



ANNUAL REPORT 2016



TPO VISION

CAMBODIAN PEOPLE LIVE WITH GOOD MENTAL HEALTH
AND ACHIEVE A SATISFACTORY QUALITY OF LIFE.

TPO MISSION

TO IMPROVE THE WELL-BEING OF CAMBODIAN PEOPLE WITH PSYCHOSOCIAL AND
MENTAL HEALTH PROBLEMS, THEREBY INCREASING THEIR ABILITY TO FUNCTION
EFFECTIVELY WITHIN THEIR WORK, FAMILY AND COMMUNITIES.

TPO VALUES

TPO PEOPLE ARE PROFESSIONAL, COMMITTED, AND ALWAYS STRIVE FOR QUALITY.
WE ARE KEEN TO LEARN AND REAL TEAM PLAYERS.
WE ARE TRUSTWORTHY AND HONEST PEOPLE WHO ALWAYS DEMONSTRATE
RESPECT AND EMPATHY AND VALUE EACH INDIVIDUAL'S OPINION.

TRANSCULTURAL PSYCHOSOCIAL ORGANIZATION (TPO) CAMBODIA

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DEAR FRIENDS OF TPO CAMBODIA,



I am pleased to present you TPO's Annual Report of TPO activities for 2016. This report reflects our concerted efforts to achieve a high quality of service for all our beneficiaries and our partners.

In 2016, all TPO project staff has been working so hard to address the mental health and psychosocial issues of the general population as well as of specific groups such as survivors of past and current gender based violence (GBV), survivors of torture, inmates of prisons, etc... We have achieved all of our targets and we have contributed significantly to improve wellbeing of our beneficiaries.

Mental health has lately attracted more attention from international communities. Member States of the United Nations agreed in 2015 to achieve 17 Sustainable Development Goals (SDG) by 2030. Of these 17 goals, mental health and gender has been taken into consideration. One target is about good health and wellbeing (goal 3) promoting healthy lifestyles as well as mental health treatment and another one is to achieve gender equality and empowerment of all women and girls (goal 5). However, there seems to be no concrete plan yet from many member states as well as from donors to invest their funding for mental health.

As a result, it is very hard for a non-profit NGO like TPO Cambodia, which relies on funding from donors to operate smoothly. Although we are trying very hard to be a self-sustained NGO, we will need to seek more funding from donors for many years to come.

On this occasion, I would like to appeal to all generous individuals and donor agencies to continue to support mental health initiatives in Cambodia as well as to support TPO.

We can help you to address the mental health issues of Cambodian people.

I hope you will find this report useful.

Sincerely yours,

Dr Sotheara Chhim

Executive Director

OUR PROJECTS

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Improving Mental Health for Survivors of Gender-Based Violence & Sexual Assault

Partnership Program for Protection of Children (3PC)

Access to Justice for Women

Justice & Relief for Survivors of the Khmer Rouge Regime

Truth, Reconciliation & Healing – Towards a Shared Future

Mental Health Care & Psychosocial Services for Cambodian Prisoners

Strengthening Local Mental Health Systems

Operation Unchain

Promoting gender equality and improving access to justice for female and GBV survivors under the KR regime_Phase II



16 Days Campaign

This 2013–2017 project is funded by the Australian Government's Department of Foreign Affairs and Trade (DFAT).



In 2016, promoting gender equality and improving access to psychological service for survivors of gender-based violence sexual assault were again a priority for TPO's community mental health team in Battambang. Our staff in Battambang continued to strengthen capacity to 20 community resource people (CRPs) on Mental Health First Aid such as identifying signs of anxiety, depression, and how to support community members with psychological problems, for example through relaxation and meditation. In 2016, our CRPs had identified and provided emotional support to 131



Survivors of gender-based violence. TPO established and ran 10 self-help groups with total of 83 members. We provided additional individual counseling to 26 people. About 1068 Community members (821 Women and 247 Men) including survivors of violence, men with a drinking problem, and vulnerable groups such as children at risk and female heads of households, received psycho-education from TPO Cambodia. All participants in the self-help groups as well as those who received counseling reported a significant improvement in the state of their mental health.



CASE STUDY OF LEY SAMNANG

Battambang province, on 12 August 2016, By Ms. Phan Chanveasna

Childhood History

Ley Samnang is a 38-year-old female living in Tuol Chreaneang village, Bay Damram commune, Banan district and Battambang province. She has 3 siblings and all of them are women. She lived with her uncle/ aunt since she was 3 years old because her mother died of domestic violence and her father left home to marry with another women and had never care for Samnang at all. Due to poverty, Samnang left school at grade 5.

Beside her 3 siblings there were 2 other cousins were also living under the care of her uncle/ aunt too. Therefore it was a great burden for her uncle/aunt very much, which made them so stressful with all the burden and that they displaced their anger to her and others. In addition, they were very strict people; they did not allow anyone to go out, or to go to the festival. If someone didn't listen to them, the shouted at with loud voice which scared Samnang and other relatives. Samnang said because of this parenting style, she became a child who often afraid of social encounter. Samnang helped her family (her uncle/

aunt) in the rice field as well as to do labor work in order to earn extra income to support the family.

Family and Marital History

At the age of 19 (1997), Samnang had a relationship with a man, name Chhoeut Heat, who was a soldier living in the same village. Both of them love each other very much but relatives of both sides opposed this decision. Therefore they decided get married without the approval from parents of both side. Because of having no approval from relatives of both sides, they cannot perform wedding ceremony as Cambodian tradition, they only prayed and requested permission from ancestor of both sides only.

The newlywed loved each other very much; they worked hard to earn the money for living as neither of them has inherited wealth from their parents (both of them have no parents). A year later, both started having minor family conflict but they still have some respect to each other. In 1999, they both had a son but he later died because of illness. They later have a daughter and a son, currently

aged 17 year old and a 14 year old respectively, both of them live in the family.

Since the death of her first son, her husband started drinking alcohol. He started to make physical and psychological abuse to Samnang. He was a bit aggressive; he always destroyed household properties whenever he got drunk. The abuse was first happened toward Samnang, but later extended to two other children. This made both of her children become easily fearful until today. This affected Samnang physical and mental health problems. Everyone in the village knew that Samnang's family had severe domestic violence. Even if local authority cannot help her family at all. She sought help from the hospital and private clinic in her community for her mental distress. She had sold 2 cows to cover the cost of treatment but her illness does not recover.

At the same time, she still continued to suffer from domestic violence perpetrated by her husband. Therefore, she was so depressed to the point that she wanted to end her life. She bought pesticide that farmers use to kill mice and had planned to swallow it, but later on she decided to throw it away because she realized that she has 2 good kids to live with. They often talk to her nicely and help



her with everything. Thus, she decided to visit psychiatric clinic in the provincial town where she was prescribed anti-depressant, which make her able to fall asleep a bit.

Despite being able to sleep, and free from headache, she still cannot bear with everyday physical and psychological abused by her husband. She was so hopeless and helpless as she didn't see if there is anyway that she can get out of such kamar. This kind of violence image has been captured and stored into her mind, thus she avoided going out to meet neighbor or attending any social activity in her village.

Motive for Attending Self-help Group

In Feb 2016, TPO team in Battambang province started working in her village. We requested permission from the local authority in order to select community resource

people to attend our training on basic mental health care. TPO has also raised awareness on mental health in her village. After the training community resource person (focal person) in her village knows that she has psychological problems from chronic domestic violence, therefore she invites her to attend self-help group, organized for survivors of GBV and was funded by DFAT, Australia, in her Toul Chreaneang village, Bay Damram commune, Banan district and Battambang province on 25 May 2016.

Family Situation Before Receiving Intervention

In the self-help group, Ley Samnang felt so hopeless, lonely, didn't speak any word, sometime she smiles but all the sudden she started to cry. The pre-test using Bluecloth Inventory , to assess her psychological status, revealed severe psychological distress such as depressed mood, anxious and phobia. In every self-help group session, Samnang always drop tear or cry in the session. Sometime she told the group members “what is the point for me to live”? And “no one can help me”.

All group members always encourage her to live and share her with their good experiences and advise. At the 4th session, she does not seem to improve. TPO counselor



realize that they do not have enough time for her to share her feeling in the group and also she seems to have more severe problems compare to other. Therefore, TPO counselor decided to give her individual counseling from 20 June 2016 in addition to her attending self-help group.

After the Intervention

1. Self-help Group

Samnang has expressed her distressing feeling to group members and cries every time she attended the group which makes everyone in the group feels so sorry for her. During the pre-test assessment of symptoms using

Bluecloth Inventory, Samnang shows lots of symptoms of depression such as depressed mood, low energy, sleeping difficulty and hopelessness. Samnang was supported by group members, as she seems to have more severe problems as compared to others. No one in the group would discriminate or look down on her. In contrast, she has learnt from the experiences of other group members in dealing with their issues. She and group members also learnt other self-help method such as anger management, relaxation technique to help her focus and sleep better, breathing technique to help her control her fear, anxiety and distress. In addition, she also has learnt about the cause and consequences of GBV on mental health and other things.

After attending the group and practice all the techniques, Samang's mental state has been improved, she has reduced anger, and knows how to deal with her distressing should all the symptoms arise. She also changes the ways she communicates to her husband and try to compromise, this make the situation in the family become more favorable. She was trying very hard to practice all the techniques she learns from the group; she has never been absent from the group at all.

2. Individual Counseling

TPO counselor observed that Samnang seems to have more severe problems as compare to other in the group. Samnang does not have enough time to express her feeling in the group, therefore, TPO counselor decided to provide individual counseling to her weekly started from 20 June 2016 in addition to the self-help group. The first, second and third meeting, the counselor was trying to understand her situation, dynamic in family and try to build relationship further. But from third meeting, TPO counselor helped her deal with emotional distress by allowing her to practice relaxation exercise in order to reduce all emotional symptoms as a result of expression of her feeling. TPO counselor also discussed with her on how she could get along well with her husband, change her negative attitude toward her husband, how she could appreciate her own existing resource, learn to love herself and to comply with her medication.

*"I have damaged you for a long time, and I will
repair all the damage you have."
– Ley Samnang's Husband*

This enables Samnang to be able to appreciate herself and can take care of her own health. Prior to the counseling, she does not care about her own health as she wishes she could die and does not care about her life. So far, TPO counselor has met her for 6 sessions until July 2016.

Impact of the Intervention

After receiving individual counseling and attending self-help group, Samnang has more energy, more initiative to do more work and confident in talking to her husband. She changes the way she thinks and gives meaning to her life, she said now her life is full of meaning. She used to think in a negative way, but now she always think of pros and con before making any decision. Example, she said that during the time when he husband treated her badly, she think that her life is like rubbish, she said “my life is like rubbish, it often flows with the water, but sometime when it meets the whirlpool, it can’t move forward, it gets stuck. So this is life, do not worry too much”. Sometime she said, “It’s my sin, I have body like other but I am more miserable than other. I wanted to run away from home but then I saw the good deed of my kids, so I change my mind”. Sometime, she said, “my husband is a bad person, he treated me badly, but he has some good point too, at

“I compared my life as a lamp without petrol, but fortunately TPO came and put more petrol and make my lamp shine again.”

– Ley Samnang

least he can produce good children for me”. Therefore, she starts to think that her life has value again.

Through self-help group and counseling, TPO counselor sees that Samnang is a strong woman who is striving to change her destiny. She first tried to help herself through practicing the technique she learnt from the group and other members and tried to make her family in harmony again. In the past, when her husband got drunk, he often scolded everyone in the family, he won’t sleep and he would scold her the whole night. Now she tried to talk nicely to her husband first, so that her husband won’t be able to scold her. When she does that, it’s help her because her husband didn’t scold her, she was so happy as she think that this is the success.

She was so happy with this, she feels so good when her family harmony has gradually returned to near normal. At the same time, her husband also received counseling

from another TPO counselor, which makes him change his behavior too. Her husband reduces drinking and stops scolding her. This makes this couple to be able to talk to each other about their problem, rather than scolding each other all the time. Her husband told her that, “I have damaged you for a long time, and I will repair all the damage you have.” This sentence makes her feel so excited, so she said that all the anger she has toward her husband has disappeared.

Her children were very happy too when they saw their parents could get along with each other well. This couple had stopped talking to each other since 13 April 2016, they start to change in the 8th session of the counseling.

Livelihood Enhancement

TPO has encouraged all self-group members to participate in the chicken-raising program, offered by TPO Cambodia. TPO staff will teach the chicken raising technique and will provide capital in \$200 to each family (this cash is supported by UNICEF through Friend International).

When Samnang’s mental health status has not improved, she was not interested in this project or in improving her

income at all. But after Samnang and her husband get along well, and everyone has good feeling, both Samnang and her husband were also interested in being part of this chicken raising too. It was then a bit too late for her because the training on chicken raising was over.

However, TPO staff still commits to help her family to be part of this program with condition. First she needs to build the chicken cage in which she can use her own resource, then TPO will teach her how to chicken raising and give her \$200 to buy chicken on 09 August 2016. She also learns from the experience of other self-help group members who have learnt before while TPO staff will continue to supervise her. We hope that she can sell her first chicken from November 2016 onward.

Ley Samnang Impression

I feel that my life is now full of hope, “I compared my life as a lamp without petrol, but fortunately TPO came and put more petrol and make my lamp shine again”, I am so happy and grateful with the help of TPO who have changed my family. TPO makes me understand the value of my own life. I wish to have TPO to continue to help me a little bit longer, so that I can become stronger.

OUR PROJECTS

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Partnership Program for Protection of Children (3PC)

Access to Justice for Women

Justice & Relief for Survivors of the Khmer Rouge Regime

Truth, Reconciliation & Healing – Towards a Shared Future

Mental Health Care & Psychosocial Services for Cambodian Prisoners

Strengthening Local Mental Health Systems

Operation Unchain

Promoting gender equality and improving access to justice for female and GBV survivors under the KR regime_Phase II



This project is funded by the UNICEF via Friend International (FI).



In 2016, TPO is selected by Friend International to work together as a partner to strengthen child protection system in response violent against children and to promote a protective family environment. TPO's focus is to provide support and service to survivors of gender-based violence, vulnerable children and local authorities in the community (Battambang province, Banan district, Kanteu 1 and Kanteu 2). This project complements with the current project funded by DFAT, which aims to improve mental wellbeing through livelihood support.

TPO also selected 66 Children between 8-15 years old (32 girls) participated in Child Friendly Club, which allows children to



express and share their feeling, experience in the group of children who are witnesses/ direct experience of violence. The child Friendly Club for children aims to increase self-confidents, reduces stress/anxiety for children in family violence.

This project identified and supported 16 GBV' families who have improved their psychological wellbeing to participate in chicken raising programme. These 16 families have received training on chicken raising and a capital of \$200/family to build cage, and to buy chicken. 6 months after receiving this support, 12 out of 16 families have increased numbers of chicken and they can earn income from the chicken raising.

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This project was funded by GIZ (German Society for International Cooperation) and operating with support from Cambodia's Ministry of Women's Affairs (MoWA).



In 2016, one of the aims of TPO's community mental health teams in Siem Reap and Kampong Thom provinces was to support disadvantage women in two districts: Angkor Thom district (Siem Reap province) and Stoung district (Kampong Thom province). The women and girls we worked with, they are victims of gender-based violence most often perpetrated within the family who have been lacking access to medical care, justice and other social services. TPO has helped them gain access to these services while also providing mental health care and psychological support. We have also worked with the perpetrators of this violence to rehabilitate them. With this work we aim to help build better informed, healthier and peaceful communities where women can feel safe, empowered and confident.

We continued to provide coaching and follow up in mental health to community resource

people (CRPs) who had expressed the desire to stay at the forefront of tackling mental health issues in their communities. Those trained CRPs have managed to provide an emotional support to 141 survivors of GBV through relaxation exercise, control of anger management, and referral for needed services.

With these CRPs we established and ran 11 self-help groups for 91 people and we provided individual counseling to 32 people (Women=23, Men=9). We ran 20 psycho-education sessions about gender-based violence and mental health for a total of 1366 villagers (F=1172, M=194). TPO referred 11 clients for other services including psychiatric treatments and shelter service from CWCC. Four clients were referred in by Life Project Cambodia, ARM, and CWCC organization to get our psychological support from TPO's counselor.

CASE STUDY OF MRS KORNG KIMSEAN

By Mrs Chan Theara, Access to Justice for Women Project, TPO Kampong Thom.

General Information

Mrs Korng Kimsean, a 36-year-old female, farmer, living in Leap village, Chamna Kroam commune, Stoang district, Kampong Thom province. Mrs Kimsean is married and has 5 children, they all are living dependently.

Mrs Kimsean has 4 siblings, 2 males and 2 females. She is the oldest child in the family. She never had a chance to go to school because her mother had a second husband and her family was too poor to send her to school.

Mrs kimsean was referred by TPO village chief, who was also a community resource person trained by TPO, to receive counseling and join self-help group from TPO in April 2016 and her treatment completed at the end of 2016.

History of Present Problems

Mrs Kimsean presented with so many physical and psychological complain, she felt so distress, fearful without reason, excessive worry about everything, easily getting angry, having headache, sleeping difficulties, having no energy / physical exhaustion, helplessness.

She said her husband was the cause of her problem. Her husband is a heavy drinker, whenever he gets drunk he becomes very aggressive, forces her to have sexual intercourse. If she rejected, he scolds her and beats her all the time. In addition, her husband is also a gambler, he has put household properties in pawnshop to get money for gambling. She cannot stop him from doing this, which made Mrs Kimsean feels so worthlessness. Mrs Kimsean said she was so helpless in her family because she cannot have any voices in the family.

Past History

When Mrs. Kimsean was a newly born baby about 7days old, her parent was separated because her father left home to marry another woman. Her mother had to go to work and Mrs Kimsean was taken care of by her aunty. At the age of 3, her mother married with another man and has 3 more children.

At the age of 15, Mrs Kimsean was raped by a man who is her current husband. After the rape, the family of both sides had discussed and agreed to arrange the married in order to compensate her suffering and to avoid having the culprit put in jail. Since the married, her husband gets drunk everyday. He often forces her to have sexual intercourse against her will; the intercourse happened even when Mrs Kimsean has menstruation. As the result, Mrs Kimsean has been affected by physical and emotional symptoms such as continuous bleeding, feeling so fearful, difficulty breathing, chest tightness, sleeping

difficulty, exaggerated startle response, low energy, poor appetite, dizziness and pain in many parts of the body. She loss weight significantly, she felt so helpless, she couldn't take care for her personal hygiene which make her appearance looks so messy. Mrs. Kimsean also drink alcohol in order to cope with her distress and physical pain. She had miscarriage six times, which could be due to the alcohol intake or abuse from her husband.

She sought help from local authority, and elderly people in the village but nothing can be done to help her husband change his behavior. She also sought treatment from Kru Khmer, monks and sometime she took medicate that she bought from pharmacy but all of the above effort could not help her. Therefore, she has to live with her problem until today.

Support from TPO Counselors

After the present of TPO in her village, Mrs. Kimsean sough a support from village chief who is TPO's

trained community resource person (CRP) in her village. As her problem is quite severe, so the CRP has referred Mrs Kimsean to TPO counselors for help. TPO counselors invited her to participate in Self Help Group, and She also received individual counseling because she needs more individual counseling in addition to attending the group.

In self-help group, she had the opportunity to share her experience, emotion and learn from the experience of others. She also had the opportunity to tell her story in private through individual counseling session. She also learns several techniques to help her cope with her symptoms and become more relax, so that she can sleep better at night, reduce alcohol consumption, communicate better with family members and become more productive. She had attended 18 self-help group sessions, 17 individual counseling sessions. The assessments of distressing score before the counseling and after counseling showed signification reduction of score from 2.61 at

the baseline and to 1.2 at the close of self-help group (the high score, the more disturb).

At the same time, TPO had provided counseling to her husband to help him cope with his problem and his alcohol abuse. As result, her husband has slightly changed his attitude and reduced alcohol intake and stopped physical and verbal abuse her and family members. This makes family relation better than before. Beside formal group sessions, TPO counselors often spend more time with his family in order to help increase harmony between TPO and her family. This makes her family feel more trustful on the service TPO provides and make them no hesitation share problems with TPO counselors.

Currently Mrs. Kimsean's husband is working in Thailand and sends some money to Mrs Kimsean to support family and cover her physical treatment. Mrs Kimsean actively participates in social activities such as meeting, wedding, Buddhist ceremony in the village.



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In 2016, this project was funded by GIZ (German Society for International Cooperation), Swiss Foundation and UNVFVT (United Nations Voluntary Fund for Victims of Torture).



In the context of the Extraordinary Chambers in the Courts of Cambodia (ECCC), also known as the “Khmer Rouge Tribunal”, this project continued to support witnesses and civil parties/KR survivors as well as their families and communities with the aim to alleviate post traumatic suffering. In close cooperation with the Witness and Expert Support Unit (WESU) and the Victims Support Services (VSS) of the ECCC, we offered a variety of psychosocial services such as on-site psychological support before, during and after ECCC proceedings, truth telling ceremonies and testimonial therapy, self-help groups, family dialogue between 3 generations, assistance to clients in need for psychiatric treatment, phone counseling and psychosocial education for KR survivors. In addition, the project aimed to raise public awareness through radio live shows and rebroadcasts on topics of mental

health and the ongoing transitional justice process and through special public events.

In 2016 TPO provided psychological on-site support prior, during and after ECCC proceedings to 32 witnesses.

It offered Testimonial Therapy – a culturally relevant trauma therapy program – to 15 Cambodian Muslims (5 females) and organized 3 public truth telling ceremonies in which national and international audience play an important role for the acknowledgement of the survivors’ suffering. The ceremony was accompanied by a photo exhibition of archive photos and graphic paintings about the repressive conditions under the Khmer Rouge regime to raise public awareness especially of the youth.

The project also offered several 8 session long self-help groups to 10

Khmers and 10 Cambodian Muslims (14 Female). This intervention gives participants a safe space to share their thoughts and emotions, process their traumatic experiences, develop relationships, rebuild trust in themselves and in others and learn new coping skills to deal with stressful daily situations. The approach was developed with great concern to the cultural habits or beliefs of the participants and to their level of understanding.

As a third approach, the project staff turned 2016 towards facilitating intergenerational dialogues with civil party families. The intervention was created to assist families who expressed the need to heal family relations, but had great difficulties to talk about sensitive issues by themselves. The facilitated dialogue with each multigenerational family consists of 5-7 consecutive sessions in intervals of 3 weeks. For the pilot intervention three generations of one civil party family was selected, consisting of grandmother, daughter and 4 grandchildren aged between 21 to 12 years. The family matriarch wanted to come to terms with her bereavement and share with her offspring about being forced into marriage by the Khmer Rouge regime. The dialogue was facilitated by 3 counselors who applied diverse techniques of

family counseling with good success.

Each year TPO is committed to support torture survivors with rehabilitation and psychiatric care. In 2016 six torture survivors received financial support from the project for their psychiatric treatment. TPO's psychiatrists made clinical assessments with all 6 clients and prescribed psychotropic drugs as far as necessary. The treatment was combined with instructions on the use and side effects of psychotropic drugs, some psycho-education and face-to-face counseling.

During 2016, the project staff provided nearly 200 telephone counseling sessions to 71 survivors. Telephone counseling sessions are meant for civil parties/KR survivors in urgent need for immediate consultation or who want some more individual counseling after group sessions. After taking part in any of the project interventions, participants are contacted by the counselors to receive phone counseling sessions if wanted up to 3 times. With the available technical solution, counseling is getting more accessible for rural areas.

TPO Cambodia collaborated in 2016 again with FM 102 MHz of Women Media Centre (WMC)

to broadcast 8 live radio shows with 52 callers (18 females) and to re-broadcast the shows 26 times. The topics dealt with Khmer Rouge past, mourning, trauma healing and reconciliation. The radio program aims to raise public awareness about the legacy of Cambodia's violent past, transitional justice, the long-term impact of KR regime on mental and physical health and on trauma healing. The live show was broadcasted once per month and re-broadcasted three to four times every month and covered provinces such as Phnom Penh, Kampong Thom, Svay Rieng, Pursat, Battambang, Kampong Cham, Kampot, Sihanouk Ville, Stung Treng and Ratanakiri.

In 2016, the project team developed and facilitated 3 workshops on resource-oriented stress management for 60 staff of the Tuol Sleng Genocide Museum. Additionally, one project staff facilitated together with the GIZ/CPS advisor a 2 day workshop for 18 national and international lawyers on trauma sensitive interview techniques and GBV and another workshop for 35 American Peace Corps members about trauma and culture in Cambodia. Furthermore, two KRT-project staff co-facilitated 1-2 workshops on development psychology in support of TPO's training unit.

With the 2016 project target group being Cham and Chvear the project team researched with a variety of media (film, articles, internet, and experts) historical and cultural facts of ethnic minorities as well as on religious practices of Muslims in Cambodia. Findings were put into writing and guarded as background knowledge, before conceptualizing and writing a final article for publication. The article deals with cross-cultural mindsets to pursue healing. It will be published in 2017.

The project also produced a film script with similar topics to showcase TPOs approach to cross cultural psychological interventions. Different camera teams filmed on several occasions project interventions with Muslims and interviews with Cham survivors. The film will be edited in 2017.

In an attempt to bring TPO project work in the province closer to the donor experience, TPO project staff organized a visit for 60 GIZ staff to target areas around Kampot, where they could talk to the beneficiaries and learn more about their traditions and present living conditions.

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USAID and the American People are generously funding this project, which is carried out by TPO Cambodia as lead organization and Youth for Peace Cambodia as subcontracting partner. Note that figures above refer to the USAID fiscal reporting period for this project which is Sept 2015-Sept 2016



With this project, TPO (in cooperation with its project partner Youth For Peace) aims to complement the process of retributive justice* at the Extraordinary Chambers in the Courts of Cambodia (ECCC) with restorative justice** at the grassroots level. In particular, we aim to help traumatized victims improve their mental well-being and strengthen their resilience and coping abilities. We also work to generate healthier relationships between various “identity groups” in Cambodian society. i.e. generate a better understanding of the complexity of victim – perpetrator identities and relationships, and work towards a shared vision of the past and the future. We do this through trauma work, truth-telling, dialogue and memorialization initiatives in 6 provinces (Takeo, Kampot, Battambang, Kampong

Chhnang, Banteay Meanchey and Pailin).

We provided a four-day Testimonial Therapy as a part of trauma treatment to 16 trauma survivors who had experienced a wide range of traumatic events during the Khmer Rouge regime including torture, forced labor, starvation, imprisonment and the witnessing of brutal killings. The therapy has given them have a better understating of the link between their past experiences and current health problems, and they were provided with a safe environment to open up and share their story as well as their problems, first with a TPO counselor, then with other survivors, family, friends, neighbors. This has brought them relief and acceptance. We also organized 3 Truth-telling

* *Justice that considers punishment as a response to crimes*

** *Justice that focuses on the needs of the victims, the offenders, and the community*

ceremonies during which we gathered a total of 217 People (119 female) – trauma survivors and their communities – to listen to and acknowledge the survivors personal stories. This hugely contributed to restoring the victims dignity and rights, and reduced stigma against them. These ceremonies allowed the communities to strengthen their sense of solidarity, peace and reconciliation. Some former Khmer Rouge expressed feelings of collective guilt and responsibility, of empathy towards the victims and a desire to reconcile with them, while some victims have developed more positive feelings towards former Khmer Rouge. We also has 310 members (171 females) of various communities participate in our film-based community dialogues, which organized eight film sessions in six provinces (Takeo, Banteay Meanchey Pailin, Kampong Chhnang, Battambang, and Kampot provinces.

During this year, TPO facilitated 1 video based former KR-victim-survivor dialogue with 3 former

KR and victim survivors in Kampong Chhnang province. The dialogue has been completed; the victims and perpetrators have been reconciled. In the process of dialogue, TPO staff has provided on going counseling to participants throughout the entire dialogue.

We also set up a counseling hotline to primarily provide additional support to Khmer Rouge survivors and young people after they've attended our activities, but we are also open to receiving calls from others who are interested in our services. During our third year, we provided counseling to 129 clients (71 females), for both on site counseling and phone counseling. Among 149 clients, 40 (17female) were TT clients, and 89 clients (54 females) were counseling clients. Last but not least, TPO has provided training on 2 trauma workshops to youths and Memory Committee members.



A friendship tree is planted by former KR and victim-survivors, in the presence of a village chief, monk, and their relatives.

OUR PROJECTS

Improving Mental Health for Survivors of Gender-Based Violence & Sexual Assault

Partnership Program for Protection of Children (3PC)

Access to Justice for Women

Justice & Relief for Survivors of the Khmer Rouge Regime

Truth, Reconciliation & Healing – Towards a Shared Future

6

Mental Health Care & Psychosocial Services for Cambodian Prisoners

Strengthening Local Mental Health Systems

Operation Unchain

Promoting gender equality and improving access to justice for female and GBV survivors under the KR regime_Phase II



Our prison project is funded for 3 years (2014–2016) by Dynamic Share (DS) and the Swiss Government through the Swiss Agency for Development and Cooperation (SDC).



Cambodia's prison population constitutes one of the most disadvantaged groups in Cambodian society. Adequate health care for prisoners with pre-existing mental health conditions, and for those who develop mental health problems while in prison, is lacking. TPO Cambodia is the only NGO providing such services. We have been bringing mental health care and psychosocial services to Cambodian prisoners since 2012. With this project, approved by the General Department of Prisons in Cambodia, we support prisoners, both male and female, in four of Cambodia's 26 prisons; Correctional Center 1, Correctional Center 2 (both also known as "Prey Sar", Kandal Provincial Prison and Kampong Chhnang Prison. We can also Provide crisis Support in other prisons at the request of prison staff.

In 2016, 128 inmates (72 men, 56 women) received psychiatric treatment and 49 inmates (33 men, 16 women) received counseling thanks to TPO Cambodia, Almost half of these

prisoners were suffering from depression, whereas psychotic disorders constituted the second-most common diagnosis. Other health problems tackled TPO staff were generalized anxiety syndrome (GAD), sleeping disorders, epilepsy, alcohol and substance abuse disorders, and bipolar affective disorder. Also, 35 inmates (18 men, 17 women) in the life skills training program, which helps them, develop their personal awareness, interpersonal relationships, and psychologically prepare for their release and plan their future. In prisons, we ran self-help groups with 12 inmates as women.

Many of our clients in prison have shown a marked improvement in their psychological well-being and have provided positive feedback about TPO's support. As one inmate said that "I can see my new life from what I have learnt, we are very grateful for TPO life skill program, it is like God who come to help, and it is like a special property which I have never had before, our lives are in our hands now."

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Mental Health Care & Psychosocial Services for Cambodian Prisoners

7

Strengthening Local Mental Health Systems

Operation Unchain

Promoting gender equality and improving access to justice for female and GBV survivors under the KR regime_Phase II



This program is funded by the Belgian University NGO Louvain Cooperation (LD) and TPO have been working together since 2008 to strengthen Cambodia's mental health care systems.



This program is funded by the Belgian university NGO Louvain Cooperation (LD). LD and TPO have been working together since 2008 to strengthen Cambodia's mental health care systems.

TPO kicked off a new 2014-2016 project funded by Louvain Cooperation which aims to strengthen local mental health systems in Kampong Cham and Tboung Khmum provinces in such a way that are able to offer accessible, good-quality and culturally relevant mental health care to the community, in an efficient and sustainable manner. To do so, TPO is working from two field offices inside provincial referral hospitals: one in Chamkar Leu Referral Hospital (Kampong Cham province) and in Ou Reang Ov Referral Hospital (Tboung Khmum province).

We continued to provide technical support on mental health services in 08 out-patient departments (OPDs), 02 referral hospitals namely Ou Reang Ov referral hospital and Chamkar Leu referral hospital and 03 health centers in health operational district Chamkar Leu, in 03 Health centers in health operational district Ou Reang Ov. In this year, TPO-LD

Project has sent 10 health staff to learn about consulting with mentally ill patients with TPO mental health clinic in Phnom Penh. This training will help OPD staff to provide proper diagnosis and treatment to clients who seeking service from their department. We also trained 3 groups of village health support group in total 46 participants on Mental Health First Aid (MHFA), 37 in female and also did refreshing course with 56 village health support groups (F=20, M=36) (VHSGs) from 06 health centers of OD ChamkarLeu and OD Ou reang Ov.

Throughout the year, 613 people are new cases received mental health services through the OPDs of 02 referral hospitals and 06 health centers in the target areas. The total number of clinical work sessions done by the out-patients department staff is 4221 sessions of consultations. 66 cases were referred by VHSGs to access mental health service after they received training on MHFA and 12 cases were referred from health center to referral hospital.

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8

Operation Unchain

Promoting gender equality and improving access to justice for female and GBV survivors under the KR regime_Phase II



The fundraiser is still open; so if you would like to contribute, please contact admin@tpocambodia.org or (+855) 23 63 66 992



In Cambodia, there are still many mentally ill patients who have been locked up at home or chained to trees by desperate family members. This happens in communities around the country, because family members do not know how to deal with the patients, there are no mental health services available in their community and they lack the finances to seek help further or to even take care of the patients.

TPO has been working in response to mental health issues, but due to funding limitations we can't respond to all needs in Cambodia. Fortunately, during TPO's 20th Anniversary Celebration in 2015, His Majesty King Norodom Sihamoni of Cambodia kindly donated US\$5,000 to TPO Cambodia. With this donation, TPO team set up a new project called "Operational Unchain" to raise awareness of mental health issues in rural Cambodian communities and

demonstrate that there are alternatives to chaining up family members struggling with mental illness.

In order to treat and unchain as many patients as possible, we decided to run an online fundraising campaign to raise more funds. TPO collaborates with the Department of Mental Health and Substance Abuse (DMHSA) to set up a mobile team traveling to rural areas to treat patients, educate families on how to take care of mentally ill patients.

So far, TPO has treated 59 mentally ill patients (23 Females and 36 males) (Unchained = 30 patients, death = 3 patients, Not yet get treatment = 6 patients, Drop out = 2 patients, Still chained = 18 patients) in 10 provinces (Svay Rieng, Takeo, Kampong Cham, Tboung khmum, Battambang, Siem Reap, Kampong Thom, Kratie, Kampong Speu, and Phnom Penh). 30 out of 59 mentally ill patients have been successfully unlocked/ unchained.

CASE STUDY: HUMAN'S COTTAGE BECOME CHICKEN'S COOP

The patient is a 22-year-old man and lives in Svay Rieng province. He attended school through grade 7, but then stopped and went to work at a factory. After working there for a year, his illness began when he was 17 years old. He did not want to see anyone or communicate with others. He stayed alone and did not sleep at night. He spoke to himself and his speech was disorganized.

His mother brought him to traditional healers for four months, but their treatments did not help. So, his mother brought him to a referral hospital for mental health services. He received medical treatment there for 18 months, but his condition still did not improve. He frequently ran away, so his mother decided to chain him to a pillar five years ago because she worried that he would harm himself or others, as well as damage other people's property. His mother



Above: The man, before got treatment from TPO, was chained in a cottage separated from his family.



Left: The man, after got treatment from TPO able to take care himself.

believed that he was sick because he had eaten dog meat when he worked at the factory. His sister also had a similar illness.

After the Operation Unchain project was contacted, a clinical team from TPO Cambodia—a psychiatrist and a psychologist—arrived at the patient's residence in order to provide free psychiatric and psychological treatment for both him and his sister. After walking into the patient's home, the clinical team saw him wearing shorts without a shirt and sitting on old bed alone. He did not speak, his affect was depressed, he had no interest in others, he was dirty and had poor hygiene, and his leg was chained to a pillar in the room.

The clinical team developed a treatment plan, which included medication and working with his family to provide better support and care for the patient. The team also worked with the villagers living close by to educate them on how to be more supportive and

reduce any discrimination. Additionally, the team worked with village and commune authorities.

After receiving care from the Operation Unchained clinical team for over two months, the patient's symptoms began to improve. He was able to communicate better, he stopped talking to himself and his family decided to free him from the chain. With the improved support from people living around him, he takes his medication according to his doctor's prescription and his psychological functioning normalized in 12 months. He was able to return to work at the factory, which increased income for himself and his family. The small cottage where he was once chained was converted into a chicken coop and continuous to provide more income for the family.

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Operation Unchain

9

Promoting gender equality and improving access to justice for female and GBV survivors under the KR regime_Phase II



In partnership with Victims Support Section (VSS) of the Extraordinary Chambers in the Courts of Cambodia (ECCC) with funding support from United Nations Entity for Gender Equality and the Empowerment of Women, TPO Cambodia has started project from January 2016 to December 2018.



In partnership with Victims Support Section (VSS) of the Extraordinary Chambers in the Courts of Cambodia (ECCC) with funding support from United Nations Entity for Gender Equality and

the Empowerment of Women, TPO Cambodia has started project “Promoting Gender Equality and Improving Access to Justice for Female and Survivors of Gender Based Violence under Khmer Rouge Regime, phase II” from January 2016 to December 2018.

This Project’s goal is to reinforce and improve gender sensitivity with relevant stakeholders and partners, raise awareness on GBV under the Khmer Rouge (KR) and its link to the current situation of violence against women and women’s human rights, support and strengthen mental well-being to the survivors, support them to get effective participation in activities at the court & outside to ensure their stories are heard, and they are satisfied with their redress. Females and survivors of gender based violence under Khmer

Rouge Regime, who are civil parties of the ECCC, and community members are the target group.

In this project, TPO also provided training to civil party representative (CPR), community resource persons (CRPs) which is included teacher, village chief, health center staff, police, lay men, village health support group. There are 39 participants attending in the training on mental health first aid. TPO also provided psychological training to a group of 17 legal professionals and support staff from ECCC and CHRAC.

To identify the beneficiaries who presented with psychological distress effected by forced married under Khmer Rough time, or other form of GBV, TPO conducted 4 outreach sessions in 4 community with 263 community participants.

Most of the survivors managed to disclose their painful experiences for the first time during TPO's program. Self-help group members (6 groups with a total of 57 participants) forged close,

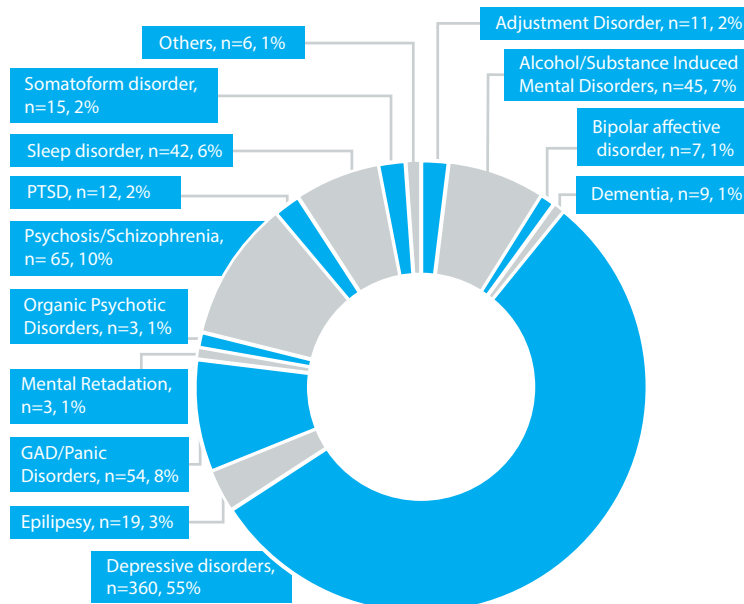
supportive relationships with each other which enabled them to face their past and process traumatic experiences in a safe, supportive and respectful setting. As a result, they expressed a reduction in stress and tension, and said to have a greater self-care ability and better coping skills. Participants in Testimonial Therapy (40 survivors of GBV) expressed similar benefits and also reported that the public acknowledgment of their suffering helped them regain their self-esteem. The survivors also stated that the integration of the spirits of the deceased in the ceremony was crucial in helping them deal better with loss and trauma. TPO also provided individual counseling via phone counseling to 40 survivors of GBV after they received trauma treatment. Beneficiaries of these programs substantially increased their understanding of gender-based violence under the Khmer Rouge and present-day forms of such violence and the proceedings in Case 002/02 at the ECCC, during this year, TPO has provided psychological support to 232 CPs and 16 witness pre and post trial.



Members of a Self-help Group are chanting and respecting to the Buddha

TPO TREATMENT CENTER

TPO's Treatment Center, funded by the TPO Trust Fund, continued to provide mental health services to a variety of patients from all over Cambodia. The numbers of new patients were 696, while the total numbers of consultations continues to be high with 7012 consultations in 2016. Clients received various types of treatment and support from TPO according to their diagnoses. A part from responding to an unmet need for mental health services, TPO's Treatment Center aims to generate income for TPO contributing to the organization's long-term sustainability and self-reliance. Also, throughout 2016, we put a considerable effort into further developing and strengthening our clinical capacity for details, see under Organizational Capacity Building. Between 20-30% of patients at this center received free treatment because they are too poor.



TPO TRAINING CENTER

With more than 20 years of experience in mental health, TPO's Training Center offers a variety of training courses on a number of mental health topics. We run "standard training courses", which aimed for minimum practical skills for participants. There are two types of courses, public course and tailored-made course. Public course are designed for general knowledge and skills suitable for general population, whereas 'Tailored-made course' are for specific need or given group or agency. All training is run by experienced and qualified trainers with degrees in relevant fields such as psychology, social work, psychiatry or psychiatric nursing. While responding to a demand in the



market for mental health training, TPO's training Center also generates income contributing to the organization's long-term sustainability and self-reliance.

In 2016, we ran 15 Public courses with 163 participants (121 females, 42 males). Participants came from different NGOs, attending courses on Counseling Skills, Stress Management and Child Development related subjects.

This year we also delivered 15 tailor-made courses to 495 participants (296 females, 199 males) from a wide range of local and International NGOs namely NGO Forum (Mlub Russey, WVC, Open Institute, Danish Red Cross, PSOD, TAF, IDE, AFESIP, Mlub Tapang, World Renew, OEC, FI, ILO, and CWCC). As we aimed for quality, we also offer coaching and supervision visit to few agency requested. The coaching / supervision is to ensure the application of the knowledge and skills

taught. This year there are 3 agency requested for coaching/supervision, namely partner of The Asia Foundation (PKKO and PDP-C), World Renew and AFESIP. The coaching/supervision focus on skills related to working with alcohol abuse person, counseling and communication skills with children. TPO-training unit is also offer variety of workshop to agencies to enhance knowledge and ensure up to date information regarding mental health. This year we offer 4 workshops regarding Mental Health and Self-care strategy for Women Domestic Workers, Orientation of the Community Based for Psychosocial Support to Red Cross's working group, Counseling Guideline for working with Alcohol abuser and Stress Management.

Totally we trained 658 participants, in which 417 are females.

RESEARCH & CONSULTANCY

With support from the Direct Aid Program we did a study (randomized control trial) on enhancing mental health literacy among village health support groups. We also developed training material esp. audio-visual materials that would help trainees to learn more quickly. The research objective is to see the effectiveness of this integrated approach that would enable TPO to replicate this to other part of Cambodia if it is proven to be effective. This proposed research is to provide training to Village Health Support Groups (VHSGs) on MHFA following the developed manual. This training enable VHSGs to identify people with mental health problem, help them if they can and refer people them to the mental health clinic in the referral hospital. At the same time, the doctors and nurses can also refer patients from the mental

health clinic back to community for VHSGs to monitor medication compliance and support them in anyway they can. For this study, we screened 160 VHSGs from which we selected 103 VHSGs (56 for the experiment group and 47 for the control group who will get the training after the study). We conducted intake/baseline assessments, 2nd (3 month) and 3rd (6 month) follow-up assessments while by year's end, TPO had delivered training on MHFA to all 56 experiment participants, and all 47 control participants after these had been KAP (Knowledge, Attitude and Practice) assessed at the 6-month point. At the result have been shown

At the end of 3 and 6-month point, the experiment group shows significantly increase their knowledge on MHFA as compare to the control group.

Participants were asked to answer questionnaire and case study about depression, anxiety.

Knowledge Related to Depression

Before the start of the training (Time 1), both treatment group and control group have no knowledge of depression. But at 3 month (Time 2) and 6 month (Time 3) points, the study shows that VHSGs who received training (treatment group) has higher knowledge of depression as compare to VHSGs who were put on wait-list (control group). They also have more confident in providing help to patients with depression.

Knowledge Related to Psychosis

Likewise, before the start of the training (Time 1), both treatment group and control group have no knowledge of psychosis. But at 3 month (Time 2) and 6 month (Time 3) points, the study shows that

VHSGs who received training (treatment group) has higher knowledge of psychosis as compare to VHSGs who were put on wait-list (control group). They also have more confident in providing help to patients with psychosis.

Perceived Stigma on Patients (Attitude)

In regard to questions of the first part, there is no different score between treatment and control group at the baseline (Time 1), 3 month (Time 2) and 6 month (Time 3). This means that participants in both groups still think that mentally ill patients cannot control their feeling, mentally ill patients are weak, mental illness is not medical problems, mentally ill patients are dangerous and unpredictable etc...

Participants Psychological Distress (Practice)

Participants or VHSGs in both groups were also asked to rate their level psychological distress using Kessler Psychological Distress Scale-10 (K-10) at baseline (Time 1), 3 month (Time 2) and 6 month (Time 3). The K-10 score is translated that the high score, the less psychological distress.

The control group ($m=4.18$) seems less psychological distress as compare to treatment group ($m=3.54$) at the baseline (Time 1). Both groups have significantly increased K-10 score at Time 2 ($m=4.51$ for control group, $m=4.37$ for treatment group). At Time 3, however, the K-10 score of treatment group continue to increase ($m=4.5$), while the score of the control group has slightly decreased ($m=4.5$).

This could be attributed that the treatment group has improved psychological wellbeing after receiving the training while the control group does not have such improvement.

TPO also has contributed to local and international research on a variety of topics (e.g. fall-out of the Khmer Rouge regime, torture, trauma healing, intergenerational trauma, transitional justice) by providing relevant information and insights to researchers from various institutions and organizations around the world. Often, TPO has received these researchers at its office in Phnom Penh for interviews and discussion. TPO has also hosted various Cambodian and international students as well as interns for periods up to several months, to provide them with the necessary practical experience in their chosen field or support them with their research.

ADVOCACY & AWARENESS RAISING

In 2016, TPO aims to build a better understanding of mental health in the general Cambodian public and advocates for better mental health services through events, print and online publications, its website and social media, newspapers, radio and TV. Every year, we actively engage in national and international awareness raising campaigns that touch on aspects of our work, such as International Women's Day (8 March), the International Day in Support of Victims of Torture (26 June), World Mental Health Day (10 October) and the International Day for the Elimination of Violence Against Women (25 November).

We are a co-organizer and participant in the yearly Youth Mental Health Day at the Royal University of Phnom Penh, one of the biggest events on the

calendar for mental health in Cambodia. Watch the video about this event (and other videos) on our TPO YouTube channel.

UN Day in Support of Victims of Torture

In 2016, TPO Cambodia highlighted the 26th June as International Day in Support of Victims of Torture by joining to spread the camping message from partners, as well as organizing an event on June 23rd in honor of torture survivors of the Khmer Rouge Regime. The Khmer Rouge survivors, guests and TPO staff gathered at TPO headquarter to talk about the right to compensation & rehabilitation for the victims of torture as this right was also established in Cambodia. The event began with a guided meditation by one of

TPO's counselors. Next, Dr. Sothara MUNY, one of TPO's technical advisors, reminded the audience about the importance of this day, and the development of rehabilitation rights for victims of torture. In the presence of TPO staff the 2 survivors finally freed a dozen of caged birds on the TPO rooftop in a symbolic act. Afterward, Mr. Ith Udom, shared some of his torturous experiences and expressed how meaningful this event is for him and other survivors. The event was concluded with closing remarks of Dr MUNY, as well as a grounding exercise for all participants. TPO Cambodia disseminated information about the event with some photos via TPO's Facebook <https://www.facebook.com/tpocambodia/>

DFAT Delegates Visit TPO Battambang

On May 11th, TPO Executive Director Dr. Sotheara Chhim accompanied delegation from Department of Foreign Affairs and Trade (DFAT) to visit TPO project funded by DFAT on 'Improving Mental Health for Survivors of Gender-Based Violence, Sexual Assault' in Banan district in Battambang province. The delegations have visited self-help groups for female survivors of GBV, lead discussions with group members about how importance it is for them to be in the group, as well as what has changed for them, and what should they do after TPO withdraws from the province. The delegates also visited the chicken farm of the self-help group members, as well as the psychological support youth groups, which has resulted in the improvement of their mental wellbeing.

Video Launching Event

On 23 May, TPO-Cambodia in collaboration with United States Agency for International Development (USAID) www.usaid.gov/cambodia organized a launching event for a brief documentary video of the 'Former Khmer Rouge (KR) and Victim-Survivor (VS) for Healing and Reconciliation Program', at the Meta House, in Phnom Penh.

The objective of the launching event was to promote grassroots efforts of KR survivors in building better peace and reconciliation by sharing their success story at the national and international levels. These extraordinary efforts have helped Cambodian people cope with trauma and learn how to live peacefully together in the same communities, whether a former Khmer Rouge member or a survivor of the regime.

PRESS AND MEDIA HIGHLIGHTS

- » Japanese TV NHK broadcast TPO's project on 'Truth, Healing and Reconciliation – Toward a Shared Future'.

<http://www3.nhk.or.jp/nhkworld/newsroomtokyo/.../20160627.html>

- » In the Channel News Asia report, Dr Sotheara Chhim, TPO executive director, stated that 'mentally ill patients at state-run facilities often receive bio-medical treatment rather than psychological or psychosocial treatment...' This means the government services mainly lack counseling, psycho-education and community-based

intervention that addresses the issue through a holistic approach'. Check out this link:

<http://www.channelnewsasia.com/news/asiapacific/cambodia-s-healthcare/2811180.html>

- » Blue Media reported (in Khmer) about TPO video launching event on Former Khmer Rouge (KR) and Victim-Survivor (VS) for Healing and Reconciliation Program' funded by USAID on May 23 2016 at Meta House.

<http://tpocambodia.org/videos-8/>

- » On CNC (Cambodia News Channel, in Khmer) May 8th, Mr. Seang Leap, TPO project coordinator (psychologist/counselor) talked about 'Understanding on problem in addiction'.

TPO in collaboration with the Woman Media Center (WMC FM 102 MHz) with funding support from GIZ has continued monthly Radio program called 'Past in the Present'. On May 6th, Dr. Muny Sothara, TPO technical advisor talked about 'Mental Health in Khmer Rouge times'. Listeners can listen via FM 102 Mhz Phnom Penh, FM 104.25 MHz Kampong Thom and FM 92.25 MHz Svay Rieng.

- » Ms. Kali Mason ran marathon to raise fund for TPO Cambodia to treat mentally ill patients who were chained by family members due to the lack of access to treatment. Check out at:

<https://www.gofundme.com/oicx9w>

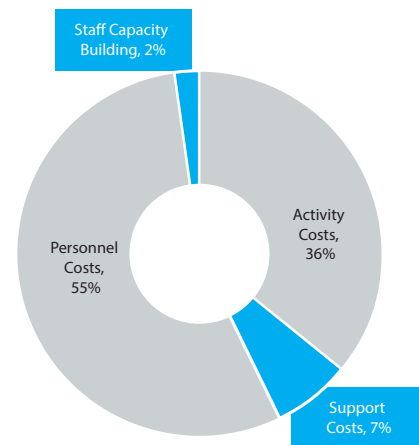
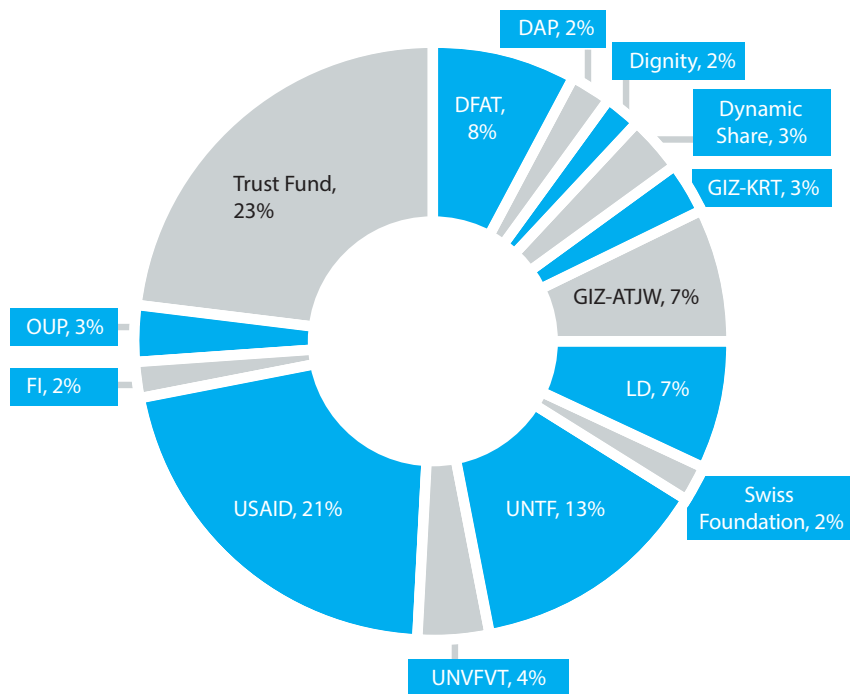
FINANCIAL STATEMENT

DONORS	Fund balance, beginning of the year 2015 (in US\$)	Fund received, during the year 2016 (in US\$)	Total Fund available during 2016 (in US\$)	Total expenditure 2016 (in US\$)	Fund balance in 2016 (in US\$)
DFAT	85,679	2,700	88,379	61,037	27,342
DAP	24,359	(1,800)	22,559	22,559	-
DIGNITY	11,756	12,082	23,838	23,838	-
DYNAMIC SHARE		36,135	36,135	36,135	-
GIZ-KRT	4,314	32,152	36,466	36,222	244
GIZ-ATJW	26,089	47,349	73,438	78,449	(5,011)
ICS*	(8,594)	8,594	-	-	-
LD	6,383	64,335	70,718	77,207	(6,489)
SWISS FOUNDATION		25,000	25,000	25,000	-
UNTF		133,790	133,790	97,145	36,645
UNVFVT		40,000	40,000	40,000	-
USAID	16,265	205,675	221,940	201,925	20,015
FI	844	19,522	20,366	20,248	118
OUP	14,742	11,896	26,638	14,157	12,481
TRUST FUND	42,173	203,221	245,394	183,544	61,850
TOTAL	224,010	840,651	1,064,661	917,466	147,195

* Final reimbursement from the previous year

Statement of Income and Expenditure for the year ended 31st December 2016.

This Income and expenses were audited by PriceWaterHouseCooper (PWC).



OUR PEOPLE

TPO currently has 51 staff members, and offices in Phnom Penh (HQ and Treatment Center) and in the provinces of Battambang, Siem Reap, Kampong Thom, Kampong Cham and Tboung Khmum. All staff members are Cambodian. Key positions:

THERAPISTS & TRAINERS

- ANG Sody, MD, Psychiatrist
- BUN Lemhuor, MA in Psychology
- CHEA So Ousaphea, Registered Nurse
- CHHAY Marideth, Senior Counselor
- CHHIM Sotheara, MD, Psychiatrist, MPM, PhD
- CHOR Sonary, BA in Psychology, MA candidate
- HOY Vathana, BA in Psychology
- KEO Sothy, MD, Psychiatrist
- KHON Leakhana, BA in Psychology
- LONG Borom, MA in Psychology
- MUNY Sothara, MD, Psychiatrist, MA in Public Health
- MEN Sokhan, BA in Psychology, MA in Paedagogy
- OM Chariya, BA in Psychology, MA in Peace Education
- PICH Panha, BA in Psychology, MA in Public Health
- POV Maline, Psychiatric Nurse, Counselor
- ROS Saray Endeth, BA in Psychology

- SANG Seum, Psychiatric Nurse
- SEANG Leap, BA in Psychology, BA in Law
- SOK Phaneth, BA in Psychology, MA in Counseling Psychology
- TAING Soeung Hun, Social Worker and Senior Counselor
- TEP Thida, BA in Psychology
- SUN Solida, BA in Psychology
- SORM Rothana, BA in Psychology
- THLEN Sokunnare, MA in Psychology

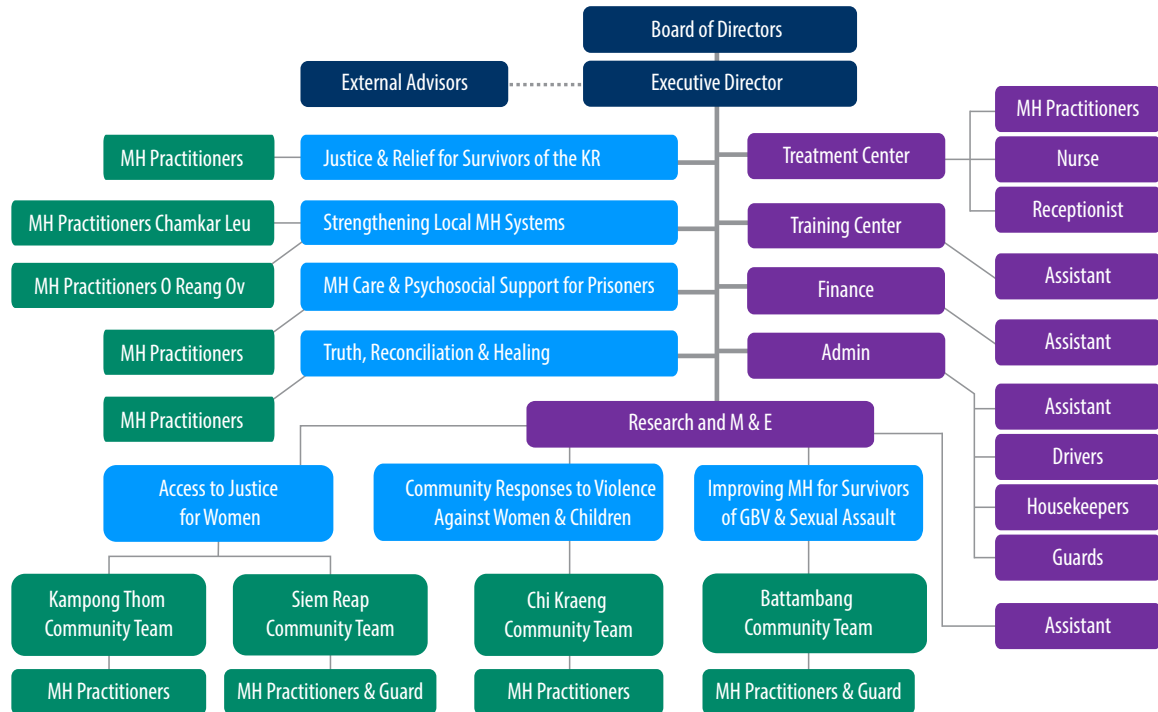
KEY MANAGEMENT STAFF

- CHHIM Sotheara, PhD, Executive Director
- LENG Bunlay, Finance Manager
- LOK Meas, Admin Manager
- ANG Sody, Head of Treatment Center
- TAING Sopheap, Head of Research, Monitoring & Evaluation
- SOK Phaneth, Head of Training Unit

COMMUNITY TEAM LEADERS

- HENG Kanha, Tboung Khmum
- LAO Lun, Battambang
- NUTH Lady, Kampong Thom
- NOUN Bopha, Kampong Cham
- PENG Vanny, Siem Reap

TPO CAMBODIA ORGANIZATIONAL CHART



MH = Mental Health. HR and IT done by Admin. Fundraising by ED; Head of Research, M&E; Project Leaders; External Advisors. Data Collection is done by individual teams. ■ In blue colour are TPO projects, four of which have project managers reporting directly to the Executive Director, while the other three projects are implemented via community teams reporting to the Research and M&E manager. ■ In green colour are community teams; they report to their line managers above them.

OUR BOARD OF DIRECTORS

- Dr. VAR Chivorn – Chairman, Executive Director, Reproductive Health Association of Cambodia (RHAC)
- Mr. KHANN Sareth – Vice-Chairman, Professor, Psychology Department, Royal University of Phnom Penh
- Dr. LIM Siv Lang – Treasurer, Physician, National Center for Dermatology, MoH
- Ms. UNG Kimkanika – Board Member, Acting Department Head, Social Work Department, Royal University of Phnom Penh
- Oknha Dr. Tan Kim Meng – Board Member, Executive Director, HOPE Medical Center and Deputy Director of Development of Sihanouk Hospital

OUR PARTNERS & SUPPORTERS

In 2016, collaborations with government, other NGOs, education and research

institutions, health professionals, other service providers and advocates for human rights and health care were again at the core of what we do. And of course we could not have done it without our donors as well as all the others who have supported us in various ways.

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- Extraordinary Chambers in the Courts of Cambodia (ECCC) and its Witness and Expert Support Unit (WESU) and Victims Support Section (VSS)
- Kdei Karuna (KdK)
- Legal Aid of Cambodia (LAC)
- Commune Counsel for Women and Children (CCWC)
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- Access to Justice Asia (AJA)
- Cooperation Committee for Cambodia (CCC)
- International Rehabilitation Council for Victims of Torture (IRCT), Denmark
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OUR SINCERE THANKS TO:



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