



**REPORT
ON**

**HIGH LEVEL STAKEHOLDERS CONSULTATION
MEETING
BETWEEN
THE ROYAL GOVERNMENT OF CAMBODIA
AND
UNITED NATIONS POPULATION FUND
ON
“COUNTRY PROGRAM ACTION PLAN (CPAP) 2016-2018”**

**27 OCTOBER 2015
THE COUNCIL FOR THE DEVELOPMENT OF CAMBODIA
PHNOM PENH
CAMBODIA**

I. INTRODUCTION

The UNFPA Cambodia Country Document 2016-2018 was officially approved by the UNFPA Executive Board in September 2015 following the endorsement by the Cambodian Rehabilitation Development Board/Council for the Development of Cambodia (CRDB/CDC) as well as a series of consultative workshops with the government partners. In parallel with this, a draft Country Programme Action Plan 2016-2018 has also been prepared and discussed on the basis of the participatory and consultative approach, in which both relevant government counterparts and civil society have been actively engaged to provide feedback and comments to ensure a holistic framework for intervention in response to the national priorities and concerns being articulated in the foregoing approved Cambodia Country Document 2016-2018.

In view of the procedural requirement that the UNFPA Country Programme Action be formally approved and co-signed by both the Government of Cambodia and UNFPA within one month following the CPD approval, the Cambodian Rehabilitation Development Board/Council for the Development of Cambodia (CRDB/CDC) together with UNFPA Cambodia Country Office convened a high level stakeholders consultative meeting on the 27th of October 2015 in order to validate and endorse the planned strategies towards achieving defined results as identified in the Country Programme Document.

The event was participated by the representatives of relevant ministries and government agencies, including the Office of the Council of Ministers, Ministry of Economy and Finance, Ministry of Foreign Affairs and International Cooperation, Ministry of Labour and Vocational Training, Ministry of Planning, Ministry of Health, Ministry of Education, Youth and Sport, Ministry of Interior, Ministry of Women's Affairs, the Cambodian Rehabilitation and Development Board/the Council for the Development of Cambodia, and UNFPA Country Office.

II. EXECUTIVE SUMMARY

The high level stakeholders consultative meeting was presided over by H.E Chhieng Yanara, Minister attached to the Prime Minister and Secretary General of CRDB/CDC, co-chairing with Dr. Derveeuw Marc G.L., Representative of UNFPA Cambodia.

In the opening remark, H.E Chhieng Yanara expressed his warm welcome and appreciation to the participants for their presence in the event followed by a clear introduction of the objective of the meeting. He also appreciated the fact that the draft CPAP builds on the achievements and lessons learned from the implementation of the current country programme and takes into consideration the national priorities, in the context of the National Strategic Development Plan and UNDAF. He went on to highlight the four thematic areas articulated in the draft CPAP, that is, i) Sexual reproductive health and rights, ii) Adolescents and youth, iii) Gender equality and women's empowerment; and iv) Population Dynamics, together with a total of 8

outputs to be achieved by the end of 2018. While ending his remark, he commended the active participation of all key line ministries and departments who are the UNFPA's critical partners in the planning for the new UNFPA programme of assistance to the Royal Government of Cambodia.

Dr. Derveeuw expressed his appreciation to the CRDB/CDC for convening and organizing such an important meeting together with his compliment to all government colleagues for their cooperation in the last five years and their continued dedication to making the implementation of the fourth country programme possible. In addition, he underlined a number of considerable achievements made during the last five years, which have significantly contributed to reduction of poverty in Cambodia, including the reductions in maternal mortality and increases in skilled birth attendance, contraceptive prevalence rate, proportion of demand satisfied in family planning, and emergency obstetric and newborn care (EmONC) facilities. Moreover, he highlighted further accomplishments during the program cycle, such as enhanced access to sexual reproductive health and rights for adolescent and youth, development of the second National Action Plan to Prevent Violence Against Women as well as the National Guidelines for Managing Violence against Women, and improved government capacity to collect, analyze and utilize population data including one CDHS, one Inter-Censal Population Survey, and the first ever migration survey in Cambodia.

Finally, he emphasized that, in this new country programme, UNFPA will continue to support national capacity development to provide reproductive and maternal health services; undertake youth advocacy and promote adolescent health; support institutional capacity development for the prevention and treatment of gender based violence; and develop national capacity for data collection, analysis and use for national policy and subnational development planning.

The session was continued with the presentation¹ of Ms. Catherine Breen Kamkong, UNFPA Cambodia Deputy Representative, on the overview of UNFPA Country Programme 2016-2018. The presentation featured the development processes of the CPD and CPAP from consultation to formal endorsement, which is envisaged to be formally signed by CRDB/CDC and UNFPA by early November 2015, key recommendations excerpted from evaluations, linkages of CPAP framework to international and national frameworks as well as national priorities, strategies, policies, and plans. She also presented the indicative resources for the CPAP 2016-2018, in which a total of USD 14.80 million will be allocated, followed by a list of prioritized provinces and criteria for selection. Finally, she encouraged the participants to visit the given draft CPAP document in order to provide comments and clarification, if any, so that it can be finalized and approved by early November 2015.

The above-mentioned keynote demonstration was culminated with the four consecutive presentations by the key relevant government ministries in order to elaborate further on details of the CPAP framework with regard to the outcomes,

¹ See detail of presentation in the Annex Section of this report

outputs, and key interventions to be implemented during the course of three years. The first session was delivered by Prof. Tung Rathavy, Ministry of Health, on Outcome 1 pertaining to “Sexual Reproductive Health and Rights”, followed by Outcome 2 on “Adolescence and Youth”, co-presented by Dr. Yung Kunthearith, Ministry of Education, Youth and Sport, and Mr. Chea Bunheng, Ministry of Interior. This was continued by the presentation on Outcome 3 on “Gender Equality and Women’s Empowerment” by Ms. Keth Mardy, Ministry of Women’s Affairs, and Prof. Tung Rathavy, Ministry of Health, and concluded by Outcome 4 on “Population Dynamics” presented by H.E Poch Bunnak, Ministry of Planning.

III. DISCUSSION

After all presentations were delivered, H.E Chhieng Yanara facilitated Question and Answer session so that the participants, especially those from the government agencies, can provide comments and feedback to the draft CPAP document. As a result, the following key points were captured:

- A suggestion was made by the Ministry of Economy and Finance on page 27, section “Part IX: Commitment of the Government”, of the CPAP document. In view of the fact that this section elaborates key responsibilities of the government and civil societies, it would be more suitable to modify the title of the section to be “Part IX: Commitment of the Government and Stakeholders”. There was also a question as to whether additional funds raised for “Adolescence and Youth” could be allocated to this area above the strategic plan commitment of 8% of the total regular resources. He underscored the important needs of youth development in Cambodia for the sake of sustained economic and social growth. Addressed by Dr. Derveeuw, the suggestion was fully accepted for revision. In response to the question raised, Dr. Derveeuw emphasized that the proportion of regular resource budget allocated for the Adolescence and Youth outcome is solely based on the UNFPA Global Strategy. However, there is room and flexibility to raise additional resources for this outcome area beyond the estimated amount. .
- Ministry of Planning raised a suggestion for numerical rectification on page 2, “Part II: Situation Analysis”, pertaining to the “estimated annual population growth during 2008-2013” according to the latest adjustment. The figure should be 1.46% rather than 1.83%. The suggestion was accepted for inclusion.
- The Office of the Council of Ministers commented that this CPAP document should include all indicators and baselines to make it more like an action plan than a policy document. Doing so is more appropriate, especially when it comes to how much should be done right now and in the future. He furthered his comment with a question on page 15 as to the reason why we encourage young people to delay pregnancies or use methods of contraception while the country is encountering the shortage of labour in the job market. Finally, he requested for more clarification with respect to the

findings from CDHS on GBV (page 9) and low level of sexual activity in unmarried adolescent girls (page 7). He expressed his concern that the findings may not reflect the real situation. Clarified by Ms. Breen Kamkong, the first comment was kindly requested to refer to the list of Annex, in which all key indicators and baselines are clearly articulated as well as the proposed programme section V of the document which also laid out all the key indicators and linkages. For 2nd comment, she highlighted that the programme is designed as per the Right-based Approach whereby the program would aim to support the Ministry of Health in addressing individuals expressed unmet need for contraception by ensuring availability of modern methods of contraception as well as information on where to access information and services. The latter comment was also clarified by the Ministry of Health, Ministry of Women's Affairs, and Ministry of Planning who assured that the findings are reliable, given the fact that the CDHS is a nationally representative survey and conducted in accordance with the international norms and standards.

- The last comment was raised by the Ministry of Education, Youth and Sport with regard to the correct total number of provinces implementing CSE curriculum to date, which should be 9 rather than 7 provinces (page 8). In addition the timeframe for key elements of the curriculum integration and revision were re-emphasized and it was suggested that the sentence should be revised, to read as follows “The CF is expected to be finalized for endorsement by the end of 2015, followed by syllabus in 2016 and textbook development in 2017”. The comment was fully appreciated by Ms. Breen Kamkong and will be updated shortly in the revised CPAP.

IV. CONCLUSION AND WAY FORWARD

In his closing remark, H.E Chhieng Yanara thanked all the participants for their active participation, recommending that the Outcome Groups and UNFPA take on board the suggestions and comments raised and finalize the CPAP document in order for the approval to take place as soon as possible. He also re-emphasized his sincere appreciation for UNFPA cooperation and support, and would encourage continued engagement, in particular with regard to future Country Programme Development, which CRDB/CDB would stand ready to provide necessary support to ensure effective coordination between the capital and the Permanent Mission in New York for speedy approval of a new programme of assistance by the UNFPA Executive Board He looks forward to finalizing the CPAP in early November and to commencing programme implementation g in 2016.

Dr. Derveeuw also expressed his sincere thanks and appreciation to the CRDB/CDC for its leadership and valued support in the development of the CPD and CPAP. He also thanked all the Outcome Groups for their hard work and dedication in this programme development. Finally, he looks forward to implementing this new country

programme as of 2016 and to assisting the Government in mobilizing resources to financing the proposed interventions.

As a way forward, the CPAP is envisaged to be formally approved by the CRDB/CDC and UNFPA Cambodia Office by early November 2015 after all the suggestions and comments from the high level consultative meeting have been incorporated, which the Outcome Groups will take on board in finalizing the current draft version.

V. ANNEX

- 1) Agenda
- 2) Presentation slides
- 3) Speeches
- 4) List of participants
- 5) Draft CPAP 2016-2018