



Cambodian Red Cross

Cambodia Healthy Ageing Pilot Project

Note of field Rapid Assessment, Prey Veng Province

6th June – 8th June 2017

I. Key informant interview

1.1 Provincial Red Cross Branch

Date: 6th June 2017

Location: Prey Veng Municipal

Name of Interviewer: Mr. OM Vutharo, Senior Program Admin-Finance Team Leader (SPAFTL) CD/NCD Health Sub Department, CRC NHQ.

Name of interviewee: Ms. Uk Meas Solina, Director of Provincial Red Cross Branch, contact no: (012-772-219)

Note of interview

1.1.1 Health situation:

- Poor hygiene among target group
- Health status is not so good among women but they are not considered themselves as it is important so they do not care about their health and do not want to go to the Health Center for accessing services.

1.1.2 Policy of Healthy Ageing:

Red Cross Branch has set up policy to support the elderly who are poor and do not have families to take care and people with disability (PWD). They are supported by RC Branch such as housing, Latrines, food relief, housewares and some small amount of money, etc. In 2016-2017, Red Cross branch provided 52 households, and built up 46 latrines.

1.1.3 Recommendation:

- Information should be sharing each other among involved people in order to response to the needs of target beneficiaries and modifying action plan on time and effectively if necessary.
- Good collaboration with involved Provincial Department is a key action for all of us to run the project smoothly and successfully.

1.2 Provincial Health Department:

Date: 6th June 2017

Location: Prey Veng Municipal

Name of Interviewer: Mr. OM Vutharo, Senior Program Admin-Finance Team Leader (SPAFTL) CD/NCD Health Sub Department, CRC NHQ.

Name of interviewee: Dr. Horn Rith, Deputy Provincial Health Department, contact no: (011-383-871)

Note Interview

1.2.1 Health situation:

- Number of pregnant women who get iron and tetanus vaccination before and after delivery was lower than previous year due to stock was ran out.
- The technical capacity of laboratory services in referral Hospital is limited on diseases diagnostic.
- Some provincial public and private hospitals have not yet applied properly against the guidelines of blood transfusion.
- 2 NGOs (Vouchor and Fred Hollow) supports 2 Referral Hospitals in Neak Leoung and Provincial Hospital for Eye Care program. In 2016, there were 724 patients who got eye surgery.
- Health and Social Development “HSD” supports Diabetic and tuberculosis program in Provincial Hospital and 1 Referral Hospital in Pearaing District. In 2016, there were 36 patients are under treatment category 1, and other 97 are under treatment category 2.
- Heart disease is significant diseases among the others. In 2016, the number was shown 1131 patients are under treatment at early stage when other 334 are complication status.
- Small number of cancer diagnose was reported. However, 2 patient have been treated at Provincial Hospital for liver cancer, 2 patients have been treated on breast cancer and other 1 case for uterus cancer.

1.2.2 Policy of Healthy Ageing:

- There is no any specific policy on Healthy Ageing. However, NCD guidelines were developed in general for every patients.

1.2.3 Recommendation:

- Close collaboration with the involved Provincial Department or other partners and clear work plan is highly suggested.

1.3 Provincial of Social Affaires Veteran and Youth Rehabilitation:

Date: 6th June 2017

Location: Prey Veng Municipal

Name of Interviewer: Mr. OM Vutharo, Senior Program Admin-Finance Team Leader (SPAFTL) CD/NCD Health Sub Department, CRC NHQ.

Name of interviewee: Mr. Men Tha, Head of National Social Security Funds Sub Department, contact no: (012-764-899).

Note of interview:

1.3.1 Health situation:

- Diabetic, Blood pressure, Respiratory chronic, and bone disease are common diseases in place.

1.3.2 Policy of Healthy Ageing:

- The Provincial Social Affairs Veteran and Youth Rehabilitation Department performs the Elderly Center in 2 communes in one district in order to create the committee for older people who would like to be a member. The membership monthly fees (1,000 Riels-2,000 Riels) is a main resource mobilization for the committee to preserve for supporting the member who will fall sick and when she/he died, the families will get 250,000 Riels each case.

1.3.3 Suggestion/Recommendation:

- Commune council is main resource in providing data related elderly people accurately.

1.4 Provincial of Women Affairs:

Date: 7th June 2017

Location: Prey Veng Municipal

Name of Interviewer: Mr. OM Vutharo, Senior Program Admin-Finance Team Leader (SPAFTL) CD/NCD Health Sub Department, CRC NHQ.

Name of interviewee: Ms. Nuon Chourm, Head of Women Affairs and Health Education Sub department
Contact no: (089-909-855)

Note of interview:

1.4.1 Health situation:

- Some cases of diseases including blood pressure, breast cancer and uterus cancer have found among women. Otherwise, people who ages over 40 has eyes problem and malnutrition.
- WHO conducted a research and has found that mostly women has health problem but they do not intend to access health service for checking up their status.

1.4.2 Policy of Healthy Ageing:

- The Health Unit of Provincial Women Affairs Department has main 6 programs to support the needs of the women comprises: Domestic Violence, Human Trafficking, Gender Diversity, Health in general, Community Kindergarten, Disaster and Climate change, Community Women Empowering.

1.4.3 Recommendation:

- Gender diversity is recommended to consider in any policy or operational plan development.
- Almost ministries and department have more concerned on big issues. They seem to have overlooked the small one but it will be massive affected in the community as a whole.
- Cambodian Red Cross should invite all involved partners to attend training on Healthy Ageing as it is recognized as the new initiative one.

1.5 District governor:

Date: 7th June 2017

Location: Peam Ro District

Name of Interviewer: Mr. OM Vutharo, Senior Program Admin-Finance Team Leader (SPAFTL) CD/NCD Health Sub Department, CRC NHQ.

Name of interviewee:

-Mr. Chear Chan Kanha, Peamro Deputy District Governor and Deputy President of RC Sub branch Committee. Contact no (011-233-238).

-Mr. Chan Thoeun, member of committee Red Cross Sub branch. Contact no. (097-667-9848).

-Mr. Phorn Veasna, Red Cross Sub branch Permanence Officer

-Mr. Uth Ponra, RC Sub branch Officer

Note of interview:

1.5.1 Health situation:

- 3 villages comprises Village no.1, no.2 and no.5) in Peam Ro District are the most vulnerable areas due to the people who are living there are poor, homeless, jobless, skinny, malnutrition and eye health problem.

1.5.2 Policy of Healthy Ageing:

- There is no any policy related Healthy Ageing in place. Only 2 NGO (WOMEN, and Water Drop) works for Orphan Vulnerable Children (OVC)

1.5.3 Recommendation:

- Healthy Ageing project should target for all villages.
- Good collaboration with local authority for effective project implementation.
- The project outcomes should be presented back to involve partners based on the completion report.
- Any incentive should be provided to the target beneficiaries during community education, public awareness or other interventions.

1.6 Commune Leader:

Date: 7th June 2017

Location: Prek Khsay Kor Commune, Peam Ro District

Name of Interviewer: Mr. OM Vutharo, Senior Program Admin-Finance Team Leader (SPAFTL) CD/NCD Health Sub Department, CRC NHQ.

Name of interviewee:

-Mr. Chum Chear, Head Deputy Commune

-Ms. Im Nimol, Clerk

-Ms. Pon Srey Mom, Women Affairs

Note of interview:

1.6.1 Health situation:

- Almost people feel worry to access health services. They predict that nobody will take care properly. They usually get traditional medicine instead when they fall sick.
- There are many retied people and poor, and some are mobilized to other places for seeking jobs.

1.6.2 Policy of Healthy Ageing:

- There is no any policy related Healthy Ageing.

1.6.3 Recommendation:

- Any incentive should be provided to the target beneficiaries during public awareness, or other community forum.

2 Focus group discussion

Name of Village: Village no.1

Date: 7th June 2017

Location: Village 1, Preik Khay Khor Commune, Peam Ro District

Focus Group: **Men**

Name of Interviewer:

- Mr. Korm Sokhan, Project officer (NHQ)
- Ms. Sim Sokuntheary, Health Focal Person, Preveng Red Cross Branch,
- Mr. Chun Sitha, Disaster Coordinator, Preveng Red Cross Branch.

Participants:

No	Name	age	sex	professional	PWD	contact
1	Seng Samnang	67	M	Farmer		089-379-993
2	Roun Nan	85	M	Stay home		071-2656316

3	Sok Min	63	M	Stay home		n/a
4	Kong Samoeun	53	M	Stay home		071-8806355
5	Tep Hoeung	50	M	Stay home		096-9258830

Note of interview:

1. Identify Health problem
 - Lung disease, flue, hip rheumatism, dizzy, cough, malnutrition.
2. Discrimination among elderly and Gender
 - It happened some times. The victims ask the local authority and police post for help and solved the issues.
3. Health care service
 - There are Health Center, Referral Hospital, and private clinic. The client feels happy and satisfy to access health services.
4. Daily dietary
 - Mixed vegetable, morning grass, rice soup with roasted fish or dried fish and can fish, coffee, and tea.
5. Physical exercise
 - Walking, bicycling, marathon.
6. Excessive alcohol and cigarette
 - Short and difficult breathing.
7. Healthy practice and long life learning
 - Drinking hot tea or warm water regularly, sufficient medicine for releasing temperature, or feel dizzy.
8. Mapping (identify high risk areas, access service and network)
 - Health Center is located far away from the village center. It is about 3 km far by walking. It is a little bit difficult as well to access police post or local authority office for security assistance
9. Community respond
 - Families and neighbors provide in kind support
10. Suggestion
 - Local authority should provide elderly card to those who are targeted for further purposed on social affairs.

Name of Village: Village n.1

Date: 7th June 2017

Location: Village 1, Preik Khay Khor Commune, Peam Ro District

Focus Group: **Women**

Name of Interviewer:

- Mr. Korm Sokhan, Project officer (NHQ)
- Ms. Sim Sokuntheary, Health Focal Person, Preveng Red Cross Branch,
- Mr. Chun Sitha, Disaster Coordinator, Preveng Red Cross Branch.

Participants:

No	Name	age	sex	Professional	PWD	contact
1	Tep Saman	60	F	Stay Home		n/a
2	Yim Vanna	56	F	Stay Home		n/a
3	Lim Sokhoeun	61	F	Stay Home		n/a
4	Preap Ich	63	F	Stay Home		089-379-993
5	Touch Khon	63	F	Stat Home		088-6797761

Note of interview:

1. Identify Health problem
 - Low of living condition, eye health problem, cardiac, headache, rheumatism.
2. Discrimination among elderly and Gender.
 - There is not any cases related stigmatization and discrimination in place.
3. Health care service

-There are Health Center, Referral Hospital, and private clinic. The clients feel happy and satisfy to access health services. They spent 10,000 Riels for general health check-up and treatment services and 40,000 Riels for baby delivery service.

4. Daily dietary

-Peanut with sugar, water melon, mango, dried fish, not so much vegetable due to stomachache problem.

5. Physical exercise

-Walking, bicycling, marathon.

6. Excessive alcohol and cigarette

-Alcohol abuse will lead to die

7. Healthy practice and long life learning

-Eating not so much, chewing and swallowing slowly, getting food regularly, do housework.

8. Mapping (identifies high risk areas, access service and network)

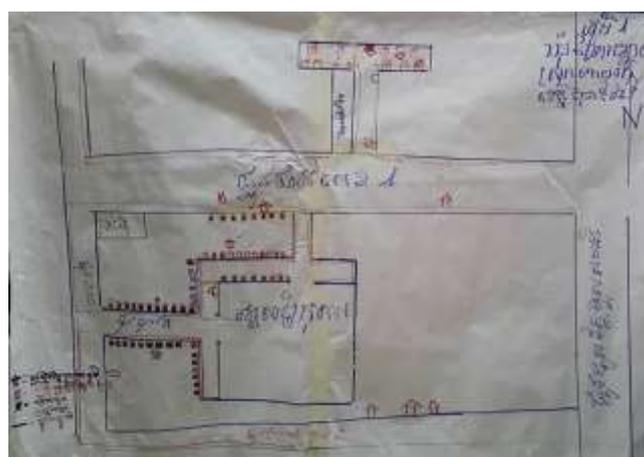
-Health Center is located far away from the village center. It is about 3 km far by walking. It is a little bit difficult as well to access police post or local authority office for security assistance

9. Community respond

-The local authority mobilizes resource through charity to support elderly people who are so poor or seriously sick. Each case was provided 1 million Riels or 80,000 Riels depends on resource availability.

10. Suggestion

-Food relief, medicine for women specifically, and sport playground for doing exercise requirement.



Name of Village: Village no.2

Date: 7th June 2017

Location: Village 2, Preik Khay Khor Commune, Peam Ro District

Focus Group: **Men**

Name of Interviewer:

- Mr. Korm Sokhan, Project officer (NHQ)
- Ms. Sim Sokuntheary, Health Focal Person, Preveeng Red Cross Branch,
- Mr. Chun Sitha, Disaster Coordinator, Preveeng Red Cross Branch.

Participants:

No	Name	age	sex	Professional	PWD	contact
1	Yos Sarin	60	M	Stay Home	Left hand	096-6626985
2	Ourk Siev	78	M	Stay Home	Blood pressure	088-3658347
3	Nieng Mod	55	M	Stay Home		n/a
4	Mak Bunkim	59	M	Stay Home		097-7111175
5	Meas Chhan	67	M	Stay Home		092-974-505

Note of interview:

1. Identify Health problem
 - Low of living condition, eye health problem, cardiac, headache, rheumatism
2. Discrimination among elderly and Gender
 - There is not any cases related stigmatization and discrimination in place.
3. Health care service
 - There are Health Center, Referral Hospital, and private clinic. The client feels happy and satisfies to access health services. They spent 10,000 Riels for general health check-up and treatment services and 40,000 Riels for baby delivery service.
4. Daily dietary
 - Peanut with sugar, water melon, mango, dried fish, not so much vegetable due to stomachache problem.
5. Physical exercise
 - Walking, bicycling, marathon.
6. Excessive alcohol and cigarette
 - Alcohol abuse will lead to die
7. Healthy practice and long life learning
 - Eating not so much, chewing and swallowing slowly, getting food regularly, do housework.
8. Mapping (identifies high risk areas, access service and network)
 - Health Center is located far away from the village center. It is about 3 km far by walking. It is a little bit difficult as well to access police post or local authority office for security assistance
9. Community respond
 - The local authority mobilizes resource through charity to support elderly people who are so poor or seriously sick. Each case was provided 1 million Riels or 80,000 Riels depends on resource availability.
10. Suggestion
 - CRC should provide health training basically to the elderly people.

Name of Village: Village no.2

Date: 7th June 2017

Location: Village 2, Preik Khay Khor Commune, Peam Ro District

Focus Group: **Women**

Name of Interviewer:

- Mr. Korm Sokhan, Project officer (NHQ)
- Ms. Sim Sokuntheary, Health Focal Person, Preveng Red Cross Branch,
- Mr. Chun Sitha, Disaster Coordinator, Preveng Red Cross Branch.

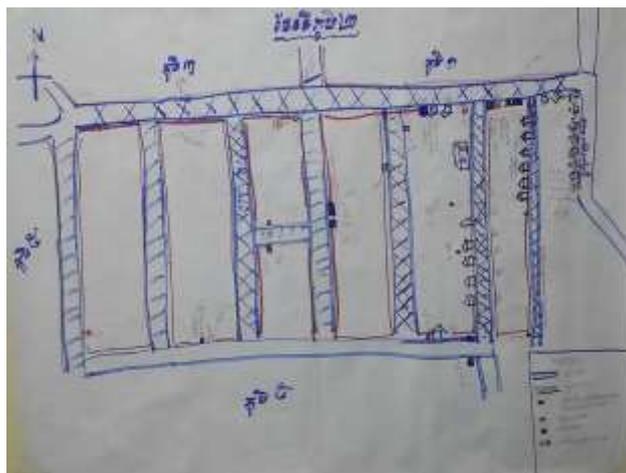
Participants:

No	Name	age	sex	Professional	PWD	contact
1	Man Ngin	74	F	Stay Home		088-8522589
2	Khon Leap	57	F	Stay Home		n/a
3	Keo Chan	53	F	Stay Home		071-2656367
4	Ros Saruon	55	F	Stay Home		n/a
5	Mok Samoeun	57	F	Stay Home		n/a

Note of interview:

1. Identify Health problem
 - Low of living condition, eye health problem, cardiac, dizzy, and stomachache.
2. Discrimination among elderly and Gender
 - There is not any cases related stigmatization and discrimination in place.
3. Health care service
 - Health service is accepted, well hospitalized by Health staff.
4. Daily dietary
 - Sewer soup, fried soy bean soak, fried eggs. Sour soup.
5. Physical exercise
 - Body movement.

6. Excessive alcohol and cigarette
 - Excessive alcohol makes us headache
7. Healthy practice and long life learning
 - Do not drink alcohol, drink hot tea, get food regularly, do exercise.
8. Mapping (identifies high risk areas, access service and network)
 - Do not identify any risk factors in these areas.
9. Community respond
 - Elderly people support by their families and neighbors.
10. Suggestion
 - Household building, and financial support to the elderly people.



Name of Village: Village no.5

Date: 8th June 2017

Location: Village 5, Preik Khay Khor Commune, Peam Ro District

Focus Group: **Women G.1**

Name of Interviewer:

- Mr. Korm Sokhan, Project officer (NHQ)
- Ms. Sim Sokuntheary, Health Focal Person, Preveeng Red Cross Branch,
- Mr. Chun Sitha, Disaster Coordinator, Preveeng Red Cross Branch.

Participants:

No	Name	age	sex	Professional	PWD	contact
1	Sek Soeun	78	F	Stay Home		n/a
2	Phan Yath	64	F	Stay Home		n/a
3	Ngem Youn	68	F	Stay Home		n/a
4	Suy Sary	54	F	Stay Home		n/a
5	Ngem Sann	54	F	Stay Home		n/a

Note of interview:

1. Identify Health problem
 - Cardiac, dizzy, diabetes, rheumatism, and blood pressure.
2. Discrimination among elderly and Gender
 - There is not any cases related stigmatization and discrimination in place.
3. Health care service
 - They rely on health services that they got such as hospitalization and treatment.
4. Daily dietary
 - Fish, mango, and dried fish.

5. Physical exercise
 - Majority of the elderly people do not do exercise due to knee problem.
6. Excessive alcohol and cigarette
 - Excessive alcohol makes us headache
7. Healthy practice and long life learning
 - Be active, stay away from salty or sweetly food.
8. Mapping (identify high risk areas, access service and network)
 - Do not identify any risk factors in this areas.
9. Community respond
 - Do not get any support for Elderly people by any NGO or other associations.
10. Suggestion
 - All in kind support and medicine are highly required.

Name of Village: Village 5

Date: 8th June 2017

Location: Village 5, Preik Khay Khor Commune, Peam Ro District

Focus Group: **Women G.2**

Name of Interviewer:

- Mr. Korm Sokhan, Project officer (NHQ)
- Ms. Sim Sokuntheary, Health Focal Person, Preveng Red Cross Branch,
- Mr. Chun Sitha, Disaster Coordinator, Preveng Red Cross Branch.

Participants:

No	Name	age	sex	Professional	PWD	contact
1	Sok Savorn	52	F	Stay Home		n/a
2	Sok Un	63	F	Stay Home		n/a
3	Prak Thy	59	F	Stay Home		n/a
4	Douk Sophy	56	F	Stay Home		n/a
5	Te Saran	67	F	Stay Home		n/a

Note of interview:

1. Identify Health problem
 - Cardiac, dizzy, diabetes, rheumatism, and blood pressure.
2. Discrimination among elderly and Gender
 - There are some cases related stigmatization and discrimination in place among poor and reach.
3. Health care service
 - The people has access health services at national hospital, health center, private clinic.
4. Daily dietary
 - Fried fish, pickled fish, boiled eggs, dried fish, rice with fish sauce, or salty dried fish.
5. Physical exercise
 - Marathon or walking around.
6. Excessive alcohol and cigarette
 - Excessive alcohol makes us dizzy.
7. Healthy practice and long life learning
 - Stay away the salty food, drinking tea or warm water.
8. Mapping (identifies high risk areas, access service and network)
 - Do not identify any risk factors in these areas.
9. Community respond
 - Getting strongly support by generous people or Village Leader.
10. Suggestion
 - Rice and financial support to improve living condition. Medicine requirement for the elderly people.

