

Disaster Preparedness and Mitigation Living above the Floods Final Evaluation



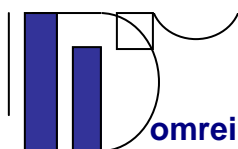
Cambodia, January 2006

Evaluation by

Domrei Research and Consulting

Ian Ramage and Gabriel Pictet

Kheang Lyhun, Ke Bopha, Sang Kimthach and Ong Thearny



Australian Government

AusAID

ឧបត្ថម្ភជំនួយ ប្រទេសអូស្ត្រាលី



UTENRIKSDEPARTEMENTET

**Ministry of Foreign Affairs
Government of Norway**

ឧបត្ថម្ភជំនួយ ប្រទេសន័រវេស

Acknowledgements

Domrei would like to thank the evaluation team for their hard work. The team were involved in all aspects of the evaluation; from developing the evaluation approach and methodologies, reviewing the draft questionnaires, collecting data in the field, translating and coding qualitative data and writing the draft report. The evaluation team were:

Mr. Ian Ramage	Research Director
Mr. Gabriel Pictet	Research Director
Ms. Kheang Lyhun	Team Leader
Ms. Ke Bopha	Evaluator
Ms. Chhy Sophearith	Evaluator
Ms. Ong Thearny	Evaluator (DPM-LAF field staff)
Mr. Sang Kimthach	Evaluator



Domrei would particularly like to thank Mr. Noel Puno, Project Coordinator for DPM/LAF and for DPAP in 2002/2003. True to type, Noel gave us several carloads of hardcopy documentation and a collection of CDs and DVDs with at least a terabyte of softcopy project documentation. No evaluators in Cambodia can have ever received so much background documentation – thanks Noel.

Thanks also to Mr. Chann Vibol, DPM/LAF Project officer for presenting the project to the

evaluation team, answering many questions and discussing the preliminary results. Domrei would also like to thank all the other DPM-LAF staffs, who made us welcome and agreed to be interviewed although the project was ending and they were all busy.

Domrei would like to thank Sun Kimsan, the DPM-LAF driver, who worked hard in the field with the team and helped to make appointments with counterparts and DPM staff for interviews.

A special thanks to Ms. Ong Thearny, who joined the team for several weeks during the evaluation. Her assistance in understanding the processes involved in the project and her local knowledge were invaluable to the evaluation. We sincerely hope her feet have stopped aching from “walking so far” in project villages with us.

Particular thanks to the DPM-LAF government counterpart staff, DCDM, CCDM, VC and VDC members who made us welcome, facilitated data collection, agreed to be interviewed and prevented our team from starving in the field.

Finally and most importantly, we are grateful to the 211 families in Preah Sdach and Kampong Trabaek districts who agreed to be interviewed, discussed the project informally and told us about their experiences of the DPM-LAF project processes.

Executive summary

The Mekong river basin occupies around 85 percent of Cambodia's land area. Together with the Tonle Sap, it is Cambodia's most significant geographical feature. Every year the Mekong floods because of heavy rainfall in the upstream countries.

Prey Veng Province is located in south-eastern Cambodia, on the Mekong River flood plain. A cycle of flooding and drought affected Prey Veng between 2000 and 2003, beginning with severe floods in 2000 that affected 30 percent of the population, killed 347 people, destroyed more than 7,000 homes and ruined almost 350,000 hectares of rice. During the same period, floods inundated more than 80 percent of the land area in the province.

In 2001, CARE conducted a study to assess the effects of flooding on poor communities in Prey Veng. The findings led to the design of the *Prey Veng Disaster Preparedness Action Planning Project (DPAP)*, funded by AusAID and implemented by CARE between Feb 2001 and Jan 2003.

DPAP was also used in a pilot assessment exercise initiated by the Humanitarian Accountability Project (HAP) that was later to evolve into the Humanitarian Accountability Partnership International (HAPI). The results of the HAP assessment identified a number of areas where activities could be improved to increase accountability and transparency both by CARE and by Commune and Village level structures.

The ***Disaster Preparedness and Mitigation (DPM) – Living above the Floods (LAF)*** project draws on lessons learned and recommendations from the final DPAP evaluation. The Norwegian Foreign Ministry funded the DPM project and AusAID funded LAF. The DPM implementation period was from March 1, 2004 to July 31, 2005 while LAF was from June 2004 to December 2005. Despite different donors, the two projects shared the same goals and objectives.

The DPM/LAF goal was to *contribute to the increased capacity of vulnerable households in the project area to cope with disasters and to reduce their vulnerability to disasters.*

Domrei Research and Consulting conducted the final evaluation of the DPAP project in 2003 and subsequently was involved in preparing the proposal for the DPM/LAF project. This gave the evaluation team the opportunity to see how lessons learned had been integrated and project implementation developed since the DPAP project.

This evaluation, conducted in December 2005, focuses on the processes used in implementing the project, in keeping with the DPM/LAF efforts to increase participation, transparency and accountability, and assesses its relevance, impact and sustainability.

The evaluation team used a variety of methods and triangulated results to increase the reliability of the findings:

1. A review of project documentation and records
2. A full day meeting at the CARE field office, where the project coordinator and staff presented a detailed overview of the DPM-LAF project to the evaluation team.
3. A survey among a random sample of households in eight villages (n=210)
4. Structured interviews with 35 Government counterparts, Village leaders and CARE staff
5. Case studies

6. Informal interviews with villagers
7. On site observations and photographs
8. On site village evaluation reports
9. Discussing preliminary results between the evaluation team and the DPM/LAF Co-ordinator

Evaluation findings

Equity. The project was successful in reaching the most vulnerable households in all the villages. There were a higher proportion of female-headed households among the beneficiary sample showing that the project was effectively targeting these families. Project beneficiaries are on average significantly poorer than non-beneficiaries are, and an impressive 98 percent of household grants went to the poor and poorest households.

Participation. All phases of the project maximised community participation, although this inevitably slowed down and complicated implementation. High community participation, beneficiary empowerment and CARE's responsiveness to individual needs explains in large part the projects popularity, and the **relevance** of its outputs.

Transparency. Community participation and informing communities of the process (e.g. in the selection of grant beneficiaries) increased the transparency of all the project processes. CARE set up complaint mechanisms, albeit a little late.

Accountability. CARE demonstrated what might be a unique commitment to accountability in Cambodia when they set up the *Special Committee to Address DPAP Complaints* (SCAC) under the DPM/LAF project. This committee was designed to resolve complaints and issues related to the DPAP project that were revealed in the final evaluation. The DPM/LAF project also took these lessons on board and initiated complaint mechanisms in every new project village.

Impact. Major floods have fortunately not occurred since DPM-LAF started, so it is too early to evaluate what effects the project has had on coping strategies. Likewise, Government counterparts did not yet have the opportunity to demonstrate their capacity to assist the population during and after severe flooding. However, the project was implemented in areas that are regularly flooded. The people whose coping capacities were increased belong to the poorest and most flood-exposed households in their communities. The household grants allowed them to get what they needed the most, thanks to a participative and empowering provision system. The flood protection infrastructure and equipment are in place.

Sustainability. Capacity building activities at all levels ensure some degree of sustainability in the short term. The project time-line is too short to assess its medium-term sustainability, especially around government intervention during and after flooding. We can assume that villagers will appreciate the positive effects of training and planning, and that they will be emulated and sustained because it is in people's interest.

Documenting best practice. The participatory processes designed and implemented by the LAF CARE team are rights-based, fair, efficient, transparent and culturally appropriate. We strongly recommend that they be replicated within CARE and shared with other organisations. The approaches, methods and tools developed by the LAF project are well documented, with practical component manuals. This will greatly facilitate their replication.

Village selection. All the DPM/LAF villages visited were vulnerable to flooding and contained a large proportion of poor households. Most counterparts and staff interviewed reported that there was no need to change or improve this process.

Project Orientation. Many people attended project orientation meetings in Preah Sdach (57%) and in Kampong Trabaek (67%). Overall, 25 of the 35 counterparts and 72% of the household respondents said that the orientation was good or very good, mostly because many people attended the meetings and then understood what the objectives of the DPM/LAF project. Donor visibility was also high for the project.

Disaster preparedness video. The disaster preparedness video was a very effective way to disseminate information to a largely illiterate population and this process should be expanded and continued. Using equipment already located in the village was a practical and sustainable approach. This could be taken a step further by providing copies of the video to television and video owners in exchange for playing the video in the evening when people have more time to watch.

Purchasing and Bidding committee. CARE and the DPM/LAF project should be congratulated for setting up an elected committee tasked with procuring project goods and services, thus increasing transparency and accountability to their beneficiaries. However, additional community promotion is required for procurement to become truly accountable to the beneficiaries. A more widely promoted and better-understood PBC could have avoided some issues concerning the price and quality of the procured goods.

Participatory Risk Assessment. PRA informed CARE staff and counterparts about the specific problems while demonstrating their commitment to accountability and community participation. Counterparts facilitated the PRA exercise, thus putting these principles into practice. PRA activities included village mapping, seasonal calendar, timeline and problem ranking. Over half of the respondents knew about PRA. They were most aware of village mapping (26%) and problem ranking (20%). Eighty-five percent of the household respondents said that PRA was either good or very good.

Vulnerable household selection. The evaluation team was impressed at the high level of awareness and participation in the selection of grant beneficiaries: 91% respondents knew about the household selection meeting; and 84% of households reported that they participated in the meetings. The community identified and ranked vulnerability criteria, and then selected the most vulnerable households according to these criteria. According to 80% of the household respondents, the selection process was either good or very good. Villagers chose the selection criteria so they were widely accepted. Despite impressive participation and transparency, beneficiary selection was also the source of most complaints, with non-beneficiaries inevitably complaining about favouritism and manipulation.

Household planning. Three quarters of the households and of the counterparts ranked the household planning as either good or very good, because people could choose what they wanted. As a result, “each household got what it really needed.” Most (81%) of the respondents reported that there were no issues or inequalities in this process. However, some household heads were old and/or illiterate, and had difficulty in deciding what to get. They found it especially difficult to calculate how much they could get with the grant budget. In this case, the direct involvement of CARE staff was crucial and praise-worthy.

Household grants. Among the 210 households surveyed, 47% in Preah Sdach District and 69% in Kampong Trabaek District target villages received grants. The overwhelming

majority of beneficiaries reported that the grants would help them deal with the next flood (96% in Preah Sdach and 99% in Kampong Trabaek). Households obviously had different needs, so the fact that different households got different things was seen as positive. It also shows that CARE was responsive to beneficiaries' needs, despite the additional procurement work that this entailed.

Project notice board. Over half of the respondents (123/210 household and 17/35 counterpart) said that the notice board is good, but less than a third read it. Part of the reason is that only 20% of the women interviewed and 56% of the men are functionally literate.

Complaint mechanisms. Few NGOs have gone as far as CARE in implementing a complaints mechanism, thereby showing villagers, local authorities and project staff that NGOs are accountable to their beneficiaries. While the complaint mechanisms require some fine-tuning, the fact that they existed and were used is commendable.

Capacity building. While the LAF project ran for only a short time, it succeeded in strengthening the local Committees for Disaster Management. CARE trained NCDM, PCDM and DCDM staff. Capacity building of these local government officials was achieved by their involvement in all the phases of the project. They played an important role as implementers and facilitators. LAF provided them with opportunities to work directly with the communities, to put into practice their knowledge and test their management skills. One very important result was the counterparts' practical understanding of their accountability to the community. District and commune level officials, and community leaders, by becoming facilitators, learned to be accountable to the people they serve.

Evaluation Recommendations

The evaluation team's recommendations, particularly for complaint mechanisms, mirror some of those made by the Cambodian Humanitarian Accountability Review in 2005.¹ The review recommended that CARE document lessons learned and revise processes for accountability.

Target area selection:

- The selection workshops held with authorities from provincial to village level were a transparent and appropriate way to identify project target areas.
- Although time consuming, the participatory process of selecting target areas was valuable in increasing ownership and ensuring that the most vulnerable communes and villages were chosen for the intervention.
- Additional time should be allocated during project planning to allow full participation without delaying the project.
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for target area selection.

Project orientation process:

- The project orientation sessions were an important tool to begin working with communities in a participatory manner. This process should be adapted and used in other community development projects to improve transparency and participation

¹ CARE International, Cambodian Humanitarian Accountability Review, May 2005.

- Given the poor level of literacy, using many pictures makes it easier for illiterate community members to understand
- Project orientation meetings should be publicised as widely as possible. Complete attendance is probably not achievable, but it is important to ensure that no groups are deliberately excluded.

Participatory risk assessment:

- Announce dates of meeting 3 or 4 days in advance to let the information spread and allow families to get organised. This could be done cheaply and effectively by posting small photocopied notices in multiple locations in each village.
- Shorten the length of PRA meetings so that people are not bored and can tend to their business
- Explain to villagers beforehand what PRA is for, what people will do and why it is important for people to attend the meeting. Posters are a good way to inform people about the PRA and its results.
- CARE should pilot the use of GPS devices and a GIS for village mapping activities. This would improve household mapping accuracy and facilitate updating of maps.
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for community risk assessment in Cambodia.

Selecting the most vulnerable households:

- The beneficiary selection process is one of the most crucial processes in the project and one of the vulnerable to corruption and bias. DPM/LAF designed and implemented an excellent and equitable method for this difficult step.
- Inevitably, some problems occurred in beneficiary selection and the process should be further refined and improved in other community-based projects.
- Invite all villagers to the meeting and have project staff distribute the invitation letter themselves.
- Inform villagers on the purpose of the meeting in advance.
- Review and correct the list of households before the meeting
- Seek villagers agreement on each household's rank anonymously (secret ballot)
- Have project staff visit each household to check that the selected households are really among the most vulnerable
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for participatory beneficiary selection in Cambodia

Disaster preparedness video:

- The disaster preparedness video was a very effective way to disseminate information to a largely illiterate population and this process should be expanded and continued
- Using equipment already located in the village was a practical and sustainable approach. This could be taken a step further by providing copies of the video to television and video owners in exchange for playing the video on multiple occasions and in the evening when people have more time to watch.

Household planning process:

- Invite beneficiaries two or three days in advance and state meeting's purpose clearly
- Shorten and simplify the existing household planning process. Use more pictures and less text to explain the process.

- Announce the price of items before household planning process to help villagers calculate their contribution.
- Fix and announce exchange rate between the dollar and Riel
- Explain, repeat and post disbursement procedures.
- Include in the household profile form
 - household priority rank,
 - total money received, contribution, remaining balance;
 - Household number (for easy reference)
 - financial procedures
- Give each household one copy of the household profile form as a receipt, to be used as evidence if they want to make a complaint
- Set up a user friendly beneficiary database to find data on specific beneficiaries and for statistics
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for household action planning in Cambodia

Purchasing and bidding committee:

- The concept of an elected committee tasked with procuring project goods and services is an excellent one. CARE and the DPM/LAF project should be congratulated for making such a concrete step towards accountability to their beneficiaries and transparency.
- However, many beneficiaries did not know that the committee existed, thus reducing the positive effect of the committee. This process requires additional community promotion to become truly transparent.
- Some beneficiaries had issues with the price and quality of items they received (see household grants) a more widely promoted and better understood PBC could have solved and perhaps avoided these issues.
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for project purchasing and bidding.

Household grants:

- Improve the quality of the items procured for the grant beneficiaries.
- Avoid issues regarding unspent or overspent budgets and refunds by simplifying the guidelines.

Complaint mechanisms:

- CARE and the DPM/LAF project should be congratulated for making accountability to beneficiaries a reality instead of empty rhetoric. This component demonstrates a right-based approach to development and makes CARE accountable to the people it assists
- Project staff and community leaders need to be encouraged to view complaints as opportunities for change and learning rather than threats to be avoided if possible. This will take time. One simple suggestion to mainstream this would be to include complaints received as an indicator of success in project log frames – demonstrating a commitment to accountability and participation.
- People clearly value a variety of complaint mechanisms – having several different methods make the mechanism accessible to more people.
- Compliant mechanisms should be established early in the project and beneficiary communities informed about the mechanisms during project orientation.

- Project staff should visit each village regularly and talk with people – this is perhaps the most effective complaint mechanism of all. This was how the best project feedback was gathered for both the DPAP and DPM/LAF evaluations.
- It's better if local authorities don't always know the visiting schedule and project staff do not always visit households with the local authorities
- Households in distant parts of the village should be a priority for project visits. Often these families are isolated from their communities for a variety of reasons – extreme poverty, HIV/AIDS, political affiliations, mental illness – that can also make them more vulnerable to disasters.
- Project staff should keep the complaint box key to reassure villagers
- People who want to complain should not be required to show or write their names their name and their complaint should be confidential
- The complaint box should be in an appropriate place (far from authorities house)
- Villagers should be encouraged to dare to complain. It is important to explain the purpose of complaint mechanisms clearly and to make it clear that complaining will not affect their benefits or the possibility of getting aid in the future.
- This process, which has already been documented in Khmer and English, should be further developed and distributed to other projects as a draft 'CARE best practice' publication for promoting accountability and a rights-based approach in community development in Cambodia

Community notice board:

- The project notice board was a useful process and contributed to both disseminating community information and increasing project transparency and accountability. This process should be continued and expanded.
- Investigate whether other notice boards exist in project villages before erecting new ones - use existing notice boards if possible
- Use a larger font/increase the size of lettering on information posted on the board for villagers with poor eyesight.
- Information posted on the board should always include colourful pictures to capture the interest of passers-by. More pictorial information is also more appropriate for less literate villagers
- If durability is desired, make the protective roof larger to protect the board from the weather.
- Have more than one notice board in large villages. In large sprawling villages with multiple entry roads like Kroich village in Kampong Trabaek district – at least three notice boards would be useful.

Disaster preparedness calendar and associated activities:

- The disaster preparedness calendar was a popular and innovative method for raising awareness and increasing community participation in the project.
- It is important to use a Khmer rather than a Gregorian calendar.
- Printing more calendars would have been an appropriate use of the project budget.
- The village question and answer sessions with prizes were also an innovative method of raising awareness of disaster preparedness issues. These sessions should be used in other programs that aim to increase community awareness or change behaviour.
- It would be useful to measure the change in knowledge and attitudes due to community interventions like the calendar, question and answer sessions and other participatory processes. A small baseline survey of knowledge and attitudes to disaster preparedness followed by a small survey at end line would probably demonstrate substantial change.

- The picture drawing contest was widely known and appreciated and should be repeated in future projects

Food aid:

- Food aid distribution in the DPM/LAF project area followed the principles of best practice and accountability.
- The thoroughness of the planning that was evident before any aid was distributed is borne out by the fact that all but one beneficiary in our random sample reported that 1) they received exactly the amount of aid they were entitled to 2) no additional money was extorted from them in the process.
- CARE should translate the documentation for this process into Khmer and distribute to other projects as a draft 'CARE best practice' publication for aid distribution in Cambodia.

Capacity building:

- Capacity building activities were appropriate to those who received training – no respondents reported that training was poor, difficult to understand or a waste of time. This was the project component ranked highest by counterpart respondents.
- All counterparts and staff emphasised the usefulness of the training they received to their own jobs and responsibilities, particularly leadership training and disaster preparedness
- Capacity building in communities through participation in various activities was one of the DPM/LAF project's greatest strengths many household respondents spontaneously told us about things they had learned from various project meetings and workshops.
- In future participatory projects designed to increase community capacity, CARE should consider conducting a small-scale survey to measure knowledge and awareness at project start. Comparing this with a second survey during the final evaluation would probably show significant improvements in community knowledge and awareness.

Contents

Acknowledgements	1
Executive summary	2
Contents	10
List of figures and tables.....	11
Acronyms	12
Introduction	13
Geography and disasters in Cambodia	13
Project background and objectives	14
Project participation strategy	15
Evaluation background.....	15
Methods	17
Evaluation team.....	17
Geographic Sample.....	17
Instrument design.....	18
Data collection.....	18
Household interviews	19
Counterpart and project staff interviews.....	19
Case studies.....	19
Photographs and discussion	19
Village reports	20
Data analysis.....	20
Limitations	20
Evaluation Results	22
Respondent Characteristics	22
Target communes and villages selection	25
Project orientation	27
Participatory Risk Assessment.....	30
Selecting the most vulnerable households.....	33
Disaster preparedness video.....	37
Household Action Plan	39
Purchasing and Bidding Committee (PBC)	42
Household Grants	44
Complaint mechanisms	48
Project notice board	53
Disaster preparedness calendar	56
Food aid	58
Capacity building	60
Discussion	63
Project Impact	63
Constraints	64
Participation.....	64
Capacity building	64
Sustainability	65
Humanitarian Accountability.....	65
Replicability	65
Other Rural development Projects	66
References.....	67
Appendices.....	68
Tabulations by beneficiary status	68
Household Questionnaire.....	70

List of figures and tables

Figure 1: Prey Veng and major rivers in Cambodia.....	13
Figure 3: Distribution of respondents by wealth ranking.....	23
Figure 4: Village selection results in Preah Sdach District	25
Figure 5: Project Orientation by beneficiary status	27
Figure 6: Project Orientation by district	28
Figure 7: Awareness of project donor.....	29
Figure 11: PRA - Awareness, participation and opinion by district.....	30
Figure 12: PRA - Awareness, participation and opinion by beneficiary status	31
Figure 13: Selection Process- respondent participation and opinion by district	33
Figure 14: Distribution of beneficiaries and non-beneficiaries by wealth ranking.....	34
Figure 15: Selection Process by beneficiary status	35
Figure 16: Household planning, participation and opinion, by district	39
Figure 17: Household planning, participation and opinion, by beneficiary status.....	40
Figure 9: PBC – Respondent awareness and opinion.....	42
Figure 18: Household grants by district	44
Figure 19: Case study – pump and well	45
Figure 20: Case study – household grants	46
Figure 28: Complaint mechanisms – awareness and complaints	49
Figure 29: Complaint mechanisms – awareness, appropriateness and opinion	50
Figure 30: Complaint mechanisms by beneficiary status	51
Figure 22: Notice board – respondent awareness and opinion by district.....	53
Figure 23: Notice board – respondent awareness and opinion by beneficiary status	54
Figure 25: Food aid – Coupon given to food relief recipients	58
Figure 26: Food aid – Respondent awareness, getting aid and opinion	58
Figure 31: Project orientation participants	60
Figure 32: Respondents’ overall evaluation of the project.....	63
Table 1: DPM/LAF areas and evaluation sample	18
Table 2 Household respondents by location	22
Table 3 Characteristics of household respondents	24
Table 4: Benefits from household grants.....	45
Table 5: Participation in community activities.....	61

Acronyms

ALNAP	Active Learning Network for Accountability and Performance in Humanitarian Action
AusAID	Australian Agency for International Development
CARE	CARE international in Cambodia
CDM	Committee for Disaster management
DCDM	District Committee for Disaster Management
DPAP	Disaster Preparedness Action Planning
DPM	Disaster Preparedness and Mitigation
DRM	Disaster Risk Management
FMC	Field Management Committee
HAP	Humanitarian Accountability Project
HAPI	Humanitarian Accountability Partnership International
HH	Household
LAF	Living Above the Floods
M&E	Monitoring and Evaluation
NCDM	National Committee for Disaster Management
NGO	Non-Government Organization
PCAC	Project Committee for Addressing Complaints
PCDM	Provincial Committee for Disaster Management
PDoEYS	Provincial Department of Education Youth and Sport
PRA	Participatory Risk Assessment
PBC	Purchasing and Bidding Committee
Q & A	Question and Answer Program
SCAC	Special Committee for Addressing Complaints on DPAP
VC	Village Chief
VCAC	Village Committee to Address Complaints
VDC	Village Development Committee
VHH	Vulnerable Household
WFP	World Food Program

Introduction

Geography and disasters in Cambodia

The Mekong river basin occupies around 85 percent of Cambodia's land area.² Together with the Tonle Sap, it is Cambodia's most significant geographical feature. Every year the Mekong floods because of heavy rainfall in the upstream countries of China, Lao P.D.R, Myanmar and Thailand. This flooding is vital to the production of floating and recession rice and for fish spawning in the rivers and the Tonle Sap (Great Lake). These two products form the staple diet in Cambodia.

The Tonle Sap is linked to the Mekong River by a 100 km long channel known as the Tonle Sap River. During the rainy season from May to October, the water level in the Mekong rises, backing up the Tonle Sap River and causing it to flow into the lake. During these months, the lake floods from 3000 sq. km to over 7500 sq. km and the maximum depth increases from 2.2 meters to over 10 meters. As the water level in the Mekong drops in the dry season, the Tonle Sap River reverses its flow and drains the waters back into the Mekong. During the wet season and while the Tonle Sap drains, the Mekong regularly floods the land on either side of the river in up to four metres of water.

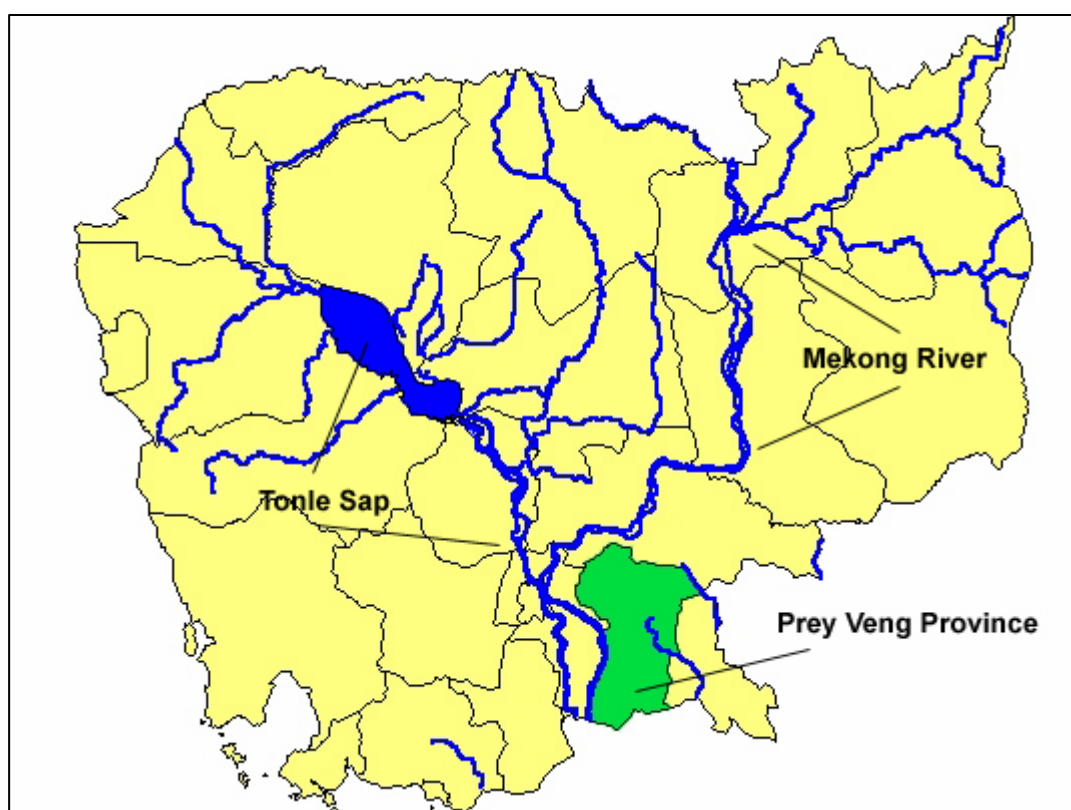


Figure 1: Prey Veng and major rivers in Cambodia

Prey Veng Province is located in southeastern Cambodia. It borders on Kandal in the west, Kampong Cham in the north, Svay Rieng in the east and Vietnam to the south. Prey Veng is about 100km from Phnom Penh and covers 2.5 percent of Cambodia's land area. It is located in the Mekong River flood plain and the Mekong forms the western

² The Mekong: Development and Its Environmental Effects, HORI Hiroshi, KOKON-SHOIN, Japan, 1996

border for much of the province. The map above shows the location of Prey Veng province and the major rivers in Cambodia.

A cycle of flooding and drought affected Prey Veng between 2000 and 2003, beginning with severe floods in 2000. The 2000 floods affected 30 percent of the population, killed 347 people, destroyed more than 7,000 homes and ruined almost 350,000 hectares of rice. During the same period, floods inundated more than 80 percent of the land area in the province.

Project background and objectives

In 2001, CARE conducted a study to assess the effects of flooding on poor communities in Prey Veng. The *Risk Mitigation and Disaster Management among Rural Communities in Cambodia (2001)* study explored the impact of flooding on livelihoods, health, safety, poverty, and examined household coping mechanisms during and after flooding. The findings of this research led to the design of the Prey Veng *Disaster Preparedness Action Planning Project (DPAP)*, funded by AusAID and implemented by CARE between Feb 2001 and Jan 2003.

DPAP established a new model for bottom-up disaster preparedness action planning at commune, district and provincial levels in Cambodia consisting of three main elements:

- 1) *Mitigation Action Planning and Implementation*
- 2) *Disaster Preparedness Action Planning and Implementation*
- 3) *Disaster Mitigation through savings*

DPAP was also one of a number of projects used in a pilot assessment exercise initiated by the Humanitarian Accountability Project (HAP) that was later to evolve into the Humanitarian Accountability Partnership International (HAPI). The results of the HAP assessment identified a number of areas where activities could be improved to increase accountability and transparency both by CARE and by Commune and Village level structures. An external evaluation showed that DPAP achieved significant positive results in reducing household vulnerability to flooding. However, there were also many lessons to be learned.

The ***Disaster Preparedness and Mitigation (DPM) – Living above the Floods (LAF)*** project is a direct follow-on to the DPAP project drawing on lessons learned and recommendations from the final evaluation. The Norwegian Foreign Ministry funded the DPM project and AusAID funded LAF. The DPM implementation period was from March 1, 2004 to July 31, 2005 while LAF was from June 2004 to January 2006. Despite different donors, the two projects shared the same goals and objectives. Both donors agreed to consolidate the two project log frames, target areas and outputs. The DPM/LAF goal, purpose and component objectives were:

Goal: To contribute to the increased capacity of vulnerable households in the project area to cope with disasters and to reduce their vulnerability to disasters

Purpose: To strengthen an existing Model for Community Based Disaster Mitigation and Preparedness that incorporates global best practice standards in 20 Villages of six communes in two districts of Prey Veng Province.

Component Objective 1: To reduce household's physical and livelihood vulnerability to flooding by mobilizing and empowering vulnerable groups to develop, implement, monitor and evaluate a disaster preparedness and mitigation programme.

Component Objective 2: *To strengthen organizational emergency response standards in the project area to reflect community level risk reduction and preparedness plans and mainstream International best practice standards.*

Component Objectives 3: *To strengthen government capacity at commune, district and provincial levels to facilitate and support community based disaster preparedness and mitigation programme.*

There were some major differences between the DPM/LAF project and the earlier DPAP project implemented by CARE in Prey Veng. DPAP targeted 115 villages across four districts comprising the entire southern half of Prey Veng province. This broad geographical scope had many implications like a staff ratio of one field officer per 30 villages. By comparison, DPM/LAF targeted two districts and identified the 10 most vulnerable villages in each district. The DPAP project worked mostly at the commune level and rehabilitated commune level infrastructure – roads, dams etc. DPM/LAF worked mostly at the village and household level to help families and communities prepare and mitigate against future disasters. The project ended in January 2006 and the external project evaluation was the last project activity to be completed.

Project participation strategy

The project developed a participation strategy that aimed to ensure that all stakeholders in the project, CARE, Government counterparts and the community had the opportunity to express their opinions, concerns, ideas and to take part in decision-making for the project. This strategy had four broad steps:

1. CARE (project) level discussions to develop project processes, plans and activities
2. CARE presents the proposed processes to the Field Management Committee (FMC)³ for discussion, review and approval.
3. The FMC presents the proposals at a larger workshop composed of representatives (counterparts) from project operational communes and villages for further discussion, review and approval.
4. CARE and the government present proposals to all villagers in each operational village for final comment, review and approval.

This approach allowed counterparts and villagers to select criteria, analyse and agree on the results of the process. The DPM/LAF project used this participation strategy for most project activities to promote transparency and accountability.

Evaluation background

Domrei Research and Consulting conducted the final evaluation for the previous DPAP project in 2003 and subsequently was involved in preparing the shape of the new DPM/LAF project. This gave the evaluation team the opportunity to see how project implementation had developed since the DPAP project. During discussions to select evaluation villages with CARE, we selected two villages – Chey Arkoal in Preah Sdach district and Kroich in Kampong Trabaek district that were in the evaluation sample for the DPAP evaluation in 2003. A short discussion of the differences between the two projects from the evaluator's viewpoint is included in the conclusions section.

³ Field Management Committee terms of reference were defined in the MoA between CARE and NCDM. FMC is composed of CARE senior project staff and government counterparts from NCDM, PCDM and DCDM.

The DPM/LAF evaluation focussed on evaluating the processes used in implementing the project. This was different from the DPAP evaluation, which focussed on evaluating project impact. This evaluation focus was in keeping with the DPM/LAF project focus, which was on improving the processes of project implementation by increasing participation, transparency and accountability.

The purpose of the evaluation was to provide an external observation of the work done, and to assess, from a learning standpoint, the impact of activities, methods and strategies adopted. This includes activities and the outcomes in the piloting of global best practices such as HAP, SPHERE and the ALNAP participation handbook, and to present findings to inform future Disaster Risk Management programming in Prey Veng.

Looking at findings of research made in the project area, DPAP evaluation, HAP study project generated reports, baseline and in accordance with the project log frame and M&E plan, the final evaluation will document and provide an assessment of DPM-LAF implementation, specifically, in ascertaining its relevance, impact/effect and sustainability.

Methods

The team used a variety of different methodologies to collect the data for the evaluation. This allowed us to triangulate our findings with data from different methods and thus increase the accuracy of our findings. The following methods were used in the evaluation:

1. A review of project documentation and records (see references)
2. A full day meeting at the CARE field office at Nheak Leoung, where the project coordinator and staff presented and discussed in detail the history of the DPM-LAF to the evaluation team. The coordinator explained how each component was implemented, and described the problems encountered.
3. A household survey among a random sample of villagers
4. Structured interviews with Government counterparts, Village leaders and CARE staff
5. Case studies
6. Informal interviews with villagers
7. On site observations and photographs
8. On site village evaluation reports (see appendix)
9. Discussing preliminary results between the evaluation team and the DPM/LAF Coordinator

Evaluation team

One DPM/LAF field staff was seconded to Domrei for the duration of the evaluation. This was valuable to allow CARE project staff to gain experience in community evaluation. It also helped the Domrei evaluators to understand many additional details of the project that were not included in the project documentation.

The evaluation team was composed of one female team leader, three Domrei interviewers and one CARE DPM-LAF interviewer. One experienced interviewer also acted as a field editor during data collection to check each questionnaire for inconsistencies before leaving the village. All staffs were trained in and signed the Domrei ethical policy before going to the field. The team identified 13 components in the DPM-LAF project. Each team member was assigned two or three project components to review during the evaluation. Evaluators read and understood their components and after discussions, reviewed the questions relating to each component in the draft questionnaires. The Domrei interviewers with the most research experience trained the other two interviewers before going to the field. As the interview questions were very specific to the DPM/LAF project, it was not feasible to field test the instrument before data collection. However, the team spent one day practicing and revising the final versions of the questionnaires.

Geographic Sample

To limit costs, CARE and Domrei agreed to select eight of the twenty project villages. Domrei asked project staff to name the four villages where project implementation was the most successful, and the four villages where it was the least successful. Domrei then checked that these eight villages were not clustered and provided a good representation of the different parts of the project area. The selected villages are spread over all six of the project communes. Two villages are on the Vietnamese border, and two near the main highway from Phnom Penh to Svay Rieng and then Vietnam. The remaining four villages were located some distance from the highway and provincial towns. The following table shows the DPM-LAF target area and the evaluation sample:

DPM/LAF target areas	Evaluation Sample	Sampling percentage
2 districts	2 district	100%
6 communes	6 communes	100%
20 villages	8 villages	40%
1915 beneficiary HHs	121 beneficiary HHs	4%
	89 non-beneficiary HHs	

Table 1: DPM/LAF areas and evaluation sample

Instrument design

The evaluation team designed two questionnaires, one for village households and one for counterparts and CARE staff. We drafted the questionnaires in Khmer and English. The questionnaires were kept simple. Half the questions were open-ended, to allow the respondents to express their point of view. The seconded CARE staff made sure the component names and questions were relevant to the local population. The

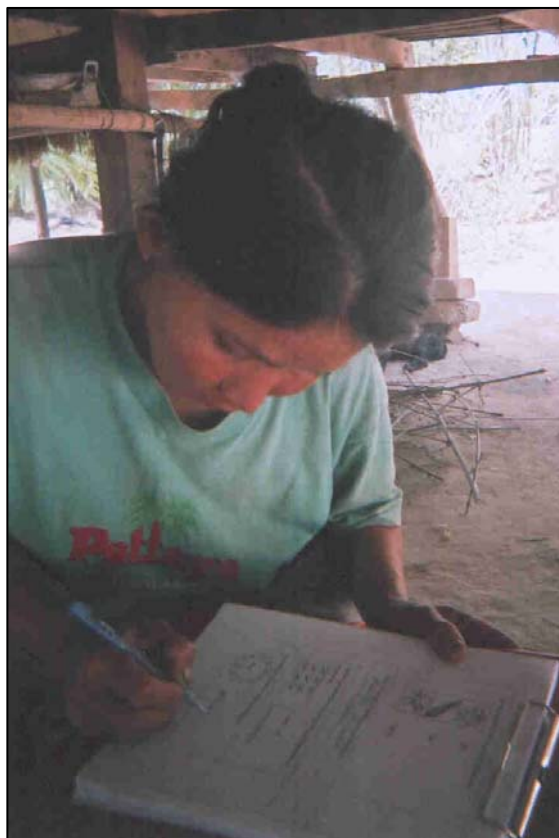


Figure 2 Literacy testing

questionnaires were designed to gather a large variety of opinions on the main components and processes of the project. The final section of the instrument was a short standard literacy test. The household questionnaire is included as an appendix to this report.

Data collection

Data collection started on December 24th and finished December 31, 2005. In each of the eight villages, the evaluation team leader compared the village map given by CARE with the Village Chief's map, computed the sampling interval, chose a random starting point, and oriented the interviewers.

Interviewers and the team leader started by interviewing the household respondents and village counterparts; took photos of project infrastructure, villagers and activities and had informal conversations with community members. At the end of the day, the team met to discussed and compare their findings and wrote the village evaluation report.

In each village, a minimum of 20 households were randomly selected using a variation of the EPI random-walk sampling method. The head of the household or an adult household member was interviewed in each household. The interviewer made an appointment and returned to the household later in the day if no adult respondents were available.

As household respondents were chosen randomly and the response rate was good, we are confident that the evaluation sample was representative of the population in the eight villages. During eight days of evaluation and data collection in Prey Veng, we interviewed 210 respondents in eight villages. There were no refusals, and only one terminated interview (not included in the analysis). We also conducted 35 interviews with counterparts, village chiefs and project staff.

Household interviews

The evaluators interviewed villagers in their homes and somewhere nearby. Interviews explained the purpose of the interview and how the information would be used before seeking consent. Interviewers explained to others who wanted to listen why the interview needed to be confidential. No village authorities or CARE staffs were nearby during interviews. No names were recorded on the questionnaires and each questionnaire was pre-coded with an identifying number. Interviews lasted from 30 minutes to one hour. Most respondents were happy and eager to be interviewed.

For the purposes of the evaluation, we classified households that received grants as project beneficiaries. Households that were not selected to receive grants are called non-beneficiary households, even if they may have benefited indirectly from the project. As we selected households randomly, the proportion of beneficiary households in the sample provides an unbiased estimate of the project's coverage rate in the two districts' target villages.

Counterpart and project staff interviews

We interviewed four staff from District Committees for Disaster Management (DCDM), 6 staff from Commune Committees for Disaster Management (CCDM), 16 village leaders and nine DPM/LAF project staff. They were interviewed about their experience of the LAF project and their opinions on all project components and processes. We interviewed village counterparts in their houses, offices or other appropriate place within the village. The evaluators interviewed project staff at the CARE Prey Veng office and in Nheak Leoung town.

Case studies

Before leaving for the field, Interviewers were given a case study format and trained in writing case studies. During an interview or a chance encounter, evaluators were impressed by a specific issue or story. When this happened, they continued the discussion informally to document the full story. The case studies illustrate some of the issues discussed in the report.

Photographs and discussion

Evaluators walked around different parts of each village to gather information. People often gathered around them to express their ideas about CARE project. This method was particularly useful as people were able to talk about the project informally.

The evaluation team had disposable cameras to photograph tangible project benefits, infrastructure and beneficiaries. Some of these appear in the report.

Village reports

The team developed a format for village reports before beginning the fieldwork. At the end of each day in the field, they met and wrote a consolidated village report, which included positive findings, negative findings and recommendations.

Data analysis

The team leader and field editor used simple field reporting forms to manage data collection. In the field, the team leader conducted spot checks, re-interviews or observed twenty percent of all interviews to ensure data quality. The field editor checked all questionnaires before leaving the village.

The team leader also checked and collated all data in clusters while in the field. On the teams return to Phnom Penh, data was delivered to the Research Director with a summary sheet for each cluster, the completed questionnaires, the records of field checks and any refusals or incomplete questionnaires. The Research Director checked and collated this information and passed it on for data entry. Quantitative data was entered on a Microsoft Access database. Consistency checks were built into the design of the data entry programme to ensure accuracy and internal consistency. Inconsistencies identified by the data validation programmes and queries were investigated by the research director, first checked on the paper questionnaire then corrected, if necessary, on the database. Data was thus cleaned and analysed using Microsoft Access, EPI Info and Stata software.

For qualitative data, each evaluator analysed his or her own components. Evaluators translated into English the answers to **open-ended survey questions** and compiled them into MS Word tables. Answers were grouped into major themes, counted and ranked by frequency. The report includes minority/dissenting views so that a wide range of opinions is represented. **Close-ended survey questions** were entered in an ACCESS database and analysed in STATA version 8.0. Differences between districts and between beneficiaries and non-beneficiaries were systematically assessed. Level of statistical significance is set at 95% unless otherwise specified. Quantitative survey results are presented in graph form in the narrative, and in table form in the appendix. Survey data, informal observation and evaluation reports were triangulated for each project component. Evaluators discussed their findings and recommendations before this report was submitted.

Limitations

As a rule, Domrei avoids putting a pre-coded “Don’t know” answer in close-ended questions to encourage interviewers to probe and respondents to be specific. Despite the interviewers’ persistence, respondents replied, “don’t know” to questions 19, 30 and 71: “Were there any issues/inequities in <name of process>”. “Don’t know” was logically recoded as “no.” As respondents sometimes prefer to say they do not know rather than say something they think is bad, our results may slightly underestimate the proportion of people who believe there actually are issues with these three components.

Interviewers also added the modality “don’t know” to the questions “What do you think about “name of process?” This answer appears as DK in the report: the reader is free to interpret DK as either OK or “not good.”

The evaluators feel that some village chiefs tried to observe the interviews. While they left when interviewers told them the interview was confidential, we suspect their presence may have intimidated some respondents or discouraged them from speaking freely. We

are nevertheless confident that with 210 completed interviews, all dissenting opinions were expressed, and confirmed in the open-ended follow-up questions, even if their prevalence is slightly underestimated.

Despite these limitations, we are confident that the results presented in this report are a fair representation of the LAF project.

Evaluation Results

While reviewing the project documentation and discussing with DPM/LAF staff we identified the following project components:

- Village selection
- Project Orientation
- Participatory Risk Assessment
- Vulnerable household selection
- Disaster preparedness video
- Household planning
- Purchasing and Bidding committee
- Household grants
- Complaint mechanisms
- Project notice board
- Disaster preparedness calendar and t-shirts
- Food aid
- Capacity building

The results of the evaluation of these components are presented in the order in which they were implemented during the project.

Respondent Characteristics

The interviews with households, counterparts and project staff were structured around these different processes. Therefore, the evaluation results are presented under headings for each process. First, we will show some characteristics of the household sample. The following table shows the breakdown of household respondents by village and district.

Location	Non-beneficiaries		Beneficiaries		Total	
	n	%	n	%	n	%
District**						
Preah Sdach	56	62.9	49	40.5	105	50.0
Kampong Trabaek	33	37.1	72	59.5	105	50.0
Village*						
Traping Proboss	18	20.2	9	7.4	27	12.9
Chey Arkoal	14	15.7	17	14.0	31	14.8
Sambour	13	14.6	14	11.6	27	12.9
Pros Sva	11	12.4	9	7.4	20	9.5
Roka Thom	7	7.9	17	14.0	24	11.4
Trapaing Run	13	14.6	13	10.7	26	12.4
Kroich	4	4.5	23	19.0	27	12.9
Cham	9	10.1	19	15.7	28	13.3
Total Sample	89	42.4	121	57.6	210	100.0
*difference between beneficiaries and non beneficiaries is statistically significant at 95%: *P<0.05 **P<0.01 ***P<0.001						

Table 2 Household respondents by location

Overall, nearly 60% of households interviewed were direct project beneficiaries. This indicates that the project had excellent coverage in the target communities. We found proportionally more beneficiaries in project villages in Kampong Trabaek district than in Preah Sdach district.

We used the Domrei Wealth Index to categorise households in the target areas into three categories: poorest, poor and better off. The wealth indicator is a composite indicator of six different wealth proxy variables: housing type, ownership of assets, animals, and number of rooms used for sleeping. Interviewers were also asked to observe and rank each household in three categories, from poorest to richest. Points are attributed for each answer and a wealth score is computed for each respondent by adding these points. Scores ranged from 1 to a maximum of 16 points. The two cut-off points were then selected so that the poorest category corresponded as closely as possible to the poorest tenth percentile and the “better-off” corresponded to the “richest” tenth percentile in a “normal” population of households in rural Cambodia.⁴

The following graph shows the distribution of wealth scores across the sample.

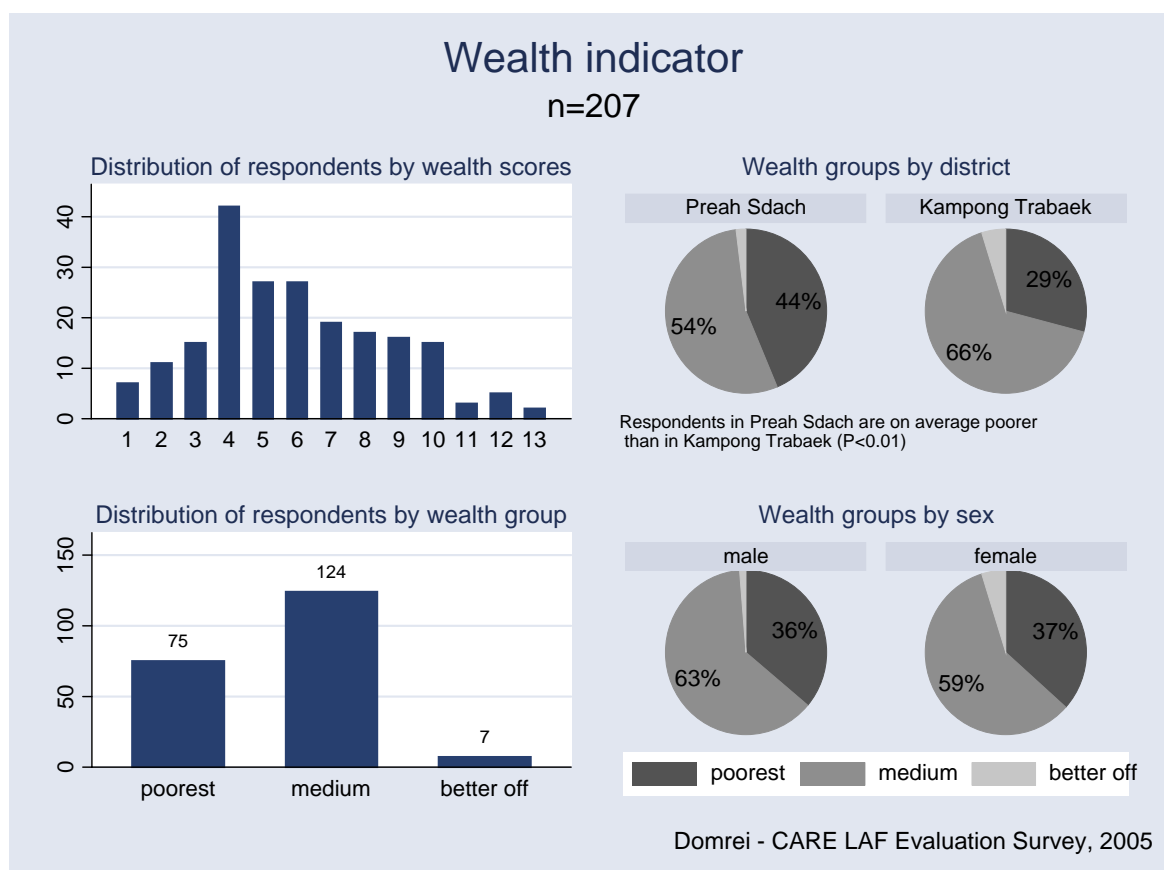


Figure 3: Distribution of respondents by wealth ranking

There was a significant difference in wealth scores between the two target districts. Household respondents in Preah Sdach district are poorer than respondents in Kampong Trabaek are. Preah Sdach households also suffer more severe flooding than households

⁴ The cut off points were defined and tested using a random sample of 2,500 households from previous Domrei surveys.

in Kampong Trabaek do and these two findings are undoubtedly linked – severe flooding leads to more damage and increased poverty.

The following table shows the breakdown of respondents by selected characteristics.

Characteristics	Non-beneficiaries		Beneficiaries		Total	
	n	%	n	%	n	%
Female respondent	52	58.4	73	60.3	125	59.5
Female-headed household**	18	20.2	44	36.4	62	29.5
wealth (interviewer ranking)**						
poorest	37	41.6	80	66.1	117	55.7
medium	36	40.4	33	27.3	69	32.9
better off	16	18.0	8	6.6	24	11.4
Total	89	100.0	121	100.0	210	100.0
Wealth group (wealth proxy)*						
poorest	22	25.3	53	44.5	75	36.4
medium	61	70.1	63	52.9	124	60.2
better off	4	4.6	3	2.5	7	3.4
Total	87	100.0	119	100.0	206	100.0
Literacy						
literate	31	44.3	31	31.0	62	36.5
semi-literate	28	40.0	41	41.0	69	40.6
illiterate	11	15.7	28	28.0	39	22.9
Total	70	100.0	100	100.0	170	100.0
*difference between beneficiaries and non beneficiaries is statistically significant at 95%: *P<0.05 **P<0.01 ***P<0.001						

Table 3 Characteristics of household respondents

There were a higher proportion of female-headed households among the beneficiary sample showing that the project was effectively targeting these families. Beneficiary households were also significantly poorer than non-beneficiary households were both according to interviewer ranking and using the wealth ranking proxy questions in the questionnaire. Only three beneficiary households from 121 (2.0%) interviews were better off. These are important findings indicating that DPM/LAF was benefiting the poorest families as well as those assessed as most vulnerable to natural disasters. It also demonstrates that 98 percent of household grants went to the poor and poorest households, which is an impressive result.

The first process undertaken by CARE was the selection of villages for subsequent project activities. In line with CARE's commitment to a participatory approach, this process involved workshops with a range of stakeholders to design criteria for selection and then to select the project operating areas.

Village	Household										Livestock										Infrastructure										Remarks
	Male	Female	Children	Total	Change	All year	Swine	Cattle	Buffalo	Other	Swine	Cattle	Buffalo	Other	Swine	Cattle	Buffalo	Other	Swine	Cattle	Buffalo	Other	Swine	Cattle	Buffalo	Other					
1. Broung Chant	121	1	84	1	271	4	2	4	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
2. Proung Bie	148	1	84	8	274	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
3. Thaproung Proung	407	1	361	2	140	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
4. Chay Chhant	325	2	388	2	138	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
5. Kroung	629	2	654	1	239	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
6. Proung Kroung	512	2	502	2	238	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
7. Broung	502	2	514	2	138	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
8. Kroung	270	2	234	4	138	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
9. Kroung	407	2	419	4	138	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
10. Kroung	400	2	419	2	237	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
11. Kroung	284	2	277	2	138	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
12. Kroung	387	2	419	2	138	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					

Approved By PCDMC
Provincial Governor

Signature of PCDMC
Provincial Governor

Signature of PCDMC
Provincial Governor

Signature of PCDMC
Provincial Governor

Notes:

- From villages 1-10, were selected.
- From villages 11-12, were not selected.

Only counterparts and DPM/LAF staff were asked about the target areas selection. Out of 35 interviews, 60 percent of counterpart respondents reported that they had participated in target village selection and 77 percent were aware of how villages were prioritised and selected. Most reported that the project compared villages based on 2000 flood damage reports for each village and commune. Twenty-seven counterparts and staff ranked the process as either good (22) or very good (5). Seven more counterparts did not take part in the process and therefore did not rank it. Only one interviewee ranked the process as “OK” and no respondents reported that it was ‘poor’. Many interviewees praised this method of selection because:

DPM/LAF Final Evaluation Report

Evaluators planned to interview leaders in nearby non-intervention villages to get their opinions on village selection. Unfortunately, this was not possible as the time for data collection was limited. During interviews, a few counterparts suggested that village flood data might not always be accurate as Village Chiefs (VC) were not always clear on how to make flood reports.

Overall, it was clear to the evaluators that all the DPM/LAF villages visited were vulnerable to flooding and contained a large proportion of poor households. Most counterparts and staff interviewed reported that there was no need to change or improve this process.

Based on the results of the evaluation, the team makes the following findings and recommendations for the selection process:

- The selection workshops held with authorities from provincial to village level were a transparent and appropriate way to identify project target areas.
- Although time consuming, the participatory process of selecting target areas was valuable in increasing ownership and ensuring that the most vulnerable communes and villages were chosen for the intervention.
- Additional time should be allocated during project planning to allow full participation without delaying the project.
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for target area selection.

Project orientation

CARE organised project orientation sessions early in the project life and these were conducted in all 20 operational villages. All households in the target villages were invited to the orientation sessions, which covered DPM/LAF objectives, the project donors, budget and allotment for household grants and a review of lessons learned from the DPAP project.

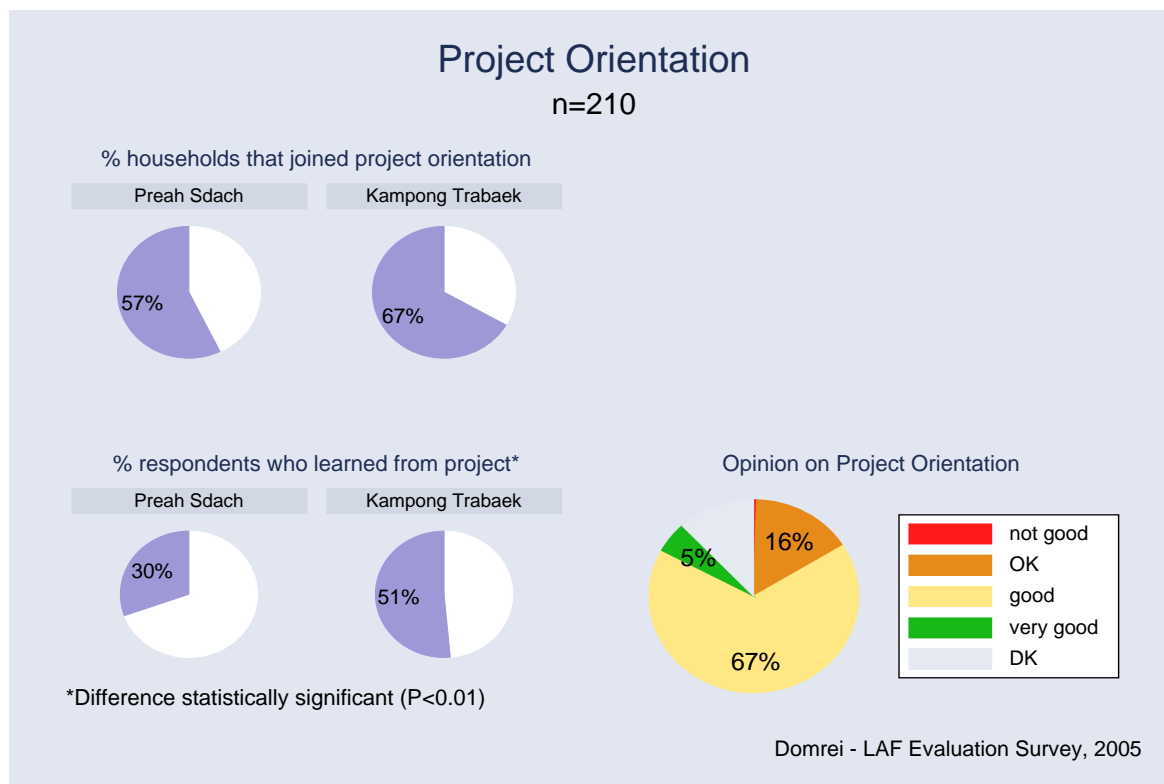


Figure 5: Project Orientation by beneficiary status

Many people attended project orientation meetings in Preah Sdach (57%) and in Kampong Trabaek (67%). Overall, 25 of the 35 counterparts and 72% of the household respondents said that the orientation was good or very good, mostly because many people attended the meetings and then understood what the objectives of the DPM/LAF project.

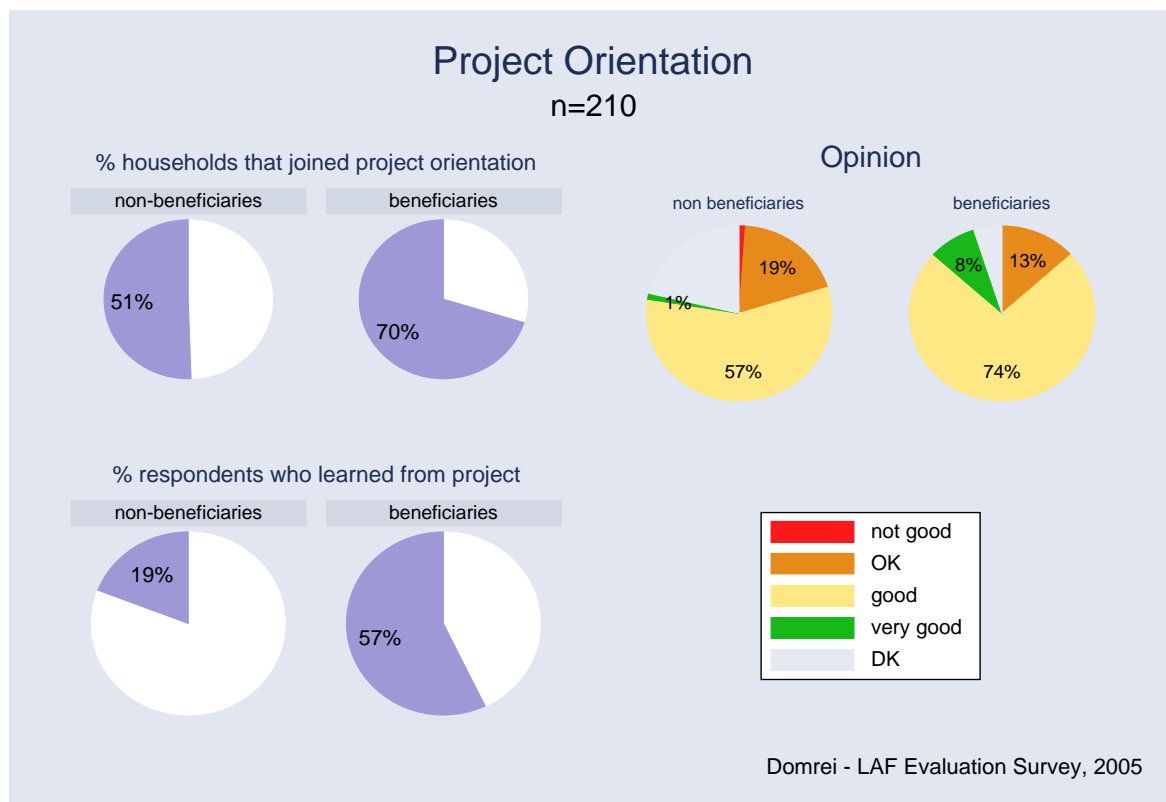


Figure 6: Project Orientation by district

Both beneficiaries and non-beneficiaries reported that project orientation sessions were important to know what activities CARE was carrying out in the village.

“Although I did not get any grants from CARE but I can learn more from CARE through meeting” (Non-beneficiary, Kampong Trabaek commune)

Donor visibility was high for the project. A sign was given to each beneficiary and most signs were fixed to the wall of each beneficiary's house. The sign contained the project and donor names. Some household respondents reported that they knew about the project donor by reading the sign although they had not attended the project orientation. Awareness of the project donors was therefore high: household respondents mentioned three main donors - CARE (36%), Australia (30%) and Norway (24%).

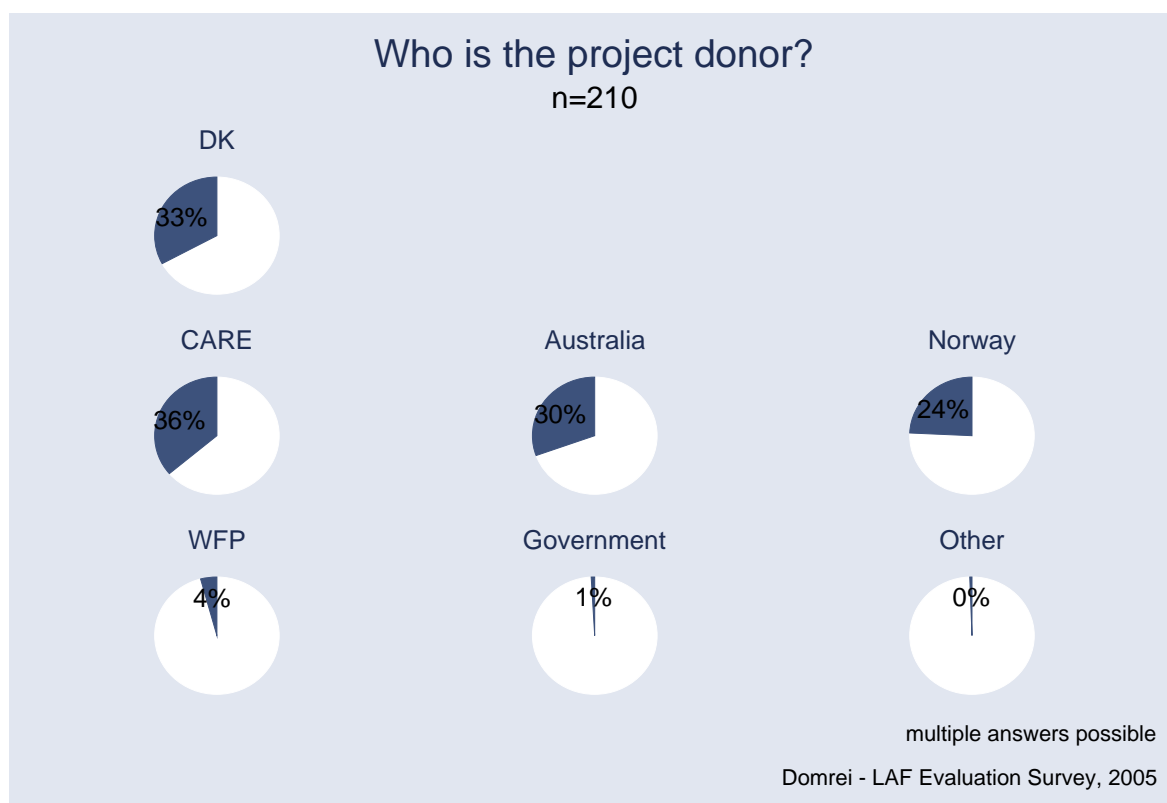


Figure 7: Awareness of project donor

CARE is generally well known and regarded in rural Cambodia. The DPM/LAF project was no exception and was popular among project villages. The project orientation not only presented the CARE project but also explained about community participation and accountability, and about the people's right to complain.

During data collection, some villagers mentioned that when CARE first came to their village, they thought that they would be cheated, and they did not expect to get anything from CARE. This distrust made them ignore the meeting and they did not attend.

Based on the results of the evaluation, the team makes the following findings and recommendations for the project orientation process:

- The project orientation sessions were an important tool to begin working with communities in a participatory manner. This process should be adapted and used in other community development projects to improve transparency and participation
- Given the poor level of literacy, using many pictures makes it easier for illiterate community members to understand
- Project orientation meetings should be publicised as widely as possible. Complete attendance is probably not achievable, but it is important to ensure that no groups are deliberately excluded.

Participatory Risk Assessment

Participatory Risk Assessment (PRA) serves two purposes. It informs CARE staff and counterparts about the specific problems and constraints that they need to address. It is also a bonding exercise, where CARE staff and counterparts build good will by demonstrating their attachment to accountability and community participation. Counterparts facilitated the PRA exercise, thus putting these principles into practice. PRA was also an opportunity for CARE to reiterate the project's purpose and organization.

PRA activities included village mapping, seasonal calendar, timeline and problem ranking. Over half of the respondents knew about PRA in each district.

The PRA activities that respondents were most aware of (or remembered) were village mapping (26%) and problem ranking (20%). Fewer respondents mentioned timelines (14%) and seasonal calendar (14%).



Figure 8: PRA group

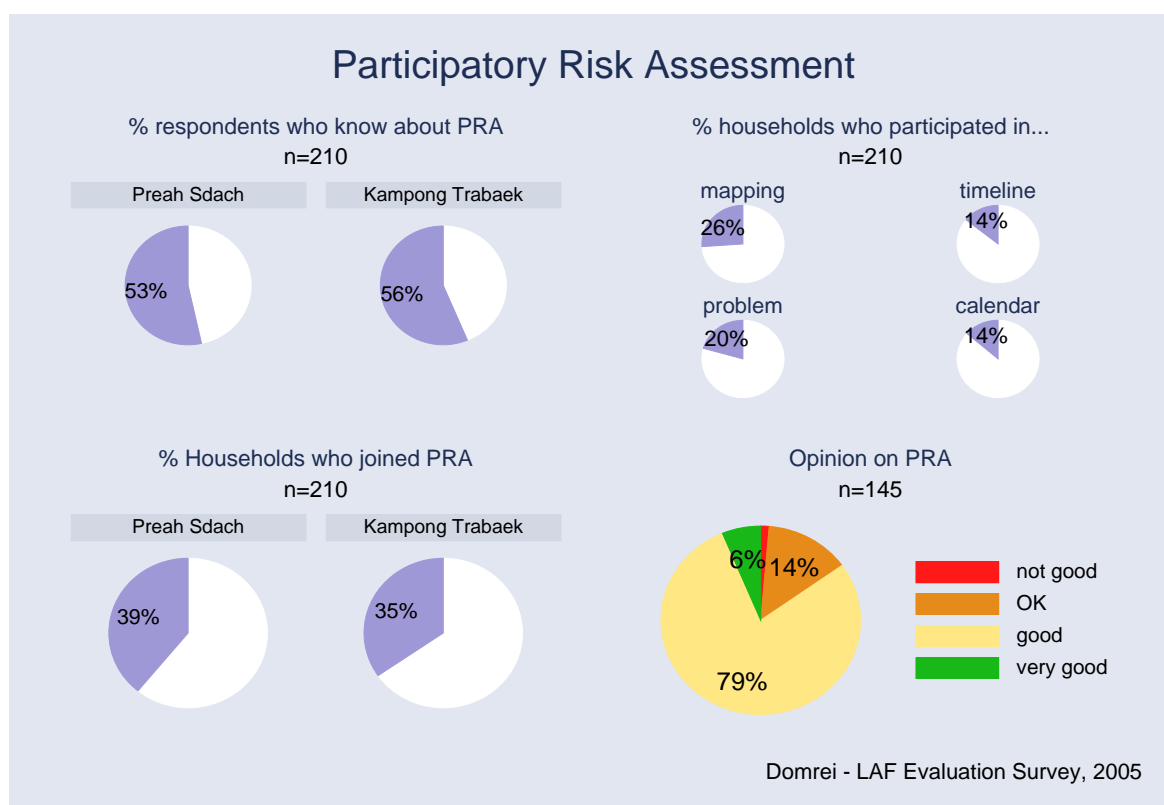


Figure 9: PRA - Awareness, participation and opinion by district

PRA participants expressed their views freely, debated (e.g. on the accuracy of village maps⁵) and were able to reach a consensus at the end of the PRA sessions. People reported that they enjoyed working in groups moderated by CARE staff.

The vast majority of household respondents (85%) said that PRA was either good (79%) or very good (6%). The most common reason reported for satisfaction with the PRA process was that it helped to obtain accurate information, as in the following quote:

“Villagers and project staff can better understand the village’s situation and problems.”

Five respondents reported that the best thing about the DPM/LAF project was the PRA process and the fact that project staff explained PRA very well. A group of people in Kampong Trabaek told one evaluator that PRA was very good

“...because the villagers understood it; they can draw maps and they can rank problems about floods.”

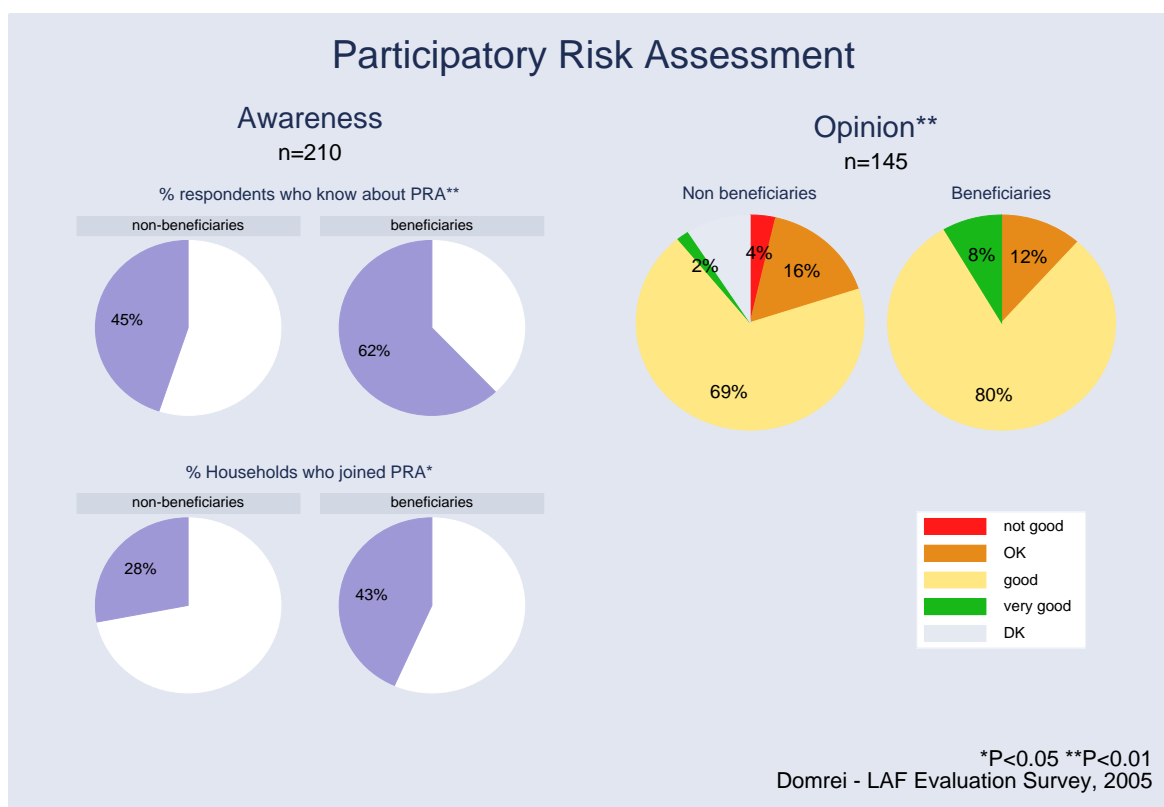


Figure 10: PRA - Awareness, participation and opinion by beneficiary status

However, not everyone was invited to the PRA sessions. In some villages respondents reported that only “important” people and representatives from different parts of the village were invited. Overall, nearly half the beneficiaries (43%) and a quarter of non-beneficiaries (28%) said they had participated in a PRA activity. Not surprisingly, a higher proportion knew about PRA among beneficiaries than non-beneficiaries.

In both districts, nearly half of the household respondents did not know about PRA in their village. Accountability and transparency are stronger when more villagers are aware of PRA.

⁵ The evaluation team used the PRA maps in the field and found some were unclear, with missing roads and households. GPS devices and a GIS would allow CARE to easily update maps and locate households.

Among the 35 staff and counterparts, 28 said that the PRA process was either good (9) or very good (19) because it gave information about vulnerable households (6), helps staff and counterparts to know the area (5) and helps CARE staff to work closely with the community.

NGO and Government staff too often limit their contacts to the village chief or the village development committee. CARE avoided this bias by getting information directly from the villagers. Counterparts and villagers recognise that PRA is a good way of collecting data.

Based on the results of the evaluation, the team makes the following findings and recommendations for conducting participatory risk assessment:

- Announce dates of meeting 3 or 4 days in advance to let the information spread and allow families to get organised. This could be done cheaply and effectively by posting small photocopied notices in multiple locations in each village.
- Shorten the length of PRA meetings so that people are not bored and can tend to their business
- Explain to villagers beforehand what PRA is for, what people will do and why it is important for people to attend the meeting. Posters are a good way to inform people about the PRA and its results.
- CARE should pilot the use of GPS devices and a GIS for village mapping activities. This would improve household mapping accuracy and facilitate updating of maps.
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for community risk assessment in Cambodia.

Selecting the most vulnerable households

The project arranged household selection meetings in each village. CARE staff facilitated the meetings with district and commune counterparts. The project invited Monks to attend in some villages as witnesses and an additional guarantee of transparency. Participants were divided into groups with a facilitator. They identified and ranked vulnerability criteria, and selected the most vulnerable households according to these criteria. The selection criteria, as a result, could be slightly different in each village.

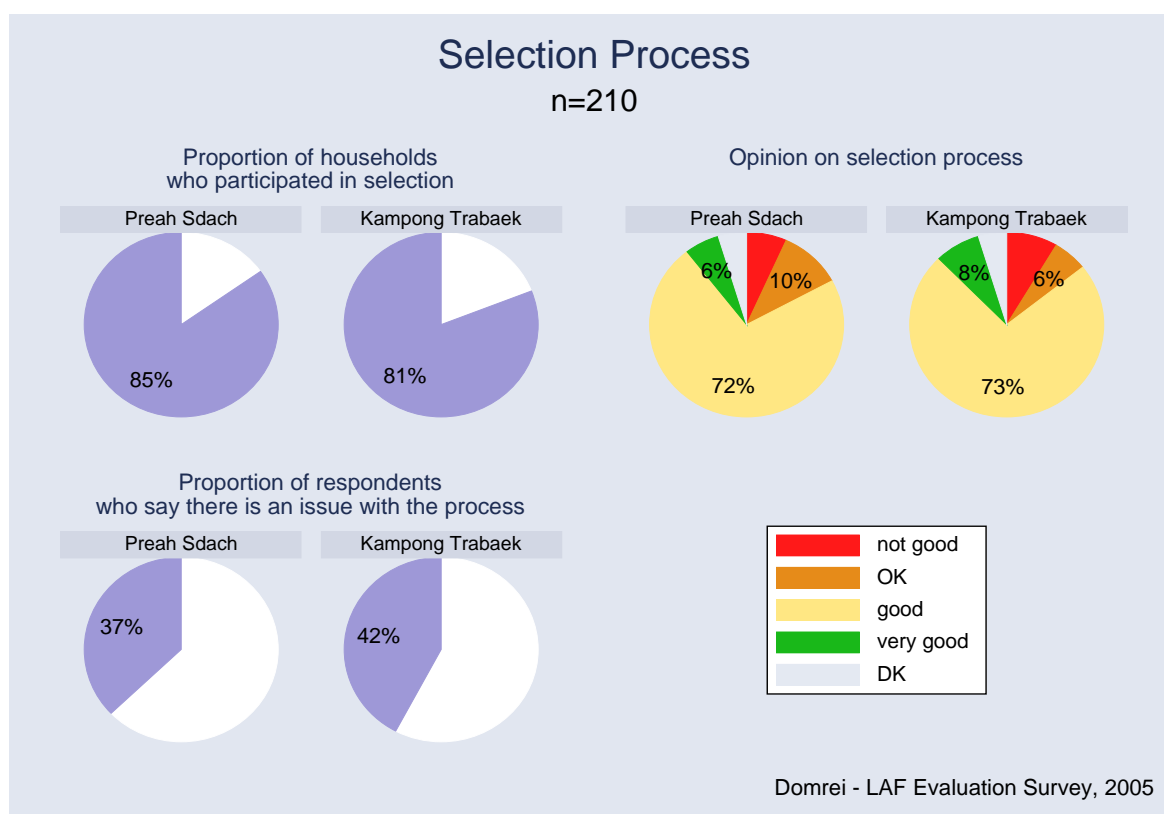


Figure 11: Selection Process- respondent participation and opinion by district

The evaluation team was surprised and impressed at the high level of awareness and participation in the selection process: 91% respondents knew about the household selection meeting; and 84% of households reported that they participated in the meetings. One third of the non-beneficiary respondents did not participate in the meeting. Among the 34 respondents who did not go to the selection meeting, ten respondents knew how vulnerable households were selected.

Three-fourths of the respondents still remember the selection process. The steps they remember the best were when all household names were listed on the board, and when the facilitator asked for an agreement on household assigned criteria. Despite the selection process' complexity, 65% of household respondents said that the selection process was easy for them to understand:

"When the process was first explained, I didn't understand. But I understood it well after the facilitator explained it to me again."

According to 80% of the household respondents and 86% of the counterparts, the selection process was either good or very good. Villagers chose the selection criteria so they seem less arbitrary and are more widely accepted.

Because villagers selected the beneficiaries, respondents and counterparts believe that the project reached the most vulnerable households.

There is therefore a wide consensus that this participatory approach to beneficiary selection is fair, and that the poorer households got most of the benefit. We have validated this statistically, using the Domrei wealth indicator. The poorest households are twice as likely to be beneficiaries as non-beneficiaries. Note that the criteria used to define wealth groups are not the same as the ones used to select beneficiaries (wealth ranking does not include vulnerability to disasters) therefore it is expected that not all poor households receive LAF grants.

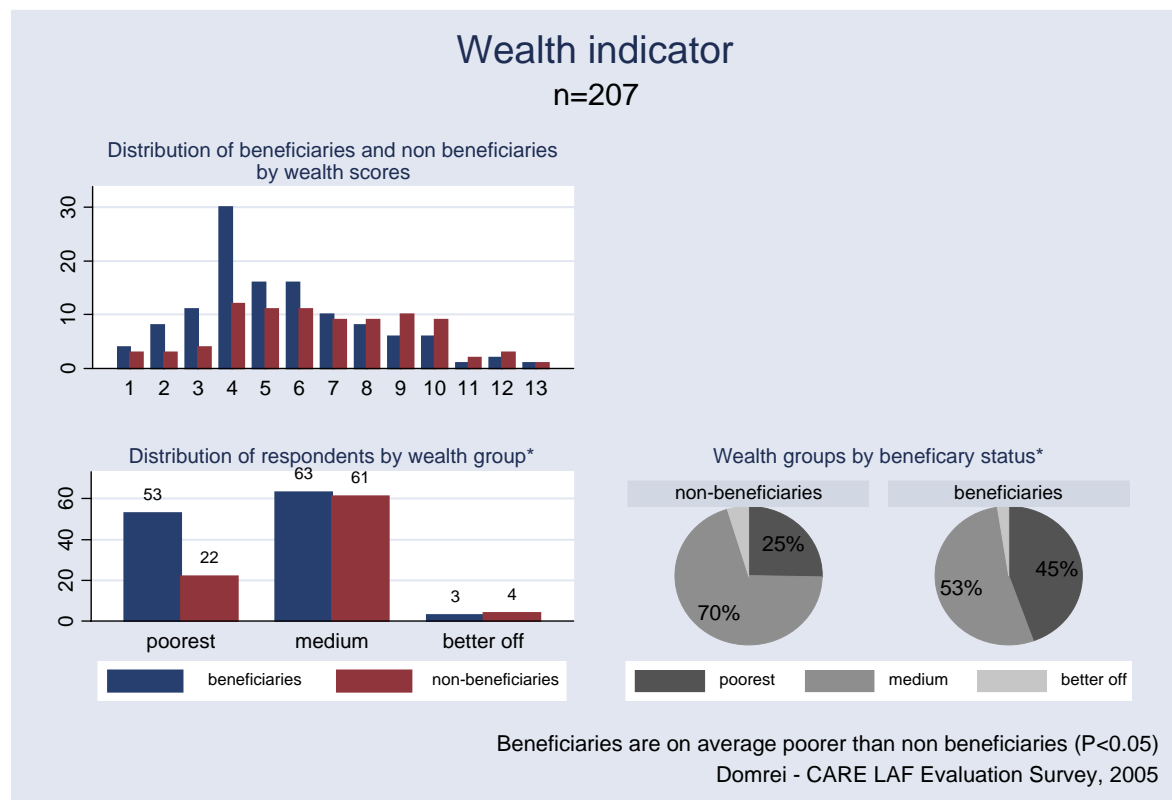


Figure 12: Distribution of beneficiaries and non-beneficiaries by wealth ranking

The proportion of woman-headed households is also significantly higher among the beneficiaries (36%) than among non-beneficiaries (20%). These findings show that selection process reaches the poorest and female-headed households. Indeed, one village respondent teased the DPM/LAF project should be renamed “the widows and orphans fund.” These reactions suggest that people naturally tend to equate vulnerability with poverty, and strongly believe that poor households should be entitled to benefits (like bicycles) even if they are not exposed to floods.

Among the 35 counterparts and staff, 32 (91%) said they took part in the selection process; and practically all the counterpart respondents knew how beneficiaries were selected. They take pride in the high level of participation and are excited about the process. Village chiefs reported that they are reassured by the high level of community participation, and their own – relatively -- low involvement:

“Villagers can’t blame me the way they did before because I did not select the beneficiaries.” Village chief from Kampong Trabaek commune

Although the household selection process was participatory and transparent, it was also the source of most complaints. Not surprisingly, non-beneficiaries complain more about the selection process than beneficiaries do. This would happen even if the process were perfectly fair and transparent, because people usually feel frustrated when their neighbours get something and they do not. LAF is no exception. Evaluators were told, “The selection process is based on favouritism” in every village. Eighty-five household respondents (40%) and two thirds of the counterparts said that there are issues/inequalities in the selection process.

The criticism raised most often by counterparts is that villagers who participated in the selection process favoured their relatives over other, more vulnerable households (8/35). Household respondents agreed, but also said that the village chief influenced the process to the benefit of his family and friends.

As a result, non-beneficiaries also have a less positive opinion of the selection process (Figure 13).

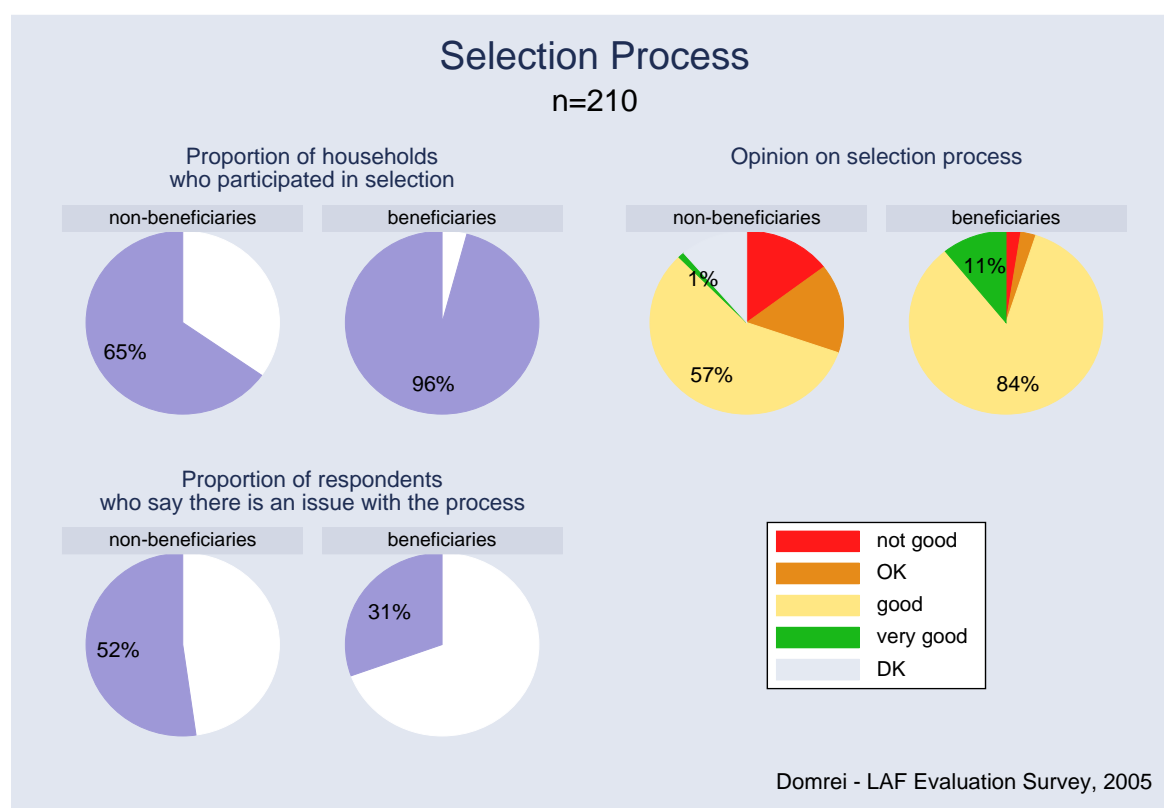


Figure 13: Selection Process by beneficiary status

It is interesting to note that villagers accuse their village chief of favouritism while the village chiefs say they avoided this accusation by not being involved. These contrasting statements puzzled the evaluation team. After discussing these contradictions with project staff, the team concluded that (1) some villagers misunderstood the selection process and (2) some were in conflict with the village chiefs before the selection process and were thus discouraged to join.

1. Misunderstandings about the selection process: There are eight priority levels, according to the problems households face. The households ranked in the first to fifth priority groups were eligible for grants. Priority 6, 7, 8 households were told they would be selected for benefits later, if there was another phase. People also thought that villages used different selection procedures and that in some cases the village chiefs chose the beneficiaries. Because of these confusions, villagers blamed village chiefs.
2. Conflicts with the village chiefs: The evaluation team documented conflicts between villagers and their chief over the selection process. In one village in Senareach Odom commune, the village chief asked people only to support the households in the south part of village because that part of the village was the most vulnerable. In three of the eight villages, respondents accused chiefs of asking beneficiaries for money (2000-3000R), saying that if they refused their names would not be on the list of beneficiaries.

Some degree of favouritism is expected in any participatory process. People naturally support families with whom they get along, or at least people they know well. Supporting one family is a convenient way of returning a favour, or building goodwill. When the facilitator asked the meeting participants if they agreed on who would get the grants, most dissenting villagers stayed quiet to avoid losing face or making enemies. For these reasons, open community meetings discourage open debate on sensitive issues and can be easily manipulated.

Almost half of the household and counterpart respondents said that selection process should be improved. When asked how, 26 respondents said that the **project staff should visit each household**, and 19 suggested providing grants to all households. Others suggested that all the households should participate in the selection.

While it makes sense to discuss the selection criteria with many people, it is more equitable for CARE staff to use the community-validated criteria and select the beneficiaries directly. CARE staffs are less likely to be accused of bias because they have fewer conflicts of interest than villagers and village leaders.

Based on the results of the evaluation, the team makes the following findings and recommendations for selecting the most vulnerable households:

- The beneficiary selection process is one of the most crucial processes in the project and one of the vulnerable to corruption and bias. DPM/LAF designed and implemented an excellent and equitable method for this difficult step.
- Inevitably, some problems occurred in beneficiary selection and the process should be further refined and improved in other community-based projects.
- Invite all villagers to the meeting and have project staff distribute the invitation letter themselves.
- Inform villagers on the purpose of the meeting in advance.
- Review and correct the list of households before the meeting
- Seek villagers agreement on each household's rank anonymously (secret ballot)
- Have project staff visit each household to check that the selected households are really among the most vulnerable
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for participatory beneficiary selection in Cambodia

Disaster preparedness video

The project obtained a video on community based disaster preparedness from the National Committee for Disaster Management (NCDM). This video was shown in all project villages after household selection and before household action planning began. In more remote villages, CARE rented a television and video from inside the village. In other areas, project staff transported the equipment from the project office. The video contained some simple instructions on preparing for, surviving and recovering from floods.

Video is an enjoyable media to watch and to inform people as people prefer to see 'reality' rather than listening to people speak. Videos are particularly appropriate for illiterate populations. Most counterpart and project staff (19/35) reported that showing the video was an effective way to inform people about disaster preparedness. The video was easy to remember and understand.



Figure 14 Disaster preparedness video

Around half of the counterparts (46%) said there was no need to improve the video because this was a good way for people in Cambodia to see the difficulties caused by floods, because the video shows actual situations.

Although the video component of the project was not included in the household questionnaire, many respondents mentioned it during the evaluation. In Pros Sva, informal conversations with 11 villagers found that the video was very good because it helped them understand about disaster preparedness and avian influenza. Significantly, among the 86 household respondents who reported that they had learned things from the DPM/LAF project, 45 reported that they learned from the video.

"Many older villagers and young children came and enjoyed watching the CARE video very much, they learned how to take care when flooding." villager in Cham village.

The video was well liked but some people commented that the television's screen was small, so that it was difficult to watch. More shows for smaller groups of people might alleviate this problem. Some villagers commented that the video showed Vietnam and they did not want to see Vietnam. In Chey Arkoal village, a group of five people said that they had never joined the video show because they were not invited. These people lived on the outskirts of the village and knew little about various project activities.

Based on the results of the evaluation, the team makes the following findings and recommendations for the video presentation on disaster preparedness:

- The disaster preparedness video was a very effective way to disseminate information to a largely illiterate population and this process should be expanded and continued
- Using equipment already located in the village was a practical and sustainable approach. This could be taken a step further by providing copies of the video to

television and video owners in exchange for playing the video on multiple occasions and in the evening when people have more time to watch.

Household Action Plan

Households from the first five priority groups were selected for the project sub-grants, and therefore eligible for Household Action Planning.

The purpose of the household action plan was to help these households to decide what they needed the most to cope with the next floods. Household planning comprised six steps, of which the first five were conducted in public meetings: (1) presentation of the selection criteria, (2) problem identification, (3) prioritisation, (4) identification and (5) prioritisation of possible solutions. Project staff and counterparts then visited individual families to help them plan (6).

Grant beneficiaries could choose between a variety of items: hand pumps, water jars and filters, household safe areas and safety hills, boats, fishing equipment, bicycles, farming equipment and supplies, and house repairs.

Most respondents (82%) know about the household planning process. Among beneficiary respondents, 89% said they took part in the planning process. While only grant beneficiaries were involved in household planning, 15% of the non-beneficiaries also said they participated.

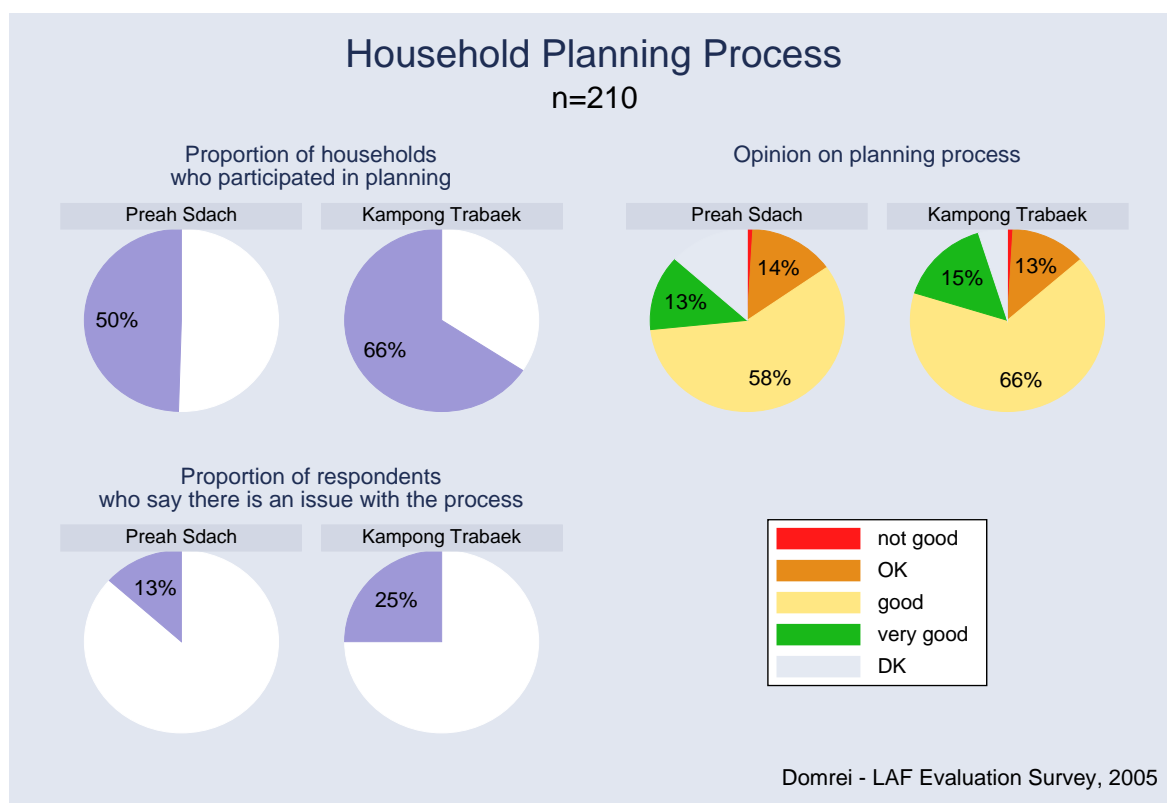


Figure 15: Household planning, participation and opinion, by district

Three quarters of the households and of the counterparts ranked the household planning as either good or very good, because people could choose what they wanted. As a result, *“Each household got what it really needed.”*

Most (81%) of the respondents reported that there was no issues or inequalities in this process. However, some household heads were old and/or illiterate, and had difficulty in deciding what to get. They found it especially difficult to calculate how much they could get with the grant budget. In this case, the direct involvement of CARE staff was crucial.

Only three of the 35 counterpart respondents did not attend household planning meetings and most counterparts understood the household planning process.

Although household planning, with its six steps, is a little complicated, most respondents understood the basic principle:

“People just tell CARE what problems they face and what they need.”

Two thirds (61%) of the respondents reported that household planning was easy to understand, most probably because CARE staff took the time to explain it clearly before starting.

“This process is easy to understand because I just answered the facilitator’s questions,” said a middle-aged woman in Kampong Trabaek.

Most (30/35) counterparts said this process was easy for villagers to understand because facilitators were well trained and CARE staff explained it well in the meetings.

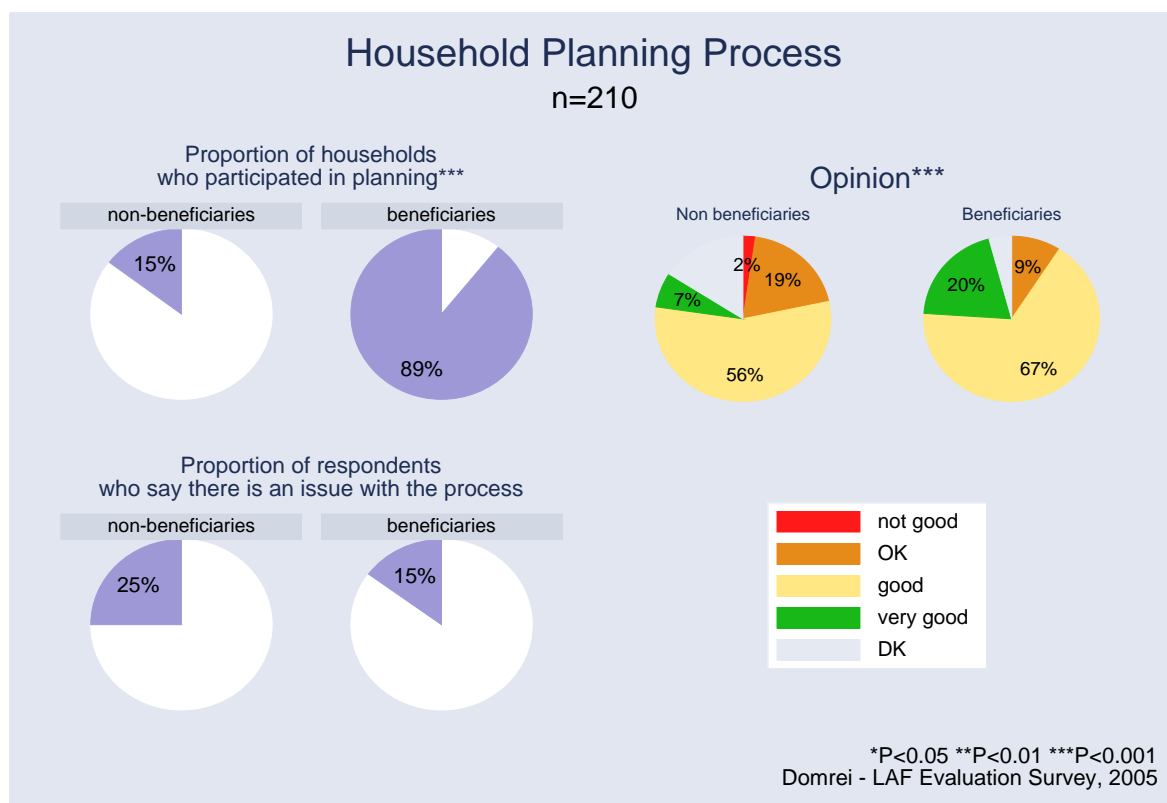


Figure 16: Household planning, participation and opinion, by beneficiary status

Only 11% of beneficiary respondents reported that they did not participate in the planning meetings, either because they were travelling, invited at short notice, or were too busy. The high level of community participation in the household planning process is impressive, and explains this component’s success.

Based on the results of the evaluation, the team makes the following findings and recommendations for the household planning process:

- Invite beneficiaries two or three days in advance and state meeting’s purpose clearly
- Shorten and simplify the existing household planning process. Use more pictures and less text to explain the process.
- Announce the price of items before household planning process to help villagers calculate their contribution.
- Fix and announce exchange rate between the dollar and Riel

- Explain, repeat and post disbursement procedures.
- Include in the household profile form
 - household priority rank,
 - total money received, contribution, remaining balance;
 - Household number (for easy reference)
 - financial procedures
- Give each household one copy of the household profile form as a receipt, to be used as evidence if they want to make a complaint
- Set up a user friendly beneficiary database to find data on specific beneficiaries and for statistics
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for household action planning in Cambodia

Purchasing and Bidding Committee (PBC)

In a laudable attempt to reduce corruption in project procurement, the DPM/LAF project developed a set of guidelines for purchasing and bidding for acquiring goods and services under the project. The first part of this was selecting members of a Purchasing and Bidding committee (PBC). Members included CARE staff, CCDM and project beneficiaries. Expensive goods were purchased using a competitive bidding process monitored by the PBC. The PBC purchased some good directly, with different members checking prices at different markets.

These guidelines covered quite a broad range of activities. These included setting the work rates and payment schedules for construction of household safety hills, requiring safety hills to meet Sphere minimum standards and guidelines for dealing with contractors. Generally these guidelines seems to have been followed, we heard no complaints from beneficiaries about payments and all the safety hills we saw were well constructed with grass on the side slopes to prevent erosion.

Almost all counterparts interviewed (30) participated and knew about PBC member selection. Eleven respondents were PBC members. Almost all counterparts (33) ranked the purchasing and bidding process as good or very good. More than half of counterparts and staff reported that there was no need to improve this process. Nearly all counterparts and staff (31 of 35) reported that there were no problems with this process.

One counterpart said, *“This process is very fair because the member of PBC is from each level⁶ and includes representatives of vulnerable households.”*

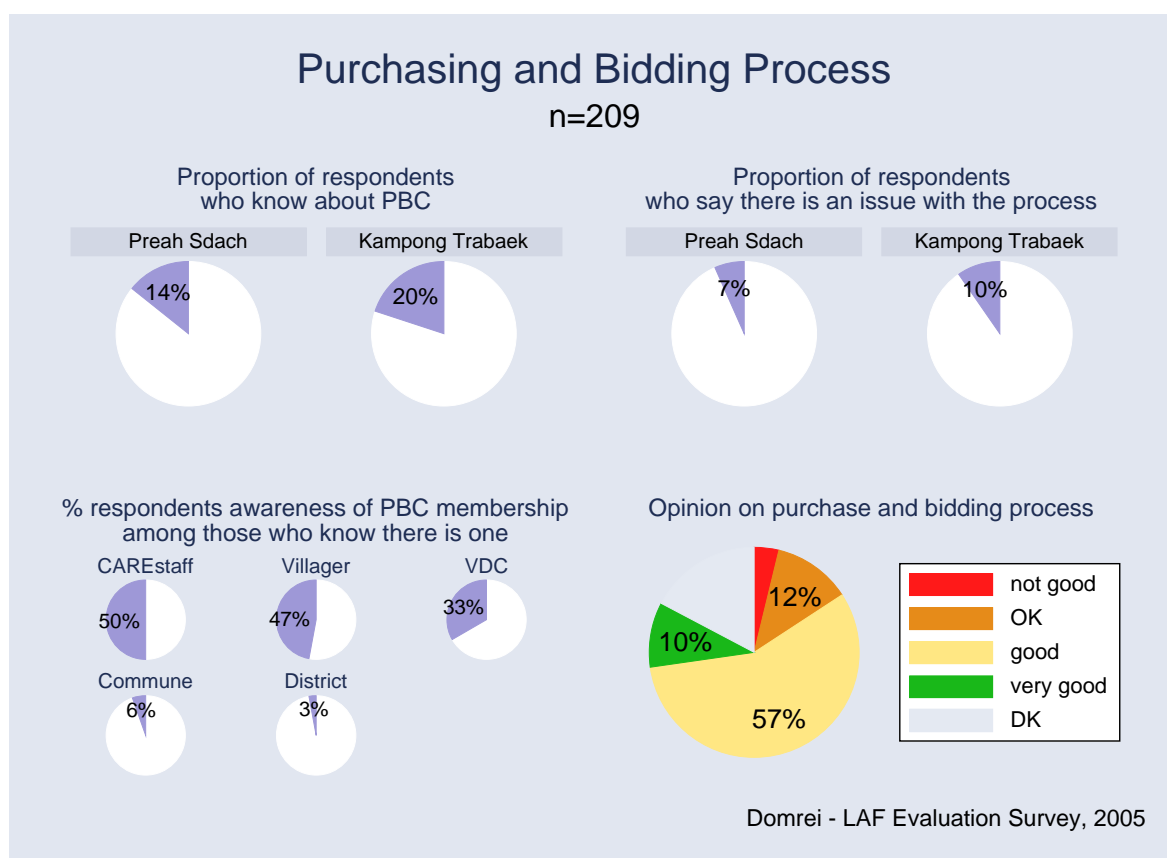


Figure 17: PBC – Respondent awareness and opinion

⁶ ‘Level’ here refers to the different levels of local government, village, commune and district.

However, very few household respondents knew about the committee. A few households reported problems with the price and quality of items purchased for household grants. It is important that the procurement process be clearly explained to beneficiaries.

Based on the results of the evaluation, the team makes the following findings and recommendations for the purchasing and bidding committee:

- The concept of an elected committee tasked with procuring project goods and services is an excellent one. CARE and the DPM/LAF project should be congratulated for making such a concrete step towards accountability to their beneficiaries and transparency.
- However, many beneficiaries did not know that the committee existed, thus reducing the positive effect of the committee. This process requires additional community promotion to become truly transparent.
- Some beneficiaries had issues with the price and quality of items they received (see household grants) a more widely promoted and better understood PBC could have solved and perhaps avoided these issues.
- This process, which has already been documented in Khmer and English, should be distributed to other projects as a draft 'CARE best practice' publication for project purchasing and bidding.

Household Grants

The household grants were the project's most tangible benefits. As survey respondents were randomly selected, the proportion of beneficiary households who received grants is an unbiased estimate of the project's coverage rate. Among the 210 households surveyed, 47% in Preah Sdach District and 69% in Kampong Trabaek District villages were given grants.

Beneficiaries chose a variety items. Zinc sheets (22.5%) were the most popular, then axes, safety hills, jars, water filters, fishing nets, wood, palm, fertilizer, baskets, tubes, roof, bicycles, bottles of water, house repairs, pots, rice seeds, wells, nails, rice, pumping machines, tents, knives, hoes, buckets, fishing equipment, batteries, boards, blankets, posts, tin, bamboo, bricks, vegetable seeds, etc.

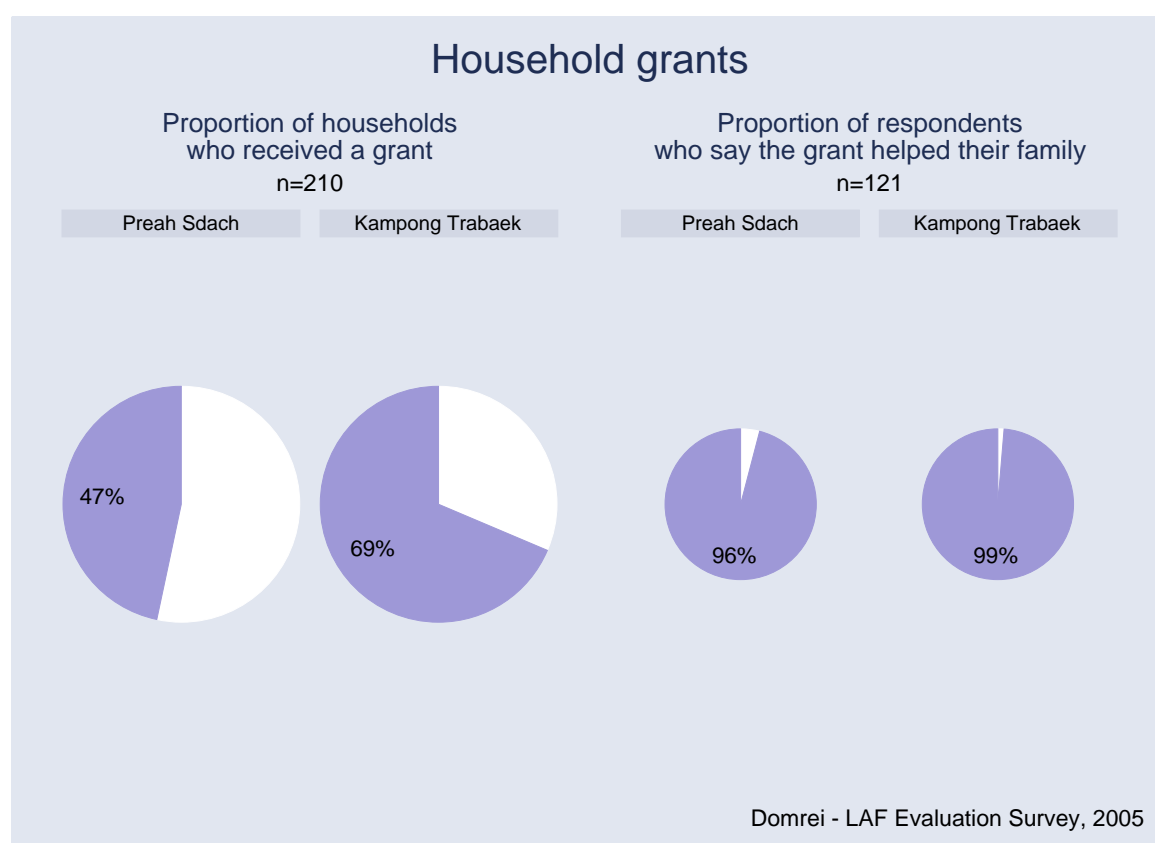


Figure 18: Household grants by district

Most assets, like bicycles and boats, are useful all year long. Water filters and jars to store water have an obvious positive impact on health. Likewise, house repairs have an effect on self-esteem.

The grant money that a household got varies according to the priority group to which it belonged. According to grant guidelines, the fourth and fifth priority beneficiaries had to contribute 10% of the total costs in labour or cash. Beneficiaries who requested less than the grant amount expected to get the balance back.

The following table shows the number and proportion of beneficiary households and how the grants helped them.

Benefit from Grants	Number (%)
House is now better for living	50 (42%)
Our living condition improved	21 (18%)
Store water	17 (14%)
Keep something Above/out of the water	17 (14%)
Have safe water to drink	13 (11%)
We now have a means of transportation	13 (11%)

Table 4: Benefits from household grants

Households who wanted to purchase more than their grant money allowed had to pay the difference. There was some confusion because some households had no money to pay for extra costs, while others who spent less than the grant allowance did not get the balance back. The evaluation team found this problem in every village visited. In Kampong Trabaek commune, a beneficiary from a different village asked the evaluation team when she would “get her money back.” According to project staff, people are confused because some beneficiaries provided their contribution in cash. Some villagers did not understand the system, so the money that they think is owed to them could actually be the money that they had to pay as their own contribution.

However, a couple of respondents complained that items purchased by the bidding and procurement committee were low quality, or that they got fewer than they ordered. For example, one woman showed us that lumber and wooden poles were too fresh for construction, or were smaller than planned. One family reported that they expected 19 sheets of zinc, but only received 15 and were told to wait for the next CARE project to get the other four.

I live in Trapaing Run village. I am always sick. I just recovered from typhoid fever and the doctor told me not to work hard. Look at my hand, see the red point? That is the stain from serum injection. I am not strong at all because I am old and often ill. I live in a small hut with my grandchildren. They are young and they cannot support the family, so I must work to earn money. I go to Phnom Penh to sell corn at Damkor market. Sometimes I don't earn any money. But, I continue because I really need money. I know that CARE comes to help people in my village. I was given a pumping well. I am very happy because I need it to get better water, especially for drinking. But, I was disappointed that I had to give more money than planned to the village chief. He ordered me to give 30,000 riel for the well's service— I know the money for service was set in household plan and I don't need to pay more. However, I forced myself to give him or I wouldn't have been allowed to use the well, and my name wouldn't have been heard or seen for the next distribution of grants. You know 30000 riel is a lot for villagers, like me. I know CARE is very good to me and other people, but I hate the village chief and I never save his face when I meet him. I always blame him and say what I think, and now he hides from me and seldom comes near my house.



Figure 19: Case study – pump and well

A few respondents said they got different items than those they had requested. For example, one household asked for wood but got a water filter instead.

People also had difficulties contributing their share of the grant. One family planned to build a house. It used the grant money to get wood, but also needed to buy zinc, pillars, etc. Therefore, the family borrowed money, and now has problems repaying the loan.

Some people said that money left from their plan was not given back, and they do not understand why. For example, a family got \$100 and chose to get a well and a fish net, for less than \$100. The family asked to have the balance back, but was told by the village chief that the money would be given in the next CARE project. However, the project policy was that left over funds were returned to the grant fund for additional grant items and for lower priority households.

A few village chiefs asked grant beneficiaries for more money than planned. See the case study box above for an example. When this family refused, the chief reportedly said that their names would not be on the next beneficiary list, and that they would not be eligible for funding from other organizations. This village chief threatened to confiscate some parts of the well to make sure that they could not use it. Naturally, Village Chiefs were not authorised to collect any money from beneficiaries during the project.

Despite these misunderstandings, disappointments and disturbing accusations, the grant beneficiaries were obviously happy to have gotten the grants. Awarding grants is a complicated and risky because it relates to money, and money is what concerns people the most. Nevertheless, CARE was successful in providing the household grants. Indeed, the overwhelming majority of beneficiaries report that the grants will help them deal with the next flood (96% in Preah Sdach and 99% in Kampong Trabaek), and that they are better prepared for flooding than in previous years.



I am 77 years old. I live in Trapaing Run village, Kansom Ork commune, Kampong Trabaek district, Prey Veng province. I am happy because CARE helps me so much. I live alone in my small house. My granddaughter lives in Phnom Penh and she can't visit me regularly. CARE gave me this new house. I got 80\$ in household grant so they provided me with 19 zinc plates, 1 water jar and 2 wood. I have a jar for keeping water for using especially for dry season. It makes things easier for me because my eyes are bad so I find it really difficult to go anywhere. When CARE staffs come to my village, they always visit my house and bring me some fruit or cake. They talk to me softly. CARE really helps the old people like me. I was sick during the grant distribution, so I couldn't go to get my grant. CARE staff brought the grant to me and then helped to repair my house. No one helps like CARE. I'm sorry I have nothing to show my gratitude. I really thank CARE for helping a lonely person. Thank you Mr. CARE for letting me live.

Figure 20: Case study – household grants

Households obviously have different priorities, so the fact that different households got different things was seen as positive, rather than unfair. It also demonstrates that CARE was responsive to beneficiaries' needs, despite the additional procurement work that this entailed.

Based on the results of the evaluation, the team makes the following findings and recommendations for the household grants:

- Improve the quality of the items procured for the grant beneficiaries.

- Avoid issues regarding unspent or overspent budgets and refunds by simplifying the guidelines.

Complaint mechanisms

Three complaint committees were initiated under the DPM/LAF project. The *Village Committee for Addressing Complaints* (VCAC), *Special Committee to Address DPAP Complaints* (SCAC) and the *Project Committee for Addressing Complaints* (PCAC). Villagers could complain through the complaint box, the complaint committee, the telephone, or directly to project staff.

The project established VCAC in each target village to address issues brought forward by people. The six committee members came from district level to community level. Two beneficiary representatives were selected on each VCAC. There are eight steps in the complaints and resolution process.

Few NGOs have gone as far as CARE in implementing a complaints mechanism, so its existence is in itself very positive. Complaints are a valuable source of information that project managers can use to improve a project. It ensures that the programme is more responsive to the needs of beneficiaries. It also shows villagers, local authorities and project staffs, in practical terms, that project implementers are accountable to beneficiaries.

Surprisingly, the complaints mechanism is less popular with villagers than with counterparts and CARE staff: Less than three in four household respondents thought it was either good (63%) or very good (8%), while all but two counterpart respondents said it was either good (57%) or very good (37%). This counter-intuitive result can be explained by the fact that many villagers (1) find the complaint procedures difficult to use and/or (2) are suspicious.



Figure 21: Complaint box

To simplify problem solving, complaints are processed at different committee levels, depending on the issue. Most (83%) counterparts and staff knew about the levels of complaint committees. Only one counterpart respondent was not familiar with the complaint process. Every process in the project is participatory, so there were few complaints addressed to the SCAC and PCAC. Villagers were more concerned with complaints at community/VCAC level where we focused the household questionnaire.

Seventy percent of household respondents reported that they dared to complain through the VCAC. If the complaint is not about a VCAC member, then it is theoretically easier for villagers to complain verbally to the VCAC.

A third of the respondents knew that they could complain to a CARE staff. This was the most frequently mentioned complaints method. This makes sense: CARE staffs do not live in the village and are easier to trust (they have fewer conflicts of interest and less suspicions of nepotism). In addition, CARE staffs are seen as having more influence on decision-making and money matters than a village leader or the VCAC. As meeting facilitators, CARE staffs are expected to answer questions and to be motivated to solve problems fairly.

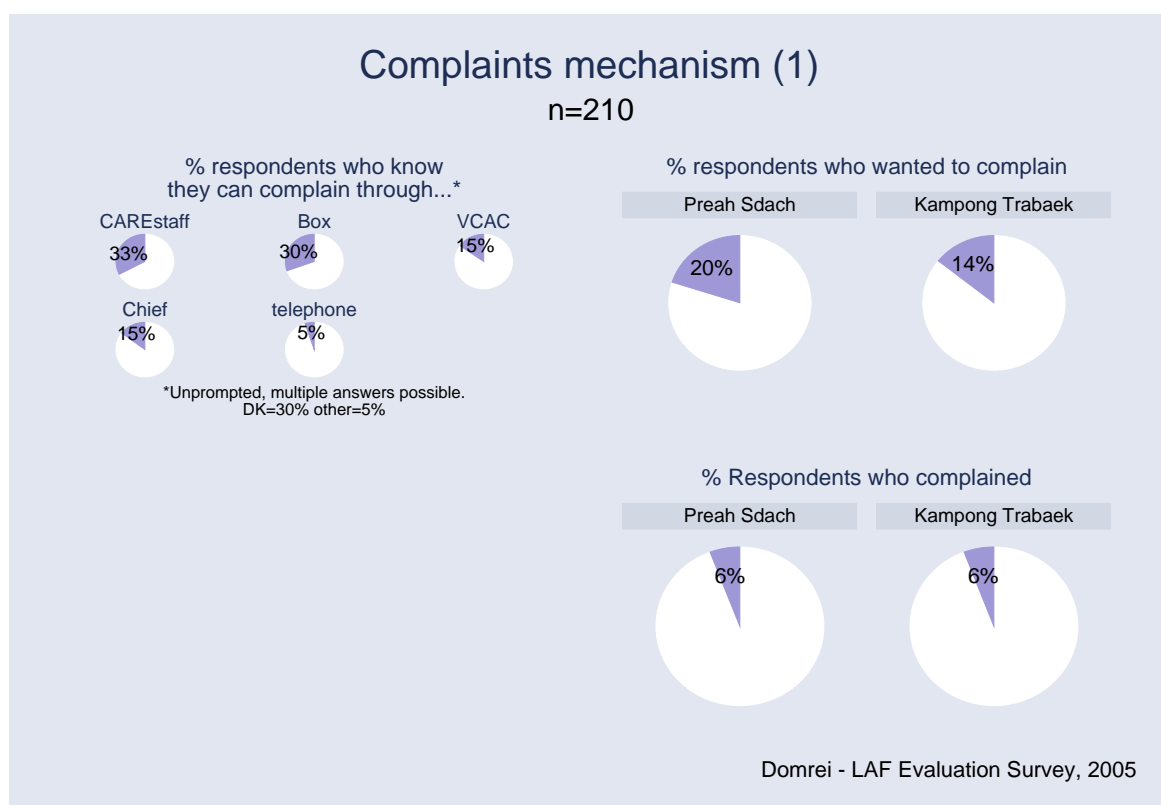


Figure 22: Complaint mechanisms – awareness and complaints

The complaint box was the second most frequently mentioned complaint mechanism (30%). It is easier to use when complaining about individuals (counterparts or CARE staff or even VCAC members). Complaint boxes were attached to each village notice board, so most household respondents (71%) were aware of them. Yet only 58% of household respondents -- including respondents who said they did not know about the complaint box -- said they would use it to complain. Using the complaints box requires writing skills, so it is not surprising that more people say they would complain to the VCAC than in writing.

There were two telephone numbers for complaints. In each village, people can find complaint telephone number on the complaint box. Most villagers do not have a telephone and rarely use one – telephone calls also cost money – so it is not surprising that this was the least known of the different complaint mechanisms. Only a small proportion of respondents (20%) reported that they knew where to get the complaint telephone number. However, as with the complaint box, 58% of respondents reported that they would use the telephone if they wanted to make a complaint.

In our sample, only a dozen respondents said they complained (5%), yet all of the complaint systems were used at least once: by putting letter in the complaint box (1), telephone (1) and verbal complaint to complaint committee (1). This suggests that having more than one means of complaining is appropriate. The most popular means of complaining were complaining to the village chief (6), to CARE staff (4) and during community meetings (2).

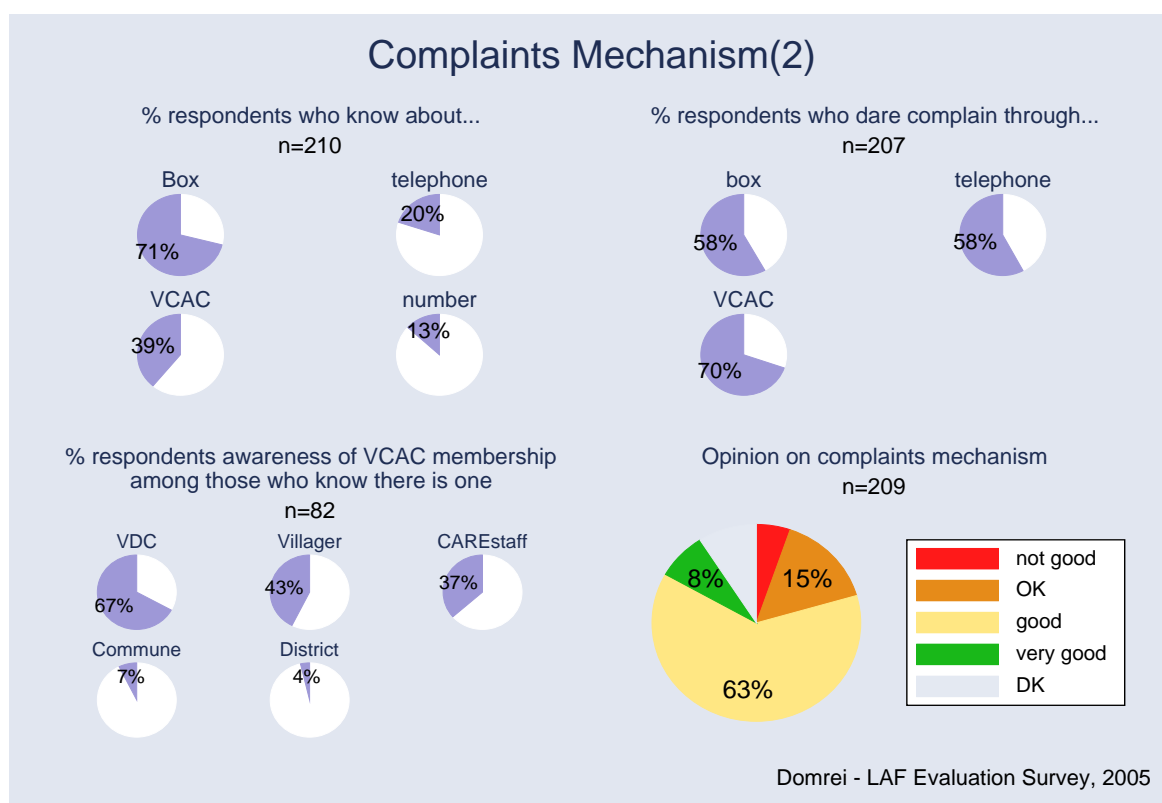


Figure 23: Complaint mechanisms – awareness, appropriateness and opinion

Complaint mechanisms were established quite recently, when all the other project components had been implemented. People therefore thought that it was useless for them to complain, since everything was already decided. Moreover, people with legitimate complaints feared that other villagers --especially beneficiaries--would accuse them of being jealous and making trouble. A few respondents reported that the village chief or project staff told them that it was too late to complain and, in two cases, that they would not get any future benefits if they did.

These reasons probably explain why among 36 respondents (17%) who said they wanted to complain less than half of them (12/36) did so. To quote one respondent:

“The complaint boxes are just like the shadow of the project; when the project ended, boxes were created to make sense that the project is for villagers and villagers can complain, but they are not used for feedback.” conversation with villagers and CARE staff.

The complaint boxes were established late in the project, after vulnerable households had been selected and just before the final household grants were given.

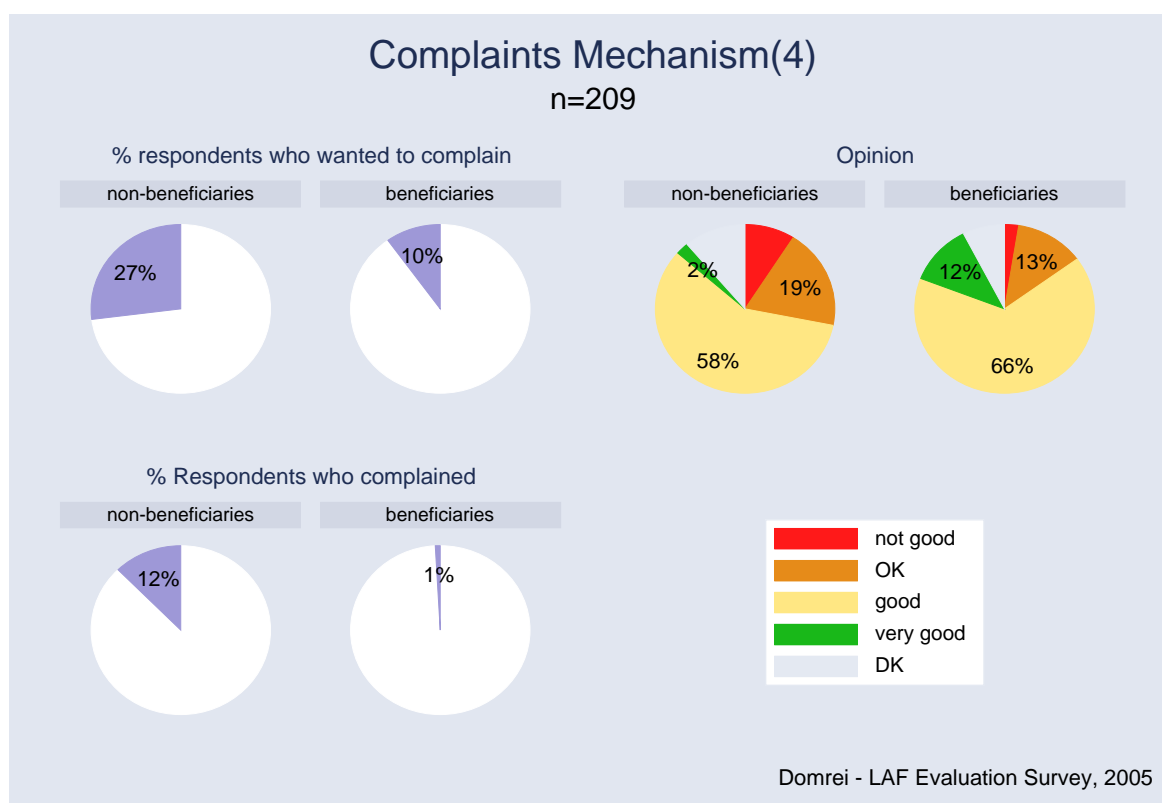


Figure 24: Complaint mechanisms by beneficiary status

Based on the results of the evaluation, the team makes the following findings and recommendations related to complaint mechanisms:

- CARE and the DPM/LAF project should be congratulated for making accountability to beneficiaries a reality instead of empty rhetoric. This component demonstrates a right-based approach to development and makes CARE accountable to the people it assists
- Project staff and community leaders need to be encouraged to view complaints as opportunities for change and learning rather than threats to be avoided if possible. This will take time. One simple suggestion to mainstream this would be to include complaints received as an indicator of success in project log frames – demonstrating a commitment to accountability and participation.
- People clearly value a variety of complaint mechanisms – having several different methods make the mechanism accessible to more people.
- Compliant mechanisms should be established early in the project and beneficiary communities informed about the mechanisms during project orientation.
- Project staff should visit each village regularly and talk with people – this is perhaps the most effective complaint mechanism of all. This was how the best project feedback was gathered for both the DPAP and DPM/LAF evaluations.
- It's better if local authorities don't always know the visiting schedule and project staff do not always visit households with the local authorities
- Households in distant parts of the village should be a priority for project visits. Often these families are isolated from their communities for a variety of reasons – extreme poverty, HIV/AIDS, political affiliations, mental illness – that can also make them more vulnerable to disasters.
- Project staff should keep the complaint box key to reassure villagers

- People who want to complain should not be required to show or write their names their name and their complaint should be confidential
- The complaint box should be in an appropriate place (far from authorities house)
- Villagers should be encouraged to dare to complain. It is important to explain the purpose of complaint mechanisms clearly and to make it clear that complaining will not affect their benefits or the possibility of getting aid in the future.
- This process, which has already been documented in Khmer and English, should be further developed and distributed to other projects as a draft 'CARE best practice' publication for promoting accountability and a rights-based approach in community development in Cambodia

Project notice board

A notice board is an important means of communication, as people cannot attend all community meetings, cannot rely on word of mouth and may have faulty memories. There was at least one project notice board in each target village.

Over half of the respondents (123/210 household and 17/35 counterpart) said that the notice board is good because it informs villagers. Among the eight sites, six had a notice board in the middle of village so most villagers can look at the news on the board. Most information is about flooding (what to do before, during and after the flood). In general, people have a good opinion of the notice board. For example, they learned about the water they should drink; how to store food in sanitary condition; keep fit and protected from germs and disease, etc. Later a complaint box was attached to each notice board. Most notice boards are in the middle of the village as people regularly pass the centre of the village than anywhere else.



Figure 25: Project notice board

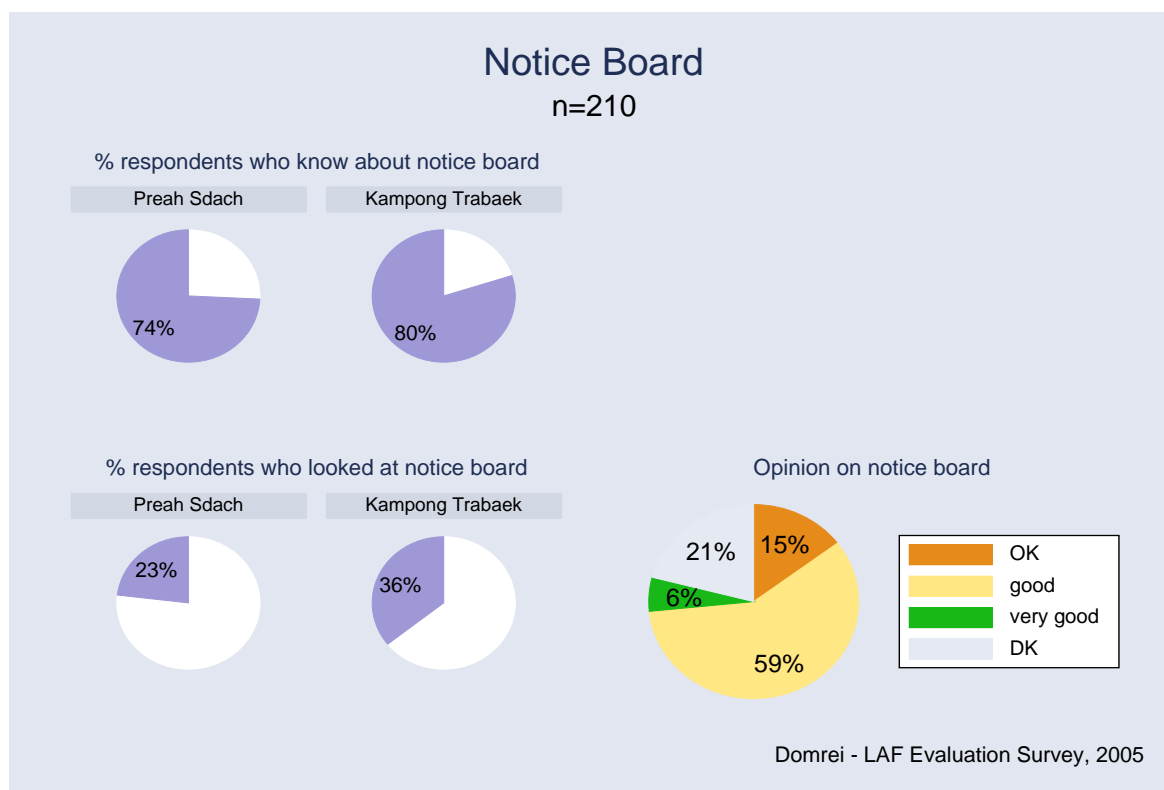


Figure 26: Notice board – respondent awareness and opinion by district

Although 107/210 household respondents reported that there is no need to change the notice board system, there are still people who seem to be unaware of its existence. Most households know there is a notice board in their village, however less than a quarter had looked at the board.

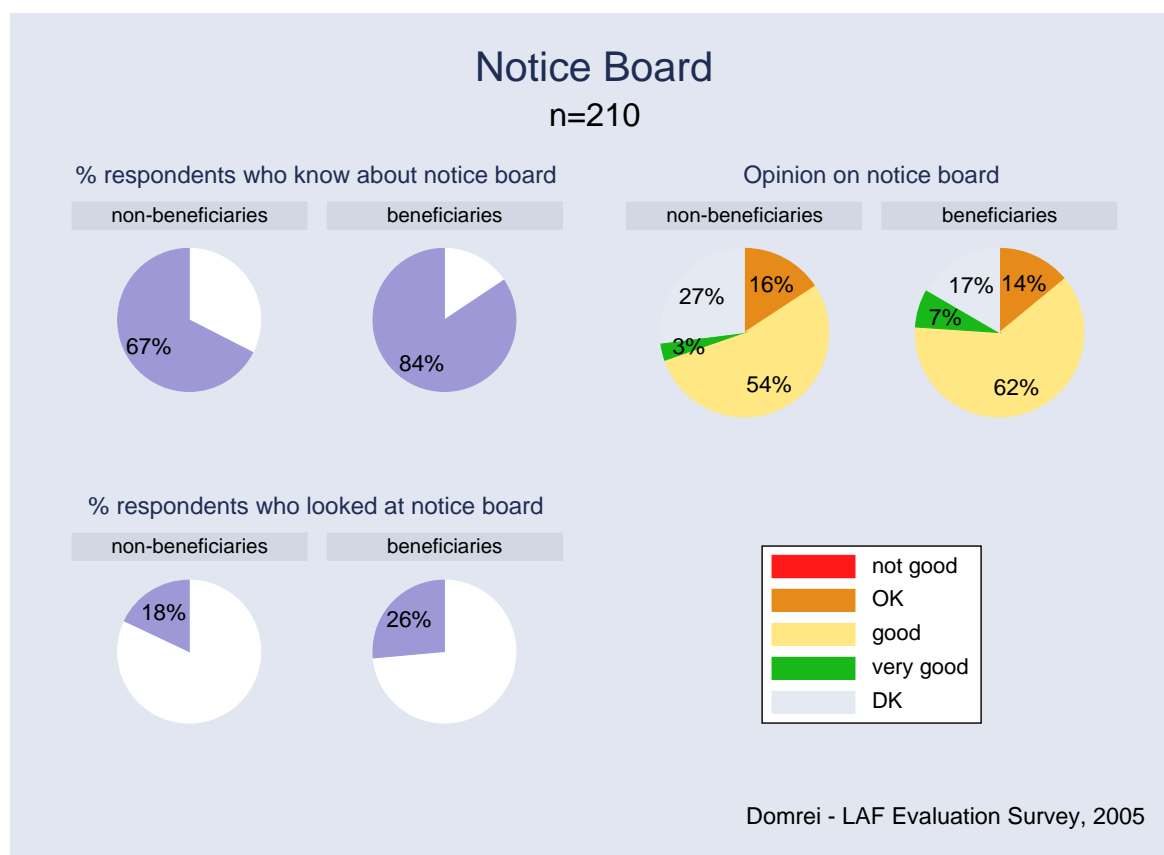


Figure 27: Notice board – respondent awareness and opinion by beneficiary status

A small number (23%) of household respondents in the eight villages reported that they did not know there was a notice board in their village. Some notice boards we observed had no pictures on them, which made them less attractive.

In addition, only 20% of the women interviewed and 56% of the men are functionally literate. Therefore, text alone is neither very attractive nor informative to most villagers. The size of the letters is very small: people with poor eyesight cannot read information.

A few counterparts made suggestions about the shape and size of the notice board; they said they would quickly become damaged by rain, as the roof was very small. They also suggested that people who come to read the notices could destroy everything inside because there was only a wire net to protect the information. During the fieldwork, we saw several notice boards with nothing displayed but no evidence or ripped or torn paper. We also noted several villages where there were existing community notice boards – sometimes located near the DPM/LAF. In these cases, it would be more useful to use the existing board. The usefulness of the notice board could be extended if village leaders were encouraged to use the board for other announcements.

We noticed that people who did not know about the notice board usually lived in houses far from the centre of the village. Those respondents who reported that they did not read the notice board gave a variety of reasons:

- Because they were not interested (15.7%);

- Because they have no time (14.7%)
- Because they cannot read (11.9%)
- Because the board is too far from their house (10.9%)

Based on the results of the evaluation, the team makes the following findings and recommendations for the DPM/LAF notice board:

- The project notice board was a useful process and contributed to both disseminating community information and increasing project transparency and accountability. This process should be continued and expanded.
- Investigate whether other notice boards exist in project villages before erecting new ones - use existing notice boards if possible
- Use a larger font/increase the size of lettering on information posted on the board for villagers with poor eyesight.
- Information posted on the board should always include colourful pictures to capture the interest of passers-by. More pictorial information is also more appropriate for less literate villagers
- If durability is desired, make the protective roof larger to protect the board from the weather.
- Have more than one notice board in large villages. In large sprawling villages with multiple entry roads like Kroich village in Kampong Trabaek district – at least three notice boards would be useful.

Disaster preparedness calendar

The project organised a poster competition for children across Prey Veng province through the Provincial Department of Education Youth and Sport (PDoEYS). The theme was disasters and disaster preparedness and the aim was to raise awareness about disaster preparedness. The twelve winning pictures were selected and used to create the 2005 NCDM/CARE disaster preparedness calendar. Some of the pictures were used on the project t-shirt and other project documents.

This was a good opportunity to disseminate information and improve awareness about disaster preparedness. Picture drawn by children in the community pictures are attractive for community people not only in the target villages but also outside. People showed interest when they saw the pictures in their village.

CARE gave t-shirts to counterparts and a few calendars to each village, so this component was not included in the household questionnaire. However, the calendars were so popular and interesting that household respondents mentioned them spontaneously during interviews.

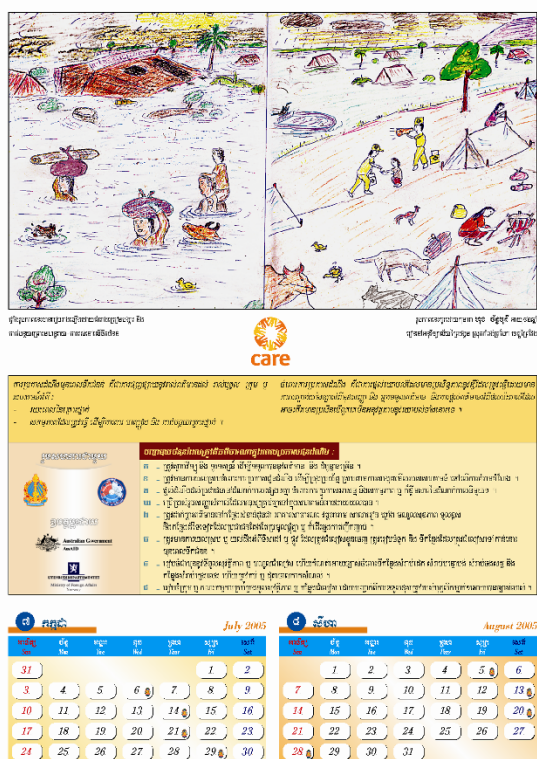


Figure 28: DRM calendar

"I saw the calendar on the notice board, it is very good, I want one to put on the wall of my house, but I can't." respondent in Preah Sdach district

A number of respondents mentioned that the calendar used the Gregorian year and Roman dates and not Khmer dates. This would unfortunately severely limit the usefulness of the calendar in rural Cambodia.

Based on the results of the evaluation, the team makes the following findings and recommendations for the disaster preparedness calendar and associated activities:

- The disaster preparedness calendar was a popular and innovative method for raising awareness and increasing community participation in the project.
- It is important to use a Khmer rather than a Gregorian calendar.
- Printing more calendars would have been an appropriate use of the project budget.
- The village question and answer sessions with prizes were also an innovative method of raising awareness of disaster preparedness issues. These sessions should be used in other programs that aim to increase community awareness or change behaviour.
- It would be useful to measure the change in knowledge and attitudes due to community interventions like the calendar, question and answer sessions and other participatory processes. A small baseline survey of knowledge and attitudes to disaster preparedness followed by a small survey at end line would probably demonstrate substantial change.
- The picture drawing contest was widely known and appreciated and should be repeated in future projects

Food aid

In 2005, NCDM reported that Cambodia was suffering the worst drought in many years. Food shortages affected some 500,000 households around the country. CARE proposed to the World Food Program (WFP) to provide drought relief in three WFP priority communes within the DPM/LAF project area. The households selected were from the 6th to 8th priority households who had not yet received support from the project. Among the eight evaluation villages we visited, three (Sambour, Pros Sva, and Roka Thom) received food aid distributions.



Figure 29: Food aid – Coupon given to food relief recipients

Households selected to receive relief were given a coupon with information about their entitlement, venue, time of distribution, complaints phone numbers, name of household, and alternate person who could receive the relief. Government counterparts were also given a small sum for their work during food aid distribution.

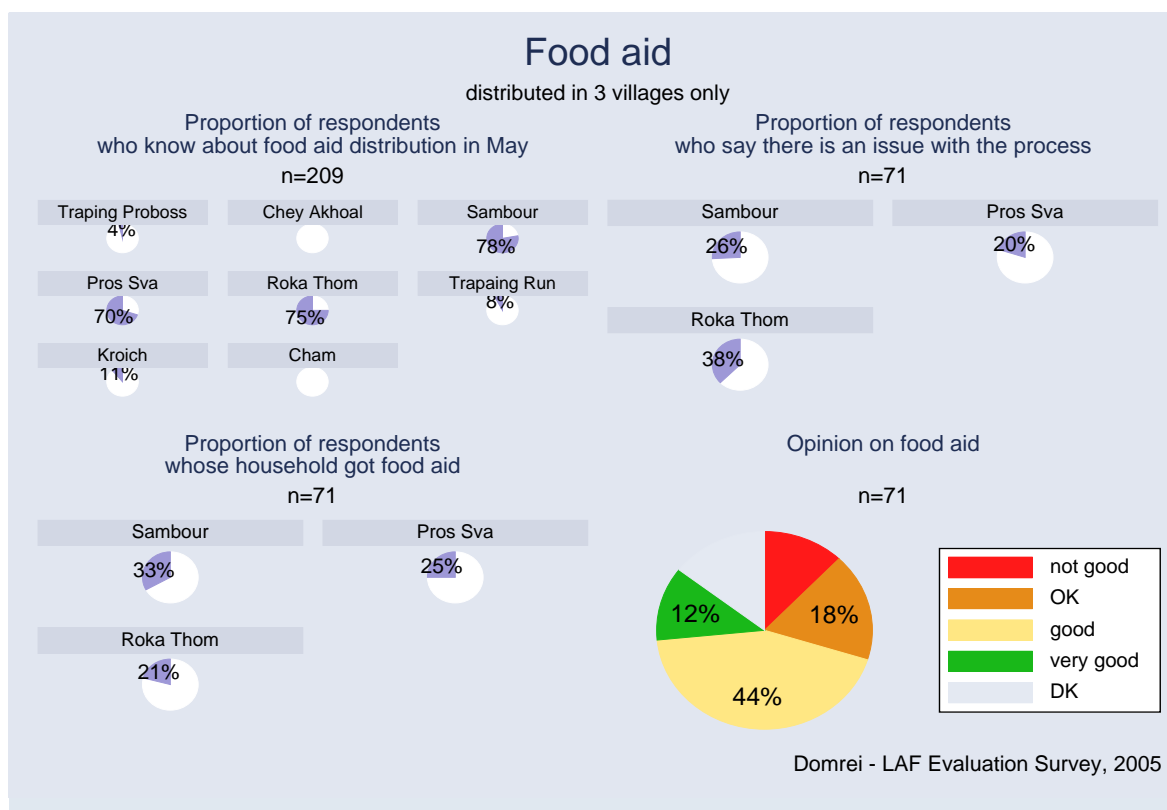


Figure 30: Food aid – Respondent awareness, getting aid and opinion

Twenty-four counterparts and staff ranked this process as good or very good because there were no problems. All but one household respondent reported that they received the correct amount of food aid - 50 kilograms of rice. However, one female respondent in Roka Thom village reported that she only received 1.5 touv of rice⁷ (22.5 kg). Only 40 families in each village received food aid so families that did not get any were envious.

Interestingly there was more variation in the per diem counterparts received than in the aid distribution itself. The project gave \$1.50 or \$3.00 to 32 officials who worked on the food aid distribution. However, the counterparts we interviewed reported receiving amounts ranging from 5,000 riel to 32,000 per day. In addition, the village chief and one VDC member in Roka Thom and the village chief in Pros Sva reported that they also received 50 kilograms of rice.

Based on the results of the evaluation, the team makes the following findings and recommendations related to food aid:

- Food aid distribution in the DPM/LAF project area followed the principles of best practice and accountability.
- The thoroughness of the planning that was evident before any aid was distributed is borne out by the fact that all but one beneficiary in our random sample reported that 1) they received exactly the amount of aid they were entitled to 2) no additional money was extorted from them in the process.
- CARE should translate the documentation for this process into Khmer and distribute to other projects as a draft 'CARE best practice' publication for aid distribution in Cambodia.

⁷ 1 touv is equivalent to 15 kilograms

Capacity building

The project undertook a variety of exercises designed to build capacity in the target areas and among project counterparts. There were three broad levels of capacity building: staff, counterpart, community.

Not surprisingly, CARE project staff generally had no experience in disaster management and all attended training sessions to bring them up to speed. The learning curve was steep, particularly for field staff who were forced to become 'experts' very quickly. DPM/LAF staff attended training in disaster management, HAP, Sphere and ALNAP, emergency response, accountability, first aid, disaster preparedness and leadership training among others.



Figure 31: Project orientation participants

Government counterparts also received considerable training to build capacity in these local disaster management structures. Training on disaster management was conducted at each level - PCDM, DCDM, CCDM and in villages. Capacity building included not only training but also field practice, cross visits to other projects, workshops and presentations.

The capacity building section of the interview was only administered to project implementers to get their ideas and opinions about this component. Overall, 95% ranked the process as either good or very good. Counterparts reported that they could use the knowledge they received to help their villagers and apply to their work. We asked counterpart respondents to rank the training they received on a 4-point scale from "1 - not at all" to "4 - a lot." Sixteen of 35 reported that they applied the knowledge to their work a lot (4) while another 16 reported that they applied the knowledge they received from training moderately (3). These results show that implementers received appropriate training from the project.

Implementers also learned about community participation, because all the processes of the DPM/LAF project were participatory. Community counterparts reported that they now understand more about accountability and humanitarian development by allowing people to make their own decisions.

“At the beginning of the project, I did not really understand about the work, but now it is clear. I will apply this knowledge to my government work or in other projects if there are any NGOs working in my village” VDC member in Preah Sdach.

Leadership training was the most popular course that counterparts mentioned (55%) especially community counterpart. The second most popular was training on disaster preparedness (52%). Unfortunately, not all counterparts were so positive:

“I learn many lessons and many subjects, but most I forgot” Boeung Darl commune.

Community capacity building was achieved through the many participatory processes and activities that were initiated by the project. We have discussed most of them in the sections above. However, the following table shows the true extent of community participation in the DPM/LAF project:

Community Activities	Participants		
	Female	Male	Total
Project orientation	1,437	1,482	2,919
Participatory risk assessment	1,092	1,151	2,243
Vulnerable household selection	1,053	1,133	2,186
Humanitarian accountability	1,034	1,065	2,099
Disaster management orientation	480	550	1,030
Total participation in community activities	5,096	5,381	10,477

Table 5: Participation in community activities

Naturally, many people attended more than one community activity so the total number does not represent 10,000 participants in the project area – however, it is clear that community participation was very strong with more than 100 participants in each village for each activity. The participation rate by sex is also impressive and is nearly equal – 48.6% female participants compared to 51.4% male participants.

Based on the results of the evaluation, the team makes the following findings and recommendations related to capacity building:

- Capacity building activities were appropriate to those who received training – no respondents reported that training was poor, difficult to understand or a waste of time. This was the project component ranked highest by counterpart respondents.
- All counterparts and staff emphasised the usefulness of the training they received to their own jobs and responsibilities, particularly leadership training and disaster preparedness
- Capacity building in communities through participation in various activities was one of the DPM/LAF project’s greatest strengths many household respondents spontaneously told us about things they had learned from various project meetings and workshops.

- In future participatory projects designed to increase community capacity, CARE should consider conducting a small-scale survey to measure knowledge and awareness at project start. Comparing this with a second survey during the final evaluation would probably show significant improvements in community knowledge and awareness.

Discussion

This final section of the results discusses the overall findings of the evaluation according to the different parts of the evaluation ToR – project impact, constraints, participation, capacity building, sustainability, humanitarian accountability and replicability.

Project Impact

The LAF overall project goal was to “increase the capacity of the most vulnerable people to cope with, and reduce their vulnerability to disasters.” The project was implemented in two districts, Preah Sdach and Kampong Trabaek, whose populations are vulnerable to floods. Preah Sdach is more vulnerable than Kampong Trabaek in the sense that its population is poorer and the floods are greater, yet has fewer beneficiaries.

Abnormal floods, like those in 2000/2001 have not occurred since DPM-LAF started, so it is too early to evaluate what effects the project has on coping strategies. Likewise, Government counterparts did not yet have the opportunity to demonstrate their capacity to assist the population during and after a flood.

However, the project was implemented in areas that are regularly flooded. The people whose coping capacities were increased belong to the poorest and most exposed households in their communities. The household grants allowed them to get what they needed the most, thanks to a participative and empowering provision system. The flood protection infrastructure and equipment are in place.

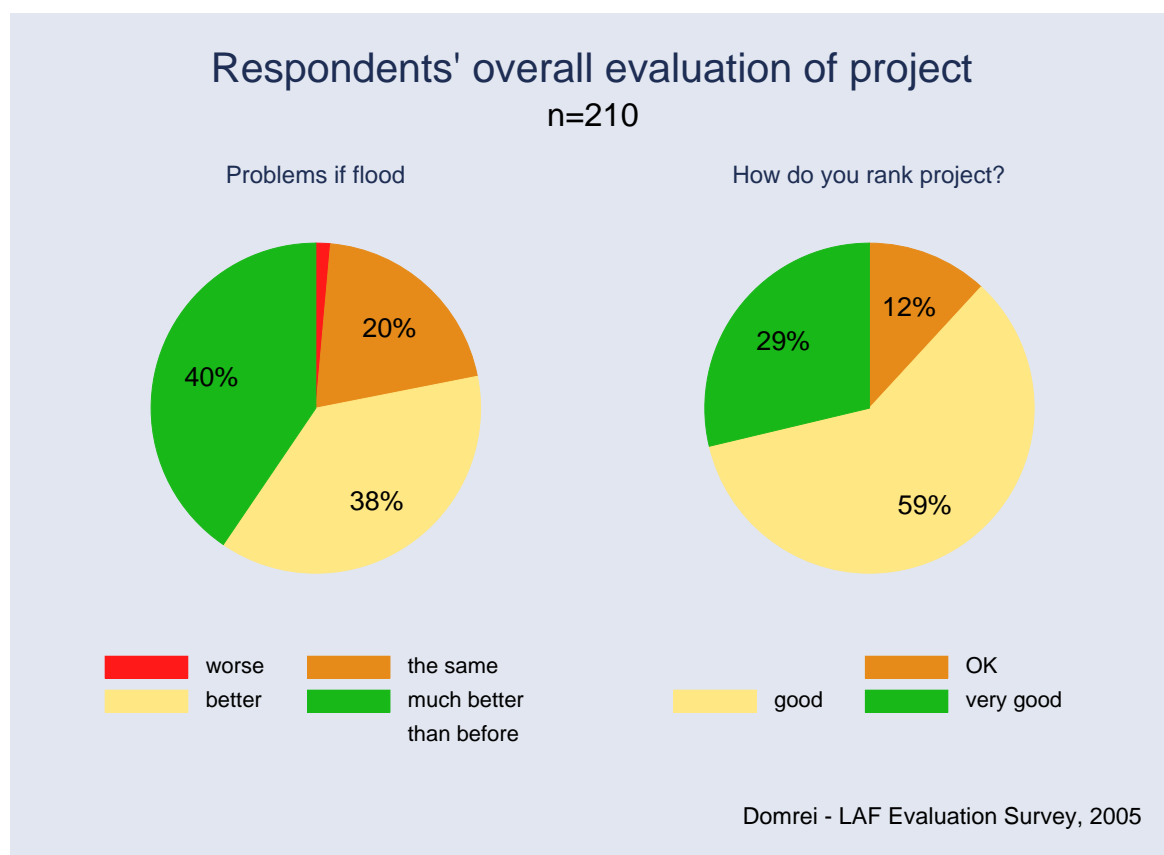


Figure 32: Respondents' overall evaluation of the project

The beneficiaries were happy to show the evaluators the tangible benefits of the project: their safety hills, the improvements to their houses, the supplies they bought to start their business, etc. The grants improved not only current living conditions but also expectations for the future.

Villagers, who did not have the chance to get far in school, value training in general, and disaster management training in particular. More concretely, the feeling is that they know how to prepare for floods, and will suffer less as a result.

Members of less vulnerable households, who did not qualify for grants, learned about disaster preparedness. For example, they know how to build their own safety hills, and can prepare for the next flood.

Seventy-eight percent of the survey respondents said their villages would cope better than before when the floods come. Eighty-eight percent said the project was either good or very good. The fact that the vast majority of villagers, including non-beneficiaries, have a positive opinion of CARE and of the project shows that the activities were appropriately implemented.

Constraints

The most important constraint we noted was illiteracy, especially prevalent among the most vulnerable individuals (e.g. the poor, widows). Illiteracy slowed down community participation and increased some people's suspicions. Field staff should be commended for their efforts in explaining the different procedures and facilitating the household planning.

Community participation is very demanding on people's time. Many people were busy with their daily work, and could not attend all the meetings.

Participation

A high level of Government involvement, community participation and beneficiary contribution undoubtedly enhanced the project's impact and sustainability.

Participation was highly appreciated by the villagers, despite the inevitable accusations of manipulation and nepotism. Community participation in all project components had strong empowering effects that cannot be measured but that was appreciated by the evaluators.

The evaluators noted that the LAF project is based on the principle that "everything that benefits people should be decided by the people themselves." CARE provides grants to people, but beneficiaries decide what to do with the grants. Although this process is more time consuming and difficult to implement, it generated a lot of goodwill in the community.

Government counterparts liked cooperating in all project activities. They are satisfied with the training program. Village leaders said they were happy with participatory process because no one could accuse them of nepotism.

Capacity building

While the LAF project ran for less than a year, it did succeed in strengthening the local Committees for Disaster Management. CARE trained NCDM, PCDM and DCDM staff. Capacity building of these local government officials was achieved by their involvement in all the phases of the project. They played an important role as implementers and

facilitators. LAF provided them with opportunities to work directly with the communities, to put into practice their knowledge and test their management skills.

District, Commune and Village counterparts' knowledge on disaster preparedness increased, but whether coordination and emergency responses were improved will be seen when the floods occur.

One very important result was the counterparts' practical understanding of their accountability to the community. District and commune level officials, and community leaders, by becoming facilitators, learned to be accountable to the people they serve.

Sustainability

Capacity building activities at all levels ensures some degree of sustainability. Unfortunately, the project time-line is too short to assess its sustainability, especially in regards to coping strategies and government intervention during and after the floods

We can only assume that villagers will appreciate the positive effects of training and planning, emulate and sustain them because it is in their interest.

How District and commune level officials will sustain their own efforts once CARE phases out is less obvious, as they will have fewer incentives to do their bit.

Humanitarian Accountability

The LAF project is built on processes that were set up to inform, listen and respond to beneficiaries. It is one of the projects in Cambodia that has taken the logic of humanitarian accountability the furthest.

The project orientation informed the community on what CARE was planning and project goal. The complaint mechanism let people complain or give feedback. Participation in household selection and household planning let people decide what was most appropriate for the community and for themselves.

While these processes can be improved, the fact that they were actually implemented is very positive.

Replicability

The participatory processes designed and implemented by the LAF CARE team are rights-based, fair, efficient, transparent and culturally appropriate. We strongly recommend that they be replicated within CARE and shared with other organisations.

The approaches, methods and tools developed by LAF project are well documented, with practical component manuals. This will greatly facilitate their replication.

The guidelines nevertheless need to take into account the low literacy rates in rural Cambodia by providing more alternatives to written forms and posters. Guidelines need to be simplified (e.g. problem ranking and household planning) to reduce the time spent explaining the system to its beneficiaries. We also recommend integrating complaints into the CARE projects' monitoring and evaluation frameworks.

We recommend that guidelines be developed for inviting villagers to community meetings. The LAF evaluation shows that community participation could be increased if

people were informed of meeting agendas earlier, and personally invited by CARE staff (rather than by village leaders).

Other Rural development Projects

The participatory strategy that the DPM/LAF project developed and documented in this project has many applications not only in the field of disaster risk management.

During the analysis of the data, Domrei presented the findings of the evaluation of the complaint mechanisms used by the project to Senior and Project managers at CARE Cambodia. These findings lead to a practical discussion on taking a Rights-Based Approach to development forward in CARE Cambodia projects.

Also during this final phase of the evaluation, the results were incorporated into the design of two rural development projects funded by AusAID and implemented by CARE. Lessons learned from DPM/LAF about transparency, accountability, community participation and complaint mechanisms have all been used to develop the ACCA project log frames, monitoring and evaluation systems, risk management plans and sustainability strategies.

We recommend that CARE Cambodia finishes documenting the DPM/LAF guidelines, translates them into Khmer and disseminates best practice notes on these processes to other community development NGOs in Cambodia.

References

CARE/Domrei Research and Consulting, Final Evaluation Report, Disaster Preparedness Action Planning in Prey Veng, Ian Ramage, Pann Sakda, Eng Sothy, May 2003

CARE, Prevailing over Disasters through Community Action and Accountable Partnerships Final Report, Noel Puno and Khun Sokha, 2005

CARE, DPM-LAF project, Prey Veng, Most Vulnerable Households Selection Process Manual, Nheak Leoung, March 2005

CARE, DPM-LAF project, Prey Veng, Process of Purchasing Committee Selection, Prey Veng

CARE, Target Communes and Villages Selection Process, Nheak Leoung, September 2004

CARE-Cambodia, DPM-LAF Project, Pear district, Prey Veng, Household Partnership Selection and Participatory Risk Assessment Manual Draft

CARE, DPM-LAF Project, Prey Veng, Households Action Plan Manual, Nheak Leoung, May 2005

CARE, DPM-LAF project, Prey Veng, District, commune and village maps

CARE International, Cambodian Humanitarian Accountability Review, May 2005.

The Mekong: The Development and Its Environmental Effects, HORI Hiroshi, KOKON-SHOIN, Japan, 1996

Appendices

Tabulations by beneficiary status

	Non-beneficiaries		Beneficiaries		Total	
	n	%	n	%	n	%
Knows PRA**	40	44.9	75	62.0	115	54.8
Joined PRA*	25	28.1	52	43.3	77	36.8
Said PRA was**						
not good	2	4.0	0	0.0	2	1.4
OK	9	18.0	11	11.6	20	13.8
good	38	76.0	76	80.0	114	78.6
very good	1	2.0	8	8.4	9	6.2
Total	89	100.0	120	100.0	209	100.0
Joined selection***	58	65.2	116	95.9	174	82.9
Issues**	46	51.7	37	30.6	83	39.5
Said selection was***						
not good	13	14.6	3	2.5	16	7.6
OK	14	15.7	3	2.5	17	8.1
good	51	57.3	102	84.3	153	72.9
very good	1	1.1	13	10.7	14	6.7
Easy to understand***	46	52.3	89	73.6	135	64.6
Total	89	100.0	121	100.0	210	100.0
Joined HH planning***	13	14.6	108	89.3	121	57.6
Issues	22	25.0	18	14.9	40	19.1
Said planning was***						
not good	2	2.3	0	0.0	2	1.0
OK	17	19.3	11	9.1	28	13.4
good	49	55.7	81	66.9	130	62.2
very good	6	6.8	24	19.8	30	14.4
Easy to understand***	31	35.2	97	80.2	128	61.2
Total	88	283.9	121	124.7	209	163.3
Knows notice board**	60	67.4	102	84.3	162	77.1
Looked at notice board	16	18.0	32	26.4	48	22.9
Says notice board is						
OK	14	15.7	17	14.0	31	14.8
good	48	53.9	75	62.0	123	58.6
very good	3	3.4	9	7.4	12	5.7
Total	89	100.0	121	100.0	210	100.0
difference between beneficiaries and non beneficiaries is statistically significant at 95%:						
*P<0.05 **P<0.01 ***P<0.001						

	Non-beneficiaries		Beneficiaries		Total	
	n	%	n	%	n	%
Joined project orientation**	45	50.6	85	70.2	130	61.9
Said project orientation was***						
not good	1	1.1	0	0.0	1	0.5
OK	17	19.1	16	13.2	33	15.7
good	51	57.3	89	73.6	140	66.7
very good	1	1.1	10	8.3	11	5.2
Learned from project***	17	19.1	69	57.0	86	41.0
Total	89	100.0	121	100.0	210	100.0
Says flood problems***						
worse	2	2.2	1	0.8	3	1.4
the same	31	34.8	12	9.9	43	20.5
better	30	33.7	49	40.5	79	37.6
much better	26	29.2	59	48.8	85	40.5
than before						
Total	89	100.0	121	100.0	210	100.0
Ranked project as***						
OK	21	25.3	3	2.5	24	11.9
good	46	55.4	74	62.2	120	59.4
very good	16	19.3	42	35.3	58	28.7
Total	83	100.0	119	100.0	202	100.0
difference between beneficiaries and non beneficiaries is statistically significant at 95%:						
*P<0.05 **P<0.01 ***P<0.001						

Household Questionnaire

ការវាយតម្លៃគម្រោងបង្កើនជីវភាពរស់នៅ និង ការកែលម្អសេវាសាធារណៈ

ការវាយតម្លៃលើទិន្នន័យ

Final Evaluation on DPM-LAF Project

ការការពារសម្ងាត់

CONFIDENTIAL

គំរូសំណួរសម្ភាសន៍

Household Interview

ក្រុមប្រឹក្សា District: _____ ឃុំ Commune: _____ ភូមិ Village: _____ ប្រុស Male (1) ភ្លី Female (2) ត្រូវជាមេគ្រួសារ: Female head household: No (0) Yes(1) ចំណាត់ថ្នាក់ទ្រព្យសម្បត្តិ Wealth Ranking: ក្រីក្រ Poorest (0) មធ្យម Medium (1) ប្រសើរ Better-off (2) ប្រភេទផ្ទះ- សូមមើលចំពោះការសង្កេតរបស់អ្នក House's Type – check your own observation ផ្ទះស្លឹកត្នោត/ស្បូវ(0) ផ្ទះឈើប្រក់ស្លឹកត្នោត(1) ផ្ទះឈើប្រក់ស្រូវ(2) ផ្ទះឈើប្រក់ក្បឿង(3) ផ្ទះថ្មី បេតុង(4) House palm leaves/thatch (0) house wood/roof palm leaves (1) house wood/roof tin (2) house wood/roof tile (3) brick or concrete (4)				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	1 st attempt	Appointment	2 nd attempt	RESULT
Date	/ /05	/ /05	/ /05	
Time				
Location				
Interviewer	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
លទ្ធផលកូដ RESULT CODE បានបញ្ចប់ Completed 1 មិនបានបញ្ចប់ អ្នកឆ្លើយស្តាប់បញ្ចប់ Incomplete - respondent termination 2 មិនបានបញ្ចប់ មានអ្នកទីតាមរំខាន Incomplete - third party interruption 3 អ្នកឆ្លើយបដិសេធ Respondent refusal 4 អ្នកឆ្លើយអវត្តមាននៅការណាត់ជួបលើកទី២ Respondent absent at 2 nd appointment 5				
	Interviewer	Supervisor	Encoder1	Archived
Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	Box: <input type="text"/>
Date	/ /05	/ /05	/ /05	/ /05
Signature				

បញ្ជីសំណួរ

ការណែនាំខ្លួន :

ជំរាបសួរ ! ខ្ញុំឈ្មោះ ធ្វើការជាមួយក្រុមហ៊ុនដីស្រាវជ្រាវ និងផ្តល់ប្រឹក្សា យើងខ្ញុំមកទីនេះ ដើម្បីធ្វើការវាយតម្លៃគំរោងកម្មវិធីរស់នៅលើទឹករបស់អង្គការយើងកម្ពុជា។ សូមកុំខ្លាច ឬព្រួយបារម្ភអ្វី ពីព្រោះយើងខ្ញុំគ្រាន់តែសាកសួរអំពីផលប្រយោជន៍នៃគំរោងប៉ុណ្ណោះ។ អ្វីដែលអ្នកនិយាយ នឹងត្រូវទុកជា សំងាត់។ យើងខ្ញុំមិនអោយ អ្នកណាម្នាក់ដឹងពីអ្វី ដែលអ្នកនិយាយឡើយ។

ប្អូនអាចបដិសេធមិនឆ្លើយសំណួរដែលអ្នកមិនចង់ឆ្លើយ ឬក៏អ្នកអាចបញ្ឈប់ការពិភាក្សាពេលណាក៏បាន។ ខ្ញុំសូមអរគុណហើយសង្ឃឹមថាការសម្ភាសន៍នេះមានរយៈពេលតែ ៣០នាទី ប៉ុណ្ណោះ។ ខ្ញុំសូមរំលឹកអ្នកថា ចំណើយទាំងអស់របស់អ្នកគឺសំខាន់ណាស់។ នេះមិនមែនជាការធ្វើតេស្ត គ្មានចំណើយត្រូវ ឬខុសទេ ហេតុដូច្នេះខ្ញុំចង់អោយអ្នកឆ្លើយអោយបានច្បាស់លាស់ និងពិតប្រាកដ ព្រោះនឹងធ្វើអោយយើងខ្ញុំប្រមូលព័ត៌មានបានល្អដើម្បីរៀបចំគំរោងអោយកាន់តែល្អទៅថ្ងៃអនាគត។

តើអ្នកមានសំណួរអ្វីសួរខ្ញុំទេ?

តើខ្ញុំអាចចាប់ផ្តើមសួរសំណួរឆាប់នេះបានទេ?

Introduction:

Hello! I am (use your name) working with Domrei Research and Consulting. We are here to evaluate LAF program of CARE Cambodia. Please don't be scared or worried because this is only about the benefit. Everything you say will be kept quiet (confidential). We won't let anybody in the village or your family know what you say.

You can refuse to answer any questions that you don't want to answer or you can stop discussing the questions at any times. I want to thank you and hope this interview will only take 30 minutes. I want to remind you that all your answers are very important. This is not a test. There are no right or wrong answers. Therefore, I want you to answer clearly and honestly. This will allow my team to collect good information for other programs in the future.

Do you have any questions to ask me?

Can I start asking the questions now?

ផ្នែកទី 1 : ទ្រព្យសម្បត្តិក្នុងផ្ទះ / Wealth Ranking

1	<p>តើគ្រួសារអ្នកមានរបស់របរ/ទ្រព្យសម្បត្តិអ្វីខ្លះ?</p> <p>បង្ហាញរាយនាមទាំងអស់</p> <p>(ចំណើយអាចលើសពីមួយ)</p> <p>សូមគូសរាយនាមនៃរបស់របរ/ទ្រព្យសម្បត្តិដែលគ្រួសារលោកលោងបានមើលឃើញរបស់អ្នកផងដែរ</p> <p>What assets do your family own?</p> <p>Prompt by reading the list</p> <p>Multiple answers possible – circle all answers given</p> <p>Check your own observation as well</p>	គ្មាន Not have	0
		វិទ្យុ Radio	1
		ទូរទស្សន៍ Television	2
		កង់ Bicycle	3
		ទូរទឹកកក Refrigerator	4
		ម៉ូតូ Motorcycle	5
		រទេះគោ Ox cart	6
		ទូក Boat	7
		ទ្វារ/គោយន្ត Car/ Koyun	8

2	<p>តើគ្រួសារអ្នកចិញ្ចឹមសត្វអ្វីខ្លះ?</p> <p>ចង្អុលបញ្ជាក់អានចម្លើយ</p> <p>(ចម្លើយអាចលើសពីមួយ)</p> <p>សូមបញ្ជាក់ថាសត្វទាំងនោះ មិនមែនជាសត្វប្រវាស់ពីគេ</p> <p>What farm animals do your family own?</p> <p><i>Prompt by reading the list (Multiple answers possible)</i> <i>Check that they do not mind the animals for someone else</i></p>	<table border="0"> <tr><td>គ្មាន Not have</td><td>0</td></tr> <tr><td>មាន/ទា Chicken/ducks</td><td>1</td></tr> <tr><td>ជ្រូក Pigs</td><td>2</td></tr> <tr><td>ពពែ Goats</td><td>3</td></tr> <tr><td>គោ Cows</td><td>4</td></tr> <tr><td>សេះ Horses</td><td>5</td></tr> <tr><td>ក្របី Buffalo</td><td>6</td></tr> </table>	គ្មាន Not have	0	មាន/ទា Chicken/ducks	1	ជ្រូក Pigs	2	ពពែ Goats	3	គោ Cows	4	សេះ Horses	5	ក្របី Buffalo	6
គ្មាន Not have	0															
មាន/ទា Chicken/ducks	1															
ជ្រូក Pigs	2															
ពពែ Goats	3															
គោ Cows	4															
សេះ Horses	5															
ក្របី Buffalo	6															
3	<p>តើផ្ទះរបស់អ្នកមានបង្គន់ចំនួនប៉ុន្មាន?</p> <p>How many toilets are there in your house?</p>	<table border="0"> <tr><td>គ្មាន/ទៅវាលស្រែ Not have/ field</td><td>0</td></tr> <tr><td>ប្រើជាមួយគ្រួសារដទៃ Share with other families</td><td>1</td></tr> <tr><td>មានបង្គន់ ១ One toilet</td><td>2</td></tr> <tr><td>មានបង្គន់២ឡើងទៅ Two plus</td><td>3</td></tr> </table>	គ្មាន/ទៅវាលស្រែ Not have/ field	0	ប្រើជាមួយគ្រួសារដទៃ Share with other families	1	មានបង្គន់ ១ One toilet	2	មានបង្គន់២ឡើងទៅ Two plus	3						
គ្មាន/ទៅវាលស្រែ Not have/ field	0															
ប្រើជាមួយគ្រួសារដទៃ Share with other families	1															
មានបង្គន់ ១ One toilet	2															
មានបង្គន់២ឡើងទៅ Two plus	3															
4	<p>តើក្នុងផ្ទះរបស់អ្នកមានបន្ទប់ដេកចំនួនប៉ុន្មាន?</p> <p>How many rooms in your house are used for sleeping?</p>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div>														
5	<p>តើមានមនុស្សប៉ុន្មាននាក់ដេកនៅក្នុងផ្ទះនេះយប់មិញ?</p> <p>How many people slept in this house last night?</p>	<div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div>														
6	<p>តើអ្នកកើតខែឆ្នាំណា? What year were you born?</p> <p>(សូមសរសេរខែនិងឆ្នាំខ្មែរ ហើយបំពេញអាយុនៅក្នុងក្រណាត)</p>	<p>អាយុគិតជាឆ្នាំ Age in yrs</p> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div>														
<p>ការឆ្លងប្រមាណគ្រោះថ្នាក់ដោយការចូលរួម / PRA</p>																
7	<p>កាលពីដើមឆ្នាំ អង្គការយើងបានធ្វើការវាយតម្លៃគ្រោះភ័យដោយការចូលរួម ដោយមានការគូសផែនទីភូមិ តារាងពេលវេលា កំណត់បញ្ហាដែលភូមិបានជួបប្រទះ។ តើអ្នកដែលបានដឹងទេ? Earlier, CARE conducted PRA doing Mapping, Timeline, Problem Ranking. Did you know?</p>	<table border="0"> <tr><td>ទេ No</td><td>0</td></tr> <tr><td>បាទ/ចាស Yes</td><td>1</td></tr> </table>	ទេ No	0	បាទ/ចាស Yes	1										
ទេ No	0															
បាទ/ចាស Yes	1															
8	<p>តើអ្នកបានចូលរួមក្នុងការវាយតម្លៃគ្រោះភ័យទេ? Did you join PRA?</p>	<table border="0"> <tr><td>ទេ No (skip to Q 10)</td><td>0</td></tr> <tr><td>បាទ/ចាស Yes</td><td>1</td></tr> </table>	ទេ No (skip to Q 10)	0	បាទ/ចាស Yes	1										
ទេ No (skip to Q 10)	0															
បាទ/ចាស Yes	1															
9	<p>ក្នុងចំណោមសកម្មភាពនៃការវាយតម្លៃគ្រោះភ័យ តើអ្នកបាន ចូលរួមសកម្មភាពណាខ្លះ?</p> <p>ចង្អុលបញ្ជាក់អានចម្លើយ (ចម្លើយអាចលើសពីមួយ)</p> <p>What PRA activities did you join?</p> <p><i>Prompt by reading the list (Multiple answers possible)</i></p>	<table border="0"> <tr><td>មិនដែលចូលរួម Never</td><td>0</td></tr> <tr><td>ធ្វើផែនទីភូមិ Mapping</td><td>1</td></tr> <tr><td>តារាងពេលវេលា Timeline</td><td>2</td></tr> <tr><td>កំណត់បញ្ហា Problem Ranking</td><td>3</td></tr> <tr><td>ធ្វើវដ្តរដូវកាល Seasonal Calendar</td><td>4</td></tr> <tr><td>មិនដឹង Don't know</td><td>99</td></tr> </table>	មិនដែលចូលរួម Never	0	ធ្វើផែនទីភូមិ Mapping	1	តារាងពេលវេលា Timeline	2	កំណត់បញ្ហា Problem Ranking	3	ធ្វើវដ្តរដូវកាល Seasonal Calendar	4	មិនដឹង Don't know	99		
មិនដែលចូលរួម Never	0															
ធ្វើផែនទីភូមិ Mapping	1															
តារាងពេលវេលា Timeline	2															
កំណត់បញ្ហា Problem Ranking	3															
ធ្វើវដ្តរដូវកាល Seasonal Calendar	4															
មិនដឹង Don't know	99															

10	តើអ្នកណាខ្លះបានចូលរួមក្នុងសកម្មភាពទាំងនេះ? Who joined these activities?		
11	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ?	មិនល្អ Not good	0
	បង្ហាញចោយអានចំណេះ	ធម្មតា Ok	1
	How do you think about this process?	ល្អ Good	2
	Prompt by reading the list	ល្អណាស់ Very good	3
12	ហេតុអ្វី? Why?		
13	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process?		
ការជ្រើសរើសអ្នកទទួលបាន / Selection Process			
14	តើអ្នកឬសមាជិកគ្រួសារណាម្នាក់បានចូលរួមប្រជុំជ្រើសរើស	ទេ No (skip to Q16)	0
	គ្រួសារងាយរងគ្រោះ ដែរឬទេ? Did you or a family member(s) join the meeting on selection the most vulnerable households?	បាទ/ចាស Yes	1
15	បើបាន តើចូលរួមដោយរបៀបណា? If yes, how?		
16	បើទេ ហេតុអ្វី? If no, why?		
17	តើគេជ្រើសរើសគ្រួសារងាយរងគ្រោះបំផុតដោយរបៀបណា? How were the most vulnerable households selected?		
18	តើនរណាខ្លះបានចូលរួមក្នុងដំណើរការនេះ? Who joined this process?		

19	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នា ក្នុងដំណើរការនេះដំណើរការនេះឬទេ? Were there any issues/inequalities from this process?	ទេ No (<i>skip to Q21</i>)	0
		បាទ/ចាស Yes	1
20	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នាក្នុងដំណើរការនេះដូចម្តេចខ្លះ? What are the issues/inequalities from this process?		
21	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ? ចង្អុលបង្ហាញអានចំណេះ How do you think about this process? <i>Prompt by reading the list</i>	មិនល្អ Not good	0
		ធម្មតា Ok	1
		ល្អ Good	2
		ល្អណាស់ Very good	3
22	ហេតុអ្វី? Why?		
23	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process?		
24	តើដំណើរការនេះងាយយល់ដែរឬទេ? Is this process easy to understand?	ទេ No	0
		បាទ/ចាស Yes	1
25	ហេតុអ្វី? Why?		
ផែនការគ្រួសារ/ Households Plan			
26	តើអ្នកបានចូលរួមក្នុងការធ្វើផែនការគ្រួសារងាយរងគ្រោះដែរឬទេ? Did you join the Most Vulnerable Households plan?	ទេ No (<i>skip to Q28</i>)	0
		បាទ/ចាស Yes	1
27	បើបាន តើចូលរួមដោយរបៀបណា? If yes, how?		

28	បើទេ ហេតុអ្វី? If no, why? 		
29	តើដំណើរការកំណត់បញ្ហានិងតំរូវការ របស់គ្រួសារងាយរងគ្រោះ ធ្វើឡើងដោយរបៀបណា? How were problems and needs identification for the Most Vulnerable Households done? 		
30	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នា ក្នុងដំណើរការនេះដំណើរការនេះឬទេ? Were there any issues/inequalities from this process? 	ទេ No (skip to 32) 0 បាទ/ចាស Yes 1	
31	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នាក្នុងដំណើរការនេះដូចម្តេចខ្លះ? What are the issues/inequalities from this process? 		
32	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ? បង្ហាញឱ្យឃើញអានចំណេះ How do you think about this process? <i>Prompt by reading the list</i>	មិនល្អ Not good 0 ធម្មតា Ok 1 ល្អ Good 2 ល្អណាស់ Very good 3	
33	ហេតុអ្វី? Why? 		
34	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process? 		
35	តើដំណើរការនេះងាយយល់ដែរឬទេ? Is this process easy to understand? 	ទេ No 0 បាទ/ចាស Yes 1	
36	ហេតុអ្វី? Why? 		

ផលនៃគំរោង/ Household Grants			
37	តើផ្ទះរបស់អ្នកបានទទួលរបស់អ្វីពីកម្មវិធីវេរដែរឬទេ? Did your household receive anything from CARE project?	ទេ No (skip to Q43)	0
		បាទ/ចាស Yes	1
38	តើបានទទួលអ្វី? What did you receive?		
39	ហេតុអ្វីអ្នកជ្រើសរើសរបស់នេះ? Why did you choose this?		
40	តើវាបានជួយដល់គ្រួសារអ្នកដែរឬទេ? Has it helped your family or not?	ទេ No (skip to Q42)	0
		បាទ/ចាស Yes	1
41	ជួយយ៉ាងម៉េចខ្លះ? How?		
42	ហេតុអ្វី មិនជួយ? Why not?		
យន្តការតវ៉ា/ Complaint Mechanism			
43	ប្រសិនបើប្រជាជនចង់តវ៉ាទាក់ទងនឹងគំរោងវេរ តើអាចតវ៉ាតាមរយៈអ្វីខ្លះ? (ចម្លើយអាចលើសពីមួយ) If there is a complaint related to DPM-LAF project, how can people make complaint? (Multiple answers possible)	ប្រអប់ដាក់ពាក្យបណ្តឹង Complaint box	1
		គណៈកម្មាធិការដោះស្រាយការតវ៉ាVCAC	2
		ទូរស័ព្ទ Telephone	3
		បុគ្គលិកវេរ CARE Staff	4
		មិនដឹង Don't Know	99
		ផ្សេងទៀត Others.....	88
44	តើអ្នកធ្លាប់តវ៉ាដែរឬទេ? Have you ever complained?	ទេ No (skip to Q47)	0
		បាទ/ចាស Yes	1
45	បើបាទ តើអ្នកតវ៉ាពីអ្វី? If yes, what did complain?		

46	តាមរបៀបណា? How did you complain?		
47	តើកន្លងមក អ្នកមានអ្វីទាក់ទងនឹងគំរោងបែប ចង់តវ៉ាដែរឬទេ? Have you ever wanted to complain related to CARE project?	ទេ No (skip to Q50)	0
		ចាស/បាទ Yes	1
48	តវ៉ាពីអ្វី? What do you want to complain?		
49	ហេតុអ្វីមិនបានតវ៉ា? Why not?		
50	តើអ្នកដឹងថា មានប្រអប់ដាក់ពាក្យបណ្តឹងតវ៉ាក្នុងភូមិដែរឬទេ? Do you know there is a complaint box in your village?	ទេ No (skip to Q52)	0
		ចាស/បាទ Yes	1
51	ប្រអប់នោះនៅឯណា? Where is it?		
52	ប្រសិនបើអ្នកចង់តវ៉ា តើអ្នកហ៊ានតវ៉ាតាមប្រអប់ដាក់ពាក្យបណ្តឹងដែរឬទេ? If you want to complain, dare you complain through complaint box?	មិនហ៊ាន No	0
		វាស Yes (skip to Q54)	1
53	បើមិនហ៊ាន ហេតុអ្វី? If not, why?		
54	តើអ្នកដឹងថា មានគណៈកម្មាធិការដោះស្រាយការតវ៉ារបស់អ្នកភូមិដែរឬទេ? Do you know there is a Complaint Committee?	ទេ No (skip to Q56)	0
		ចាស/បាទ Yes	1
55	នរណាខ្លះជាគណៈកម្មាធិការដោះស្រាយការតវ៉ាសំរាប់ភូមិអ្នក? (ចម្លើយអាចស្មើសព្វគ្នា) Who are the complaint committee's members in your village? (Multiple answers possible)	បុគ្គលិកដៃគូរស្រុក District Counterpart	1
		បុគ្គលិកដៃគូរឃុំ Commune Counterpart	2
		មេភូមិ/គណៈកម្មាធិការអភិវឌ្ឍន៍ភូមិVDC	3
		បុគ្គលិកប្រចាំ CARE Staff	4
		តំណាងប្រជាជន Villager Rep	5

		មិនដឹង Don't Know	99
		ផ្សេងទៀត Others.....	88
56	ប្រសិនបើអ្នកចង់តវ៉ា តើអ្នកហ៊ានតវ៉ាតាមគណៈកម្មាធិការដោះស្រាយការតវ៉ាដែរឬទេ? If you want to complain, dare you complain to VCAC?	មិនហ៊ាន No	0
		ហ៊ាន Yes (skip to Q58)	1
57	បើមិនហ៊ាន ហេតុអ្វី? If not, why?		
58	តើអ្នកដឹងថាមានទូរស័ព្ទសំរាប់តវ៉ាដែរឬទេ? Do you know there are telephone numbers for complaint?	ទេ No (skip to Q61)	
		ចាស/បាទ Yes	
59	តើអ្នកដឹងថា អាចរកលេខទូរស័ព្ទនេះនៅកន្លែងណាដែរឬទេ? Do you know where to get the numbers?	ទេ No (skip to Q61)	0
		ចាស/បាទ Yes	1
60	នៅកន្លែងណា? Where?		
61	ប្រសិនបើអ្នកចង់តវ៉ា តើអ្នកហ៊ានតវ៉ាតាមទូរស័ព្ទដែរឬទេ? If you want to complain, dare you complain through telephone?	មិនហ៊ាន No	0
		ហ៊ាន Yes (skip to Q63)	1
62	បើមិនហ៊ាន ហេតុអ្វី? If not, why?		
63	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ? ចង្អុលបញ្ជាក់អានចំណុច How do you think about this process? <i>Prompt by reading the list</i>	មិនល្អ Not good	0
		ធម្មតា Ok	1
		ល្អ Good	2
		ល្អណាស់ Very good	3
64	ហេតុអ្វី? Why?		
65	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process?		

66	តើអ្នកគិតថាប្រជាជនហ៊ានតវ៉ាតាមណាខ្លះ? What do you think the way(s) people dare to complaint are?		
67	ហេតុអ្វី? Why?		
ការទិញដូរ និងដេញថ្លៃ/ Purchasing and Bidding			
68	តើអ្នកដឹងថាមានគណៈកម្មាធិការទិញដូរ-ដេញថ្លៃ សំរាប់គម្រោងវែរដែរឬទេ? Do you know there is Purchasing and Bidding Committee?	ទេ No (skip to Q70)	0
		បាទ/ចាស Yes	1
69	តើគណៈកម្មាធិការទិញដូរមាននរណាខ្លះ? (ចម្លើយអាចលើសពីមួយ) Who are the purchasing committee's members? (Multiple answers possible)	បុគ្គលិកដៃគូរស្រុក District Counterpart	1
		បុគ្គលិកដៃគូរឃុំ Commune Counterpart	2
		មេភូមិ/គណៈកម្មាធិការអភិវឌ្ឍន៍ភូមិVDC	3
		បុគ្គលិកវែរ CARE Staff	4
		តំណាងប្រជាជន Villager rep	5
		មិនដឹង Don't Know	99
		ផ្សេងទៀត Others.....	88
70	តើដំណើរទិញដូរសំភារៈ របស់គម្រោងវែរ ធ្វើដោយរបៀបណា? What is the process of purchasing?		
71	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នា ក្នុងដំណើរការនេះដំណើរការនេះឬទេ? Were there any issues/inequalities from this process?	ទេ No (skip to Q73)	0
		បាទ/ចាស Yes	1
72	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នាក្នុងដំណើរការនេះដូចម្តេចខ្លះ? What are the issues/inequalities from this process?		
73	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ? បង្ហាញឱ្យមើលតាមបញ្ជី How do you think about this process? Prompt by reading the list	មិនល្អ Not good	0
		ធម្មតា Ok	1
		ល្អ Good	2
		ល្អណាស់ Very good	3

74	ហេតុអ្វី? Why?		
75	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process?		
អំណោយ / Food Aid (Only in Raka Thom, Pros Sva, Sambour) គ្រួសារនីមួយៗគួរតែទទួលបានអង្ករ៥០គ.ក្រ Each family should be given 50 Kgs of rice			
76	កាលពីខែឧសភា យើងមានការចែកអំណោយ តើអ្នកបានដឹងទេ? There was Food Aid distribution in May, did you know?	ទេ No (skip to Q80)	0
		ចាស Yes	1
77	តើអ្នកបានទទួលអំណោយដែរឬទេ? Did you get Food Aid?	ទេ No	0
		ចាស Yes	1
78	តើអ្នកទទួលបានអ្វីខ្លះ? What did you get?		
79	តើអ្នកទទួលបានអំណោយដោយរបៀបណា? How do you receive Food Aid?		
80	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នា ក្នុងដំណើរការនេះដំណើរការនេះឬទេ? Were there any issues/inequalities from this process?	ទេ No (skip to Q82)	0
		ចាស/បាទ Yes	1
81	តើមានបញ្ហា វិភាគមិនស្មើភាពគ្នាក្នុងដំណើរការនេះដូចម្តេចខ្លះ? What are the issues/inequalities from this process?		
82	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ? ចម្លើយដោយអានចំណេះ How do you think about this process? <i>Prompt by reading the list</i>	មិនល្អ Not good	0
		ធម្មតា Ok	1
		ល្អ Good	2
		ល្អណាស់ Very good	3
83	ហេតុអ្វី? Why?		

84	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process?		
ការខ្សែពត៌មាន/ Notice Board			
85	តើអ្នកដឹងថាមានការខ្សែពត៌មានរបស់យើង នៅក្នុងភូមិអ្នកដែរឬទេ?	ទេ No (<i>skip to Q89</i>)	0
	Do you know there is a notice board in your village?	បាទ/ចាស Yes	1
86	តើអ្នកដឹងថា ការខ្សែពត៌មាននោះប្រាប់អំពីព័ត៌មានអ្វីខ្លះ? Do you know what notice board informs you about?		
87	តើអ្នកធ្លាប់មើលឬទេ? Have you ever looked?	ទេ No	0
		បាទ/ចាស Yes (<i>skip to Q89</i>)	1
88	បើទេ ហេតុអ្វី? If not, why?		
89	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ? ចម្លើយរបស់អ្នកអំពី How do you think about this process? <i>Prompt by reading the list</i>	មិនល្អ Not good	0
		ធម្មតា Ok	1
		ល្អ Good	2
		ល្អណាស់ Very good	3
90	ហេតុអ្វី? Why?		
91	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process?		
ការបង្ហាញព័ត៌មាន / Project Orientation			
92	តើអ្នកបានចូលរួមប្រជុំ ការបង្ហាញគំរោងរបស់យើងដែរឬទេ? Did you join CARE Project Orientation?	ទេ No	0
		បាទ/ចាស/បាទ/ចាស Yes (<i>skip to Q94</i>)	1
93	បើទេ ហេតុអ្វី? Why not?		
94	តើអ្នកបានរៀនអ្វីខ្លះពីការបង្ហាញនោះ? What did you learn from that?		

95	តើអ្នកដឹងថា គំរោងរបស់យើរ មានគោលបំណងដូចម្តេចខ្លះ? What are the objectives of CARE's project?		
96	តើអ្នកដឹងថាអ្នកណាជាម្ចាស់ជំនួយដែរឬទេ? Do you know who the project donor is?	រដ្ឋាភិបាល Government អង្គការយើរ CARE រដ្ឋាភិបាលអូស្ត្រាលី Aus/Australia ប្រទេសន័រវេ Norway ស្នូរអភិបាលពិភពលោក WFP ផ្សេងទៀត Others..... មិនដឹង Don't know	1 2 3 4 5 88 99
97	តើអ្នកយល់យ៉ាងម៉េចដែរ ចំពោះដំណើរការនេះ? បង្ហាញដោយអានចំណេះ How do you think about this process? Prompt by reading the list	មិនល្អ Not good ធម្មតា Ok ល្អ Good ល្អណាស់ Very good	0 1 2 3
98	ហេតុអ្វី? Why?		
99	តើអ្នកគិតថាគួរកែលម្អដំណើរការនេះយ៉ាងដូចម្តេចដែរ? How do you think to improve this process?		
100	តើអ្នកបានចេះ/រៀនអ្វីពីគំរោងរបស់យើរដែរឬទេ? Did you learn anything from CARE's project?	ទេ No (skip to Q102) បាទ/បាទ Yes	0 1
101	តើអ្នកបានរៀនអ្វីខ្លះពីគំរោងរបស់យើរ? What did you learn from CARE project?		
102	រៀនដោយរបៀបណា? How did you get this information?		

103	<p>ប្រសិនបើមានទឹកជំនន់ តើអ្នកគិតថាអ្នកភូមិមានបញ្ហាដូចកាលពីមុនរឺទេ?</p> <p>បង្ហាញដោយអានចំណេះ</p> <p>If there is flood, do you think villagers will face the same problems as in the past time?</p> <p><i>Prompt by reading the list</i></p>	<p>យ៉ាងមុន worse than before 0</p> <p>ដូចមុន Same as before 1</p> <p>ប្រសើរជាងមុនបន្តិច Better than before 2</p> <p>ប្រសើរជាងមុនច្រើន Much better than b4 3</p> <p>គ្មានបញ្ហា No problem 4</p>
104	<p>ហេតុអ្វី? Why?</p>	
105	<p>សូមជួយចាត់ចំណាត់ថ្នាក់គំរោងគ្រូបង្រៀននិងកាត់បន្ថយគ្រោះមហន្តរាយ-ការរស់នៅលើទឹកជំនន់ របស់យើង?</p> <p>បង្ហាញដោយអានចំណេះ</p> <p>Please rank DPM-LAF project of CARE.</p> <p><i>Prompt by reading the list</i></p>	<p>មិនល្អ Not good 0</p> <p>ធម្មតា Ok 1</p> <p>ល្អ Good 2</p> <p>ល្អណាស់ Very good 3</p>
106	<p>ក្នុងនាមជាអ្នកទទួលបានផល តើអ្នកមានសិទ្ធិអ្វីខ្លះ? What are your rights as a beneficiary?</p>	
107	<p>អ្វីទៅដែលបញ្ជាក់ថា ជាការទទួលខុសត្រូវខ្ពស់នៅក្នុងគំរោងយើង? What does accountability mean in CARE's project?</p>	
108	<p>ការចេះអាន និងចេះសរសេរ</p> <p>បើត្រូវទាំងអស់ គឺចេះអាន និង សរសេរ</p> <p>បើមានខុសខ្លះ គឺចេះអាន និង សរសេរនៅមានកំរិត</p> <p>បើខុសទាំងអស់ គឺមិនចេះអាន និង មិនចេះសរសេរ</p>	<p>ចេះអាន និង សរសេរ 1</p> <p>ចេះអាន និង សរសេរ នៅមានកំរិត 2</p> <p>មិនចេះអាន និង សរសេរ 3</p>
109	<p>តើអ្នកមានអ្វី ចង់អោយខ្ញុំយកទៅប្រាប់យើងនៅភ្នំពេញទេ? Do you have any comments you want me to take to CARE in Phnom Penh?</p>	
110	<p>យោបល់អ្នកធ្វើសំភាសន៍ : កត់ត្រារាល់អ្វីខុសពីធម្មតា អំពីការសំភាសន៍ / Interviewer's opinion: Note anything unusual about the interview</p>	