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Youth Situation Analysis in Cambodia: Challenges, Perceptions and Opportunities for Youth

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Introduction

Cambodia has the youngest population in south-east Asia, people of 10–24 years making up 36 percent of the population. Unlike many countries in the region, Cambodia has not yet reaped the demographic bonus of a large working population and small dependent populations of elderly and children. Despite recent rapid economic growth, young people will face increasing competition for employment and other economic opportunities, resulting in continued pressure on public services and resources in education and health.

The issues confronting Cambodian youth today are deeply interrelated. For example, youth employment is inextricably linked to education and skills training. Youth from better off households tend to have access to better quality schooling and health care than children of poor households. Such patterns tend to be self-perpetuating in the absence of policies designed to break the intergenerational transmission of poverty.

There is a need for a comprehensive multi-sectoral national youth policy to guide long-term strategic planning that will target investments in education and vocational training and health care and awareness.

The Youth Situation Analysis aims to inform policy makers and partners in the development of a national



A young student from Don Bosco vocational training school working as an electrician in Preah Sihanouk province.

youth policy and of sectoral policies and programmes that serve young Cambodians. The analysis identifies human, financial and organisational barriers to the fulfilment of young people's rights, with special focus on the most vulnerable and excluded. It also defines and distinguishes between different groups and the challenges they face. The analysis drew upon data from the Cambodia Socio-Economic Survey 2004 and other secondary materials. Researchers also conducted focus group discussions with youth and parents and

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interviewed key informants from a small sample in six purposively selected villages in Phnom Penh and five provinces to provide qualitative texture to the statistical analysis and desk exercise.

Youth's Position in Economic and Social Context

The challenges and opportunities that young men and women in Cambodia face must be understood in terms of rapid economic growth characterised by modest reductions in poverty and increasing inequality. Economic development has also brought significant demographic shifts, as the population is increasingly young and highly mobile. The discussions below provide empirical analysis of youth-related issues with reference to socio-economic development trends.

Employment

The single most important issue confronting young Cambodian men and women is employment. The labour force is growing by as many as 300,000 per year, a figure that may increase to 400,000 in the near future. Most new employment is in the garment, tourism and construction industries. These sectors are not growing fast enough to absorb so many labour market entrants. As a result, the government's Rectangular Strategy, as outlined in the *National Strategic Development Plan 2006–2010*, outlines steps to develop agriculture as a “third engine” of growth, after garments and tourism, to generate both on-farm and off-farm employment. However, on-farm employment is constrained by insecure land tenure, lack of affordable credit, fragmented inputs and services, a lack of infrastructure and poorly functioning markets. Off-farm employment seems to have great potential, but more efforts are needed to stimulate SME and agribusiness investment.

In addition to investing in specific sectors to absorb the growing labour force, it is also important to prepare young men and women with the skills needed in non-traditional jobs, which increasingly characterise Cambodia's labour market. Because the economy is changing in a context of regional and global competition, young workers need the right kind of education, skills and capacity to compete in a regionally integrated economy. Current vocational training is not sufficient to meet the increasing demand for services and manufacturing. For example, as agriculture intensifies and diversifies, there

will be a greater reliance on machinery and transport, which will require skilled mechanics for maintenance and repair. These opportunities should be matched with affordable credit to support SME start-ups.

Comprehensive long-term assessment of the likely trajectory and composition of Cambodia's growth and development through 2025 and beyond, including geographical distribution, and of the likely employment requirements, would enable planners and policy makers, in consultation and collaboration with development partners and the private sector, to begin discussing what kind of public and private investments are needed in education and vocational training. This requires policies and planning that match education and vocational training programmes with the needs of the economy and society as it evolves.

Education

There is widespread agreement that education promotes economic growth though increased productivity, the acquisition of new skills and attitudes and the accumulation of knowledge. The role of education in reducing poverty and income inequality is also strongly established. Illiteracy is one of the strongest predictors of poverty, while unequal access to education is a correlate of income inequality (World Bank 2006).

Research also shows that investments in girls' education have some of the highest returns of any development investment. With even a few years of formal education, women are more likely to plan their families and have fewer children, seek pre- and post-natal care, provide their children with better nutrition, ensure they are immunised and procure appropriate medical care for them.

The Education Strategic Plan (2006–10) outlines the government's efforts to achieve the millennium development goal of access to nine years of basic education for all young people. There has been significant progress in the number of primary and lower secondary schools, enrolment levels in lower secondary education and adult literacy (ages 15–24). A key indicator is that national expenditure on education has steadily increased since 2000. Funds have been primarily allocated to primary and lower secondary education for schools, materials and training of teachers. Priority Action Plans have also encouraged greater participation of girls and disadvantaged youth in education.

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The ratio of primary to secondary schools climbed to 7.6 in 2005. By 2004, only 14 districts were still without a lower secondary school, while 45 districts lacked an upper secondary school. One of the key indicators of education access is distance to school. This varies considerably according to sector and income quintile. For the poorest families, the average is 7.66 km, while for the top quintile it is 3.09 km, implying time and transportation costs for the poorest families. School infrastructure has also improved. Parents perceive that there are better sanitation facilities and improved quality of classroom materials. Community perceptions also suggest improvements in access, including the availability of schools, free registration and a pro-poor education policy.

Despite these achievements, quality, efficiency and coverage vary across regions. Access to education at all levels continues to be inferior in rural and remote areas, where many of Cambodia's poor and very poor reside. Costs, including informal fees, are still a barrier, and vulnerable youth groups tend to be over-aged or late school entrants. Young men and women from the lowest two quintiles face considerable challenges with regard to secondary education. Although increases in secondary enrolment are evident for disadvantaged gender, location and socio-economic groups, the gaps have increased between urban and rural and the poorest and richest quintiles. Retention is a serious concern since the survival rate is what counts in the long run. The poor are at the greatest risk of dropping out due to a variety of community and individual factors. As a result, overall educational attainment remains low, and it will be difficult to achieve universal basic education by 2015. High rates of illiteracy are still evident in the 15–24 age group, especially among girls.

There are additional challenges. How can the education system impart the values needed to build and participate in modern democratic societies and ensure good governance? How can government planners and others concerned ensure that the quantity and quality of education are linked to and relevant to the labour market? The curriculum needs a review and reformulation to include more science and mathematics that promote problem-solving skills that can help workers to make decisions and work together in teams, as well as more practical courses that build or strengthen agricultural and vocational skills.

Measures to increase the participation of the poor and girls include focusing resources on schools in poor rural communities; targeting subsidies for school attendance

for the very poor and girls; community participation in school decisions; subsidies and incentives for secondary and tertiary education; adapting curricula to local needs; and media and public information campaigns on the inclusion of girls, the disabled and vulnerable young people. Vocational training for out-of-school youth can be most cost effective by improved targeting and ensuring that programmes are complemented with other services and tailored to local labour markets. Such programmes can be more effective when they include on-the-job training and employee sponsorship, as well as access to affordable credit to help young entrepreneurs in SME start-ups.

Non-formal programmes that impart literacy and other basic skills to adults and out-of-school youth can improve family income generation and have strong positive impacts on health. A widely reported outcome among adult learners is a sense of empowerment and an ability to act with a greater sense of confidence in public arenas and to catch up with modern development.

Health

The sweeping social and cultural transformations accompanying Cambodia's rapid economic growth have shaped young people's exposure to and capacity to deal with risk situations. The migration of young people without families for employment and education contributes to reproductive health risks and increased risk-taking behaviours associated with STDs, drug abuse and gender-based violence. However, sexual and reproductive health issues such as unplanned pregnancies and abortion cannot be attributed solely to migration, nor are they only an urban phenomenon. Access to information and communication technology is changing attitudes and introducing new lifestyle possibilities throughout the country.

Some of the most serious health risks involve tobacco use, substance abuse (alcohol, drugs) and HIV/AIDS. According to 2004 data, 7.3 percent of youth aged 15–24 are current smokers. This appears to be primarily a male behaviour, 13.6 percent of males being smokers, but only 0.8 percent of females. Out-of-school youth (9.2 percent) are much more likely to smoke than those in school (0.6 percent). In the 11–18 age group, 14.2 percent have consumed alcohol: 20.9 percent of males and 7.4 percent of females. A higher percentage (15.9) of out-of-school youth has consumed alcohol than those in school (12.1 percent). A worrying indicator is that many youth say they first consumed alcohol as early as 12 years of age. Young people report that they start to drink early due partly

to peer pressure and/or new lifestyle behaviours modelled by adults.

The production, sale and use of drugs are becoming increasingly complex. Although there is some evidence that the number of illicit drug users may be declining, drug use is no longer a purely urban phenomenon but has spread to rural and even remote areas. Most drug users are unemployed, sex workers and workers in labour-intensive industries, including construction, garments and truck/taxi driving, as well as street children. More than 80 percent of known drug users are younger than 26. However, this is a very difficult group to identify, and the number of users is difficult to count accurately.

Cambodia has achieved important success in HIV/AIDS prevention. The prevalence among the 15–49 age group declined from 3.0 percent in 1997 to 1.0 percent in 2003. Those at highest risk of contracting HIV are female sex workers, men who have sex with men and intravenous drug users, many of whom are young people. Estimates in 2006 suggest that HIV/AIDS prevalence among female sex workers attending antenatal centres was 12.6 percent, down from 21.4 percent in 2003. Some 7.2 percent of this more recent estimate consists of persons younger than 25 years. There is some indication that these high rates of infection may be spilling over into other demographic groups. For example, among pregnant women aged 15–24 years, the figure was 0.41 percent in 2006, compared to 0.36 percent in 2003. As many as 43 percent of new infections are now occurring in married women aged 15–49 years, most of whom are infected by their husbands.

Knowledge and awareness of HIV/AIDS are also high. According to the 2004 Cambodian Socio-Economic Survey, about 90 percent have heard about it. Knowledge among 15–24 year olds is also high, 88–98 percent across the country. The 2005 Cambodian Demographic and Health Survey found that 98.3 percent of men and 98.7 percent of women in the 15–24 age group had heard of HIV/AIDS, while the 2006 RHIYA data suggest 100 percent. About 72.4 percent of young males and females are aware of at least one method to avoid contracting AIDS. TV is the most popular source of information, and other sources include radio, friends and school (27.7 percent). Further sources include newspapers or magazines, leaflets, posters, health workers, monks, community meetings, parents, partners, peer educators and neighbours. Other research, however, suggests that upland ethnic groups in remote rural or mountainous regions are less aware than other ethnic groups of the same age.

Knowledge of modern contraception (at least one method) is almost universal, about 99 percent among people between the ages of 15 and 49. However, use among females aged 15–19 years and 20–24 years is 2.5 and 2.4 percent, respectively, for modern methods, while 1.4 percent of the 15–19 age group and 13.4 percent of the 20–24 cohort use traditional methods. Exposing young women to discussions of sexuality appears to be increasingly accepted by parents and others. This makes discussions of reproductive health more open and should help to promote sexual and reproductive health, family planning and safe abortion.

Health knowledge and indicators show strong improvement. However, these promising trends do not appear to apply to marginalised groups, street youth or other disadvantaged youth. It appears that those most at risk are young rural males who are out of school and presumably not working. This suggests a need for better targeting of marginal and at-risk groups, with some attention to geographic location. Government and non-government organisations need to continue to develop advocacy, awareness raising and health education programmes for youth, households and communities. Local authorities, community-based organisations, pagodas, schools and social service providers (medical practitioners) all have important roles to play. Knowledge and awareness of prohibited drugs are quite high.

Vulnerability

A broad definition of vulnerability can be derived from the government's policy statement on alternative care for children (MoSVY 2006). Children exposed to vulnerability have been categorised into those in special need of protection and children at risk. Children in special need of protection include orphans, abandoned children, children infected with or affected by HIV/AIDS, abused children (sexually, physically, emotionally), street children, children in conflict with the law, child victims of exploitation (sexual or any form of harmful labour), children with disabilities, children addicted to drugs and children whose basic physical needs are not being met.

Vulnerability can be a function of poverty and social exclusion, physical and mental health or violence and abuse. Vulnerability can also be considered as a function of migration, in which children of poor households are increasingly exposed to homelessness, violence and abuse.

Poverty and social exclusion

Young people living in poor households are one of the most vulnerable groups in Cambodian society. They

constitute 26 percent of the country's total population, of which about 35 percent live below the poverty line. Because their livelihood is mostly dependent on rain-fed agriculture, these youth often experience food insecurity. They tend to receive less education and have little or no access to vocational training. They live in households that are routinely in debt and have high dependency ratios. These households have dwindling land resources and poor employment prospects. Social exclusion, including because of disabilities, ethnicity and remoteness, exacerbates vulnerability and poverty.

Physical and mental health

Street children are among the most vulnerable groups in Cambodia. They are vulnerable to a wide range of physical and mental health problems, lack of access to basic needs and a multitude of dangers (sexual exploitation, violence, substance abuse). The number of children living on the streets may be increasing by as much as 20 percent each year due to rural-urban migration. Some 10,000–20,000 young people may be working on the streets, half of whom are female.

Loss of parents impacts on household income and education. According to the 2005 Cambodian Demographic and Health Survey, 9 percent of children under 18 have lost one or both parents. The growing number of HIV/AIDS orphans is alarming, about 55,000, or 10.9 percent of all orphans, as of 2001. It has been estimated that by 2005, 20.7 percent of orphans in Cambodia would have lost parents due to AIDS-related illnesses.

Violence and abuse

Young people may be experiencing more violence and abuse than any other group in Cambodia. Poverty, mental illness, alcoholism and gambling are all associated with domestic violence, which has either direct or indirect effects on young people. Young people exposed to violence in the home live with fear, are subject to depression, are prone to misbehave, lose concentration at school and drop out or run away from home. Domestic violence is a contributing factor to household downward mobility due to property damage and the costs associated with injury and productivity losses.

Crime and rape are another aspect of vulnerability. Technology is having a role; for example, access to pornographic films and the internet seems to play a role in some cases of sexual crimes.

Migration

Young men and women leaving rural communities for urban employment are exposed to a wide range of problems, including alcohol and drug abuse, gang violence, crime and rape. Some adopt behaviours that expose them to the risk of HIV/AIDS and other STDs. Young people who migrate across borders are even more vulnerable to being cheated and are subject to arrest and work in jobs that entail health risks with no consequent health care (e.g. spraying insecticide in Thailand). Some are exposed to drug use to induce long hours of work, while some women are subject to sexual exploitation and forced prostitution.

Participation and Rights

When vulnerability is high among young men and women, their prospects for civic participation are low. Education is key to future participation in economic, social and civic affairs. Among poor, very poor and vulnerable youth, however, education represents a trade-off with household economic activities. In many respects, poverty is one of the most important barriers to youth participation.

In rural Cambodia, youth voices are not well incorporated into local development planning. Youth often feel ignored in the early stages of planning, but are expected to contribute labour to development projects. Youth are rarely called to participate in village meetings because elders believe that youth have less experience in decision making. At the same time, many youth indicate that they are not interested in participating because it is the duty of village leaders and elders to make such decisions. In either case, many youth appear not to have much sense of ownership of development planning.

Most local community development decisions concern infrastructure such as schools, roads, canals and irrigation. Little attention has been focused on social aspects of youth development. There is a need to mainstream youth's participation in local development planning. This should be a key feature of a national youth policy.

Youth volunteering is a key component of social capital formation and the strengthening of reciprocity. However, many youth tend to equate volunteering with unpaid work. There is some indication that volunteering can work when there is appropriate support from NGOs and community institutions. When opportunities to volunteer are coupled with vocational or skill development, youth will have better prospects for employment as well as increased civic engagement.

There is also a widespread lack of community

services for youth. Parents and village leaders often view team sports and similar activities as a waste of time and not a good use of scarce resources. Elders and community leaders need to understand and value greater youth participation in social and civic affairs.

Mapping Exercise

The national mapping exercise regarding NGO and IO work in health and education suggests that there may be significant gaps in geographical coverage. Peripheral provinces, including Stung Treng, Oddar Meanchey, Mondolkiri, Ratanakkiri, Preah Sihanouk, Svay Rieng, Preah Vihear and Pursat, receive fewer project interventions than provinces in the central plains and the Mekong and Tonle Sap basin. Despite the recent expansion of transport and communication networks, more distant and remote areas continue to lag behind in health and education services.

One reason for this is that NGOs and IOs may prefer to concentrate their efforts in more accessible areas since it is more efficient on a per unit cost basis to serve densely populated areas. This probably also accounts for government not locating health posts and school facilities in remote areas where population is scattered. However, if the objective is to reduce poverty among youth, then more interventions will have to occur in these regions, where young people are frequently vulnerable, particularly in relation to employment, education and health.

There may be a time lag between infrastructure development and interventions. Once road access is improved to an area, for example, it then takes time to plan a particular intervention and mobilise resources. This suggests a need for more forward-looking interventions that anticipate improved access. This in turn implies better information and coordination of administration. Government may need to take a more pro-active role in encouraging NGOs and IOs to intervene in poorly served areas.

NGOs, IOs and government agencies each have advantages in comparison with one another. For example, NGOs generally have an advantage in flexibility to target hard-to-reach groups, while IOs may have an advantage in resources and technical capacity. Government often has an advantage in scope of information and coverage, access to information and institutional mandates for action. Each actor needs to coordinate and consult with the others in order to provide complementary inputs and services for youth.

This is especially important in poverty reduction because these areas tend to have higher poverty rates than

areas with abundant interventions. Moreover, spending on health subsidies appears to have an important impact on poverty reduction. Education support from NGOs and IOs tends to focus more on primary than on secondary education. At this point, this seems appropriate because there is a need to ensure that more students enrol in and complete primary education, which in turn will stimulate demand for lower secondary education.

Other areas of intervention that appear to be in place include civic engagement and citizenship, democracy, human rights, advocacy and combating child and sexual exploitation. Child rights and juvenile delinquency, domestic violence and gender-based violence appear to be well covered in the central Mekong and Tonle Sap areas, while border areas are less well served. However, Kompong Speu is included in the less well-served area.

Due to time and resource constraints, the mapping was able only to assess the number of provincial interventions. It does not include the scope or scale of outreach or in any way reflect depth of impact. For example, a project serving 50 youth in two communes and a programme serving 500 youth in 20 communes both count as one intervention. A more detailed and comprehensive mapping exercise would identify district or commune interventions.

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