

Kingdom of Cambodia

Nation Religion King

Cambodia Country Report

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Ministry of Social Affairs, Veterans and Youth Rehabilitation Ministry of Health Ministry of Labour and Vocational Training

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I. Background

A. Situation

The world is moving to an ageing population. The demographic shift is taking place at a different pace in every country including our region. Declining fertility rate and increasing longevity are the main associated and driving factors to this global trend. As highlighted in the report released by UNFPA in 2012 "Ageing in the 21st Century", increasing longevity is a cause for celebration as it is one of the greatest achievements of humanity. But population ageing will also pose new challenges to individuals, families, societies and the global community. The rise of the elderly will be associated with an increased need for health, care, retirement and living supports, and will demand different intergenerational relations.

Population ageing is an important emerging demographic phenomenon in Cambodia, warranting a strong multi-sectorial policy and program response to deal with many significant implications for the elderly in particular and society at large. Longevity by itself is a fact to be celebrated but for the increasing vulnerabilities of the elderly arising out of poverty, rural living, income insecurity, illiteracy, age-related morbidity, feminization, dependency, decreasing support base, etc. Today's older Cambodian represent 6.3 present (848,000 peoples), respectively 5.3 for male and 7.3 for female, most of them live in the rural areas. These older people are survivors of three decades of hardship and conflicts. They live in rural areas. They have small plots of land to survive and are very unlikely to have a regular income. Among them, 25 percent are living under the poverty line. Currently, the increasing numbers of older people are becoming concerned for primary caretakers from their grandchildren because young adults are more likely migrate to work outside their homeland. Divorce, parental death, and family supports are still the primary safety net for older people. Support care system is a challenge by migration, disease, and death. These factors leave older people much more vulnerable¹.

Ageing population in Cambodia is growing at a steady pace as the result of falling fertility rate and improvement in the life expectancy. Currently one in every four Cambodians is aged over 60. In the next 20 years, the number of older people in Cambodia will double and will triple by year 2050. If the fertility rate continues to drop and the life expectancy of the Cambodian population continues to grow, by year 2070 older people will outnumber younger people2.

National census 2008 revealed that Cambodia adults, aged 60 years and older accounted for 848,000 people, 6.3 present of the population; respectively 5.3 for male and 7.3 for female. By 2015, the older adult is forecasted to reach 1.1 million, 11 present of the total population; respectively 5.3 for male and 7.3 for female. By 2025, the figure will be quadruple, 1 out of 4 the Cambodian population (26% of the total population) will be more than 60 years and above.

Old age is associated with declining health and disability, increased risk of chronic noncommunicable diseases such as joint pain, high blood pressure, diabetes, heart disease and dementia. There will be reduced capacity for self-care such as bathing, dressing, transferring, using the toilet, eating, and walking, meaning fewer older people will be able to live independently in their community.

¹ http://www.ncdm.gov.kh/

² http://www.ncdm.gov.kh/

MoSVY's responsible for providing basic services and protection to the elderly currently lack the necessary information, manpower, facilities and equipment effectively respond to the needs. Information gathering from all relevant stakeholders including local and international pertners who have been participating and contributing activities for older people. For instance, the health care delivery system in Cambodia currently does not sufficiently cater for older people's needs. The elderly are less likely to receive treatment than the young, even though they carry a greater burden of diseases.

To date, Ministry of Health (MOH) has committed action on ageing and has helped in evolving crucial policies and initiatives. MOH has the policy to provide health care and health promotion for all population in the country. Through health personnel and existing health facilities, MOH provides curative/ hospitalized care, preventive and promotion through public health service providers in collaboration with international and national organizations. Responding to the policy MOH has been constructed health elderly care centre in a national teaching hospital, Khmer-Soviet Friendship Hospital, and it is scheduled to be completed in year 2015.

In 2015, National Social Security Fund is under technical of Ministry of Labour and Vocational Training is going to run the Pension Scheme for all people who are under the Labour Law.

All the dynamic changes the country has experienced, relatively little attention has been given to the situation of Cambodia's older people. But we believe this situation is gradually changing. The government, notably MoSVY, MOH and MLVT acknowledges the demographic shift and is determined to take action now to respond to the concerns and needs of the present older people and to invest in the future longevity dividend.

The Government of Cambodia is under the wise leadership of Samdech Hun Sen, Prime Minister was announced his own political platform of the fifth legislates and the "Rectangular strategy phase III "especially its central theme of "Growth, Employment, Equity and Efficiency" toward for transform the nation to move forward as became a developed country in 2050.

B. Current Challenges

- Cambodia doesn't have the national security fund for elderly;
- Health problem of the elderly is likely to be related to chronic illness, mental health and non-communicable diseases;
- Majority of older people have limited knowledge. They have traditional idea and less work, engage only in housework and pagoda activities. They feel uncomfortable with poor sight, difficulty of hearing, travelling. These make them lost opportunity participating in the community development activities, sharing their experiences and problems with their local communities where they lived;
- Older people, who live in rural areas, have low education, limited knowledge of hygiene and health;
- The key challenges for Cambodia are financial supports. The mechanism to fund comprehensive and extensive policies such as universal pensions is not currently in place. Conceptual and technical assistances from the region would be highly beneficial.

LAWS AND POLICIES INSTRUMENT ON ELDERLY

A. The Constitutional of the Kingdom of Cambodia

Article 72: The health of the people shall give full consideration to disease prevention and medical treatment. Poor citizens shall receive free medical consultation in public hospitals, infirmaries and maternities. The state shall establish infirmaries and maternities in rural areas.

B. Sub-degree of Government on Elderly

- Government issued sub-degree No.40, dated May 07, 1999 on Cambodian National Committee for Elderly through Preparing International Old-Age's Day and help old people to focus on elderly welfare promotion, held the old age's day every year and cooperate with national institutions, organizations, international organizations, internal/external NGOs and other charities for supports.
- The Royal Government of Cambodia has issued a sub-decree dated 15 July 2011 on the establishment of an inter-ministerial Committee for the elderly which is charged to reviews policies and framework on ageing. The Cambodian National Committee for Elderly is mainly tasked to maintain the spirit and celebration of the International Day for the older people, to promote, develop and steer ageing sensitive policies and framework, to put in place structure and programs that are adapted to the social and economic context of the country to address old age needs, and to coordinate the implementation specific measure ensuring an equitable protection to older people and to promote best practices.
- Circular No.15, date 15 September 2000 on action to improve actions to old people in communities with targets to spread involving institutions and local authorities on government policies for healthcare, living improvement of families, communities and to give opportunities to join all social work. To make solidarity for old people.

C. Policies instrument

- Policy on Pension Fund for veterans and civil seven endorsed in 1987, Ministry of Social Affair Veterans and Youth Rehabilitation implement the policy pension fund to retired government official, and government official who are frail and according the national economic development.
- National Policy for the Elderly (NPE) adopted in 2003. These policies need to be reviewed to reflect socio-economic and demographic changes of the country.
- MOH, adopted national policy on elderly and disability care in 1999,

II. Social Participation and Contribution for Elderly

A. National Committee for Disaster Management (NCDM)

As the national committee for disaster management have play an importance role in working to support people who affected from evacuated and disaster which have been living in very hard condition as don't have proper shelters, have limited access to water and health care services. They have also challenging with food shortage because they have brought nothing with especially elderly and children. Moreover, NCDM also response to the needs of affected people for short and medium term, government and all stakeholder should hand in hand working on relocated camp and apply camp management strategy which insure affected people are able to live in healthy conditions: good environment and separated shelters, access the basic need services: water, sanitation, health and education³.

³ http://www.ncdm.gov.kh/

B. Civil Society Engagement

1. Cambodian Red Cross (CRC)

The Cambodian Red Cross (CRC) is the largest humanitarian organization in Cambodia. Established on the 18 February 1955, it is officially recognized by the Royal Government as an auxiliary to the public authorities in humanitarian services to relieve the sufferings of the most vulnerable⁴. CRC's under the wise leadership by **Lok Chumteav Kittiprittbandit Bun Rany Hun Sen**, President of the Cambodian Red Cross, has actively been involved in alleviating the



standard living of older people who have nothing to depend on and of people everywhere who are faced with natural and other disasters addressing their daily needs in a timely fashion in line with RGC national policies and programs.

Today, the CRC delivers a multitude of programs including health care, promotion of the Movement's Fundamental Principles and Humanitarian Values and Disaster Response and Preparedness activities throughout the country and contribute to poverty reduction of the most vulnerable in Cambodia including elderly and children by becoming a leading humanitarian organisation. Communities are reached through a comprehensive network of 24 branches covering all provinces in the Kingdom, with some 126, 318 members; and a network of more than 5,700 Red Cross Volunteers (RCV) and 5,300 Red Cross Youth (RCY) all working to deliver services and implement programs to meet the needs of those most vulnerable in our society⁵.

2. Help-Age Cambodia and Relevant Development Partner

Help-Age Cambodia to address the practical needs of older people with the establishment and replication of OPAs and piloting a number of approaches to sustain older people's livelihood, to

increase their access to health and care and to provide a fair participation and space in the development process. Steps towards long term solutions for improving the conditions of older people in Cambodia are also discussed in order to be prepared for significant grow of the older population. Thought cooperation with Help-Age Korea and Ministry, Help-Age with counterpart with provincial department commune level was conduct a new model of care based on the Korean model which is built on community-based social capital, through the collaborative care among families in the neighbourhood and through



community based services, as an alternative to the traditional elder-care model that relies on one's own children which is increasingly weakened with the migration of adult children migration and increasing participation of women in the productive work by keep older persons as healthy and independent as possible so they can delay falling into dependency through community based care services and will target the most needy older persons who have non-communicable diseases, are

⁴ 5th General Assembly Summary Report, 2014 of Cambodian Red Cross

⁵ http://www.redcross.org.kh/

frail or homebound in the Northwest of Cambodia with include Battambang, Bonteay Meanchey, Pursat and Seim Reap provinces⁶.

C. Community Centre

Pagoda is one place of building spirit and education for citizen by performs a number of functions in Cambodian life through the monks. Mostly, elderly are participated in all formal village festivals, ceremonies, marriages, and funerals. They also might have participated in ceremonies to name infants and in other minor ceremonies or rites of passage. At the same time, they are consulted about important decisions such as marriages, building a new house, or going on a long journey. They are believed to be able to foretell future events and to determine lucky or unlucky days for various activities. Currently, total of 4600 pagoda was built in the countryside where the elderly can access for mediation and enjoy together for discussion and consultation about the community development and Buddhism with older people in community in everyday and every weekend.

Moreover, in the Northwest of Cambodia by supporting from Older People Association Coalition, community chief was selected volunteers in the communities are delivering the service. Services offered include: Companionship and emotional





support - Housekeeping: cleaning, cooking & washing - Personal care: assisting in eating, bathing, dressing- Escorting to health facilities, temple, market, bank, etc

D. Private Sector

Private Sectors are played in important role in talking care of the elderly and homeless older people to provide food cloths materiel building home and provide services social welfare and heath as well as during the flooding, disaster and social problem.

MoSVY, incorporation with private companies, banks and television stations has been collecting materiel and money to building houses for poor veterans and people with disability and establishment the centre veterans with disability to support the veterans and their families in Phnom



Penh municipality, Kampong Spue, Kampong Cham, Prah Vihea and Banteay Meanchey etc. **Example 1:**, one of investor from USA was built the mental health centre for elderly. **Example2:**,

⁶ Mid-term report of Help-Age Cambodia, 2014

Lok Chumteav Hun Mana, director general of Bayon Radio and TV stations, and president of the Bayon Foundation, created a Goddess house program and has so far built hundreds of goddess houses for older people. Her engagement in humanitarian activities is seen as a model for all people at the present time as well as for future generations to get involved in supporting the well-being of older people in Cambodia.

F. E. University's Student

YES Team who are studying at National University of Management incorporate with many

university students in Cambodia was organized the Elder Garden Project (Young + Elderly=LOVE) in 2014 that make for elderly smile, joyful and get love from young people by collecting elder who stay at difference home in Phnom Penh to come together for playing game, shear value experience to young people and unlocking the barrier between home and home elderly by presenting to companies and microfinance for receiving support. Moreover, they also have plan to organize the study trip between elderly who are living in Phnom Penh city to visit older people in rural area for exchange the



perspective, idealism and build relationship among elder and young people for better understanding and keeping spirit of the nation for living in peacefully, connectivity and solidarity.

III. Future Plan

- Develop "Law on National Social Security for The Citizen of the Kingdom of Cambodia " to expand the social security and welfare service on general population, including the elderly.
- Review the National Elderly Policy, developed in 2003, with the intention of developing a stronger policy document that can be efficiently implemented nationwide.
- Develop social security system for Cambodian people by development of a comprehensive social security system covering layer on the scope of the people of all segments of society as a core of social safety nets through create a working group to study the law on social security for citizens of the Kingdom of Cambodia, organize meetings and workshops to monitor and review with the participation of the relevant Ministries, Institutions and NGOs, prepare document form to pass inter-ministerial and request decision and approval from the government and widely dissemination.
- Enhance elderly welfare by promoting activities of Cambodian National Committee for Elderly and mechanisms for the implementation of policies for the elderly and organize elderly day 1 October each year, development of community elders and care for elderly family, continue to strengthen and expand the activities of elder people's associations (OPAs) in communes and Continue to promote care for older people in the family, encouraged to religious communities and training service provider to provide service to elder people.
- MOH continues to revise and update the policy of elderly health care.
- MOH continue building and strengthening capacity for health and non-health personnel at all levels, establish health elderly care system and network for the country.

- Strengthen cooperation with ASEAN member countries, Japan, China, and Republic of Korea on programs caring for the Elderly.
- The NSSF of MOLVT has implemented health-care insurance in 2013, while the pension scheme will be implemented in 2015. The plans to implement the pension scheme (2011-2020), are as follows:
 - Possibility of creating pension scheme: An analysis, based on the data from the social economy, plays an important role in creating pension scheme and preparing working group to study on the roles, functions, and legal regulations.
 - Capacity building for effective and convincing implementation of the pension scheme through participation and organizing conferences, study visits and local and international trainings.
 - Prepare legal regulations essential for the implementation of the social scheme such as defining modalities, registration procedure, contribution rate, and benefits, etc.