

2020

ANNUAL REPORT



TPO VISION

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

TPO MISSION

TO IMPROVE THE WELL-BEING OF C AMBODIAN 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

We hope that you have enjoyed both work and family life in 2019 and are now looking forward to achieving your goals in 2020.

I am pleased to share with you TPO's Annual Report 2020. Over the past year, Cambodia was in the pandemic warrior. During this report period, the mental health issue related to covid such as people they lost job, they lost income and they lost their loved one. Many patients have relapsed. In 2020, the increasing 3 times of patients who accessed to counseling via phone and chat counseling.

However, TPO has increased the funding for humanitarian during the covid crisis to provide emergency support to those who been affected during the pandemic warrior.

TPO staff have contributed to improving the mental health wellbeing of its beneficiaries across different projects. We have completed the projects as planned and this has pleased our donors. TPO has also participated in raising awareness of mental health to the public through local and international media interviews.

We are committed to providing a good quality of mental health care to Cambodian people! And we hope that the New Year 2021 brings all of us good success and prosperity.

Sincerely yours,

Dr Sotheara Chhim
Executive Director

Australia-Cambodia Cooperation for Equitable Sustainable Services (ACCESS)

The Australia-Cambodia Cooperation for Equitable Sustainable Services (ACCESS) is a three-year (2018-2021) Government of Australia initiative to improve the sustainability, quality and inclusiveness of services for persons with disabilities and for women affected by gender-based violence (GBV) in Cambodia. ACCESS reflects Australia's strong commitment to support human rights, gender equality and disability-inclusive development. ACCESS works in partnership with the Ministry of Women's Affairs(MOWA), the Ministry of Social Affairs, Veterans and Youth Rehabilitation(MOSVY), the Disability Action Council (DAC) and the Ministry of Economy and Finances(MEF) to support the implementation of the National Action Plan to Prevent Violence Against Women (NAPVAW).

TPO has contributed to key outcome of the ACCESS program to contribute to achieve and support the implementation of NAPVAW. The two key outcome are listing

- ACCESS IO 2.1: Government adopts, and service providers operationalize, essential service standards for women affected by GBV
 - TPO Outcome 2.1.1: The quality of psychosocial service provided by local service providers to woman affected by GBV, with and without disabilities is strengthened.
- Access IO 2.2: MoWA improves multi-sectoral referral and coordination networks at national and sub-national levels
 - TPO Outcome 2.2.1: Women affected by GBV have accessed to other coordinated social services, including crisis information, safe shelter, legal and psychosocial support.

WHERE DO WE WORK:

TPO is going to implement the project in 2 provinces:

1. **Siem Reap (Pouk and Krolanch district):** The reason why we select Siem Reap because the incident of physical violence in Siem Reap is as high as 13.6%, ranking number 4, based on the CDHS report. In addition, TPO has experienced working in this province for 5 years in the "AJW1&2" funded by GIZ. TPO has many partners there; this could provide synergy to the proposed project. TPO staff are also familiar with the local service providers, geographic location, and local culture etc...This would allow TPO to start the project faster. There is already existing mental health service in Siem Reap, so this service could be a source to refer affected woman affected to receive treatment.
2. **Kampong Cham (Chamkar Leu district) :** In this province, the incident of physical violence is 17.9%, ranked number 1 based on CDHS, but there is no coordinated response services for women affected by GBV there. TPO is confident that the chosen location will enable TPO to implement the project in a holistic and collaborative ways. TPO's existing project in Kampong Cham, allow the cost sharing with the proposed project.

WHOM DO WE WORK WITH:

Direct beneficiaries:

- Local service providers as members of CCWC such as commune police, commune chief, village chief, deputy of village chief and village health support group

Indirect beneficiaries:

- Women affected by GBV with and without disabilities have accessed to psychological support from local service providers/from TPO through referral from implementing partners of from local service providers.

Key milestone 1: 100 LSPs completed training on Minimum standard for counselling, Psychological First Aid and Referral.

Between period of January to December 2020, TPO-ACCESS project have trained LSPs:

Trained LSPs/Jan-Dec 2020	
Kompong Cham	104
Seam Reap	74
Ratanakiry	24
Tbong Khmom	31
Total	233

Out of these total numbers of LSPs, 133 are project target group, while 100 LSPs are from GBV working group in Kampong Cham and Tbong khmom province. GBV working group including Commune council, health centre and referral hospitals.

Key milestone 2: 100 LSPs receive refreshing training course/follow up in every 3 months by TPO’s trainers/psychologists

Due to COVID-19 impacts, TPO was able to offer onsite refreshing course to 2 participants groups, while spending the quarter to work on shifting onsite refreshing training to online course. Through online mentoring, there were 26 local service providers seeking support from TPO’s supervisors. In addition, training how to use zoom and other online methods were conducted LSP in order to prepare them to attend remotely refresher trainings the follow quarter.

Last quarters of the project implementation, TPO were able to conducted, face to face and online refreshing trainings consisted of five sessions as follow:

1. Review and recap of previous 3 training blocks
2. Remote counseling
3. Introduction of Psychoeducation and its facilitations skills for topic of GBV and Psychosocial problem
4. Psychoeducation and its facilitation skills for topic of positive and negative coping for stress
5. Action plan on provision of remote counseling, facilitation of psychoeducation and supervision

There were 70 LSPs participating in these refreshing training. Among them, 34 were males and 36 were females, and in which 2 male participants were disable.

Keys milestone 3: Few Women Support Groups (WSG) were established right after the training in Dec 2019. TrainedVSHGs would be identified as co-facilitators together with TPO’s psychologists.

In the first quarter of this year implementation, TPO’s psychologist and LSPs had discussed and prepared for the running of WSG. As the result there were some LSPs volunteered to run the groups. Furthermore, they made concrete plans to seek approval form their commune chief, and consult with relevant village chiefs in order to identify women affected by gender-based violence to join their groups.

As the pandemic spread out and there were few restrictions in term of gathering, or any task that need people together, were cancelled by the communed authority, the activities under this milestone have been postponed from quarter to quarter. To adjust this activities TPO conducted a rapid assessment and learned that these activities can be replaced by psychoeducation activities. In the last quarter of this year implementation, there were 6 psychoeducation sessions were organized with 174 people attending to those session, in which 25 of them were GBV survivor and 11 were people with disability.

Key milestone 4: During the project implementation, women affected by violence received or been referred to psychological supports from local services provider or from TPO’s psychologists:

GVBs survivors receive services /Jan-Dec 2020	
Kompong Cham	180
Seam Reap	262
Total	442

There were total of 442 GBVs survivors, 180 and 262 are from Kampong Cham and Seam Reap respectively, have received psychological supports from our Local Service Provider and TPO’s project staff.

Create a protective community for women, girls, men and boys (wgmb) through preventing and responding to gender based violence in a pragmatic and gender.

GBV is a serious problem in Cambodia, with almost one in four women (aged 15-45) experiencing physical, emotional or sexual violence. This makes the country one of the countries most affected by GBV in the entire Asia-Pacific region. The government has responded to this situation with a series of laws and regulations; however, the Cambodian legal system has glaring gaps, which means that at the local level the law is interpreted and applied within the prevailing social norms and cultural practices. For example, reconciliation and mediation are considered and applied as traditional practices in marital conflicts, but they often serve traditional gender stereotypes, with the result that domestic peace is restored at the expense of women. Recent research, however, shows that it is possible to develop and apply a culturally sensitive Theory of Change (ToC) that focuses on revision and transformation rather than on combating and abolishing local tradition and culture. Such a ToC takes existing social and cultural practices as a starting point for the development of measures to prevent and combat GBV, and in this way uses

the locally existing and de facto influential cultural elements to improve the situation of women and girls. However, not least because of the social taboo on mental health issues, the range of treatment options is correspondingly limited. Only one percent of the government's health budget goes to this area. The present project takes both aspects (combating GBV and promoting psychosocial health) into account; geographically, it concentrates on the provinces of Kampong Chhnang, Tbong Khmum and Kampot, as these are the provinces with the highest prevalence of violence against women in the country, but where there are hardly any resources available for prevention and control.

Cambodia's traumatic history as the cause of this enormous health burden on society. In recent years, worldwide studies have repeatedly demonstrated how trauma can be passed on to future generations. However, the traumatic experiences of the genocide are by no means sufficient to explain the causes of the rising rates of mental stress and disease in Cambodia. Poverty and the rapid social and economic developments of recent years also have an impact on the mental health of the population.

All these factors contribute to what is known as Cambodia's appalling mental health crisis, which affects not only individuals but also families and society as a whole. The still prevalent stigmatization of mental illness makes the situation worse, leaving people alone with their burdens and ultimately leading to acts of violence that often act as a valve. Therefore, TPO has proposed the project embodies a holistic approach to the challenge of gender based violence in Cambodia, with the goal of creating a protective community for women, girls, men and boys (wgmb) through preventing and responding to domestic violence in a pragmatic and gender sensitive manner. Implemented by two partners, TPO and WPM, this project focuses on response services and secondary prevention.

The objective of the project: The quality of psychosocial service provided by local service providers to women affected by GBV, is built and strengthened.

The outputs during the project implementation:

1. **Initial Training:** CRPs / CCWC are trained on: Mental Health First Aid (MHFA) and Minimum Standards for Basic Counseling for Women and Girl Survivors of GBV.

N	Target Province	Participant	
		M	F
01	Tbong Khmum, Dambae District	10	16
02	Tbong Khmum, Kroch Chmar District	9	16

2. **Refresher Training:** CRPs/CCWC will receive ongoing support through follow up trainings;

N	Target Province	Participant	
		M	F
01	Tbong Khmum, Dambae District	7	13

3. **Awareness raising Campaigns:** mental health issues, psychosocial problems, gender issues and the causes and effects of violence;

N	Target Province	Villagers	
		M	F
01	Tbong Khmum, Dambae District, Seda Commune, Seda Village	14	42

4. **Self-Help Groups (SHG):** empowers survivors of GBV by giving them the opportunity to express their emotions, find better solutions to cope problems and learn from each other's experiences.

No	Self Help Group (SHG)	Total Participants	# of Group
1	SHG for women	23	2 groups
2	SHG for men	20	2 groups
3	SHG for children	21 (Girl=14, Boy=7)	2 groups

Justice & Relief for Survivors of the Khmer Rouge Regime

More than two thirds of Cambodians believe that the ECCC is helping to achieve justice for the victims and contributing towards rebuilding society. In what is known as Case 002/02 – the trial against the surviving senior members of the Khmer Rouge regime – 3,850 joint plaintiffs, more than half of them were women who were victims of gender-based violence, were permitted to give evidence of the crime against the former Khmer Rouge leaders. The process of giving evidence of the testimony of the crime resurfaces the trauma memory; therefore it affects their psychological wellbeing. In order to develop and provide psychological services to KR survivors in response to their needs. The Transcultural Psychosocial Organization Cambodia (TPO) offers psychological support to help survivors cope with their traumatic experiences and providing counselling for survivors, and also offers the staff themselves psychological support and supervision to help them deal with their own trauma.

The project is working to strengthen the reconciliation and the peace-building process, through our project implementation ensures that Khmer Rouge survivors have received psychological support such as testimonial therapy as an opportunity to tell their stories and process traumatic

experiences and engaging youth in information historical education to learnt about the past and its consequences for the present and the future.

Project Activities

Key outcomes

- To Improve mental well-being of Khmer Rouge survivors through providing mental health services
- Enhance The Understanding about the Khmer Rouge history and psychological affected on KR survivors and their family members

WHAT MAKES Change?

 <p>Training on Basic Counseling</p> <p>41 key resource persons such as local authorities, monks, traditional healer, police, health center staff, invited for basic counseling and refresher training</p>	 <p>Psychological support</p> <p>Provide Testimonial Therapy and establish SHGs.</p> <ul style="list-style-type: none"> • 10 KR survivors in their community receive this psychological support
 <p>Counseling</p> <p>11 Khmer Roush survivors received individual counseling and ongoing psychiatric treatment</p>	 <p>Psychosocial Awareness</p> <p>10 psychosocial awareness-raising sessions conducted with 447 villager attended.</p>

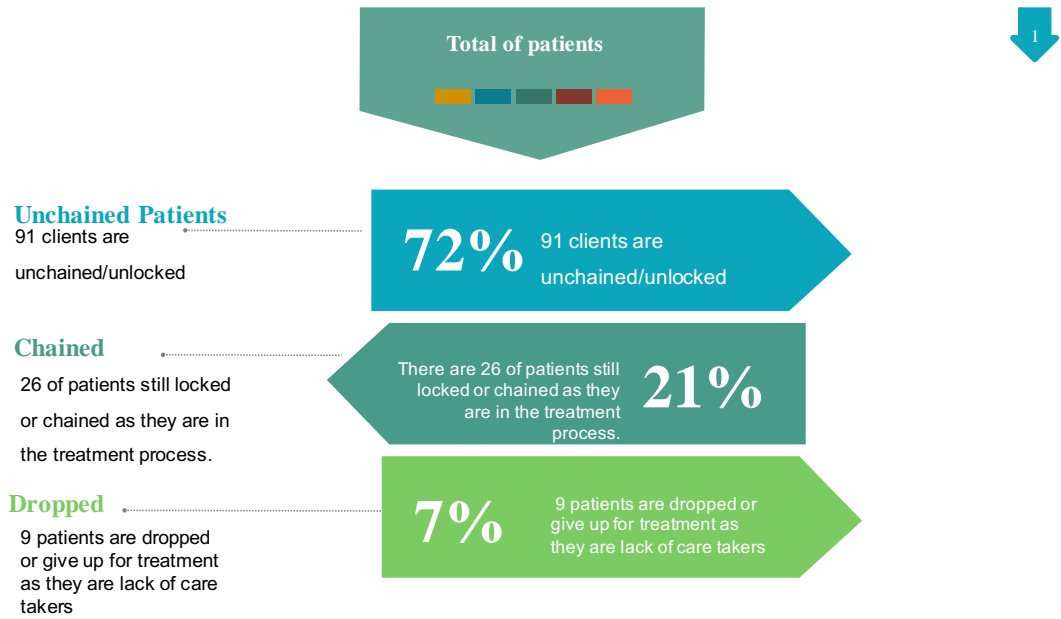
Operation Unchain

Cambodia has made little progress in enhancing the wellbeing of its population and remains amongst the poorest countries in the word; with nearly 40% of Cambodian people living below the poverty line. Mental health service in Cambodia only exist in some urban areas, and the mental health service offered by those mental health clinics are purely based on biomedical approach, prescribing more medication rather than address the root cause of the problems in a holistic way. Thus mentally ill patients does not seems to fully recover and to function effectively as

There is a huge lack of understanding of mental health among the publics, community members, as well as health staff. Therefore, patients were not be referred to receive proper services on time. Stigma and discrimination is still a huge problem in the community, therefore it affect patients from recovery as well as from family to disclose the problems and seek help properly. Extreme poverty in rural area, this would be maintaining factor that make family and patients neglect with treatment. Family member may leave patients behind because they need to go to work. Sometime, family may lock up patients because of hopeless of treatment, or they have no time to take care patients.

In 2020, TPO has received grant from UNHCR, and continue in funding raising through global giving to

- To improve mental health and eventually free mentally ill patients who have been locked up due to their mental illness or due to the lack of access to appropriate treatment.
- Raise awareness of mental health issues in rural Cambodian communities and demonstrates that there are alternatives to chaining up family members struggling with severe and chronic mental illness.



I'm alive

- A man, 35 years, lives in Svay Rieng province. He was a youngest child in his family. His one hand was chained to a pillar and his one leg was chained to another pillar of abandoned cottage.

- He was so skinny because of having not enough care from his family. He was a student at university, could speak English and French. While he was sick with psychosis, he was referred to get medical treatment, then he was better. After that he relapsed and sent to hospital again, but was not better. His family felt hopeless for recovery and he was very aggressive, and harmful. Then family members decided to chain him for safety. He was chained for 17 years.

- While TPO mobile team approached him, he can't communicate and has no insight. TPO therapists prescribed medication for treatment and also worked with his family and his neighbours for raising psycho-awareness for seeking the support for him. It's very challenged because he had conflict with his older sister who is a caregiver. He didn't get proper care from his sister, this issue made recovery very slow.

- This case was spent for almost 4 years of treatment for recovery. Now he is better and his family released him and integrated him into the family.



Partnership Program for Protection of Children (3PC)

Most children in Cambodia live with their biological parents. In 2014, 89 per cent of children lived with at least one parent, and three-quarters lived with both parents. The 11 per cent of children who are not living with their biological parents are to be found in a range of alternative forms of care. Cambodian families traditionally used immediate and extended kinship networks as a means of caring for orphans and vulnerable children, with a fall-back reliance on pagodas for orphaned and destitute boys.

A further challenge facing kinship caregivers in the present day, and especially grandparents, is the lack of any government financial support. This lack has resulted, in a not insignificant number of cases, in an inability to feed, clothe and educate children who are in need of an alternative to parental care. The lack of stable and continuous parenting in institutional care appears to have dramatic negative effects on child development and well-being, and that the major delays found in institutionally reared children's cognitive and social-emotional development might have their roots in the experiences of structural neglect in institutions. On the other hand, the transition from institutional care to family foster care proved to be an effective intervention for children's cognitive and social- emotional development.

In 2020, TPO is contribute to achieve the below objective:

- The program focuses on building and strengthening national and sub-national capacities of child protection systems, and accelerated comprehensive prevention and response child protection efforts.

Under this project, TPO intervention is

- To identify children affected by violence
 - Social workers can transfer knowledge and skills regarding identifying children who are affected by violent to relevant duty bearers
- Be able to provide psychological support to children affected by violence

During this report period:

- During this report, TPO had established 2 children group who are affected by violence. These 2 groups consists 28 children (girl=15, boy=13) they are between 12 to 15 years old.
- 2 Self-help groups for woman and men as the survivor of violence and partner of survivors.
- There are 17 cases referred in to get psychological counseling from TPO' counselors.

Under this report, TPO has organized 3 training to all 3 PCs and CWCC

Training Content	Male	Female	Total
Training on Identification and Support to Violence Affected Children (VAC)	20	32	52 CWCCs
Provide online training on Family Therapy to 3 PCs partners	10	13	23
Provide Psychological First Aid training to 3PCs	8	20	28

Psychological Support through online services relates COVID19 response on Child Protection

While its full impact and long-term fallout is still unclear, there is one thing we do know: the mental health and psychosocial impact of COVID-19 on the lives of children and adolescents and their families will be significant. Almost all the world's children – 2.33 billion – now live in countries that have imposed some form of movement restrictions as a result of COVID-19. For most, these restrictions mean no school, no meetups with friends, limited recreation activities and the inability of children in humanitarian settings to access safe spaces for essential support to their wellbeing.

When this is combined with the distress of worrying about getting sick or having loved ones become ill or die, noticing their parents' concerns over potentially losing jobs, and increased tensions within households, it can lead to feelings of helplessness and increased vulnerability to poor mental health. Parents and caregivers will also be affected and need help as they provide the necessary environment and support for children to cope during this crisis; therefore, looking after mental health and psychosocial needs of children across the life course, and the entire family unit is essential.

TPO Cambodia, the only organization that provide mental health service for Cambodians for the past 25 years, started to see the influx of patients attending our clinic. At the same time, we also see increasing numbers of people calling in our hotlines or messaging in our Facebook messenger to ask for help related to their mental distress. The rapid spread of virus, the social distancing, travel restriction, the lack of personal protective equipment (PPE) makes it hard for our clinicians to provide face-to-face mental health consultation/counseling. Therefore, we have reduced significant amount of time to provide face-to-face consultation, but increase the online consultation instead.

In the proposed project, TPO is going to provide remote psychological support to children, adolescents, parents and caregiver who are affected by COVID-19. TPO is going to use manual on Mental health and psychosocial support (MHPSS) in Emergency Setting developed by WHO-IASC (WHO and Inter-Agency Standing Committee).

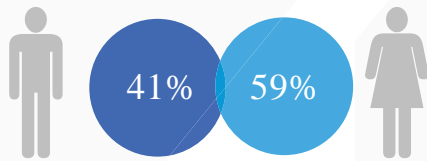
I. OUTCOME ANALYSIS

- Mental health and Psychosocial Support through online platform and hotlines to response during COVID-19 pandemic
- To promote appropriate psychosocial wellbeing for girls, boys, young women, young men, caregivers/parents during the pandemic of COVID-19

Total of beneficiaries access to remotely psychological support service



During the project implementation, 968 beneficiaries has accessed to remotely psychological support service



Online counseling
There are 291 Facebook users have received online counseling. (F=208, M=108)



Interact with chatbot system
677 clients received phone counseling (F=359, M=249, boy=30, and girls39)

Through humanitarians funding from UNICEF, Plan International Cambodia, TPO has provided training on Psychological First aid to 316 local stakeholders and NGOs partner (F=208, M=108)

Strengthening Local Mental Health Systems

The project aims to increase access for vulnerable groups (women, children and old people) to the highest quality of Comprehensive Non-Communicable Disease services (diabetes, hypertension and mental health) through promotion, prevention, treatment, and rehabilitation, contributing to a long and healthy life. 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. During the fiscal year 2020, the project has achieved the following:

Outputs:

- **597** new cases (406 cases are female) received mental health consultation from 6 health centers and 2 referral hospital.
- Totally **5929** sessions of consultation were done by from 6 health centers and 2 referral hospital.
- **1095** sessions of psycho-education were done in OPD, 797 sessions were done by nurses and 298 sessions were done by social workers.

- **3995** participants attended psycho-education in OPD, 1321 participants are male and 2674 are female.
- **194** sessions of coaching were done with nurses by social workers on counseling, psycho-education and home visit.
- **1023** sessions of counseling were done by nurses and social workers, 738 sessions were done by nurses and 285 were done by social workers

Collaboration and Networking

- **21** times of Pro-TWGH meeting organized by Kampong Cham and Tboung Khmum provincial Health Department (PHD) were attended by the project staff. During the meeting, the project also did presentation on an achievement of the project. 03 times of Pro-TWGH meeting were canceled because of Covid-19 pandemic.
- 2 times of the meeting organized by department of mental health and substance abuse (DMHSA) on planning and finalizing Minimum Standard of treatment for Schizophrenia at home (mentally ill patients are chained or locked up).
- **49** cases (24 cases are female) were referred by village health support group to the health centers.

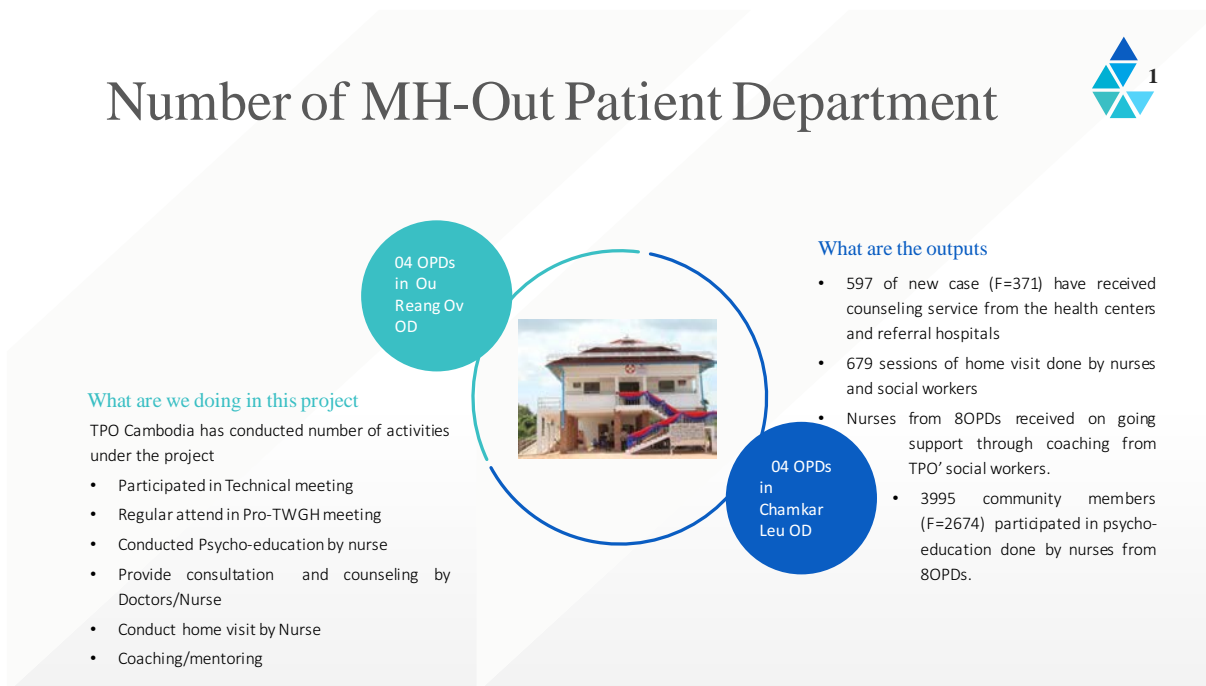
Capacity building

- 2 training courses were organized with a total of 52 participants (29 females). 30 participants (16 in female) from OD Stung Trang and 22 participants (13 in female) from OD Chamkar Leu, Kampong Cham province. This 5-day training course was organized for health staff working at health center level of OD Stoeung Trang and OD Chamkar Leu on "Basic Counseling skills, Mental Health First Aid (MHFA), and Gender-Based Violence (GBV)" supported by ACCESS project, a joint project between the Royal Government of Cambodia and the Government of Australia. The purpose of this training is as follows:
 - To provide health staff in OD Stoeung Trang with basic counseling skills which will allow them to approach and support their target groups who are survivors of gender based violence and people with mental health problems in an effective way, according to the needs.
 - To provide health staff with mental health first aid and gender based violence (GBV) approaches which will allow them to identify people with mental health problems, GBV and to provide psychological counseling possibly and to refer them to available services as needed.

Capitalization

- 3 leaflets (depression, relaxation and anger management) were reprinted and 1 new leaflet were produced on alcohol abuse and printed out.
- Counseling guideline was edited and reprinted.

Number of MH-Out Patient Department

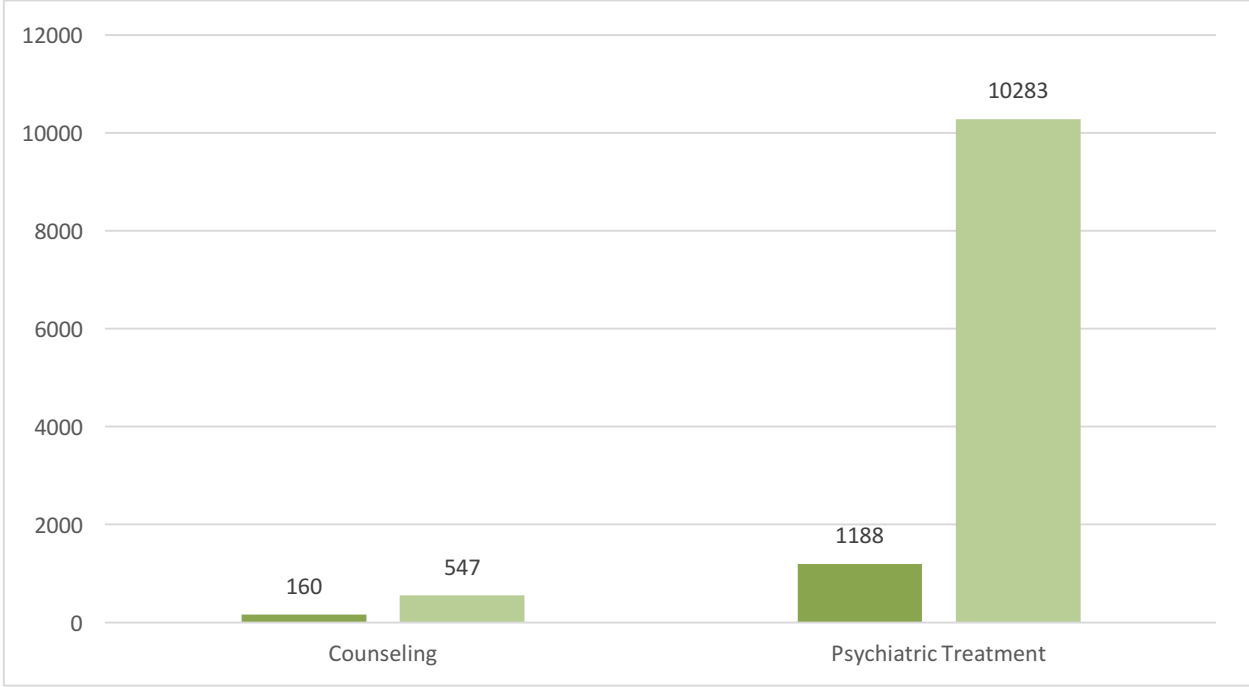


TPO TREATMENT CENTER

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 in 2020 was 1248 (160 received counseling and 1188 received psychiatric treatment), while the total number of consultations continues to be high with 12697 consultations (1375 received counseling and 11322 received psychiatric consultation) in 2017. Clients received various types of treatment and support from TPO according to their diagnoses. Apart 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 2020, 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.

Number of New Patients:

	Counseling	Psychiatric Treatment	Total
# of New Patients	160	1188	1375
# of Consultation	547	10283	11322



TPO TRAINING CENTER

TPO’s Training Center offers a variety of training courses on a number of mental health topics.

There are two types of courses: public courses and tailored-made courses. Public courses are designed to provide general knowledge and skills suitable for the general population, whereas ‘Tailored-made courses’ are for specific needs or a given group or agency. All training courses are run by experienced and qualified trainers with formal 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.

During the start of Covid Pandemic, TPO did not run the public course in person training.

[TPO Beneficiaries in 2020](#)

TPO Beneficiaries in 2020

Activity	Male	Female	Total
Awareness Raising	5469	9640	15109
Training	287	395	862
Self-Help Group	96	155	251
Counseling	622	954	1576
Psychiatric Clinic	450	675	1125

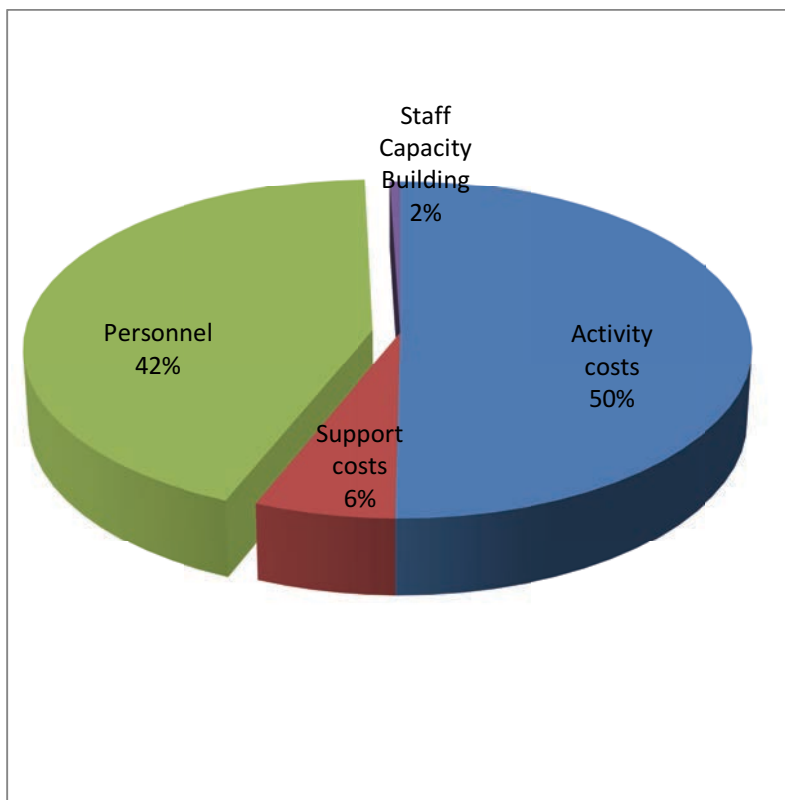
FINANCIAL STATEMENTS

Statement of Income and Expenditure for the year ended 31st December 2020

DONORS	Fund Balance, Ending of the year 2019 in US\$	Fund received, During the year 2020 in US\$	Total Fund Available in 2020 in US\$	Total Expenditure 2020 in US\$	Fund Balance 2020 in US\$
ACCESS	44,121	139,408	183,529	118,178	65,351
FI	16,106	19,947	36,053	33,277	2,776
GIZ	9,801	10,772	20,573	27,967	(7,394)
JOHANNITER	-	48,760	48,760	35,827	12,933
LD	18,561	40,270	58,831	50,543	8,288
OHCHR*	(3,245)	1,676	(1,569)		(1,569)
OUP	41,042	6,494	47,536	31,582	15,954
SMART	-	30,650	30,650	30,650	-
UNTF*	(4,570)	4,570	-	-	-
UNICEF	-	85,502	85,502	85,502	-
UNVFVT	-	30,000	30,000	30,000	-
DAP	13,713	-	13,713	13,713	-
TRUST FUND	165,292	459,129	624,421	438,142	186,279
Total	300,821	877,178	1,177,999	895,381	282,618

CLASSIFICATION	EXPENDITURE 2020 in US\$
Activity costs	449,460
Support costs	53,174
Personnel costs	388,072
Staff Capacity Building	4,675
Total	895,381

*Final Reimbursement -



OUR PEOPLE

TPO currently has 33 staff members, and offices in Phnom Penh (HQ and Treatment Center) and in the provinces of Battambang, Kampong Cham and Tboung Khmum. All staff members are Cambodian. Key positions:

THERAPISTS & TRAINERS/COUNSELOR

- ANG Sody, MD, Psychiatrist
- CHEA So Ousaphea, Registered Nurse
- CHHIM Sotheara, MD, Psychiatrist, MPM, PhD Candidate
- KEO Sothy, MD, Psychiatrist
- MORM Sreypich, BA in Psychology
- KOSAL DINA , BA in Psychology
- OM Chariya, BA in Psychology, MA in Peace Education
- PICH Panha, BA in Psychology, MA in Public Health
- PHAN ChanVeana, Psychiatric Nurse
- 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
- SUN Solida, BA in Psychology
- SORM Rothana, BA in Psychology
- PHAN Chanveansa, BA in Management

- NUTH Lady, Nurse
- PHATT Sophea, BA in Psychology
- YORN Sreymom, Nurse
- KUN Sivnear, Nurse
- THORNG Palina, BA in Psychology

KEY MANAGEMENT STAFF

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

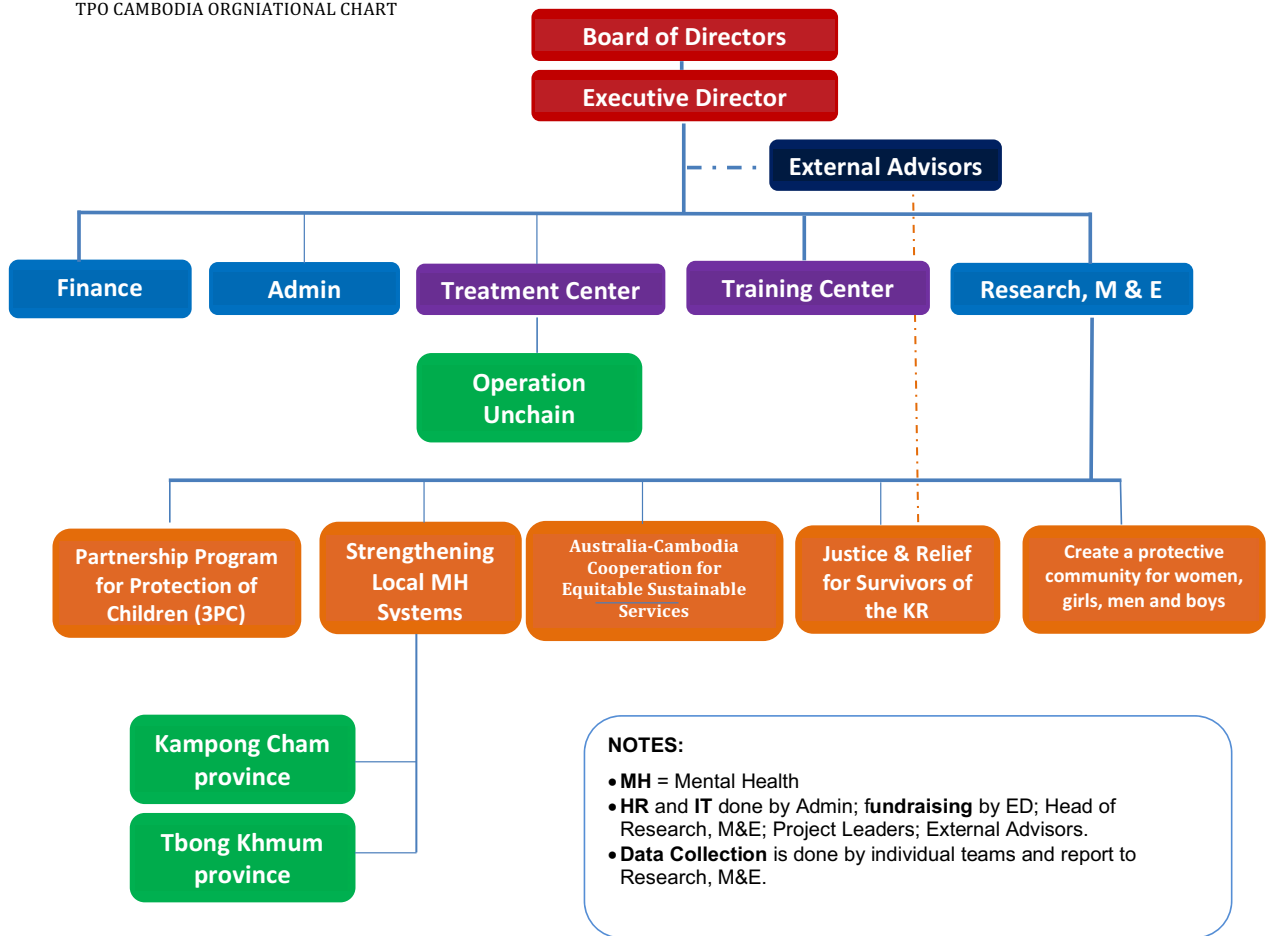
INTERNATIONAL ADVISORS

- Jurgen Grafe

COMMUNITY TEAM LEADERS

- LAO Lun, Battambang
- NOUN Bopha, Kampong Cham
- Heng Kanha, Tboung Khmom

TPO CAMBODIA ORGNIATIONAL CHART



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
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- **Operation Unchain Project (OUP)**
- **Plan International Cambodia**
- **UNICEF**
- **International for Rehabilitation Council for Torture Victims (IRCT)**
- **German Society for International Cooperation (GIZ)**
- **United Nations Voluntary Fund for Victims of Torture (UNVFVT)**
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LOCAL PARTNERS

- Banteay Srei (Siem Reap)
- Cambodian Human Rights and Development Association (ADHOC)
- Cambodian League for the Promotion and Defense of Human Rights (LICADHO)
- Cambodian Women’s Crisis Center (CWCC), Siem Reap
- Extraordinary Chambers in the Courts of Cambodia (ECCC) and its
- Witness and Expert Support Unit (WESU) and Victims Support Section (VSS)
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- Legal Aid of Cambodia (LAC)
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- Cooperation Committee for Cambodia (CCC)

- Child Self Alliance (CSA)
- International Rehabilitation Council for Victims of Torture (IRCT), Denmark.

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