

PREVENTING INTIMATE PARTNER VIOLENCE AGAINST WOMEN IN CAMBODIA

Annual Project Report 2015

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I. Program Description and Approach

The Australian Department of Foreign Affairs and Trade (DFAT) is supporting the Cambodian Ministry of Women's Affairs to change attitudes and prevent violence so that women and girls can feel safe in their homes, in the workplace and in their communities. The Asia Foundation's (TAF), Preventing Intimate Partner Violence Program (PIPV) seeks to reduce rates of IPV in Cambodia by promoting comprehensive primary prevention strategies and interventions that reduce or eliminate specific risk factors and strengthen or establish protective factors for the prevention of IPV.

The Australian Aid-funded TAF research program *Improving Targeting to Prevent Intimate Partner Violence in Cambodia*, including the incorporation of recommendations from the associated *Targeting Brief Series on IPV*, provided the evidence base for the original design of the PIPV Program. Based on quantitative analysis of available datasets four risk and/or protective factors emerged as the most robust and statistically significant: alcohol abuse and childhood exposure to violence as risk factors for IPV; media exposure and educational attainment as both risk and protective factors for IPV. Each of these factors was then further analysed including a review of relevant qualitative research and literature; identification of current promising programmatic approaches; cost benefit analysis; and international good practice in primary prevention of IPV. The research found that in comparison to the areas of child protection and education, where significant investment has been made, there has been little work in addressing IPV through alcohol abuse and media exposure. DFAT supported TAF to focus interventions to address the two most significant risk factors - alcohol abuse and negative media exposure. The PIPV Program works towards two mutually reinforcing outcomes: (1) Target groups experience a reduction in IPV risk factors and an increase in protective factors; and (2) Government agencies, civil society, the private sector, and communities use evidence to advocate, plan, budget for, and implement policies, laws, and programs to prevent IPV.

Supporting the implementation of the second NAPVAW II. PIPV strategy and activities directly support the implementation of primary prevention Cambodia's second National Action Plan to Prevent Violence Against Women (NAPVAW II). PIPV supports NAPVAW II's call for *primary prevention interventions require targeting to specific groups that are at higher risks of using and/or experiencing violence in the future with a strategy that promotes positive change in perceptions, attitudes, behaviours, beliefs, practices, and social norms.*Understanding that reducing alcohol abuse and negative media exposure are but two components of an overall primary prevention approach, the program will make efforts to couple strategies to build positive masculinities, reduce negative gender norms that promote tolerance of IPV, and collaborate with IPV protection and response systems.

Building sustainability of IPV prevention policies and practices through constituencies. PIPV builds sustainability over time by strengthening IPV prevention practices that work while advocating for policies that support those practices. Whether it is a commune chief that works to integrate the Commune Alcohol Notification System (CANS) into their Commune Investment Plans (CIP) or a student campaigner who provides feedback to TV broadcasters, PIPV's primary means to achieve sustained improvements in policy and practice for IPV prevention centres on empowering issue-based constituencies. PIPV recognizes that it is these constituencies that will ultimately be the drivers required to sustain prevention practices and see-through policies to enforcement, whether it is through the bylaws that regulate alcohol consumption at the commune-level or the application of regulations of TV content.

II. Progress on Program Outcomes and Activities

Outcome 1. Target groups experience a reduction in IPV risk factors and an increase in protective factors

Output 1.1: Improved awareness on PIPV among target stakeholders including communities, NGOs, and government authorities

Activity 1.1: Organize subnational CANs orientation workshops among target stakeholders

ACHIEVEMENTS TO DATE

- A total of 6 subnational workshops were held in target districts in Svay Rieng and Kratie.
- An average of 54 participants comprising of district and provincial governors, commune and village chiefs, commune council members, district police, school administrators and principals, representatives from the Provincial Department of Women's Affairs, health centres, and local NGOs from Svay Rieng and Kratie attended each workshop.
- Evidence base, progress on the CANS, commune stakeholder experiences, and lessons learned were presented and shared among participants.
- Surveys showed increased knowledge of primary prevention and IPV risk factors among participants.
- Collaboration was strengthened between partners and district and provincial level officials.
- Synergies built with DFAT Development Partners in Kratie.

To ensure the CANS are sustainably enforced in all 19 communes and address the gaps between emerging national policies and local level practices on alcohol regulation, TAF convened two rounds of subnational workshops in June 2015 and January 2016 in target districts - Rumduol District in Svay Rieng and Chhloung and Chitr Borei Districts in Kratie. The primary aim of the workshops was to provide a venue to share information, bring together lessons learned from primary prevention efforts in the targeted communes, and an opportunity for district and commune level stakeholders to discuss and better understand the consolidated evidence on IPV in their communities, share their own work, and coordinate with other actors working on PIPV. These workshops also provided an opportunity to support the NAPVAW's implementation at the subnational level by increasing awareness on risk and protective factors for primary prevention among district and commune-level stakeholders.

The June 2015 subnational workshops were conducted with 154 participants comprising of district and provincial governors, commune and village chiefs, commune council members, district police, school administrators and principals, representatives from the Provincial Department of Women's Affairs, health centres, and local NGOs from Svay Rieng and Kratie. This initial workshop series was important in laying the groundwork for partners – People Center for Development and Peace (PDP-C) and Punleu Komar Kampuchea Organization (PKKO) – to get buy in and strengthen collaboration efforts with district and provincial level officials for the CANS implementation. TAF shared its findings from *Targeting Research on IPV and Alcohol Abuse and Media Exposure*. Post-workshop questionnaires showed increased knowledge on primary prevention and IPV risk factors among participants.

In January 2016, TAF convened another round of workshops in the targeted districts with a total of 170 commune and district level stakeholders. TAF shared its analysis of the midline survey findings to show initial impact of the CANS implementation and help identify areas for improvement. Partners presented progress on the CANS implementation and plans for the future program. Panel discussions were facilitated with commune

and village chiefs to discuss their experiences on the CANS, positive changes they have observed in their communities, challenges faced, and recommendations for the program going forward. Testimonials collected from commune leaders are included in Annex I.

For both rounds of workshops, TAF invited DFAT Development Partners in Kratie - Cambodian Community Justice Assistance Project (CCJAP) and ABC International Development's Cambodia Communication Assistance Project (CCAP) - to share information about their programs, contribute program learning, and build networks with PIPV stakeholders.

Output 1.1: Less IPV in target communities

Activity 1.2: Implement PIPV programs through small grants to target PIPV partners for evidence-based initiatives to prevent IPV

ACHIEVEMENTS TO DATE - ALCOHOL ABUSE

- All 19 CANS agreements have been signed by commune chiefs in targeted communes in Svay Rieng and Kratie.
- Over 4,500 community members, district officials, commune chiefs, school administrators, alcohol vendors, abbots, youth and elder leaders, and police have participated in 212 workshops, focus group discussions, forums, campaign, and other CANS-related events.
- A core network of 314 community CANS stakeholders were established.
- 67,393 CANS materials have been disseminated in target communes.
- 118 alcohol abusers and their families have received counselling.
- Partners, PDP-C and PKKO, synced their CANS campaigns with the 16-Days Campaign activities in their provinces.
- Commune chiefs in all 19 communes have agreed to integrate the CANS into their Commune Investment Plans.
- The KAP midline survey shows a reduction in self-reported IPV and IPV related to alcohol
 consumption in the targeted communes along with increased awareness of the negative
 consequences of alcohol abuse.

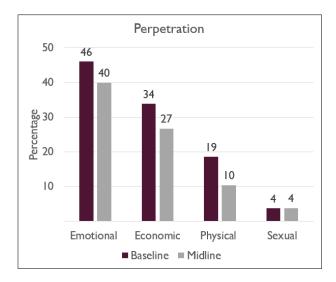
Support CANS Implementation. TAF conducted due diligence and provided small grants to PDP-C and PKKO to implement CANS aimed to reduce alcohol abuse and IPV in 19 targeted communes in Svay Rieng and Kratie. In the absence of a national law on alcohol, the CANS is a commune level by-law which sets limits on the sale, consumption, and advertising of alcohol at the community level. The CANS program follows a participatory approach to engage stakeholders in the community through workshops, ongoing dialogue, trainings, and public campaigns to raise awareness about the harmful effects of alcohol abuse, develop notification systems, and strengthen primary and secondary prevention interventions — including counselling to alcohol abusers.

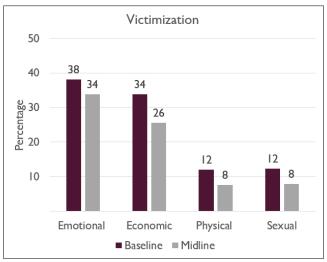
CANS agreements have been signed in all 19 communes with over 4,500 commune stakeholders participating in over 200 CANS-related events over the past year. Partners have established a core network of 314 of key stakeholders to lead on the implementation and enforcement of the CANS in their communes. Progress and activities of the core group are being monitored and supported by PDP-C and PKKO. All 19 commune chiefs have agreed to incorporate the CANS into their Commune Investment Plans.

PDP-C has trained 61 community focal points on counselling for alcohol abuse. PKKO has conducted 33 counselling sessions with alcohol abusers and their families and is monitoring the progress of their rehabilitation. To build the capacity of partners on counselling for alcohol abuse, TAF will partner with the

Transcultural Psychosocial Organization (TPO) for the development of guidelines and curricula for counselling for alcohol abuse at the commune level – along with linking to other standards for counselling, referral, and mediation for gender-based violence interventions in the community.

The TAF midline survey on knowledge, attitudes, and practices on alcohol consumption and IPV found that while the frequency of alcohol consumed has increased (likely due to the wedding season) the average quantity of alcohol consumed has decreased which might indicate that respondents are more aware of the negative consequences of alcohol abuse and binge drinking. The survey shows increased acceptance that alcohol consumption can lead to violence, can cause diseases, and should be regulated. More importantly the survey found that both reported perpetration and victimization of IPV has decreased in comparison to the baseline survey. The biggest decrease was perpetration of physical IPV from 19% to 10%. Self-reported IPV associated with alcohol consumption has also decreased. Further analysis of the base to midline survey findings are included under Activity 2.1.





Based on feedback from commune leaders during the subnational workshops, the communities were overall very receptive to the CANS program. The communities recognized that alcohol was a significant factor for IPV (though many still perceive it as a cause), traffic accidents, and greater disruption in the community. If resistance was faced, it was mainly from the alcohol vendors. This shows that alcohol reduction programs can be a good entry point to address VAW issues in the community. Commune leaders said they have noticed that binge drinking (especially among the youth) has gone down since the Program started but noted that the introduction of the new traffic law might have something to do with this decrease also. Some said that the numbers of families they had been counselling that had problems with alcohol and IPV have decreased. See short testimonials from commune and district leaders in Annex II.

ACHIEVEMENTS TO DATE - MEDIA EXPOSURE

- Open Institute mobilized and trained 132 university students in e-advocacy, media code of ethics, gender and IPV, and how to compose messages to broadcasters for the online media campaign.
- 29,316 posts, 2,570 shares, 512 interactive comments, and 13,432 likes have been made targeting TV broadcasters via the online social media campaign, averaging 224 posts daily.
- Ol's champion, DJ Nana Tips, did a short video for the OI campaign that had over 120k views and she created 4 posts with 13,514 likes, 2,283 shares, and 281 interactive comments.
- TAF developed a system to monitor negative VAW/IPV content on the country's 4 largest TV stations CTN, Hang Meas, TV5, and Bayon.
- Monitoring schedules were developed for the 4 channels and 4 monitors were trained.
- 800 hours of TV programming on the 4 channels have been monitored to identify and target negative content.
- A Gender Media Advisor was selected and has provided advice, support, recommendations, and guidance on the media monitoring, market surveys, the online media campaign, and work with broadcasters.
- A methodology to gather audience feedback through live performances and focus group discussions has been developed and approved by CTN.

Online Campaign. TAF provided a small grant to Open Institute (OI) to lead an online campaign to mobilize viewers to call for improved content on TV and press broadcasters to improve programming. With a predominately young population in Cambodia who use social media as a primary form of communication, OI enrolled and trained 132 university students to post comments directly to TV broadcasters and help sensitize the issue of negative media exposure and IPV to a larger audience of peers, friends, and family. Over 45k posts, comments, likes, and shares have been posted as of December on social media for the campaign. OI enlisted a local celebrity, DJ Nana Tips, who did a short video for OI's campaign that had over 120k views, along with 4 posts generating 16,078 likes, comments, and shares. OI synchronized messages and activities with the 16-Days to End VAW to further increase awareness and promote the campaign.

Identify Negative Programming through Regular Monitoring of 4 TV Broadcasters. TAF developed coding guidelines to monitor the frequency of physical, sexual, and emotional VAW depicted on TV; is it between partners to identify IPV; sanctioning behaviour; alcohol consumption behaviours by the victim and perpetrator; frequency of alcohol and generally violent advertising; and a set of criteria for the reporting of VAW in the news. Four monitors were trained on gender, VAW, and monitoring. Schedules were developed to monitor the 4 major TV broadcasters in Cambodia – CTN, Hang Meas, TV5, and Bayon – in fifteen minute increments. Over 800 hours of TV programming has been monitored to identify and target negative programming.

TAF's monitoring found that TV5 depicted the most physical and sexual VAW and physical and sexual IPV of all the channels monitored. The most negative content was found among the foreign drama programs. TV5 mainly airs Thai dramas so it is not surprising this channel would have the most negative VAW content. CTN depicted the most emotional VAW and Hang Meas the most emotional IPV. Advertisements, mainly promotions for the dramas which often feature the most violent scenes as a way to attract viewers, were also highly negative. The table below shows the most negative programs by channel. Of the most negative programs, comedies are the only programs produced locally so TAF has targeted efforts to improve content through technical and advisory support for comedy programs.

	TV5	Bayon	Hang Meas	CTN
Emotional VAW	Thai Drama	Singaporean Drama	Comedy*	Filipino Drama
Sexual VAW	Thai Drama	Chinese Drama	Comedy*	Comedy*
Physical VAW	Chinese Drama	Filipino Drama	Comedy*	Korean Drama

Provide Technical Support to TV Broadcasters to Reduce Negative Content. PIPV program hired a Gender Media Advisor (GMA) with over 20 years of experience in behaviour change communications methods and developing and analysing audience research for content development in Southeast Asia and an assistant (with gender and media experience) to help with translation and coordination of GMA activities. The GMA reviewed all PIPV media activities and provided advice and recommendations to improve approaches and outcomes. For the OI campaign, the GMA shared key messages that could be used in the campaign, how to generate discussion among viewers, and pressure points for broadcasters to improve content. The GMA would sit in on regular monitoring meetings to review, discuss, and clarify what negative content monitors were finding. She also analysed over 50 Cambodian television programs to further understand both negative and positive content — including CTN's Pek Mi Comedy Troupe shows, all episodes of BBC Media Action's Love 9, and locally produced comedy programs on Bayon and Hang Meas.

While direct contact with CTN was delayed, this gave time for TAF and the GMA to consolidate key findings to present both to CTN/CBS management and the Pek Mi Comedy Troupe actors, producers, and directors. The presentations were met positively by CTN. Audience research proved to be a common interest for TAF and CTN as the Pek Mi Troupe does not have the time or resources to conduct audience research and relies on ratings and informal audience feedback to make programming decisions. A comment by the managing director showed he recognized this hit or miss approach to programming and that he would welcome the opportunity to do audience research to improve programming. TAF developed a methodology to gather real time feedback from an audience during a live performance that could be followed up with in-depth qualitative interviews to further understand what the audience finds funny, what is not, what resonates, what is offensive, etc. Findings from the audience research would then be used to improve gender and VAW sensitive programming through script development, production/set changes, and further training and technical support from the GMA.

Outcome 2. Government agencies, civil society, the private sector, and communities use evidence to advocate, plan, budget for, and implement policies, laws, and programs to prevent IPV

Output 2.1: Improved understanding for future PIPV programming through evaluations of the impact of PIPV interventions

Activity 2.1: Identify impact of primary prevention interventions on IPV through base, mid, and end line evaluations and weekly market surveys

ACHIEVEMENTS TO DATE

- Matrixes to monitor and evaluate the progress on the CANS implementation have been developed with partners, PDP-C and PKKO. Reported cases of IPV to police and commune councils by commune are also tracked.
- Baseline and midline surveys on knowledge, attitudes, and practices on alcohol consumption, gender, and IPV were designed and conducted in targeted communes with 390 respondents each survey in August 2015 and January 2016. Partner staff and field supervisors were trained on the methodology, questionnaire, and Ethical and Safety Guidelines for Conducting Research on IPV.
- TAF inserted IPV-specific questions in 2 regular TV market surveys conducted with up to 3,500 respondents in Phnom Penh, Battambang, Kampong Cham, Prey Veng, Siem Reap, Kampong Som, and Takeo.
- Research was conducted on primary and secondary preventions interventions for alcohol abuse and IPV in Cambodia and the region and mapping of the current regulatory framework for broadcasters.

Monitoring and Evaluation. To monitor progress on the CANS implementation, TAF designed tracking matrixes for partners – PDP-C and PKKO – to complete on a monthly basis. Over 4,500 community members and stakeholders have participated in 212 CANS related events. 314 core community focal points have been established in 19 communes, 3 districts, and 2 provinces which comprise of district officials, commune chiefs, village chiefs, school administrators and teachers, abbots and monks, youth and leaders, police officials, and health department officials. These key stakeholders are instrumental in the implementation and enforcement of the CANS in their respective communes.

Key CANS Stakeholders	Total	Female	Male
Rey CANS Stakeholders	314	92	222
District Official (s)	2	1	1
Commune Chief (s)	20	1	19
Village Chief (s)	90	11	79
School Administrator, Principal, and/or Teacher (s)	44	0	44
Abbot and/or Monk (s) from Pagoda	2	0	2
Youth Leader (s)	46	25	21
Elder Leader (s)	98	54	44
Police Official (s)	12	0	12
Health Dept Official (s)	1	0	1

IPV cases reported to the commune council and police in each targeted commune are also being tracked. TAF analyzed these reported cases but could not find a noticeable trend if IPV cases were going up or down. Given many cases go un-reported for a variety of reasons, usually only severe cases are reported to the police, and discrepancies in cases reported to the commune council vs police; TAF did not present these findings to the community and stakeholders and relied on the self-reported figures from the KAP surveys to give a better picture of IPV in the targeted communes.

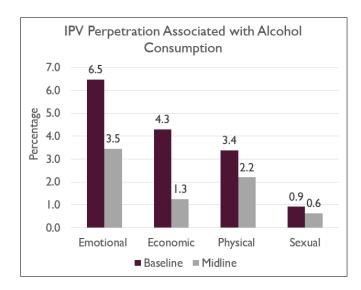
To understand the changes in knowledge, attitudes, and practices in relation to alcohol consumption, gender, and IPV of people living in the 19 targeted communes; TAF conducted a baseline survey at the beginning of the Program in August 2015 and a midline survey in January 2016 with a representative sample of 390 respondents for each survey. As there was only a 4.5 month period between the base and midline surveys, to better understand the impact of the CANS interventions an endline survey will be conducted in December 2016. All partner and field staff conducting the surveys were trained in Ethical and Safety Guidelines and Protocols for Conducting Research on IPV that were adapted from WHO.

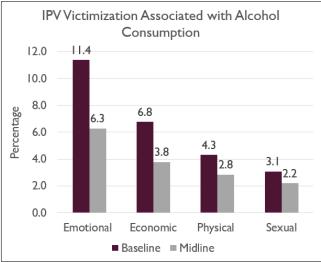
Comparison of the KAP base to midline survey found that while the frequency of alcohol consumed has increased (this might be due to the wedding season) the average quantity of alcohol consumed has decreased. Knowledge and attitudes on alcohol consumption and its negative consequences have improved, especially related to the CANS intervention areas. There was an increase of 5.4 % of respondents agreeing that 'Alcohol consumption could lead to physical violence'. There was an increase in alcohol and health awareness, with an increase of 6.2 % of respondents agreeing that 'drinking alcohol causes many diseases such as chronic hepatitis, pancreatitis and cancer'. Related to children and younger people at risk from alcohol, there was an increase in respondents agreeing that 'alcohol should not be sold to children below the age of 21' (8.7%) and an increase in respondents agreeing that 'alcohol should not be sold near pagodas and schools' (10.0%). For alcohol advertising and availability, there was an increase in respondents agreeing 'advertising alcohol encourages people to drink more' (5.9%) and an increase in respondents agreeing 'there is too much alcohol freely available in your community'. Importantly, there was a slight increase in respondents agreeing that 'Increasing awareness on the negative impacts of alcohol consumption will help to reduce IPV cases' (3.8%).

There was a significant increase in the percentage of respondents agreeing that 'People should be treated the same whether they are male or female' (from 83.8% to 92.1%). However, other gender attitudes did not improve. There was an increase in the percentage of respondents agreeing that 'A wife cannot refuse to have sex with her husband.' Most surprisingly, there was significant increase in the number of respondents agreeing that 'If a women doesn't physically fight back it is not rape' (from 62.2% to 71.3%). This indicates that partners need to improve their messaging on gender and sexual VAW during outreach, in dissemination materials, and other CANS related activities.

Over 50% of respondents knew of the CANS in their commune which increased from 12%. Surprisingly, 77% of Chhloung District respondents had seen the actual CAN agreement compared to only 27% in Rumduol and 11% in Chitr Borei Districts. This shows that PKKO, who is implementing the CANS in Chhloung, has the most effective approach to disseminate the CAN agreements and ensure that the CANS are widely known among the community. Unlike PDP-C, PKKO distributes the CANS to homes. 81% of respondents said they saw the CANS 'at home' compared to 45% who saw the CANS in a public space.

Most importantly, the midline survey found that both self-reported perpetration and victimization of IPV has decreased in comparison to the baseline survey. The biggest decrease was perpetration of physical IPV from 19% to 10%. All forms of IPV associated with alcohol consumption have also decreased. The decrease was higher in Chhloung and Rumduol Districts than Chitr Borei.





Recognizing the trackers and KAP surveys do not provide a qualitative understanding of the effectiveness of the CANS interventions, an evaluation of the CANS will be carried out in March 2016. Feedback from community members and stakeholders will be gathered to see what has worked well in the CANS implementation and what areas need improvement. In addition to exploring the sustainability of CANS integration into CIPs and establishing the criteria for the expansion of the CANS into 11 new communes.

TV Market Ratings Surveys. TAF inserted one question into a semi-annual media consumption survey of 2,500 rural and urban respondents in Phnom Penh, Battambang, Kampong Cham, Prey Veng, Siem Reap, Kampong Som, and Takeo. Viewers were asked to recall physical and sexual VAW on TV programs they regularly watch. The data was disaggregated by location, age, gender, household income, and showed the most watched channels, timeslots, and favourite shows on the top five channels. The survey did not include questions about emotional VAW or IPV. 2/3 of viewers reported they had seen VAW which was primarily on news shows and Thai, Philippine, and Korean drama series. An interesting finding was the little VAW was recalled in comedies, since TAF's in-house monitors found quite a lot of VAW in comedies. Recall is known not to be a reliable reflection of content, but instead of audience attention. TAF speculates that audiences are distracted by the humour and do not recognize or remember the VAW content of the comedies. The audience research will test this hypothesis. Data from the survey was used to develop the schedules for TAF in-house media monitoring and for our presentation to CTN (and potentially other broadcasters) to link negative and positive VAW programs with market share. This data was also useful in designing the segmentation for the proposed audience research.

TAF inserted two questions in a TV market ratings survey that is conducted weekly in Phnom Penh with 1,000 respondents. Viewers complete a panel diary indicating the channels and programs they watch daily. Two columns were added for viewers to check if they saw physical or sexual VAW on the program and if it was between partners. Clear examples of physical, sexual VAW, and IPV are described on the diary panel and viewers were trained in completing the panel. TAF is expecting the first report of findings of the TV market ratings surveys by mid-February 2016. This will provide a better understanding of viewer exposure to negative content, help the measure impact of work with the broadcasters, and can used for comparison with the media monitoring findings.

Output 2.2: Improved understanding for future PIPV programming through targeted research on risk and protective factors of IPV

Activity 2.2: Support targeting research on risk and protective factors of IPV by incorporating new prevalence datasets into existing targeting analysis

TAF has secured the 2013 Cambodian Violence Against Children Survey and 2014 CDHS datasets to begin analysis. A short report will summarize key findings from the analysis of new datasets and whether this new data confirms or challenges TAF's *Targeting Research on IPV* findings. The report will be available as a PDF on TAF's website and hard copies will be disseminated to stakeholders primarily through the TWGG-GBV and TWG-VAC for wider uptake.

Output 2.3: Improved understanding for future PIPV programming with increased evidence-base through additional research on primary prevention and responses to IPV

Activity 2.3: Conduct additional research on primary prevention and response

An international social work student from La Trobe University conducted research on primary and secondary prevention interventions for alcohol abuse and IPV in Cambodia, Laos, Thailand, and Vietnam. Qualitative research was carried out through key informant interviews with resources in the fields of alcohol abuse prevention and VAW (including representatives from IOGT-NTO, TPO, GADC, Cambodia Men's Network, M'lop Tapang, Friends International). A desk review was conducted to look at the scope and nature of alcohol abuse and IPV, as well as - existing primary and secondary interventions at the international, regional and national levels. Recommendations were consolidated and look at primary prevention interventions through developing policy and laws, enforcing laws, education and capacity building, training and awareness raising campaigns. Secondary prevention interventions discuss the development of good practice guidelines for alcohol use intervention, expansion and improved resources for existing alcohol abuse and IPV services, developing preventative/early interventions before drinkers become alcohol dependent and the use of community-based treatments to maintain sobriety and prevent relapse. Key findings from this report will be translated and shared with partners. In addition, to helping identify key stakeholders and resources for the development of commune guidelines for alcohol abuse and IPV to be led by TPO in the next phase of PIPV. Key recommendations from the report include:

Primary Prevention

- A three pronged approach combining: 1) law reform and the regulation of alcohol through adoption and enforcement of national alcohol policy; 2) community based interventions that control the availability of alcohol at the commune level and provides counselling to alcohol abusers; and 3) awareness raising about the harmful consequences of alcohol abuse and promoting alternative social constructions of masculinity that do not condone intoxication. (Bouhours, 2014; TAF, 2015).
- A National Alcohol Policy needs to be actioned and enforced. The policy should restrict sale and purchase, regulate the density of outlets where alcohol can be obtained, aim to discourage the rapid consumption of large quantities of alcohol by limiting alcohol advertisement and reducing any drinks promotions and incentives. (Heise, 2011; WHO, 2005a).
- Training programs need to be developed to increase the capacity of law enforcement, local authority and the commune council to improve their gender sensitivity, legal knowledge and counselling skills in regards to IPV. Workshops for court and justice officials need to be initiated at the district level to assist officials in avoiding gender bias in law interpretation and handling IPV cases. This could follow a capacity-building model where training can be provided to national specialists who can then assist in training officials at lower levels (Loi, Huy, Minh & Clement, 1999).

- In many communities, schoolteachers are regarded as role models for alcohol-free lifestyle and can play a significant role in delivering educational messages on alcohol to their community (Bouhours, 2014). Early primary prevention interventions such as alcohol abuse awareness and education should be provided to all children as part of a whole-school approach that incorporates parents, local services and communities (WHO, 2005a). This also includes education on health relationships, non-violence communication skills, conflict resolution and human rights values, which can be integrated into primary and secondary school curricula (TLC, 2014).
- Social marketing campaigns to challenge dominant male stereotypes and gender roles perceptions in the community need to be funded, developed and promoted nationally (TLC, 2014).

Secondary Prevention

- Developing good practice guidelines for alcohol abuse intervention using empirical evidence of approaches that have produced improved outcomes. Approaches with the greatest amount of supporting evidence include: behaviour therapy, family work, group therapy and motivational enhancement. One example of behaviour therapy is 'relapse prevention,' which focuses on coping with situations that represent a high risk for heavy drinking (Kaliyan Mith and M'Lop Tapang, 2013).
- Approaches to managing alcohol addiction are rare in the developing world and can be costly and
 unethical due to limited resources. However, WHO, have developed a package of care for alcohol abuse
 in low to middle-income countries that includes community-based treatment camps to support
 alcoholics through detoxification. This followed by various intervention to assist individuals in
 maintaining sobriety and prevent relapse such as self-help support groups (Benegal et al., 2009; Heise,
 2011).
- Developing preventative/early interventions before a drinker becomes alcohol dependent have resulted in clinically significant reductions in drinking and alcohol-related problems. This process typically involves conduct initial screenings to identify and individual's risk level and then a decision is made on whether the individual will benefit from brief or more specialised interventions. Brief interventions can involve enlisting respected members and leaders of the community to assist individuals in assessing their drinking and providing them with guidance on how to reduce consumption.
- Existing alcohol and IPV support services centres need to be provided with improved resources and counselling services need to be expanded to other provinces. Existing centres may need to market their programs in order to make their services more widely known to people, especially in remote villages (Loi, Huy, Minh & Clement, 1999).

To better understand the existing framework for regulating TV content, TAF carried out key informant interviews with officials from relevant departments in the Ministry of Culture and Fine Arts (MoCFA) and Ministry of Information (MoInf), along with speaking to media CSO's – BBC Media Action, CCIM, WMC, and CHEMS. These meetings also helped to identify MoCFA and MoINF representatives to participate in the Media Specialist Subgroup meetings to review regulatory benchmarks and TAF's media monitoring findings in the next stage of PIPV. All officials we met with expressed their interest in participating and were happy to hear about the work that TAF was undergoing.

TAF found that MoCFA's Department for Cinema and Cultural Diffusion is responsible for regulating content for all locally and foreign produced films aired in theatres and on TV in Cambodia. The Department of Performing Arts is responsible for live performing arts and theatre performances for public entertainment or educational purposes like the circus, concerts, Khmer traditional theatre, etc. Praka no. Praka no. Praka no or distribution of movies or TV products, either of Khmer or foreign origin, which could negatively impact Cambodian society - especially children. Movies and TV products are classified in four groups: G for general audience, NC15 for an audience of 15 years old and up, NC18 for 18 years and older, and not allowed.

Further regulations apply to NC15, which can only be screened between 10:00 pm and 6:00 am on local or cable TV. Movies with a NC15 rating can only be sold or rented to customers of 15 years or older. NC18 is allowed to be screened in cinema only and not on TV. Before the movie or TV product is aired a label should be on the screen showing its rating. Additionally, any billboards, advertisements, and packaging should have the film's rating G, NC15, or NC18 clearly visible. There are six general principles for the classification of movies or TV products.

- 1- Generally accepted by the public
- 2- Need to protect young people
- 3- Racial/religious harmony
- 4- National interest
- 5- Treatment of theme, content, and context
- 6- Evaluation of impact

For locally produced feature films, a script must be submitted to MoCFA for review and approval. With approval from MoCFA filming can proceed. The film is then submitted to MoCFA to review and give the rating before it can be released to theatres or aired on TV. For foreign films, the film is submitted to MoCFA, taxes are collected for censorship and rating, then approved for screening. MoCFA said it is hard for them to regulate TV content because the MoCFA does not have any 'teeth' or authority compared to MoInf that is responsible for licensing for TV broadcasters.

MoINF's Department of Audio and Visual has the authority to monitor and regulate TV content and information dissemination – excluding movies and films. However, they cannot censor or pre-screen TV content due to a conflict of the Press Law that states that "to maintain independence of the Press, pre-publication censorship shall be prohibited." Circular no. <code>oomman &65/(MDL)</code> gives general principles of broadcasting programs to all radio and TV broadcasters. It requires TV channels, including cable TV, to minimize broadcasting movies or TV products or programs that show gangster activity, fighting, violence, cruelty, rape, and terrorism. Under this the broadcasters promise that they "will not broadcast anything that affects Khmer custom and tradition, or causes violence, racism, discrimination of color, religion and politics, and other aspects prohibited by Law." Formal complaints can be made by anyone via phone, Facebook, or by letter to MoINF that goes to a taskforce who operates under subcommittee for radio, newspaper, and television. It is unclear what sort of penalty broadcasters face for complaints filed.

III. Lessons Learned and Recommendations

CANS Implementation. Because the CANS approach slightly varies between PDP-C and PKKO, TAF can compare strengths and weaknesses of approaches and share this learning with partners to improve project delivery. Note, the upcoming CANS evaluation will further tease out lessons learned and recommendations for improving the CANS implementation.

- The midline survey found that 77% respondents in Chhloung District saw the CANS, whereas, only 11% reported seeing the CANS in Chitr Borei. PKKO directly distributed the CANs agreement to homes which proved as a more effective way to raise awareness about the CANS to the wider community, instead of only posting the CANS in public and common spaces as PDP-C did in Chitr Borei.
- PDP-C involved local health department officials in the core key stakeholder group in their communes.
 This seems like a natural fit as health department officials are invested in promoting the health of community members and may be working to address the issue of alcohol abuse already. PKKO might consider including health department officials in their key stakeholder group.

• PKKO held monthly check-in and monitoring meetings with commune focal points, making it easier to address issues as they came up in the commune and adjust things where needed.

Commune leaders from both provinces said they sometimes had a hard time engaging commune focal points for the CANS. They suggested instead of nominating the focal points to have people self-nominate to ensure that focal points are invested and committed throughout the process.

Online Campaign. There was a substantial amount of posts (45k!) on the campaign led by OI. However, the impact of these posts is still unclear and the direct influence it had on broadcasters. In the next phase of the Program, it is recommended that OI focus more on improving the quality (than quantity) of the posts and encouraging discussion about why negative content is linked to IPV/VAW to sensitize a larger audience to the issue. Creating an online petition for each broadcaster then gives a mechanism for those sensitized to register their concern and call for improved content on TV. The GMA recommended that OI make a public presentation of the petitions to the broadcasters and invite local media to put them in the spotlight. OI should also explore the formal complaints mechanisms with MoINF as way to register complaints about negative VAW content on TV.

Media Monitoring. While establishing the monitoring system and training the monitors did take a bit of work, TAF found there were efficiencies by doing the monitoring in-house. Given the ad-hoc and sometimes urgent nature of working with the broadcasters, it was helpful to be able to quickly get and analyse the data as needed. The GMA could sit in on the meetings and hear about issues, triage questions, and clarify things as they came up. TAF could easily feedback findings to OI, the GMA, and adjust approaches on the PIPV Media Program where needed.

Provide Technical Support to TV Broadcasters to Reduce Negative Content. As it is an area of mutual interest for TAF and CTN, the GMA recommends that TAF pursue audience research in collaboration with the Pek Mi Troupe using a combination of real time audience research, and in-depth qualitative research. TAF should take the lead on the audience research, looking for a balance between the interests of the two groups. The GMA notes that the interests differ: Pek Mi's interest is increasing the humour in their comedies in any way they can, while TAF's interest is in documenting the audience's response to VAW content. TAF should look for opportunities to communicate persuasively with CTN and Pek Mi Troupe about VAW content, its negative impact on Cambodian audiences, and recommendations to improve content without lessening the audience's enjoyment of their shows.

In the agreement negotiated with CTN, TAF should include training in Gender and Media. The objective of the training should be to help CTN and Pek Mi work effectively with TAF on Gender and Media, becoming in effect allies. The GMA team should develop a one-day Gender and Media training workshop. The workshop should be active, participatory and entertaining, not didactic, lecture-based or scolding in tone and it should challenge Pek Mi to develop comedy based on good gender portrayals. The GMA team should pre-test the training it by delivering it to TAF staff, some of whom have not yet had gender training themselves.