflects the solidarity of the community members in addressing their common problem.



Story of Yeout

Ms Pen Yeout, 49, is a very busy woman. She looks after the household, works as a farmer to earn income for her family and is also the deputy village chief at the same time. In addition to these duties, like other widows in her village, Pen Yeout has another important assignment: collecting water for daily use.

"Widows like me shoulder responsibilities no less than men. But our tasks would be much easier if we had a clean piped water network running up to our house. Then we won't need to worry so much about fetching water. It can certainly help lessen our burden and save our time too," she said.

She said that half of the women in her village are widows due to divorce or the death of their husbands. In addition to working to generate income for their family, these women are responsible for taking care of household chores, rearing their children and collecting water for daily use. In the dry season, she said she and other women spend many hours collecting water because they do not have any means to transport large quantities of water in a single trip. Sometimes some kind-hearted villagers would lend their motorcycle for them to transport water but when such an offer is not available the women have to walk long distances to fetch the water.



She said her life would be a lot better if she had enough water for daily use. She wishes the same for the other women too. She said better access to water will give them more time to concentrate on other tasks or farming to increase income for the families. "It will help widow families like me build a more independent lifestyle unlike in the past when we used to rely so much on men. We can also use the time saved from the water collection to do something more meaningful for us too."

Story of Heng

Heng is an orphaned young girl. She and her three younger brothers live with their grandmother. The young girl is industrious at her study. But since she was a baby, she rarely experienced the love or care of her parents. Her father died when she was still a toddler. Her mother spent most of her time conducting business far away from the home village. She had been away for too long until one day she was gone forever.

Heng's grandmother recalled, "One day I received news that my daughter fell gravely ill and I was asked to go to see her for one last time. I was overwhelmed by worries as I did not have the money to make a long trip. A moment later I received a phone call telling me that my daughter had already passed away. My heart was suddenly filled with profound sadness for my five grandchildren who had just become orphaned with an uncertain future ahead of them."

Under her grandmother's care, Heng was able to continue her study. At school, she has received close attention from her teachers. Some of her classmates have discriminated against her for the fact that she is orphaned. But Heng never gives up on her struggle to study and cherishes a desire to complete schooling to become a policewoman and serve the people in her community.

At 14, she still lacks awareness about sexual reproductive health or about how to handle herself at the time when menstruation starts. She is shy



and not so talkative. Every day after returning from school, she usually joins her neighbours in going out to the rice fields to find snails to cook for food. After dinner, she immediately tends to her homework and rarely has time to communicate with her grandmother. Like most people in her village, she drinks water straight from the well without boiling it first. For defecating, the family uses a latrine with thatched roof and walls. With her advancing age, Heng's grandma said she is not capable of understanding everything relating to health and sanitation because her main concern is the livelihood of the family. However, she hopes that education will lead her grandchildren to find a bright future and live a healthy life.





Older people in rural areas

Who are they?

The 2008 census showed 6.34% of Cambodians were aged over 60. This population is increasing and is expected to nearly triple in the coming decades. Many older people, mostly women, are direct caregivers of their grandchildren due to the migration of adult children. Around 25% of older people live below the poverty line and cannot afford to pay for water services.

Marginalisation dimension

Older people in Cambodia are usually thought to be cared for by their family and are therefore a largely excluded group in development. There are many frail older people experiencing limitations associated with the ageing process, including failing eyesight and reduced mobility, which affects their access to WASH.²³

Story of Chroeun

Ms Peng Chroeun, 65, and her husband, Mr Hin Heang, 73, live together in a hut in Lech village, Chronauk commune, Kampong Leng district. Water and sanitation are the two main issues facing the villagers, especially elderly people who do not have children to help look after them, as in the case of this couple.

"Currently we live on land that belongs to our children, and we make a living by growing some vegetables and raising chickens. But this year, we have noticed we have become physically weaker. I cannot go out to do farming work like I used to and my husband is deaf and has just recently had an operation to remove his appendix as well. We are aging and weaker by the day. This is



all we can do to stay alive as our children are not well-off either. Everybody has their own family to look after and provide for as well," Ms Chroeun said.

Every day the couple buys water from private vendors, who deliver by cart. Sometimes the vendors refuse payment out of pity for the old couple. When they need to defecate, they have to go to the nearby bushes or to their backyard. Ms Chroeun said the practice is extremely difficult due to her frailty, which sometimes can cause her to easily trip over. Without a proper toilet, she has to dig a hole in the ground in order to defecate. But it is not easy for her to squat and get up due to a chronic pain she has in her knees.



"The difficulty is indescribable for us. Everything requires money. Going to the hospital requires money, so does building a toilet and buying water. But we no longer possess the physical strength we used to use to earn money. All we can do to survive is grow a few crops, weave mats, raise chickens, and sell mangos and cashew nuts. We are trying to stay alive on our own without having to bother our children too much," she said.

Their village has about 500 families. The villagers rely on a total of 10 wells for water for daily use. The village has 102 elderly people, who are compelled to work to survive since they do not have children or grandchildren nearby to look after them or have been abandoned



by them altogether. Due to a lack of money to buy filters or purified water, the villagers usually drink raw water they collect from wells or rain. Without family to help them, the elderly face a daunting task of collecting water from the wells, which are located far from their houses.



Ms Chuon Nen, 59, and her 66-year-old husband, Mr Chap Choy, are another example. They have 16 children but eight of them have unfortunately died from various illnesses. The couple earn a living from farming rice, growing vegetables and raising some livestock. Water is the main challenge they face to maintain their livelihood. Ms Nen said she hopes that one day her village will have an elderly centre where old people like her can receive healthcare

and other care free of charge. Access to clean water and sanitation is of utmost importance for them and the entire community. Such a facility would significantly help ease the hardship of the villagers, especially old people who are left with the burden of raising and caring for young grandchildren after the children's parents migrated to work in factories or construction sites in the provincial towns and cities.





People with limited literacy in rural Cambodia

Who are they?

Cambodia has made gradual progress in improving the literacy rate of the adult population aged 15 and above. The Cambodia Socio-Economic Survey 2015 report shows that the adult literacy rate has increased up to 80.5% since the fall of Khmer Rough.²⁴ However, literacy is still a challenge for girls, the rural poor and minorities.²⁵

Marginalisation dimension

There has been no study conducted to understand the consequences of the lack of basic literacy skills among rural Cambodians. Cambodia's historical legacy of war and poverty means the poorest of the poor in rural Cambodia typically have not received the basic primary education that would enable them to be able to read or write. The limitation of their literacy skills hinders other areas of their lives including access to information, education and employment.

Story of Siek

Ms Prak Siek, 48, is a widow with two daughters. She has a strong desire to see both of them receive high education, get a job and have a better life than the one they live today. For that goal, she clearly understands the importance of her daughters maintaining good health. She is fully aware how important it is for them to drink only clean water and have access to a proper toilet – all for the sake of their health and safety.

The mother and daughters live in a zinc-roofed wooden house in an area which experiences flood and drought for six months every year. Their house is typical of the area with the front section perched on a dyke and the rear extended into the canal and propped up by stilts that stretch eight metres below. The height is the main reason why many villagers do not want to build a toilet inside their houses due to the high cost involved. The higher the house, the more concrete pipes they need to install to form a septic tank for the toilet.

"Defecating has been the main difficulty facing our family since we do not have a toilet. In the rainy season, we just dump it straight into the water below. But in the dry season, we have to find a spot behind bushes or row the boat up to 150 metres from the house in order to defecate privately. We have to be patient and wait until dusk in order to avoid being noticed.



In the past, we didn't have to take a long trip to do it because there was still plenty of forest nearby. Now we have to go a bit further in order to find a quieter place, especially in dry season. In the rainy season, we can just do it on a boat near the house," says Ms Siek.

"Access to information about this subject is important for my family but we rarely receive it when the local authority comes to disseminate information about health and hygiene. They usually conduct such awareness campaigns only when the water subsides; at which time I am busy working as a labourer in the field to earn an income. They rarely give advance notice before they come and I cannot read either," she says.





Ms Siek has learned about the importance of drinking boiled water through a radio broadcast she and her fellow villagers listen to regularly while out fishing at night or labouring in the field during the day. She said that because she and most villagers cannot read they are often unable to comprehend printed educational materials. Even though the materials are usually elaborated upon by those who brought them, she said the villagers can understand very little and often forget everything by the time they get back home. Therefore, she said it is most preferable that these education materials be delivered in image, sound, or video format to help the villagers memorise their intended messages better.







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