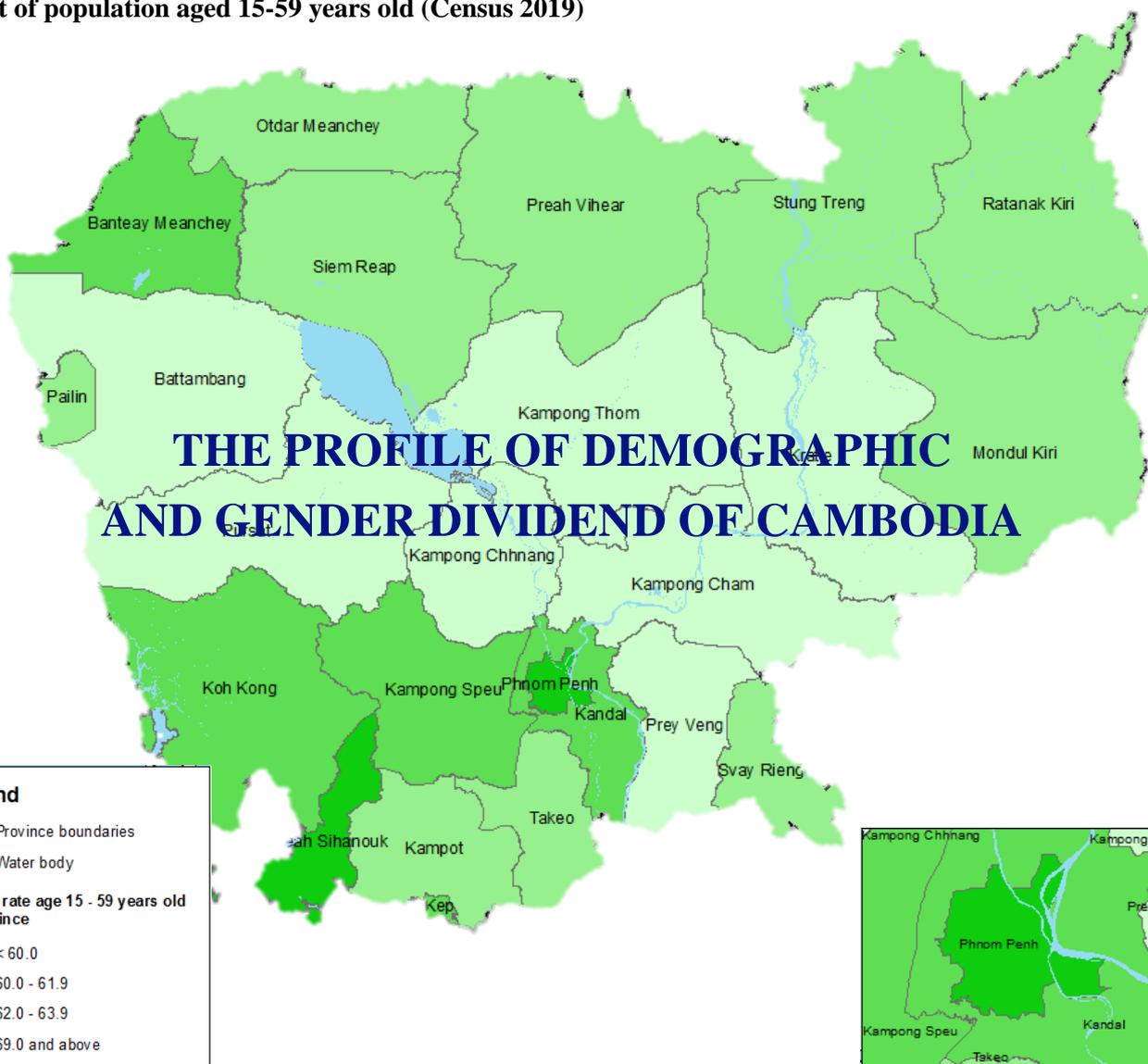


# MINISTRY OF PLANNING



Percent of population aged 15-59 years old (Census 2019)



General Secretariat for Population and Development

December 2021





MINISTRY OF PLANNING



**THE PROFILE OF DEMOGRAPHIC AND  
GENDER DIVIDEND OF CAMBODIA**

General Secretariat for Population and Development

December 2021



## Preface

Cambodia has made remarkable progress in improving the quality of life of its people in the past decades. Socio-economic development has been most impressive, which sustained an average economic growth rate of 7.6 percent in the 1994-2015 period, ranking sixth in the world; it reached lower middle-income status in 2015. These impressive achievements have been built upon openness to trade and capital flows and driven by preferential trade treatment and large official development assistance and foreign direct investment inflows. The structure of the economy has changed drastically during this period of rapid growth. In the short period between 2012 and 2018, agriculture's share of value added fell from about 34 percent to 21 percent, while industry's share rose from about 24 percent to 33 percent. Agriculture's share of employment is much higher - about 55 percent, so product per worker in manufacturing is about 4.3 times that in agriculture, and in services, about 3.6 times that in agriculture.

Population growth in Cambodia has been slowing as a result of fertility decline starting in early 1990s. The total fertility rate halved between about 1993 and 2019. It is now not far above replacement level. There have also been remarkable improvements in adult and maternal mortality since the year 2000. The decline in infant and under-5 mortality levels to roughly one-fifth of their 2000 level in the space of 19 years is particularly impressive. Life expectancy at birth in 2019 was 75.5, almost 17 years higher than the life expectancy of 58.6 in 2000. Between 2008 and 2019, urban share of Cambodia's population rose from 27.1 percent to 39.1 percent, largely as a result of reclassification of formerly rural communes to urban status. Migration also played a role; between 2008 and 2019, rural to urban migration became the predominant migration stream. The capital city of Phnom Penh dominates Cambodia's urban scene.

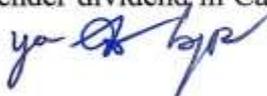
Rapid decline of fertility in the early 1990s following a baby boom period in 1980s later opened up a demographic window of opportunity for accelerating economic development, called demographic dividend, estimated to have started in mid 2000s. In responding to the rapid socio-economic development and the continuing decline of fertility, the General Secretariat for Population and Development of the Ministry of Planning in collaboration with United Nations Population Fund conducted a policy research to analyse the Demographic and Gender Dividend and its Profile of Cambodia and to provide sound evidence-based policy and strategic directions for the socio-economic development of the country. The study is essentially an in-depth review of the trends in Cambodia's population and its age structure, the policies currently in place to deal with this changing population and the interaction of demographic change with other aspects of socio-economic development. The study also analyses the future dynamics of population change in Cambodia, and the relation of this to the demographic and gender dividends by using the new population projections for Cambodia.

The demographic transition presents the economy with an opportunity in the form of a surge in the relative size of the working-age population. This change in age structure leads to economic growth opportunities in two principal ways. First, by increasing the proportion of working-age persons in the total population it increases the ratio of economically active individuals to dependants. Second, a reduction in the youth dependency ratio allows for increased investment in child health and education, in the long run enhancing overall productivity and improving the skill level of the labour force. In the longer run, aggregate

savings can increase as the large working age population save for retirement. This increase in savings can increase investment, leading to economic growth. This is referred to as the “second demographic dividend”.

Taking this opportunity, we would like to express our sincere thanks to all key actors including H.E. Tuon Thavrak, Secretary of State and H.E. Dr. Poch Bunnak, Secretary of State for their active participation and guiding in preparing this paper, H.E. Chea Chantum, Secretary General, Mr. Hang Suvidya, Deputy Secretary General and staff of the General Secretariat for Population and Development of the Ministry of Planning for their hard work in formulating this policy research paper. We highly appreciate the good collaboration of United Nations Population Fund and its staff for its support, financially and technically. A special thank goes to Prof. Gavin Jones for his assistance in developing the policy research on the Situation of Demographic and Gender Dividend of Cambodia. We also thank to all line ministries and institutions for their participation with fruitful inputs in the workshop.

We believe that this policy research paper provides detailed data and information on demographic and gender dividend in Cambodia for policy makers, planners and researchers to fulfil their needs.



**Senior Minister  
Minister of Planning**



**Kitti Settha Pandita CHHAY THAN**

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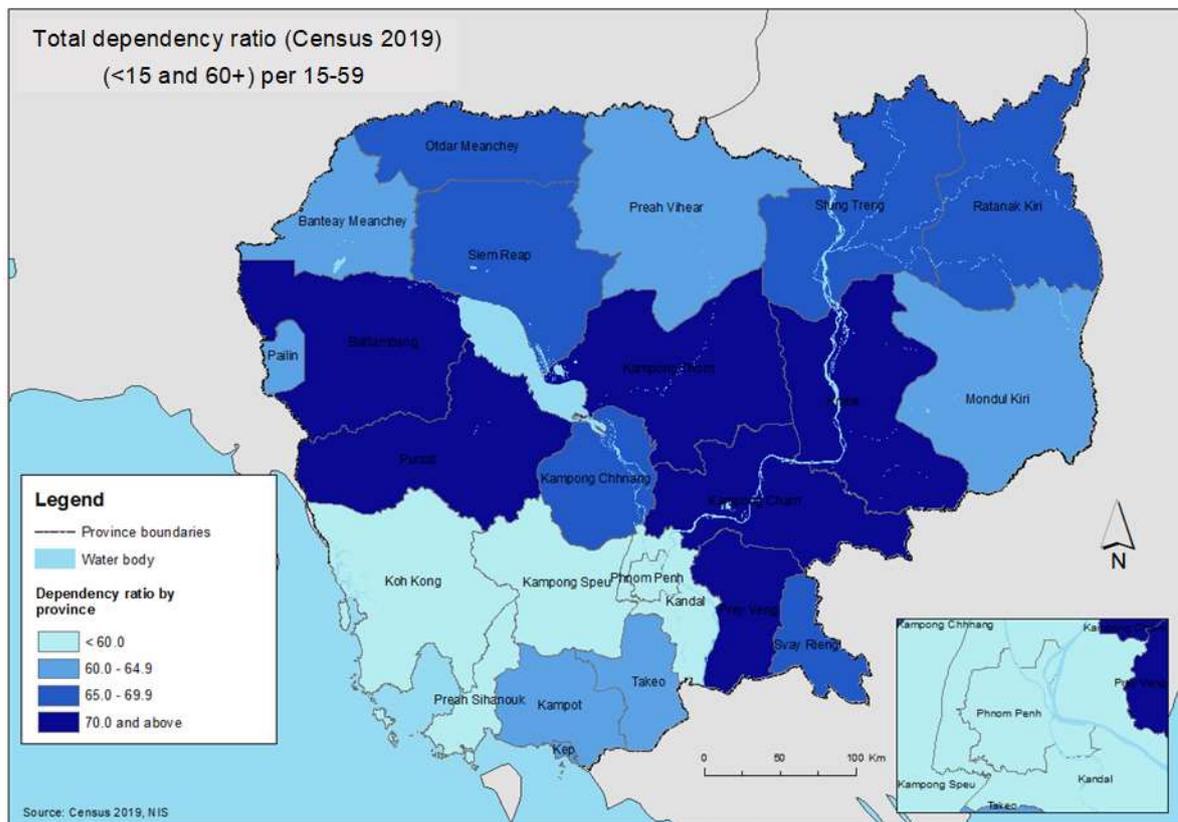
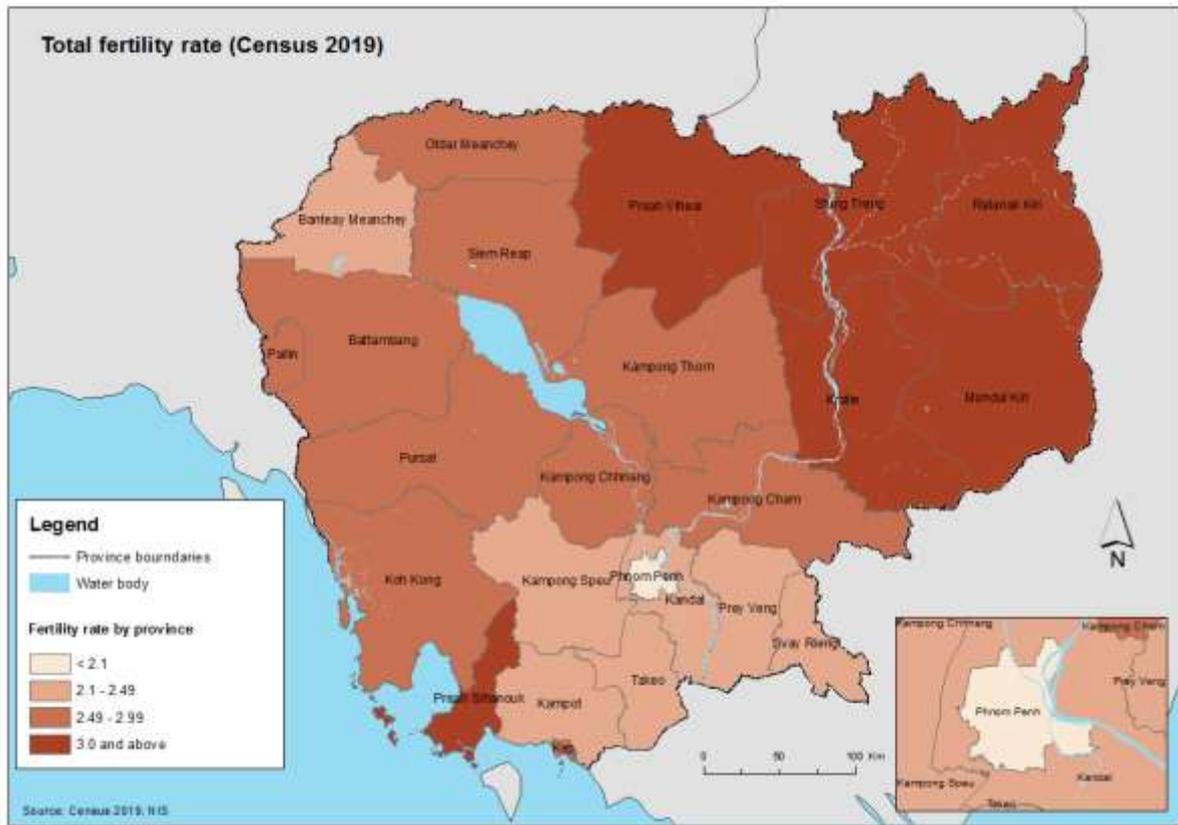
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## **List of Abbreviations and Acronyms**

ADL	Activities of Daily Living
ANC	Antenatal Care
ARI	Acute Respiratory Infection
ASEAN	Association of Southeast Asian Nations
CDHS	Cambodia Demographic and Health Survey
CEDAW	Convention on Elimination of All Forms of Discrimination against Women
CIPS	Cambodian Inter-Censal Population Survey
CNCW	Cambodian National Council for Women
COVID-19	A Disease Caused by a Form of Coronavirus
CPR	Contraceptive Prevalence Rate
CPRm	Prevalence Rate of Modern Contraceptives
CRUMP	Cambodian Rural Urban Migration Project
CSDGs	Cambodia Sustainable Development Goals
GDI	Gender Development Index
GDP	Gross Domestic Product
GMAP	Gender Mainstreaming Action Plan
GSPD	General Secretariat for Population and Development
GII	Gender Inequality Index
HDI	Human Development Index
HEF	Health Equity Fund
HIV/AIDS	Human Immunodeficiency Virus Infection /Acquired Immunodeficiency Syndrome
ICPD-PoA	International Conference on Population and Development-Plan of Action
IMF	International Monetary Fund
IMR	Infant Mortality Rate
IUD	Intrauterine Device
MDGs	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MIPAA	Madrid International Plan of Action on Ageing
MMR	Maternal Mortality Ratio
MoEYS	Ministry of Education, Youth and Sports
MoE	Ministry of Environment
MoH	Ministry of Health
MoP	Ministry of Planning
MoWA	Ministry of Women's Affairs
NGO	Non-Governmental Organization
NIS	National Institute of Statistics
NPP	National Population Policy
NSDP	National Strategic Development Plan
NTA	National Transfer Accounts
OADR	Old Age Dependency Ratio
OECD	Organization for Economic Cooperation and Development
PISA	OECD's Programme for International Student Assessment
PISA-D	PISA for Development Programme

POADR	Prospective Old-Age Dependency Ratio
RGC	Royal Government of Cambodia
SDGs	Sustainable Development Goals
SEZ	Special Economic Zones
SME	Small and Medium-Sized Enterprise
SPPF	Social Protection Policy Framework
SWTS	School-To-Work-Transition Survey
TFR	Total Fertility Rate
TVET	Technical and Vocational Education and Training
UNFPA	United Nations Population Fund
UNDP	United Nations Development Programme
UNICEF	United Nations Children’s Fund
WHO	World Health Organization

## Thematic Maps of Cambodia



## Executive Summary

The objective of this policy research undertaken by the General Secretariat for Population and Development of the Ministry of Planning, in collaboration with UNFPA is to conduct an analysis of the Demographic/Gender Dividend and its Profile of Cambodia (DDPC) and to provide sound evidence-based policy and strategic directions for the socio-economic development of the country. The methodology of the study is essentially an in-depth review of the trends in Cambodia's population and its age structure, the policies currently in place to deal with this changing population and the interaction of demographic change with other aspects of socio-economic development. Using the new population projections for Cambodia, the study analyses the future dynamics of population change in Cambodia, and the relation of this to the demographic and gender dividends.

Population growth in Cambodia has been slowing as a result of declining fertility. The total fertility rate halved between about 1993 and 2019. It is now not far above replacement level. There have also been remarkable improvements in adult and maternal mortality since the year 2000. The decline in infant and under-5 mortality levels to roughly one-fifth of their 2000 level in the space of 19 years is particularly impressive. Life expectancy at birth in 2019 was 75.5, almost 17 years higher than the life expectancy of 58.6 in 2000.

Between 2008 and 2019, urban share of Cambodia's population rose from 27.1% to 39.1%, largely as a result of reclassification of formerly rural communes to urban status. Migration also played a role; between 2008 and 2019, rural to urban migration became the predominant migration stream. The capital city of Phnom Penh dominates Cambodia's urban scene.

Cambodia's record of socio-economic development in recent times has been most impressive. It sustained an average economic growth rate of 7.6% in the 1994-2015 period, ranking sixth in the world; it reached lower middle-income status in 2015. These impressive achievements have been built upon openness to trade and capital flows and driven by preferential trade treatment and large official development assistance (ODA) and foreign direct investment inflows (FDI).

The structure of the economy has changed drastically during this period of rapid growth. In the short period between 2012 and 2018, agriculture's share of value added fell from about 34% to 21%, while industry's share rose from about 24% to 33%. Agriculture's share of employment is much higher - about 55%, so product per worker in manufacturing is about 4.3 times that in agriculture, and in services, about 3.6 times that in agriculture. To deal with this issue, the product mix in agriculture needs modification to move towards higher value crops, livestock and fishing and aquaculture products, and technology adopted to raise yields; at the same time, the movement of labour out of primary industry into higher-yielding sectors needs to be fostered.

Cambodia has managed to lower the proportion of the population living under the national poverty line from 47.8% in 2007 to 13.5% in 2014 – a remarkable achievement. The poverty rate was four times as high in 1994. However, the vast majority of families who escaped poverty did so by a small margin.

The human development index (HDI), which incorporates education, health and incomes, is a good indicator of a country's overall progress. Since 1990, Cambodia's HDI has

shown the second highest rate of improvement in the Asia-Pacific and the 14<sup>th</sup> fastest in the world. Yet its position of 144 out of 189 countries shows how far it still has to go.

### **The demographic dividend**

In recent decades, because of the dramatic decline in Cambodia's fertility rates since the late 1980s, the growth of the child population has slowed (and actually gone slightly into reverse), the working-age population has continued to grow rapidly, and the old age population has increased even more rapidly, from a very small base. The demographic transition presents the economy with an opportunity in the form of a surge in the relative size of the working-age population (crudely approximated as age 15-59). This change in age structure leads to economic growth opportunities in two principal ways. First, by increasing the proportion of working-age persons in the total population it increases the ratio of economically active individuals to dependants. Second, a reduction in the youth dependency ratio allows for increased investment in child health and education, in the long run enhancing overall productivity and improving the skill level of the labour force. In the longer run, aggregate savings can increase as the large working age population save for retirement. This increase in savings can increase investment, leading to economic growth. This is referred to as the "second demographic dividend".

The surge in the relative size of the working-age population can be tracked using the dependency ratio (the sum of the population aged 0-14 plus the population aged 60 and above, divided by the population aged 15-59, times 100). Typically, in a high fertility population, the dependency ratio is around 90 to 100, then as fertility declines to replacement level it falls to a low point of around 45 to 55. After some time, if fertility remains at replacement level or falls even further, the dependency ratio begins to climb again, and can reach levels of over 100 as the rising proportion of population in the old ages (60+) outstrips the decline in the proportion of children.

Importantly, the trends in the share of the two dependent age groups – 0-14 and 60+ - move in opposite directions as fertility declines, and the trend in the overall dependency ratio is the net outcome of these trends. In Cambodia, the child dependency ratio fell from 82.5 in 1998 to 47.6 in 2019, while the aged dependency ratio rose from 10.3 to 14.4 over the same period; the net result was a decline in the overall dependency ratio from 92.8 to 62.0. The overall dependency ratio will keep declining to about 56 in 2040.

Cambodia entered the favourable zone (dependency ratio below 65) in 2011, and will stay in the zone until about 2034 in the constant fertility projection, until about 2048 in the slow fertility decline projection and until about 2052 in the rapid fertility decline projection. The favourable zone will last for 23 years in the constant fertility projection, 37 years in the slow fertility decline projection and 41 years in the rapid fertility decline projection. The reason for these differences is the difference in child dependency. All projections show the same increase in the old age population.

Once Cambodia's dependency ratio has climbed back up to 65, the level which it passed in 2011, during its downward trend, the country will have fundamentally changed. It is expected to have reached upper middle income status, with capital accumulation and technological progress providing a much greater capacity to manage a larger share of dependents. Effective realization of the first demographic dividend is the best way to prepare for population ageing and to increase the chances of realizing a second demographic dividend.

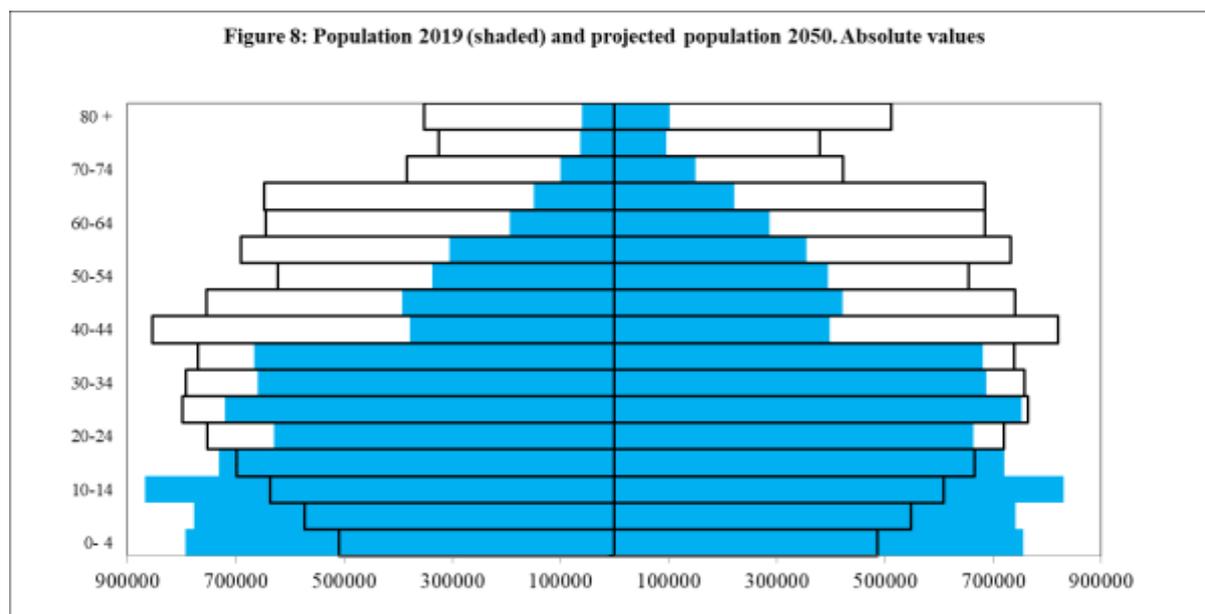
There is nothing automatic about realizing the demographic dividend. If burgeoning numbers of young workers entering the labour force find themselves unemployed, underemployed or in work not befitting their educational background, the dividend is unlikely to be realized. It should also be noted that the make-up of the dependent population is very different when countries enter the favourable zone (dependency ratios below 65) compared to when they leave it. When they enter the zone, a much higher proportion of dependents are children; when they leave it, a much higher proportion are older people. The support needs of these two groups are obviously very different.

### Alternative population projections for Cambodia

There is room for differences of opinion about the prospects for further fertility decline in Cambodia. Among countries where fertility fell in fairly recent times to around the level reached in Cambodia in 2019 (TFR 2.5), three different patterns can be observed: (1) fertility stalls at around that level (Indonesia, Sri Lanka), or even in some cases rises somewhat (Egypt, Algeria, Morocco, Mongolia); (2) fertility continues to decline, but only gradually (Nepal, Bangladesh); fertility declines rapidly to levels well below replacement level (Thailand, China, Malaysia). The most likely trend for Cambodia is for fertility to decline further.

Three population projections are used in this report: rapid fertility decline, slow fertility decline and constant fertility. In all three projections, population rises substantially above its 2020 figure of 16.3 million, to a 2050 population of 21.7 million in the rapid fertility decline projection and 25.2 million in the constant fertility projection. These trends highlight the impact of “population momentum” – the effect of an inherited high fertility age structure - on population growth.

Age structure changes over the projection period will be immense. In the rapid fertility decline projection, the numbers of children will fall considerably, while the numbers at all ages above 40 will be much larger by 2050 (see Figure).



The age structure of Cambodia’s working age population will change drastically up to 2050. The “youth bulge”, if defined by the share of youth in the total population, is over; it reached its peak around 2010. By contrast, numbers and proportion of population in the 30-59 age group increased steadily, as numbers entering that age group were still reflecting the

high birth rates in the pre-1990s period. An “ageing” of the working age population was Therefore, under way, and will continue well into the future. There are a number of clear implications. Since the numbers of younger workers will not be growing much, and their share in the working-age population actually declining, it is exceptionally important that the best possible use is made of their talents, both by providing them with education fitted to the digital economy, and by ensuring that the jobs emerging are in keeping with the objective of moving the economy in higher-productivity directions.

Both children and older persons consume more than they produce, whereas the opposite is true of the working-age population. Therefore, the society and economy has mechanisms for resource transfers that will support the dependent population. The National Transfer Accounts (NTA) measure how people at each age produce, consume and share resources, and save for the future, at both public and private levels, and this helps in identifying appropriate policy responses from government. An NTA study would be useful for Cambodia.

### **Benefiting from the demographic dividend**

Attaining upper middle income status for Cambodia depends crucially on (i) significant improvements in the shares of population with upper secondary and post-secondary education; (ii) improving economic competitiveness and diversification to sustain strong growth and create jobs. Whether Cambodia’s development goals can be achieved will depend to a great extent on the human development of the adolescent and youth cohorts. Educational trends will determine the possible role of youth in upgrading the productivity of Cambodia’s labour force. Broader forces determining the pace of economic growth and structural change in the economy will determine whether they can be provided with productive outlets for the skills they acquire during their periods of education and training. Happily, Cambodia has a very high labour force participation rate, for both men and women. But an increasing proportion of them need to be working in productive occupations.

Though Cambodia has made great progress in educating its rising youth cohorts, the end result of education is not as hoped. Although rural and the poorest youth have an improved opportunity to enter the highest grades, their rate of school enrolment is still low compared to urban and affluent youth. In 2018, Cambodia participated in OECD’s PISA-D pilot project; the results identify serious issues in Cambodian education - a high rate of grade repetition, school dropout and low student achievement. Cambodia performs very poorly in comparison with its ASEAN peers.

Happily, there were improvements in the nutritional status of children in the 14 years to 2014. It can be expected that the next cohort of Cambodian youth to enter the labour force will on average have had better nutrition (and less stunting, wasting and underweight) than those who have recently joined the labour force. But while the indicators of nutritional improvement are very welcome, there is still a need for more intensive interventions to lower these rates further. Safe motherhood indicators for women have also shown a remarkable improvement over the course of just 14 years. Most remarkable of all was the increase in the proportion of deliveries in a health facility, from just 10% in 2000 to 83% in 2014.

Family planning is closely linked to the possibilities of benefiting from the demographic dividend – in two ways. First, more rapid fertility decline extends the dividend longer. Second, women who can achieve their desired family size, and avoid unwanted

pregnancies, are more likely to avoid health complications of too-frequent pregnancies, raise their wanted children well, and have a broader range of options for their time utilization as their family grows up than women who gave birth to unwanted children.

The desire of Cambodian couples to limit childbearing to a relatively small number of children is clear, as almost half of both women and men with two living children do not want any more. This indicates a substantial demand for family planning services, which is being met to a considerable extent; the decline over time in unmet need, a halving between 2005 and 2014 from 25% of currently married women aged 15-49 to 12.5% is very impressive. However, family planning efforts should aim to lower Cambodia's rather high proportion of traditional compared to modern contraceptive methods.

The projected growth of the working-age population in Cambodia will continue at the rate of less than 1.7% per annum over the 2020s and 1.2% per annum over the 2030s. An economic growth rate of 7% per annum, which has been achieved over a sustained period in the past before COVID-19 caused a setback, and which can probably be regained once COVID-19 has been controlled around the world, should be enough to provide ample employment opportunities for the growing workforce.

The National Strategic Development Plan 2019-2023 notes that Cambodia's growth base remains narrow. "The current growth pillars, i.e. agriculture, tourism, garment and construction cannot ensure high growth in the long term due to structural change of domestic economy and demography, rising competition and vulnerability to external shocks. In this regard, it is necessary to identify new sources of growth through promoting the development of new economic sectors, creating and increasing value-added in the existing growth pillars." (Royal Government of Cambodia, 2019: 175).

### **Adolescents and youth as a priority group.**

Adolescents and youth will be on the front line with regard to the issues of education, economic growth and employment discussed in this chapter. The adolescent and youth population (age 15-29) in Cambodia is a numerically very important group, in 2019 numbering 4.1 million and accounting for 26.4% of Cambodia's population. This group is important for other reasons as well. Comprising as it does young people completing their education, beginning to form families, entering the labour force, or in the early stages of their working career, this group will play a significant role in Cambodia's development trends over the coming decade and beyond. Therefore, suitable policies of youth development are essential in ensuring that youth are able to lead a fulfilling life and their potential mobilized to support national development efforts.

In the 2030s the number of adolescents and youth will cease increasing, or even start declining. This will slow the transition to higher average educational attainment of the working population as a whole, because the newly entering workers are, on average, better educated than the older workers. This serves to emphasize the importance of ensuring that each cohort of youth receives better education than the cohort preceding it. This will help offset the effect of the decline in the youth cohort's share of the working age population in slowing the increase in the overall educational attainment of the labour force.

The School-to-work-transition survey (SWTS) provided a rare opportunity to analyse the specific challenges of young people in the labour market. It showed the reasons for leaving school for youth with uncompleted education; economic reasons (could not afford, too poor,

needed to earn money to support the family) make up a massive 62% of all such cases. By contrast, “no school nearby” was mentioned by only 4% of respondents. Clearly, provision of more accessible schools would make little difference to continuation of young people in school unless the economic reasons for dropping out were dealt with.

Teenage childbearing (linked to early marriage) is a major health concern, and the social consequences of teenage childbearing can also be dire, curtailing women’s educational and employment opportunities. Overall, 12% of young Cambodian women (age 15-19) have begun childbearing, the great majority of them at ages 17 and upwards. Teenage childbearing is much more common in rural than in urban areas, and among those with primary school education or less.

### **The gender dividend**

Though school enrolments and labour force participation are high for Cambodian females, Cambodia ranks in the bottom third of the world’s countries according to the Female Human Development Index and the Gender Inequality Index, and in the bottom 40% according to the Global Gender Gap Index. Clearly, Cambodia has some way to go to reach medium to low levels of gender inequality.

Reducing gender inequality is not only the right thing to do; there are also substantial economic benefits resulting from reduction of gender inequality. Costs to economies of gender inequality occur in five main areas: (1) earnings and standards of living; (2) educational attainment, child marriage and early childbearing; (3) fertility and population growth; (4) health, nutrition, wellbeing and violence; and (5) agency, decision-making, and social capital.

Agriculture, the garment industry and retail industries are the main industry categories employing women. Apart from these activities, no other industry category employs more than 1.4% of the female workforce. The aim of shifting workers from agriculture to higher productivity sectors, either fully or by adding part-time non-farm employment to their scope of work, applies not just to male workers in the sector, but even more to female workers.

There is a clear interrelationship between poverty, teenage marriage, early childbearing and limited opportunities for rewarding employment for young mothers. It is to be hoped (and expected) that the continuing rise in the proportion of girls continuing to secondary and higher education will lead to further increases in the median age at first marriage and first birth.

One fifth of Cambodian women have ever experienced physical violence, and 8% have experienced it in the past year. Among ever-married women, the most commonly reported perpetrator of physical violence is their current husband or partner (56%), followed by their mother/stepmother (23%) and former husband/partner (20%). These findings indicate a high proportion of spousal violence. Focusing on recent experience of violence, it is found that 11% of married women experienced physical or sexual violence by any husband or partner in the past 12 months.

Cambodia has strong policy frameworks and national plans for advancing gender equality and women’s empowerment. The Rectangular Strategy aims to empower women in the economy, education, and public leadership, dismantle negative gender behavioural norms and stereotypes, combat gender-based violence, trafficking and sexual exploitation, and further mainstream gender in policies.

## **Ageing trends and policy issues**

While population ageing will be rapid in Cambodia, the pace of ageing will be much the same as in Southeast Asia as a whole, and considerably slower than in Thailand and Vietnam. The old age dependency ratio (OADR) shows a steady rise in the number of old people per 100 persons aged 20-59, from 14.7 in 2020 to between 35.2 and 37.8 in 2050. Elderly women in Cambodia are far less likely than elderly men to have a surviving spouse or to be literate. But well over 90% of older parents have at least one of their children living in the same village – mostly living in the same household. This means that they can expect family help in activities of daily living, where necessary, or other assistance in times of need.

There have been a number of government reports into planning for an older population in Cambodia. To maximize the benefits and manage the risks associated with population ageing, governments should support continuing and lifelong education and health care for all; encourage savings behaviour and healthy lifestyles throughout the life course; promote employment among women, older persons and others traditionally excluded from the labour force, including through a gradual increase in the official retirement age; and support family-friendly policies to facilitate work-life balance and increased gender equality in both public and private life.

### **At-risk populations**

This report focuses on the poor and near-poor, remote populations, minority ethnicities, the physically and mentally disabled, and migrant workers. The Cambodian government has addressed assistance to such groups in its National Social Protection Policy Framework 2016-2025. Many programs are being implemented, for example the Health Equity Fund (HEF), which pays user fees for poor people at public health facilities.

Not all those suffering from social disability of one kind or another can be assisted through government programs. Improved coordination and monitoring can help, but the shortage of funds means that there will always be issues at the margin about which programs can be funded and which ones will miss out. Targeting of programs to reach the most needy is essential, along with imaginative ways of collaborating with NGOs and development partners in order to expand coverage. For targeting, the IDPoor process can continue to play an important role.

### **National policies**

Cambodia has an impressive range of planning and policy documents relevant to the issues discussed in this report. Key examples, whose content is briefly summarized in the Report are: Rectangular Strategy for Growth, Employment, Equity and Efficiency; National Strategic Development Plan 2019-2023; National Population Policy 2016-2030; Action Plan 2016-2018 of National Population Policy 2016-2030; Cambodia's Voluntary National Review 2019 on the Implementation of the 2030 Agenda for Sustainable Development; and National Social Protection Policy Framework 2016-2025.

### **Data and research needs**

Cambodia is quite well covered by censuses and surveys, though the results of the Cambodian DHS currently in the field are very much needed. An effective vital registration system would also be of great value in monitoring population trends. There may be a case for

linking such a system with the IDPoor card system under which people can receive benefits from social assistance programs and social security schemes.

### **Prospects for further benefiting from the demographic dividend**

Cambodia is in a good situation to prioritise human rights in carrying forward its population policy. It has reached relatively low fertility levels, and is well placed to cope either with stalling of fertility decline, or with slow or rapid fertility decline. A further decline in fertility appears to be the most likely trend in Cambodia, though the pace of such decline, and at what point it is likely to end, is very difficult to predict. Cambodia is in a favourable demographic zone where fertility is in the vicinity of replacement level, and the dependency ratio will continue falling for another 25 years. It still faces considerable population growth as a result of population momentum, but with sound planning, this growth can be coped with. Cambodian planners need to take maximum advantage of the favourable age structure to achieve the goal of reaching upper middle income status by 2030, and upper income status by 2050.

Cambodia has done remarkably well in becoming one of Asia's star performers in socio-economic development. Its economic growth has continued at a remarkably rapid pace. School enrolment ratios have continued to increase steadily. The danger is that these successes could lead to complacency. The quality and relevance of the education Cambodia's children are receiving are significantly deficient in relation to the challenge of fitting those who are graduating from this system into the kinds of jobs the economy needs to provide to achieve upper middle income status by 2030. Cambodia must increase education's share in its overall government expenditure patterns to achieve its goals for educational quality. Aspects of Cambodia's economic performance also face challenges moving forward. The ultimate impact of COVID-19 remains to be seen, but it has already raised the proportion of the population living in poverty.

Sound planning is the key to ultimate success. Cambodia's "Rectangular Strategy for Growth, Employment, Equity and Efficiency", and the planning mechanism based on it, have provided a sound platform for the remarkable advances in recent years.

# Chapter I

## Introduction

The objective of this policy research undertaken by the General Secretariat for Population and Development of the Ministry of Planning (MoP), in collaboration with UNFPA is to conduct an analysis of the Demographic/Gender Dividend and its Profile of Cambodia (DDPC) and to provide a sound evidence-based policy and strategic directions for the socio-economic development of the country, aiming at contributing to government's efforts to pursue post-COVID socio-economic recovery plan, ensure the attainment of the ICPD Programme of Action (ICPD-PoA) and Cambodia Sustainable Development Goals (CSDGs)'s indicators by 2030, ultimately to realize Cambodia's vision of becoming an upper-middle income country by 2030 and high income country by 2050 by way of transforming Cambodia's economy from a traditional to a digital economy and society. The study seeks to identify areas where current policies may need modification to benefit most effectively from the demographic dividend and the gender dividend.

The methodology of the study is essentially an in-depth review of the trends in Cambodia's population and its age structure, the policies currently in place to deal with this changing population and the interaction of demographic change with other aspects of socio-economic development. Using the new population projections for Cambodia, the study will analyse the future dynamics of population change in Cambodia, and the relation of this to the demographic and gender dividends.

The study is based on a detailed examination of relevant data available for Cambodia, including census reports for 1998, 2008 and 2019, socio-economic surveys (conducted annually since 2013), Demographic and Health Surveys (DHS) for 2000, 2005, 2010 and 2014, Ministry of Planning documents, and other relevant official reports such as the *National Population Policy 2016-2030*, the *National Social Protection Policy Framework 2016-2025*, the *National Ageing Policy 2017-2030*, the *National Strategic Development Plan 2019-2023*, and the *Rectangular Strategy for Growth, Employment, Equity and Efficiency: Building the Foundation Toward Realizing the Cambodia Vision 2050, Phase IV*. Reports on Cambodia by the World Bank, ADB, UN/ESCAP, UNDP (notably the *Human Development Report Cambodia 2019*), UNICEF, ILO, and WHO have also been studied. Other literature not specifically on Cambodia, but relevant to methodological aspects of the report has also been consulted - for example, on the demographic dividend, the gender dividend, alternative measurements of ageing, and use of detailed models such as the National Transfer Accounts (NTA) to reveal policy approaches to realize most effectively the benefits of the demographic dividend.

A Consultation Meeting on Demographic and Gender Dividends and its Profile in Cambodia, held on 16 September 2021, provided very useful feedback from the 140 participants from Cambodian government agencies and development partners. The comments were taken into account in the final revision of the document.

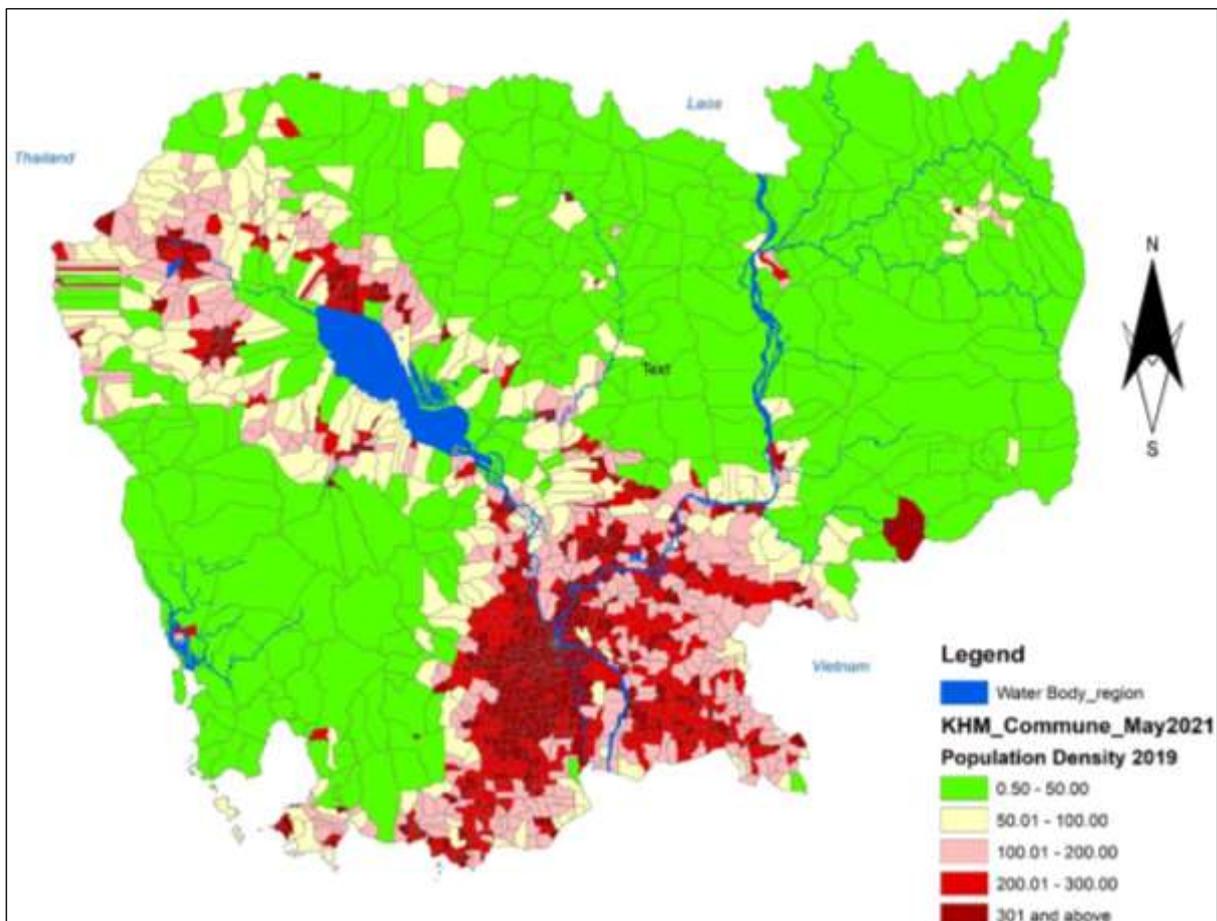
## Chapter II

### Cambodia's Demographic and Development Situations and Trends

#### 2.1 Population distribution and density

Population distribution and density is greatly influenced by the topography. As shown in Map 2.1, the densely settled areas of Cambodia are those in the lower Mekong Delta, adjoining the Mekong Delta regions of southern Vietnam, including the capital city of Phnom Penh; and to a lesser extent, areas of the central region surrounding the Tonle Sap. The more hilly and mountainous areas are much more sparsely populated.

**Figure 2.1. Map of Cambodia's population density by commune, 2019**



Source: National Institute of Statistics

#### 2.2 Population growth since 1998

Cambodia has conducted population censuses in 1998, 2008 and 2019. These provide a sound basis for examining population growth over time. Table 2.1 provides some relevant data.

Population growth has slowed slightly in the 2008-2019 period. The urban population growth rate has been very rapid, and the rural population actually declined in absolute numbers between 2008 and 2019. This was more the result of re-classification of some communes from rural to urban status than of migration from rural to urban areas, although this was also occurring, particularly to the capital city, Phnom Penh (National Institute of Statistics,

forthcoming). Without re-classification, the rural population would have continued to increase.

**Table 2.1. Cambodian population change, 1998-2019**

Variable	1998	2008	2019	Average annual growth rate	
				1998-2008	2008-2019
Total population	11,437,656	13,395,682	15,552,211	1.5	1.4
Males	5,511,408	6,516,054	7,571,837	1.6	1.5
Females	5,926,248	6,879,628	7,980,374	1.4	1.4
Urban population	2,095,074	3,635,177*	6,135,194	5.7	4.9
Rural population	9,342,582	9,760,505*	9,417,017	0.4	-0.4
No. of households	2,162,086	2,817,637	3,553,021	2.7	2.1

**Source:** Population Census Reports for 1998, 2008 and 2019. \*The urban population recorded in the 2008 Population Census was reclassified in 2011 (NIS 2011). The revised urban and rural populations for 2008 are used in this table.

It should be noted that one factor that could influence the inter-censal growth rate of the population is the number of Cambodians abroad. The NIS noted that according to the Report of the 2018 Annual General Meeting of the Ministry of Labour and Vocational Training, 1,235,993 Cambodian migrants were working abroad. We do not know what the number was at the time of the 1998, 2008 or 2019 Population Censuses.

Table 2.2 gives details of population growth by region and province over the 1998-2019 period. The growth of Cambodia's population over the 1998-2019 period was most rapid in the relatively sparsely populated Plateau and Mountains region. In the 1998-2008 period, this rapid growth was marched by the Tonle Sap region, but population growth in that region slowed considerably in the 2008-2019 period. Focusing on individual provinces, a number in the Plateau and Mountains region (Mondul Kiri, Preah Vihear, Ratanak Kiri and Stung Treng) had rapid growth throughout the period, as did Otdar Meanchey in the Tonle Sap region and Phnom Penh in the Central Plain region.

**Table 2.2. Population growth by region and province, 1998-2019**

	Total population			Annual growth rate	
	1998	2008	2019	1998-2008	2008-2019
<b>CENTRAL PLAIN</b>	<b>5,898,305</b>	<b>6,547,953</b>	<b>7,644,295</b>	<b>1.0</b>	<b>1.4</b>
Kampong Cham*	1,608,914	925,992	899,791	0.4	-0.3
Tbong Khmum*	n.a.	764,000	776,841	n.a.	0.3
Kandal	1,075,125	1,091,170	1,201,581	1.6	0.8
Phnom Penh	999,804	1,501,725	2,281,951	2.8	3.2
Prey Veng	946,042	947,372	1,057,720	0.0	1.0
Svay Rieng	478,252	482,788	525,497	0.1	0.8
Takeo	790,168	844,906	900,914	0.7	0.6
<b>TONLE SAP</b>	<b>3,505,448</b>	<b>4,356,705</b>	<b>4,852,964</b>	<b>2.1</b>	<b>1.0</b>
Banteay Meanchey	577,772	677,872	861,883	1.6	2.2
Battambang	793,129	1,025,174	997,169	2.3	-0.3
Kampong Chhnang	417,693	472,341	527,027	1.2	1.0
Kampong Thom	569,060	631,409	681,549	1.0	0.7
Pursat	360,445	397,161	419,952	0.7	0.5
Siem Reap	696,164	896,443	1,014,234	2.5	1.1
Otdar Meanchey	68,279	185,819	276,038	8.6	3.6
Pailin	22,906	70,486	75,112	11.2	0.6
<b>COASTAL AND SEA</b>	<b>816,201</b>	<b>960,480</b>	<b>1,072,468</b>	<b>0.8</b>	<b>1.0</b>
Kampot	528,405	585,850	593,829	1.0	0.1
Koh Kong	132,106	117,481	125,902	0.1	0.6
Preah Sihanouk	155,690	221,396	310,072	2.5	3.1
Kep**	n.a.	35,753	42,665	2.2	1.6
<b>PLATEAU AND MOUNTAINS</b>	<b>1,189,042</b>	<b>1,530,544</b>	<b>1,982,484</b>	<b>2.2</b>	<b>2.4</b>
Kampong Speu	598,882	716,944	877,523	1.8	1.8
Kratie	263,175	319,217	374,755	1.9	1.5
Mondul Kiri	32,407	61,107	92,213	6.3	3.7
Preah Vihear	119,261	171,139	254,827	3.6	3.6
Ratanak Kiri	94,243	150,466	217,453	4.7	3.3
Stung Treng	81,074	111,671	165,713	3.2	3.6
<b>CAMBODIA</b>	<b>11,437,656</b>	<b>13,395,682</b>	<b>15,552,211</b>	<b>1.5</b>	<b>1.4</b>

**Source:** Adapted from National Institute of Statistics, 2019, Tables 2.3 and 2.5; National Institute of Statistics, 2020, Table 2.2.1.

\*Tboung Khmum, formerly part of Kampong Cham, was created on 31 December 2013.

\*\*Kep, formerly part of Kampot province, was created in December 2008.

### **2.3 Trends in key demographic variables**

Mortality and fertility trends according to the data in successive Cambodian Demographic and Health Surveys and the 2019 Population Census are shown in Table 2.3. There were remarkable improvements in adult and maternal mortality in the brief 9-year period between 2005 and 2014, and in infant and under-5 mortality in the 19-year period 2000-2019. All the estimates are subject to a margin of error, but the overall trend is very clear. The decline in infant and under-5 mortality levels to roughly one-fifth of their 2000 level in the space of 19 years is particularly impressive.

**Table 2.3. Trends in mortality and fertility indicators, 2000-2019**

	2000	2005	2010	2014	2019
<b>Adult mortality rate, age 15-49</b>					
Women	n.a.	3.12	2.5	1.96	n.a.
Men	n.a.	5.18	4.1	3.50	n.a.
<b>Maternal mortality ratio</b> (deaths per 100,000 live births)	n.a.	472	206	170	141
<b>Infant mortality rate</b>	95	66	45	28	18
<b>Under-5 mortality rate</b>	124	83	54	35	28
<b>Specific fertility rate by age of mother</b>					
Age 15-19	51	47	46	57	32
Age 20-24	191	175	173	162	126
Age 25-29	203	180	167	152	137
Age 30-34	165	142	121	102	108
Age 35-39	118	91	71	51	62
Age 40-44	55	41	28	28	28
Age 45-49	15	5	4	5	10
<b>Total fertility rate<sup>1</sup></b>	<b>4.0</b>	<b>3.4</b>	<b>3.0</b>	<b>2.7</b>	<b>2.5</b>

**Source:** Cambodia DHS 2005, 2010, Tables 10.3 and 10.4; Cambodia DHS 2014, Tables 5.3.2, 6.3.2, 11.3 and 11.4; figure 11.1. Population Census Report, 2019, Table 8.2.1 and Figure 8.4.1. The adult mortality estimates are for the period 0-6 years preceding the survey, and the child mortality estimates for the period 0-5 years preceding the survey. The fertility estimates are for the period 0-5 years preceding the survey.

It is important to note that urban-rural difference in mortality, especially child mortality rate, remains, according to the 2019 Population Census report. The report also presents estimates of expectation of life at birth, which reflects mortality conditions at all ages. The 2019 life expectancy was 75.5 (75.6 in urban areas and 74.5 in rural areas; 74.3 for males and 76.8 for females). This is almost 17 years higher than the life expectancy of 58.6 in 2000, as estimated by the United Nations Population Division, a rise reflecting the remarkable achievements in recent years in improving health conditions and lowering mortality rates.

Table 2.3 also shows a steady decline in fertility, a continuation of sharp decreases in fertility rates in the late 1980s and 1990s. The declines up to 2014 were sharpest at ages above 35, indicating a desire to cease childbearing rather than an effort to space births more widely. However, these rates appear to have risen slightly since 2014. In any case, a trend toward wider spacing of births was also part of the picture. In 2014, 13% of non-first births in Cambodia occurred less than 24 months after the preceding birth, as compared with 16% in 2010 and 18% in 2005 (NIS et al., 2015:74).

Examination of trends in Cambodia's fertility over time shows that Cambodia lagged most of Southeast Asia in fertility decline, and is a latecomer to the group of countries with near-replacement level fertility. As recently as the 2005-2010 period, Cambodia, along with Lao PDR and Philippines, were the only large Southeast Asian countries with a total fertility rate (TFR) still above 3.2. By 2015-2020, Cambodia's TFR had fallen considerably, to 2.5,

<sup>1</sup> The TFR in a given year is the number of children a woman would give birth to over her reproductive life if she followed the age-specific fertility rates prevailing in that year.

<sup>2</sup> Timor Leste was in a different league, with a TFR of 5.3.

and those of Lao PDR and the Philippines had also fallen to much the same level. The key issue now is to project the future trend in Cambodia's fertility rate – whether it will stall at roughly its present level, as has happened in countries such as Indonesia and Vietnam, or whether it will continue to decline to well below replacement level, as has happened in Thailand and Malaysia.

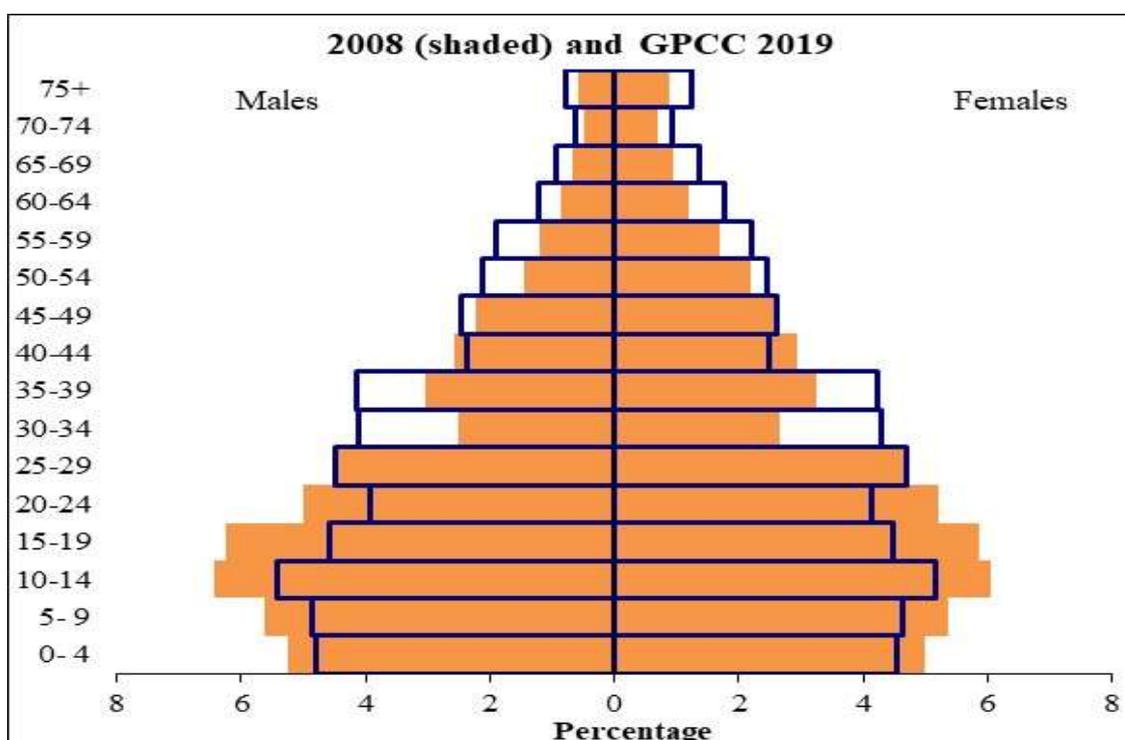
There was a substantial increase between 2008 and 2019 in the proportion of the population who were married (Table 2.4). Widowhood among females decreased. The differences in marital status are much more marked when disaggregated by age group. For example, the Cambodian Demographic and Health Survey 2014 (Table 9.1) showed that, while only 3% of women aged 15+ were widowed, at ages 45-49, 11% were widowed, a far higher proportion than for males of the same age group (2%). The report notes that this is likely due to men's greater propensity to remarry after having been widowed.

**Table 2.4. Marital status of the population aged 15+, 2008 and 2019 (%)**

Marital status	2008		2019	
	Males	Females	Males	Females
Never married	37.0	28.9	31.2	24.1
Married	60.8	59.6	65.9	66.4
Widowed	1.3	8.3	1.5	6.3
Divorced	0.8	3.1	1.3	3.0
Separated	0.1	0.2	0.1	0.2
<b>TOTAL</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>

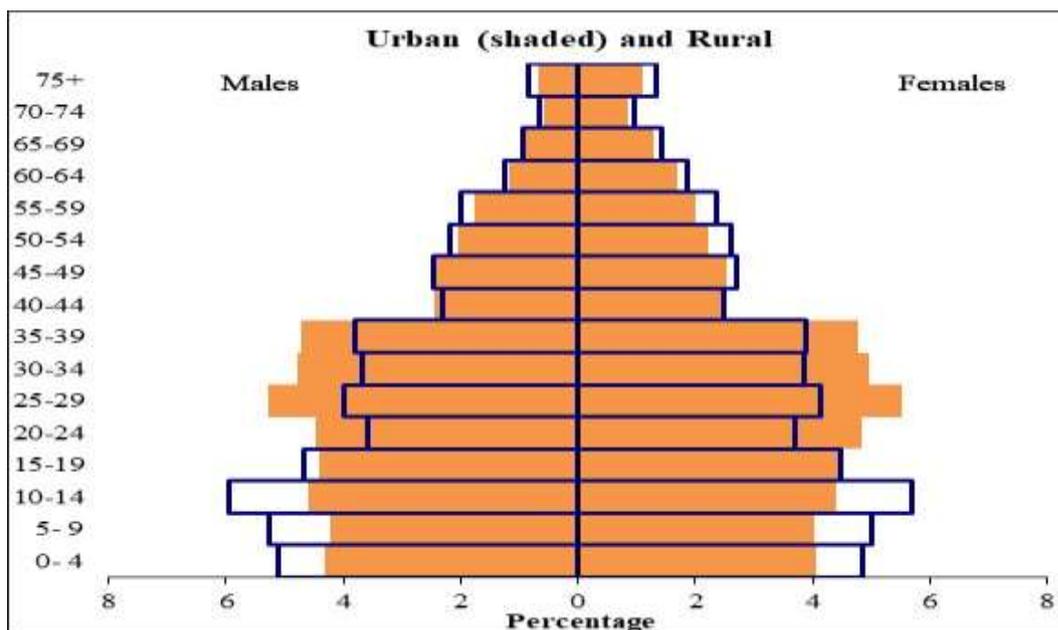
Source: Population Census Report 2019, Table 3.5.1

**Figure 2.2. Population pyramid, Cambodia, 2008 and 2019**



Source: National Institute of Statistics

**Figure 2.3. Population pyramid, Cambodia urban and rural, 2019**



Source: National Institute of Statistics

Cambodia’s age structure is heavily influenced by the very high death rates and low birth rates of the Khmer Rouge period. This left a severe undercutting of Cambodia’s age pyramid at ages 30-34 in 2008, moving up roughly to ages 40-44 in 2019 (see Figure 2.2). Subsequently, the steady decline in fertility over the 1990s and early 2000s led to some undercutting of the pyramid at ages 0-9 in 2008, an undercutting which could have been expected to move up the pyramid to ages 10-19 in 2019, but which somewhat surprisingly remained at ages 0-9.

The urban and rural population pyramids (Figure 2.3) reflect the different forces acting on these populations. Both the rural and urban age pyramids show a filling in, between 2008 and 2019, of the markedly undercut groups aged in their 30s, similar to that observed for Cambodia as a whole. But there is also evidence in the 2008 urban pyramid (not shown) of a bulge in age groups 15-29, reflecting considerable rural-urban migration in the years prior to that. This bulge was no longer apparent in the 2019 urban age pyramid, suggesting that there had been a less marked pattern of rural-urban migration of young people in the years leading up to the 2019 Census.

The sex ratios of Cambodia’s population have been affected by historical events, notably the dreadful mortality of the Khmer Rouge period, which affected both sexes, but males even more than females. This has left Cambodia’s overall sex ratio as 94.9 males for every 100 females. At young ages (0-14) the sex ratio is about 104, reflecting a normal sex ratio at birth and, it would appear, no particular favouring of one sex over the other in the way children are raised, food is provided or needed medical attention sought. However, at ages beyond 20, the ratio declines below 100, and falls very sharply at ages in the 50s, to a ratio of about 85 and even lower (in the 60s) at ages beyond 60, probably reflecting mainly the even greater excess mortality and migration abroad among males than among females in the Khmer Rouge period.

## ***2.4 Urbanization***

Between 2008 and 2019, Cambodia's urban population increased by 64.6%, and the urban share of population rose from 27.1% to 39.1%. The rural population declined by 4.7%. This decline resulted partly from rural-urban migration, but also from the reclassification of many formerly rural communes as urban communes, either because they met the three objective criteria for designation as urban areas (population size of more than 2,000, population density of more than 200 per sq. km, and share of non-agriculture in total employment of more than 50%), or because they were awarded urban status following certain administrative criteria.

There are wide variations in the level of urbanization of the different provinces of Cambodia as of 2019, and in the trend in the urban share of their population between 2008 and 2019. Some provinces - Kampong Thom, Kampot, Preah Vihear and Prey Veng - have below 11 per cent of their population living in urban areas. At the other end of the scale, Phnom Penh is 100% urban, followed by Preah Sihanouk (80 per cent), Kep and Pailin (both above 75%), Kandal (65%) and Kampong Speu (59%). Whereas the level of urbanization of some provinces (e.g. Kandal, Kampong Chhnang, and Svay Rieng) increased rapidly over the period, in some the urban population (as well as the urban share of the population) actually declined (Battambang, Kampong Cham and Tbong Khmum).

A recent study (NIS, forthcoming) has estimated the proportion of the urban population growth that took place between 2008 and 2019 that was due to different elements. Natural increase of the pre-existing urban population was responsible for 19% of the growth, migration for 13% and reclassification for 68% (more than two thirds).

The capital city of Phnom Penh dominates Cambodia's urban scene. The urbanized area of Phnom Penh has been spreading into surrounding provinces – the northern parts of Kandal, the eastern parts of Kampong Speu and the northern parts of Takeo. When these areas are included as part of the Phnom Penh Extended Metropolitan Region (EMR), the population of the functional Phnom Penh metropolitan region is raised to over 3.7 million in 2019, highlighting just how dominant Phnom Penh is in Cambodia's urban hierarchy. Cambodia's total urban population is 6.135 million. The Phnom Penh EMR accounts for well over half (61 per cent) of this population.

Migration has played an important role in the differential population increase in different parts of the country. One way of considering the data on rural-urban redistribution of the population through migration is to examine the breakdown of all moves into four categories: rural to rural moves; rural to urban moves; urban to rural moves, and urban to urban moves. The 2019 Population Census report has a table showing these streams in 2008 and in 2019, and it is reproduced as Table 2.5. According to the 2008 Census, the predominant movement was rural to rural, followed in second place by rural to urban. The 2019 Census showed a major change: rural to urban became the predominant stream, and urban to urban movement also slightly exceeded rural to rural movement. This change reflects the rapid process of urbanization that occurred between the two census years.

**Table 2.5. Internal migration streams between urban and rural areas, 2008 and 2019**

Migration streams	Both sexes		Male		Female	
	2008	2019	2008	2019	2008	2019
Number of internal migrants	3,457,228	3,182,615	1,744,044	1,665,175	1,713,184	1,517,440
<b>Migration stream (% of total migrants)</b>						
Rural to rural	50.9	29.0	53.3	30.7	48.5	27.1
Rural to urban	27.5	34.0	25.6	32.4	29.5	35.7
Urban to rural	6.5	7.0	6.8	7.6	6.2	6.3
Urban to urban	15.1	30.0	14.4	29.3	15.9	30.8
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>

Source: National Institute of Statistics

Migration has contributed considerably more to population growth in urban areas than in rural areas. For Cambodia as a whole, lifetime migrants represent 26% of the urban population but only 7% of the rural population; likewise, recent migrants are 13% of the urban population but only 2.3% of the rural population.

### **2.5 Socio-economic development**

Cambodia's record of socio-economic development in recent times has been most impressive. Cambodia sustained an average annual economic growth rate of 7.6 per cent in the 1994-2015 period, ranking sixth in the world; it reached lower middle-income status in 2015 and aspires to attain upper middle-income status by 2030 and high income status by 2050. These impressive achievements have been built upon openness to trade and capital flows and driven by preferential trade treatment and large official development assistance (ODA) and foreign direct investment inflows (FDI). In more recent times, ODA has largely been replaced by FDI as Cambodia's strategic direction shifted towards private sector growth rooted in a liberal market economy (Royal Government of Cambodia, 2019: 2). Faced with a rapidly growing labour force, Cambodia has been very successful in creating jobs for youth and women in labour-intensive activities.

The structure of the economy has changed drastically during this period of rapid growth. Dividing the economy into three broad sectors – agriculture, industry and services – in the short period between 2012 and 2018, agriculture's share of value added fell from about 34% to 21%, while industry's share rose from about 24% to 33%; the share of services rose only slightly (Royal Government of Cambodia, 2019: 100). The shift of production from agriculture to industry was not fully reflected by a similar shift in employment; between 2008 and 2019, the proportion of workers in agriculture fell from 72% to 55%, and the actual number from 5.014 million to 4.711 million.<sup>3</sup> The 55% of Cambodia's workforce employed in the agriculture sector thus produce 21% of Cambodia's output, reflecting the much lower productivity of Cambodia's agriculture compared with the industrial and services sectors.

Notwithstanding Cambodia's many impressive achievements, the country faces new issues in its drive to continue its impressive growth record. As summarized by the World Bank (2017: 13-17), labour productivity gains have been lower than in other rapidly growing economies, partly due to lower capital intensity. Cambodia could face issues of declining competitiveness in its prominent low-end garment production and tourism sectors. Relatively

<sup>3</sup> Figures from 2019 Population Census report, Table 5.6.2.

low educational attainment and performance, despite rising enrolment rates, imposes constraints on economic diversification and upgrading; childhood malnutrition and other early life deprivations negatively affect the quality of Cambodia's human resources. There is limited social protection to assist vulnerable households deal with financial and weather shocks. Governance shortcomings affect the competitiveness of firms, the quality of service delivery by the public sector and access to assets and opportunities. Infrastructure gaps include lack of access in many areas to all-weather roads, impacting food value-chains and access to health, education and other public services.

Cambodia has managed to lower the proportion of the population living under the national poverty line from 47.8% in 2007 to 13.5% in 2014 – a remarkable achievement. The poverty rate was four times as high in 1994. However, the vast majority of families who escaped poverty did so by a small margin. Around 4.5 million people remain near-poor and vulnerable to falling back into poverty when exposed to economic and other external shocks (World Bank, 2021). Analysis undertaken in 2014 suggested a reduction of just 70 cents in daily income would more than double the poverty headcount ratio (UNDP, 2019:24). COVID-19, of course, was a major shock, and Cambodia's economy registered negative growth of -3.1% in 2020, undoubtedly bringing more people below the poverty line.

Available data on income inequality shows that Cambodia has a relatively low level of inequality, with a Gini coefficient of 0.31 in 2012 compared to 0.38 in 1994 (UNDP 2019: 24) . Between 1990 and 2014, Cambodia was one of the more successful Asian countries in reducing inequality – by about 7 percentage points. Over the same period, Thailand did even better, reducing inequality by about 8 percentage points, but inequality in Vietnam increased by about 3 percentage points and in Indonesia by about 8 percentage points (UN/ESCAP, 2018, Figure 1.3). In Cambodia, human development losses due to inequality have fallen (UNDP 2019, Figure 1.7).

As well as inequalities of outcomes such as income, countries can also face considerable inequality of opportunities. Comparing the richest with the poorest quintile, in Cambodia there are fairly wide gaps in access to four or more years of education, though a considerably smaller gap in coverage of reproductive, maternal, newborn and child health interventions. The educational inequality gap in Cambodia is less than in Nepal, India, or Lao PDR, but more than in China, Indonesia, Philippines, Thailand and Mongolia. The health gap is about the same as in Indonesia, but less than in all the other comparator countries except Mongolia (IMF, 2016: Figures 4.13 and 4.14).

A summary of some other aspects of Cambodia's demographic, social and economic situation in a broader Asian context is provided in Table 2.6. Some of the information in this table will be referred to in later sections of the report, but some features of the table will be discussed here.

**Table 2.4. Some development indicators: Cambodia and comparator countries**

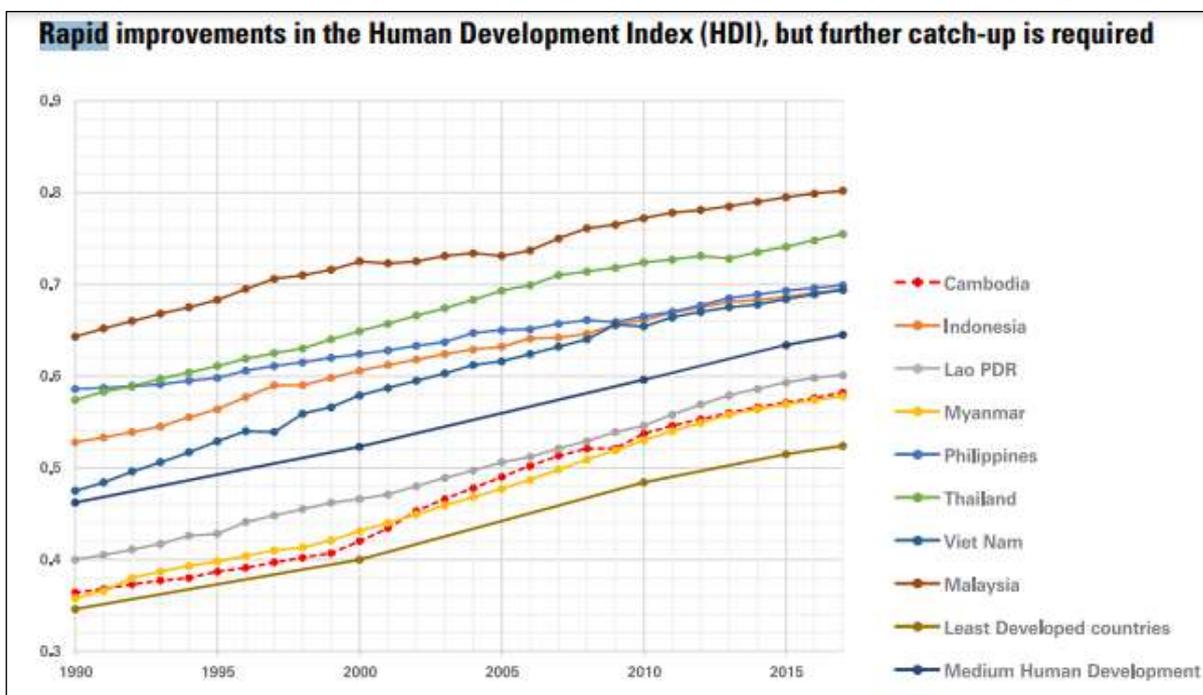
<b>Indicators</b>	<b>Cambodia</b>	<b>Thailand</b>	<b>Vietnam</b>	<b>Lao PDR</b>	<b>Myanmar</b>	<b>China</b>	<b>Indonesia</b>	<b>Malaysia</b>	<b>Bangladesh</b>	<b>India</b>
<b>Per capita GDP (USD) PPP 2019</b>	4,583	19,277	8,397	8,173	5,369	16,804	12,335	29,620	4,964	6,997
<b>Human development index 2019 (rank)</b>	144	79	117	137	147	85	107	62	133	131
<b>Human capital index 2020 (rank)</b>	118	63	38	126	120	45	96	62	123	116
<b>Gender development index (value)</b>	0.922	1.008	0.997	0.929	0.954	0.961	0.940	0.972	0.904	0.820
<b>Under 5 mortality rate 2015-20</b>	28	9	21	48	48	12	25	7	32	39
<b>Maternal mortality ratio 2017</b>	160	37	43	185	250	29	177	29	173	145
<b>TFR 2015-20</b>	2.52	1.53	2.06	2.70	2.17	1.69	2.32	2.01	2.05	2.24
<b>FEMALE LFPR 2018</b>	76	59	73	37		64	54	56	36	21
<b>% of deliveries in health facility</b>	83	n.a.	n.a.	n.a.	37	n.a.	75	n.a.	50	79
<b>% of births attended by trained personnel</b>	89	n.a.	n.a.	n.a.	66	n.a.	91	n.a.	53	81
<b>% of children aged 12-23 months fully vaccinated</b>	65	n.a.	n.a.	n.a.	55	n.a.	65	n.a.	89	62
<b>% stunted, children under 5 - ~2017</b>	32	13	24	33	29	5	31	22	31	38
<b>% wasted, children under 5 - ~2017</b>	10	8	4	9	7	2	11	11	8	21
<b>Net enrolment rate, primary education, 2019</b>	90.6	n.a.	98.7	91.6	98.1	n.a.	94.4	99.7	n.a.	92.3
<b>Gross enrolment rate, secondary education, 2019</b>	n.a.	115.2	n.a.	65.8	68.4	n.a.	88.9	83.8	72.6	73.8
<b>Government expenditure on education as % of GDP</b>	2.16	n.a.	4.17	2.94	1.93	n.a.	3.58	4.16	1.33	n.a.

Source: Per capita GDP, human capital index: World Bank; human development index, gender development index from UNDP; TFR and under 5 mortality from UN Population Division; MMR estimates from WHO et al., 2019; delivery, vaccination, stunting and wasting data from DHS surveys around 2017 (2019 MICS for Thailand) and from World Bank database; female LFPR from ILO, ILOSTAT database; enrolment data and educational expenditure from UNESCO UIS statistics.

As measured by income levels (per capita GDP), Cambodia is the lowest of all the countries in the table. It also ranks second lowest in the Human Development Index (HDI). However, it is noteworthy that Cambodia ranks much better in some of the other indicators – for example, the under-5 mortality rate, and the percentage of deliveries in a health facility and attended by trained personnel.

The human development index (HDI), which incorporates education, health and incomes, is a good overall indicator of a country’s overall progress. Taking a longer-term view, Cambodia’s overall progress has been strong. Since 1990, Cambodia’s HDI has shown the second highest rate of improvement in the Asia-Pacific and the 14<sup>th</sup> fastest in the world (UNDP 2020).<sup>4</sup> Yet its position of 144 out of 189 countries shows how far it still has to go. According to this indicator (see Figure 2.4), Cambodia lags all the comparator countries in Table 2.6 above, except Myanmar, although the human capital index shows it ranking above Myanmar, Lao PDR and Bangladesh.

**Figure 2.4. Human Development Index of selected countries**

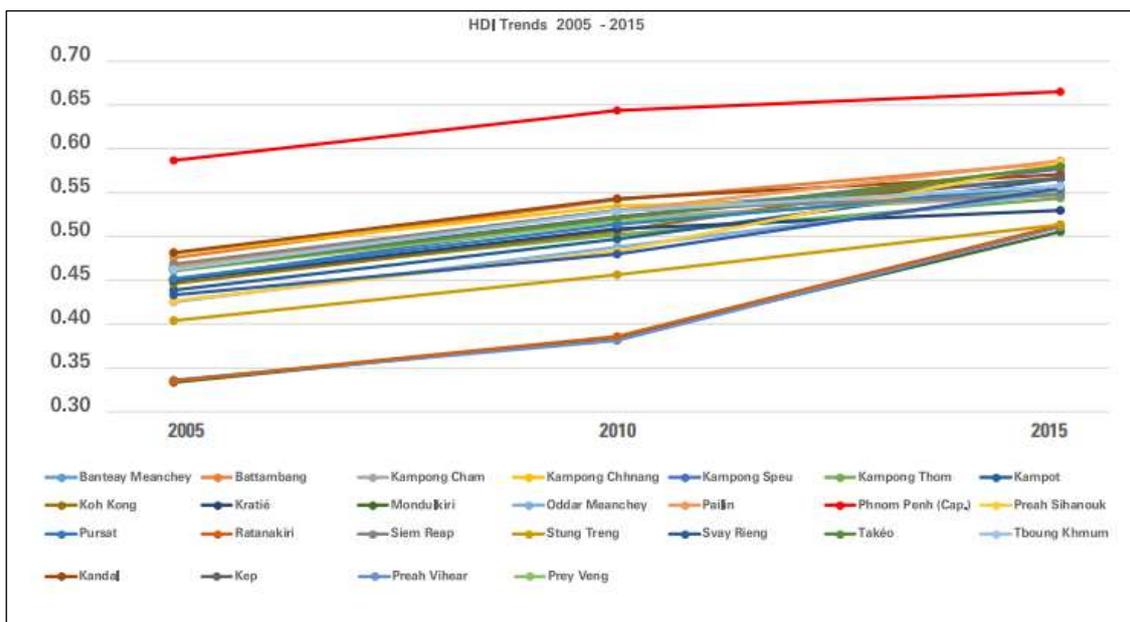


Source: UNDP 2019, Figure 1.5.

Useful information is available on provincial differences in the HDI (Figure 2.5). Phnom Penh is well ahead of other provinces, but the differences between it and the lowest-ranking provinces have narrowed. Over the decade to 2015, the three most deprived provinces (Mondulhiri, Preah Vihear and Ratanakiri) substantially narrowed their differences with the other provinces, so that by 2015, the pattern showed only two groups, namely Phnom Penh and the rest.

<sup>4</sup> Strong improvement in the life expectancy index drove advances in Cambodia’s HDI (UNDP, 2019: Figure 1.6).

**Figure 2.5. HDI trends in provinces, 2005-2015**



**Source:** UNDP 2019, Figure 1.11

The World Bank notes that despite the progress in health and education outcomes, human capital indicators in Cambodia lag behind other lower middle-income countries. “A child born in Cambodia today will be only 49 percent as productive when grown as she could be if she enjoyed full quality education, good health and proper nutrition during childhood” (World Bank, 2021). Lower secondary school completion rates are at 45% in 2019, which is significantly lower than the average for lower middle-income countries.

The aspirations of the Cambodian government are clearly set out in the document outlining the Phase IV “rectangular strategy” for growth, employment, equity and efficiency. More details about the document will be provided in Chapter 9. Here, a quotation from the Introduction to the Rectangular Strategy document will give a sense of the justified pride felt by the government in the substantial accomplishments of recent years:

Cambodia, previously perceived as an economically-underdeveloped country mired in poverty and food insecurity, is now a food exporting country, one of the fastest growing economies in the world and a great performer in terms of poverty reduction and improvement in social indicators which has recently graduated from low-income country status to lower middle-income country. (Royal Government of Cambodia, 2018: 1).

The rectangular strategy is translated into specific development objectives by the National Strategic Development Plan 2019-2023. This highlights a number of key policy priorities and actions over the plan period. The first is acceleration of governance reform. Then come human resource development (emphasizing education and technical training, public health and nutrition and gender equity and social protection), economic diversification (including, among other things, preparing for the digital economy and the Fourth Industrial Revolution), private sector and job development (including, among other things, promoting small and medium enterprises and entrepreneurship), and finally, inclusive and sustainable development, including promotion of the agriculture sector and rural development, as well as strengthening urban planning and management (Royal Government of Cambodia, 2019: Chapter IV).

## Chapter III

### The Demographic Dividend

#### *3.1. Demographic dividend*

Demographic dividend is an economic growth potential resulting from changing in the population age structure, especially during which the proportion of working age population (aged 15-64) is much larger than that of the non-working age population (aged under 15 and aged 65 and above). The potential for economic growth can be enormous, depending on whether the right policies are in place and investments in human capital, especially among young population, are substantial and strategic.

In the late 1990s, discussion of the remarkable success of East Asian economies began to focus on aspects of their fertility trends, population growth and age structure changes (Bloom and Williamson, 1998; Bloom, Canning and Sevilla, 2003). The argument was that the demographic transition, particularly a decline in fertility, presents the economy with an opportunity in the form of a surge in the relative size of the working-age population (crudely approximated as age 15-64). This change in age structure leads to economic growth opportunities in two principal ways. First, by increasing the proportion of working-age persons in the total population it increases the ratio of economically active individuals to dependants. Second, a reduction in the youth dependency ratio allows for increased investment in child health and education, in the long run enhancing overall productivity and improving the skill level of the labour force. In the longer run, aggregate savings can increase as the large working age population save for retirement. This increase in savings can increase investment, leading to economic growth. This is referred to as the “second demographic dividend”.

The surge in the relative size of the working-age population can be tracked for those countries (including almost all countries of Asia) that have experienced substantial declines in fertility. This is usually done by tracking the dependency ratio (the sum of the population aged 0-14 plus the population aged 65 and above, divided by the population aged 15-64, times 100 – or alternatively, the sum of the population aged 0-14 plus the population aged 60 and above, divided by the population aged 15-59, times 100). Typically, in a high fertility population, the dependency ratio (using age 60 as the cut-off for old population) is around 90 to 100, then as fertility declines to replacement level it falls to a low point of around 45 to 55.<sup>5</sup> After some time, if fertility remains at replacement level or falls even further, the dependency ratio begins to climb again, and can reach levels of over 100 as the rising proportion of population in the old ages (60+) outstrips the decline in the proportion of children.

One way to track the potential demographic dividend in a population is to estimate (or project) when the dependency rate falls below a certain value (say 65 when using the 60+ population as the elderly population), when it reaches its lowest point, and when it climbs as high as 65 again. A dependency ratio of 65 is well below the 90-100 typical of high fertility populations and the 100+ typical of very low fertility populations, and it is reasonable to argue that while the dependency ratio remains below 65, the country continues to benefit from a demographic dividend. This was the gist of the argument used in a study on sustainable

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<sup>5</sup> Using age 65 as the cut-off for the elderly population, in a high fertility population the dependency ratio is above 80, then declines to around 40 or 50 at its lowest point.

development and changing demography Asia and the Pacific region (Jones, 2019).<sup>6</sup>

Importantly, the trends in the share of the two dependent age groups – 0-14 and 60+ - move in opposite directions as fertility declines, and the trend in the overall dependency ratio is the net outcome of these trends. In Cambodia, the child dependency ratio fell from 82.5 in 1998 to 47.6 in 2019, while the aged dependency ratio rose from 10.3 to 14.4 over the same period; the net result was a decline in the overall dependency ratio from 92.8 to 62.0. Later in the chapter, projections of trends in these two components of the dependency ratio will be examined, keeping in mind that in analysing these differing trends in dependency on the prospects for more rapid economic growth, the pattern of needed government investment, and the need for social and community support services, the very different pattern of needs of the child population and the elderly population have to be taken into account.

The great majority of Asia-Pacific countries currently are enjoying a demographic dividend, though some with the lowest fertility rates, or where fertility declined earliest, have passed the most favourable point of lowest dependency ratios<sup>7</sup> (and Japan has already exited the favourable period, because of its rapid ageing). Although some of the other countries are also witnessing rapid ageing, they are still in a phase where they can reap a first demographic dividend. Even China and Thailand still have another decade to do so.

It is sometimes argued that the benefits of low dependency ratios end when these rates begin to rise through ageing. This ignores the fact that the ratio is still very low in historic terms until it climbs back to 65 or 70. It is true that in some countries (for example, Bangladesh, China, India, Iran, the Republic of Korea and Thailand) the labour force begins to contract within 10 years after reaching the low [point of the dependency ratio (UNDP, 2016, Table 2.1)]. But in other countries, it continues to increase for much longer (20 years in Sri Lanka, and 25 years in the Philippines and Viet Nam, according to the United Nations projections). The key point is that the benefit does not suddenly end either when the dependency ratio begins to rise or when the working-age population begins to contract. The age structure only gradually becomes less favourable for development, and the time taken for the dependency ratio to climb from its lowest point to reach 65 is typically between 20 and 35 years. The age structure remains quite favourable for development during this period.

Once the dependency ratio has climbed back up to 65, the level which it passed in its downward trend many decades earlier, countries can be expected to have fundamentally changed. They should now be relatively developed, with capital accumulation and technological progress providing a much greater capacity to manage a larger share of dependents. Effective realization of the first demographic dividend is the best way to prepare for population ageing and to increase the chances of realizing a second demographic dividend.

It cannot be overemphasized that there is nothing automatic about the dividend. If burgeoning numbers of young workers entering the labour force find themselves unemployed, underemployed or in work not befitting their educational background, the dividend is unlikely to be realized. Youth unemployment (according to the strict definition of unemployment) is low in Cambodia (2.4% in 2014, though it increased with level of educational attainment, reaching 7.3% for university-educated youth). Even using a broad definition of

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<sup>6</sup> That study, however, used the cut-off of age 65 as the beginning of old age.

<sup>7</sup> These countries include Sri Lanka, China, Taiwan, Republic of Korea and Thailand.

unemployment, the rate only rose to 3.3%<sup>8</sup> (Kanol (ed), 2015). Given that unemployment is not a viable option for the very poor, analysis of the overall labour market needs to take into account not only unemployment and underemployment, but also “working poverty”, which is much more common in Cambodia.

Another important point to note is that when the fertility decline to below-replacement level is more rapid, the dependency ratio declines more rapidly and reaches a lower level. This can be seen in countries such as China, Iran and the Republic of Korea, and is also the case in Cambodia, as the projections to be discussed later will show.

How long do most countries stay in the favourable zone, with dependency ratios below 65? This varies greatly, depending on the particular features of a given country’s demographic history, but most Asian countries that are well along in their demographic transition were in the zone (or are expected to be in the zone) for between 40 and 50 years. For Cambodia, total time in the favourable zone – including the 10 years already in the zone – is likely to be between 38 and 42 years.<sup>9</sup>

The demographic dividend is of major importance for Cambodia, as the changing age structure can play an important part in supporting more rapid socio-economic development. The remainder of this chapter will focus on how age structure changes resulting in a demographic dividend have developed in the past, and the prospects for further age structure changes in the future. Chapter 4 will then focus on ways of benefiting from the demographic dividend.

### ***3.2 Population age group structure***

Before beginning a detailed discussion of age structure trends in Cambodia, it should be stressed that most of the tabulations in the present chapter will show two alternative figures for the working age population and the old age population. One set of figures considers the working age population to be aged 15-59 and the old age population to be aged 60+; the other set considers the working age population to be aged 15-64 and the old age population to be aged 65+. The use of ages 15-59 and 60+ adheres to the general practice in Cambodia; the figures 15-64 and 65+ are more widely used in international comparisons.<sup>10</sup> Both sets of figures are, of course, only a rough approximation of reality. People enter and leave the workforce at different ages, depending on their circumstances, and most do not enter the workforce at precisely age 15, nor do most leave it at age 60, or 65.

### ***3.3 Trends in Cambodian population’s age structure, 1998-2019***

In recent decades, particularly because of the dramatic decline in Cambodia’s fertility rates since the late 1980s, the growth of the child population has slowed (and actually gone slightly into reverse), the working-age population has continued to grow rapidly, and the old

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<sup>8</sup> The strict definition of unemployment refers to persons without work, available to work and actively engaged in a job search. The “broad” definition excludes the job search criterion.

<sup>9</sup> Time in the favourable zone will be much shorter – about 24 years - if fertility remains constant. This is because the child dependency ratio would remain considerably higher than in the other projections. However, the constant fertility projection is an unlikely outcome.

<sup>10</sup> The United Nations Population Division in its presentation of dependency ratios does not use the age group 15-59 at all, but only 15-64, 20-64, 20-69, 25-64 and 25-69. With lengthened periods in educational institutions, an increasing proportion of adolescents and youth are delaying their entry into the workforce well beyond age 15.

age population has increased even more rapidly. Comparing the 1998 and 2019 census results shows the trends over slightly more than two decades. What does this comparison show? The results are given in Table 3.1. It is noteworthy that, in Cambodia, the working age population is generally expressed as those aged 15-59, and the old age population 60+. Because in most international comparisons, age groups 15-64 and 65+, this report utilizes both age group classifications here (and in later tables).

**Table 3.1. Population size by broad age groups, 1998, 2008 and 2019**

Age group	Population ('000)			Share of population (%)			% increase 1998-2019
	1998	2008	2019	1998	2008	2019	
0-14	4,895	4,513	4,572	42.8	33.7	29.6	-6.6
15-64	6,142	8,311	10,063	53.7	62.0	64.5	63.8
65+	400	571	918	3.5	4.3	5.8	129.5
15-59	5,934	8,038	9,596	51.9	60.0	61.7	61.7
60+	609	845	1,384	5.3	6.3	8.9	127.3
Total	11,438	13,396	15,552	100	100	100	40.6
Dependency ratio (old age considered 60+)				92.7	64.5	62.1	

Source: National Institute of Statistics

The decline in the share of the child population is very pronounced – from almost 43% in 1998 to less than 30% in 2019. This trend in the child population reflected the sharp decline in fertility (a halving of the TFR from 5.13 in 1990-95 to 2.52 in 2015-20 (United Nations estimates). The decline in the proportion of the child population was almost totally matched by the rise in the proportion of the working-age population (15-64). The share of the older population (aged 65+) actually rose substantially, but because the rise was from a very low base of 3.5% in 1998, the rise was only just over two percentage points, whereas the share of the working-age population rose by almost 11 percentage points (from 54% to 65%).

Another point about the older population also needs to be stressed. Although the number of older persons in Cambodia rose much more rapidly than those of the other main age groups between 1998 and 2019, the share of those aged 60+ or 65+ in Cambodia's population remains one of the lowest among the major Southeast Asian countries. Table 3.2 shows the list.

**Table 3.2. Proportions of the 60+ and 65+ age groups in Southeast Asian Countries 2020**

Country	Share of population aged 60+ (%)	Share of population aged 65+(%)
Singapore	20.9	13.4
Thailand	19.2	13.0
Vietnam	12.3	7.9
Malaysia	11.0	7.2
Indonesia	10.1	6.3
Myanmar	10.0	6.2
<b>CAMBODIA</b>	<b>8.9*</b>	<b>5.8*</b>
Brunei	9.5	5.6
Philippines	8.6	5.5
Lao PDR	6.8	4.3
Timor Leste	6.6	4.3

\*This figure is from the 2019 Population Census. The UN gives a 2020 figure of 7.6% for age 60+ and 4.9 % for 65+ (Source: UN Population Division, *World Population Prospects*, 2019.)

The emphasis of the present chapter will be on the future, not the past. But understanding the path by which Cambodia’s population reached its current situation is important in interpreting the projections of its future trends. These future trends will be assessed through the lens of the “demographic dividend”, an important concept in the study of population-development relationships.

### ***3.4. Alternative population projections for Cambodia***

There is room for differences of opinion about the prospects for further fertility decline in Cambodia. Among countries where fertility fell in fairly recent times to around the level reached in Cambodia in 2019 (TFR 2.5), three different patterns can be observed: (1) fertility stalls at around that level (Indonesia, Sri Lanka), or even in some cases rises somewhat (Egypt, Algeria, Morocco, Mongolia); (2) fertility continues to decline, but only gradually (Nepal, Bangladesh); fertility declines rapidly to levels well below replacement level (Thailand, China, Malaysia).

What can be expected in Cambodia?

The first thing to examine is the effect of compositional change in the population on fertility change. There are certain groups in Cambodian society that will become a larger share of the population in future. What are their fertility differentials? Table 3.3 gives the answers. It is important to compare urban and rural populations and those with different levels of educational attainment, because data are available for them, the data shows considerable differences, and the share of these groups in the population will change over time.

**Table 3.3. Cambodia TFR by location and education, 2016 and 2019**

	<b>DHS 2016</b>	<b>Census 2019</b>
<b>Cambodia</b>	<b>2.7</b>	<b>2.51</b>
<b>Location</b>		
Urban	2.1	2.22
Rural	2.9	2.81
<b>Education</b>		
No education	3.3	n.a.
Primary	3.1	n.a.
Secondary and higher	2.3	n.a.

Source: National Institute of Statistics

In Cambodia, the share of the urban population and the better-educated population is almost certain to rise over time, so if the fertility of the urban and rural populations, and of different educational attainment groups, in the population were to remain constant (generally, urban and better-educated populations have lower fertility rate), a decline in fertility could be expected on compositional grounds, which is the increasing share of the urban population and the better-educated population.

Compositional change, however, is only one factor influencing fertility levels. In countries where fertility has declined from high levels to replacement levels, the decline in fertility has swept through all groups in society, leading to much greater fertility decline than would have resulted merely from the changing urban-rural and educational composition of the population. That was what happened as well in Cambodia, particularly in the 1990s and 2000s.

Considering Cambodia's situation in future, what changes can be expected that will pervade the whole community? This is hard to predict, but if economic growth manages to get back on track after COVID-19 is dealt with, and a growth rate of 7% per annum can be regained, many employment opportunities will be opening up for (increasingly well educated) women, and this will increase the opportunity costs of having children. A further decline in fertility could be expected for this reason alone.

Therefore, a further decline in fertility appears to be the most likely prospect, but just how rapid this fertility decline is likely to be, and whether it is likely to lower Cambodia's fertility to replacement level and below, remains uncertain.

In looking ahead to probable trends in Cambodia's population over the 30-year period 2020-2050, three sets of projections will be considered.<sup>11</sup> They all assume no net international migration, and further decreases in mortality, consistent with recent trends and the gradual improvement in health conditions and health services in Cambodia.

The fertility trends in the three sets of projections are shown in Table 3.4. The projection with rapid fertility decline would see Cambodia reaching the fertility levels currently characterizing Japan and Thailand by 2045 and those currently characterizing Republic of Korea, Taiwan Province of China, and Singapore by 2050. Much can happen in the more than a quarter century to 2045, and these assumed trends, while they may seem extreme, could well be followed. The sharp fall in fertility in Thailand after it reached replacement level fertility around 1990 (reaching a TFR of just over 1.5 some 20 years later) is an example of what could happen in neighbouring Cambodia. The projection with slow decline shows a much more modest pace of decline, and the assumption that, having reached replacement level fertility around 2035, further fertility declines would be only slight. The constant fertility projection, while it is the least likely of the trajectories to be followed, is important in illustrating the implications of fertility stalling at a level about 20% above replacement level.

**Table 3.4. TFR trends in three different scenarios of population projections**

Year	Fertility trend		
	Rapid decline	Slow decline	Constant fertility
2019	2.51	2.51	2.51
2020	2.41	2.47	2.51
2025	2.16	2.32	2.51
2030	1.94	2.19	2.51
2035	1.74	2.09	2.51
2040	1.56	2.02	2.51
2045	1.40	1.99	2.51
2050	1.25	1.98	2.51

Source: National Institute of Statistics

<sup>11</sup> They have been prepared by Dr. Ricardo Neupert, the UNFPA consultant to NIS on analysis of the 2019 Population Census data.

## Box 1. Demographic effect of COVID-19

The COVID-19 pandemic broke out in the world in January 2020. It was slow to affect Southeast Asia, and it was not until February 2021 that many cases started to be recorded in Cambodia, and not until 11 March 2021 that the first death was recorded.

The virulence of the COVID-19 pandemic in Cambodia picked up sharply in mid-2021, reaching a peak of confirmed cases in July 2021, after which there has been some decline in daily new cases. By September 22, 2021 the number of cases in Cambodia had reached 106,000 (the 107<sup>th</sup> highest number among the world's countries) and deaths had reached 2,154. Cambodia's deaths from COVID-19 per million population (127) were fewer than in its neighbours Malaysia (732), Thailand (225) and Vietnam (178), but more than in Lao PDR (2) on the same date. These numbers are almost certainly a considerable underestimate of the real number of deaths from the pandemic. On a world scale, studies of excess mortality during the COVID-19 period indicate that the official number of deaths from COVID-19 represent, at best, a bit less than half the true toll and at worst only about a quarter of it (*The Economist*, 2021). In countries such as Cambodia, with incomplete death recording, the relative underestimate of COVID-19 deaths is likely to be even greater.

Despite uncertainties, the likely effects of COVID-19 on the three determinants of demographic change – mortality, fertility, and migration – can be assessed, and through these determinants, its likely effect on population growth and structure. It is unlikely that direct effects on mortality, fertility or migration would be large enough to make much difference to the projections of population growth and structure. Recorded deaths so far from COVID-19 are only enough to raise Cambodia's death rate (annualized) by a tiny 0.8%, though the real increase could well be more than double or more. The main direct effect of COVID-19 is to bring forward in time the deaths of elderly people. While younger people are just as likely to contract the virus as older people, their death rates from the disease are far lower. COVID-19's indirect effects on population growth, however, are harder to predict, but could be very substantial. These indirect effects are likely to include:

- Increased death rates (more widely spread across age groups than the direct effects) as a result of hardship caused by the damage to the economy through measures taken to counter COVID-19; and through the effect of COVID-19 on vaccination programmes and the lessened attention to other health needs.
- There may be a dampening effect on annual fertility rates, but probably not much effect on completed fertility of cohorts.<sup>12</sup> Couples may postpone childbearing (or possibly marriage in the first place) in the light of serious economic hardship and uncertainty, though lack of access to contraceptive supplies could work in the opposite direction.

Overall, then, projected trends in population will probably not be greatly affected by COVID-19. Unfortunately, the same cannot be said of its effect on economic growth. As in many countries, the adverse effects on economic growth and poverty reduction are likely to play out over a number of years.

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<sup>12</sup> Evidence of fertility trends in recessions tends to show only small aggregate effects, in most cases not leaving an imprint on cohort fertility levels (Sobotka, Skirbekk and Philipov, 2011).

### 3.5. Cambodia's population projections 2020-2050

Future population trends in Cambodia according to the three different sets of population projections are shown in Table 3.5. More detailed information on each projection is given in Annex Tables 1-6.

**Table 3.5. Cambodia population trends 2020-2050, three projections**

Fertility Scenarios	Population ('000)				% change 2020-2050
	2020	2030	2040	2050	
Rapid fertility decline	16,338	18,735	20,625	21,728	+33.0
Slow fertility decline	16,342	18,962	21,384	23,444	+43.5
Constant fertility	16,345	19,229	22,272	25,215	+54.3
<b>Number aged 0-14 ('000)</b>					
Rapid fertility decline	4,765	4,598	4,085	3,362	-29.4
Slow fertility decline	4,769	4,825	4,764	4,628	-3.0
Constant fertility	4,772	5,092	5,569	5,858	+22.8
<b>Number aged 15-64 ('000)</b>					
Rapid fertility decline	10,594	12,487	14,049	14,661	+38.4
Slow fertility decline	10,594	12,487	14,129	15,111	+42.6
Constant fertility	10,594	12,487	14,211	15,652	+47.7
<b>Number aged 65+ ('000)</b>					
Rapid fertility decline	979	1,651	2,491	3,705	+278.4
Slow fertility decline	979	1,651	2,491	3,705	+278.4
Constant fertility	979	1,651	2,491	3,705	+278.4
<b>Number aged 15-59 ('000)</b>					
Rapid fertility decline	10,085	11,768	13,218	13,332	+32.2
Slow fertility decline	10,085	11,768	13,298	13,782	+36.7
Constant fertility	10,085	11,768	13,380	14,323	+42.0
<b>Number aged 60+ ('000)</b>					
Rapid fertility decline	1,488	2,370	3,323	5,034	+238.3
Slow fertility decline	1,488	2,370	3,323	5,034	+238.3
Constant fertility	1,488	2,370	3,323	5,033	+238.2

Source: National Institute of Statistics

The trends according to age groups show two projections for the working age population (aged 15-59 and 15-64 respectively) and two projections for the elderly population (60+ and 65+ respectively).

Focusing first on the population as a whole, this is expected to continue increasing up to the year 2050, even in the rapid fertility decline projection, increasing by one third between 2020 and 2050 according to that projection, by 44% according to the slow fertility decline projection, and by 54% according to the projection in which fertility does not decline at all after 2020. These trends highlight the impact of “population momentum” on population growth, which is very considerable even in the rapid fertility decline projection, where fertility is below replacement level from about 2026. When fertility remains at replacement level, this means that population stabilization would eventually result once the age structure of the population has time to adjust to this level of fertility. However, because of large numbers moving into and through the reproductive ages as a result of the large numbers of children born in the earlier high fertility levels moving into adulthood, it takes a long time for this population stabilization to be reached. In the case of the rapid fertility decline projection, there is a projected increase of 22% in the 24-year period (2026-2050) after fertility reaches

replacement level, and the population will still be increasing in 2050, though the rate of growth will have slowed to a very low level by then (about 0.4% per annum).

Table 3.5 also shows the trends in the three broad functional age groups in the Cambodian population – namely, children (aged 0-14), working age (shown for both 15-64 and 15-59) and old age (shown for both 65+ and 60+). It is expected that the child population will:

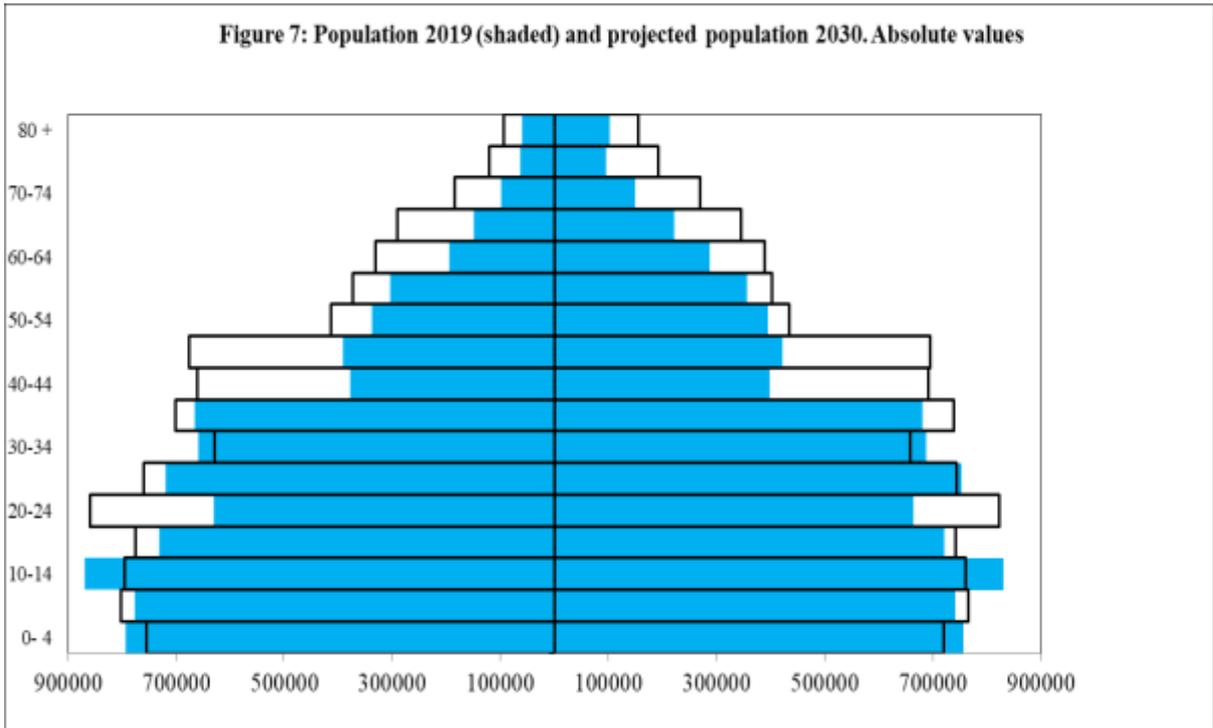
- Fall by almost one third in the rapid fertility decline projection,
- Increase and then decline in the slow fertility decline projection, ending the 30-year projection period slightly smaller in size than it began it,
- Grow steadily by almost one quarter by 2050 in the constant fertility projection.

By contrast, the working-age population is projected to increase greatly in all projections, substantial differences between the projections only emerging in the last decade of the projection period. The old age population will grow by the same amount in all three projections, and this growth is very substantial – well over a doubling of its numbers by 2050.

As an aid in understanding the changes in total population size and age structure, two age pyramids are presented, for the rapid fertility decline projection, showing the changes between 2020 and 2030, and the changes between 2020 and 2050 (see Figures 3.1 and 3.2). What is most striking is the marked ageing of the population. In 2030, most age groups above age 20 will be larger than in 2020, and most age groups below age 20 will be somewhat smaller. The contrast between the 2020 and 2050 populations is much more striking: all age groups 20-24 and above will be larger in 2050 (much larger in the case of age groups 40-44 and above), and all age groups below age 20 considerably smaller, as a result of the fertility decline.

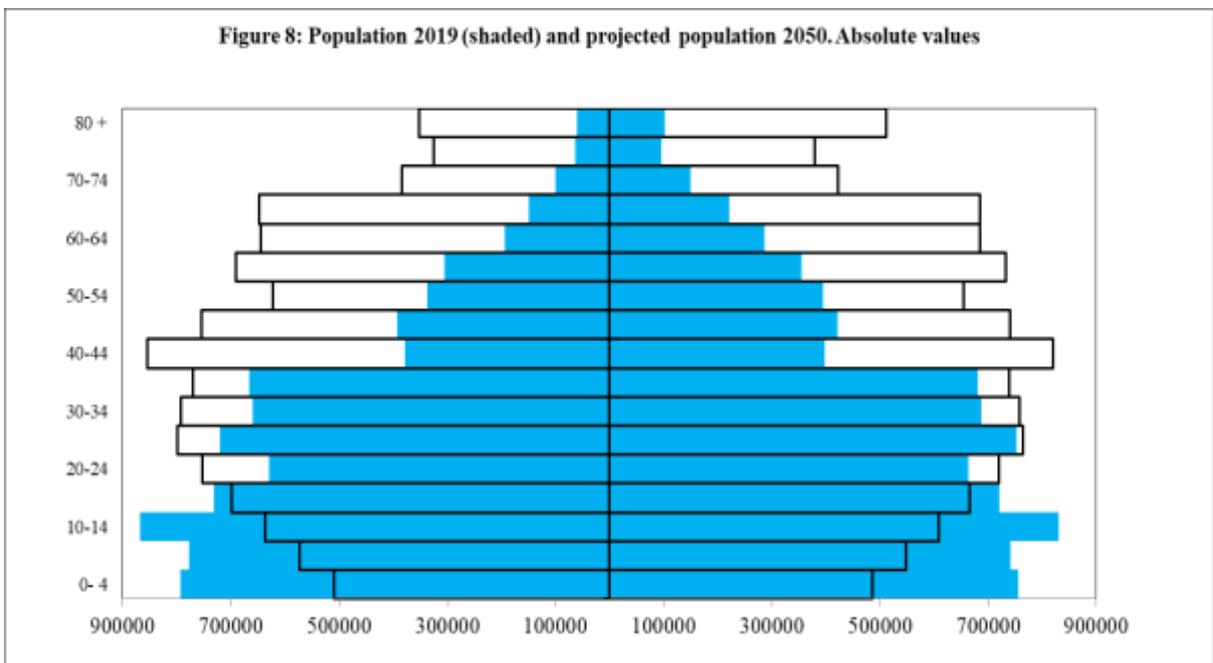
Considerable population growth will take place in Cambodia in coming decades. Cambodia's development experience in recent years, when population growth was even more rapid, provides grounds for confidence that Cambodia can continue its path of rapid social and economic development, in spite of continuing population growth. Moreover, as already noted, fertility is unlikely to continue at the higher level assumed in the constant fertility projection, so the overall increase in population is likely to be well below 50% over the 30-year period, slackening to almost zero by the end of the period.

**Figure 3.1. Population pyramids in 2019 and 2030**



Source: National Institute of Statistics

**Figure 3.2. Population pyramids in 2019 and 2050**



Source: National Institute of Statistics

The different trends in the broad age groups, already discussed, now need to be considered in the light of the discussion in the earlier section on the demographic dividend (see Table 3.6).

**Table 3.6. Trends in the projected share of three broad age groups in the three fertility scenarios, 2020-2050**

Fertility projection scenarios	Percentage aged 0-14				% change 2020-2050
	2020	2030	2040	2050	
Rapid fertility decline	29.2	24.5	19.8	15.5	-46.9
Slow fertility decline	29.2	25.4	22.3	19.7	-32.5
Constant fertility	29.2	26.5	25.0	23.2	-20.5
	Percentage aged 15-64				
Rapid fertility decline	64.8	66.7	68.2	67.5	+4.2
Slow fertility decline	64.8	65.9	66.0	64.5	-0.5
Constant fertility	64.8	64.9	63.8	62.1	-4.2
	Percentage aged 65+				
Rapid fertility decline	6.0	8.8	12.1	17.1	+185
Slow fertility decline	6.0	8.7	11.6	15.8	+163
Constant fertility	6.0	8.6	11.2	14.7	+145
	Percentage aged 15-59				
Rapid fertility decline	61.7	62.8	64.1	61.3	-0.6
Slow fertility decline	61.7	62.1	62.2	58.8	-4.7
Constant fertility	61.7	61.2	60.1	56.8	-7.9
	Percentage aged 60+				
Rapid fertility decline	9.1	12.7	16.1	23.2	+155
Slow fertility decline	9.1	12.5	15.5	21.5	+136
Constant fertility	9.1	12.3	14.9	20.0	+120

Source: National Institute of Statistics

In the projection with rapid fertility decline, the share of the child population drops almost in half between 2020 and 2050, this decline being offset by a rise in the share of the working-age population, but even more so by a rise in the share of the old age population. In the projection with slower fertility decline, the decline in the child population share is still large, and the rise in the old age share is also large, but the share of the working-age population changes only slightly. Finally, in the constant fertility projection, the share of the child population sinks slowly, the share of the elderly population rises somewhat less rapidly, and the share of the working-age population actually declines slightly.

The following section will discuss the implications of the age structure changes already shown in Table 3.7 for Cambodia's dependency ratios, and what this means for the demographic dividend.

### **3.6. Projected trends in dependency ratios, ageing and the demographic dividend**

It has already been noted that Cambodia entered the most positive stage of the demographic dividend - when the dependency ratio falls below 65 - around 2011, and it has remained in that favourable zone up to the present. What do the projections show about how long it will stay in the favourable zone? This question is answered in Table 3.7, which shows the projected trends in the dependency ratio over the coming 30 years according to the three alternative projections.

According to the three projections, Cambodia will remain in the favourable zone (dependency ratio below 65, using age 60+ for the elderly population) up until about 2034 in the constant fertility projection, until about 2048 in the slow fertility decline projection and

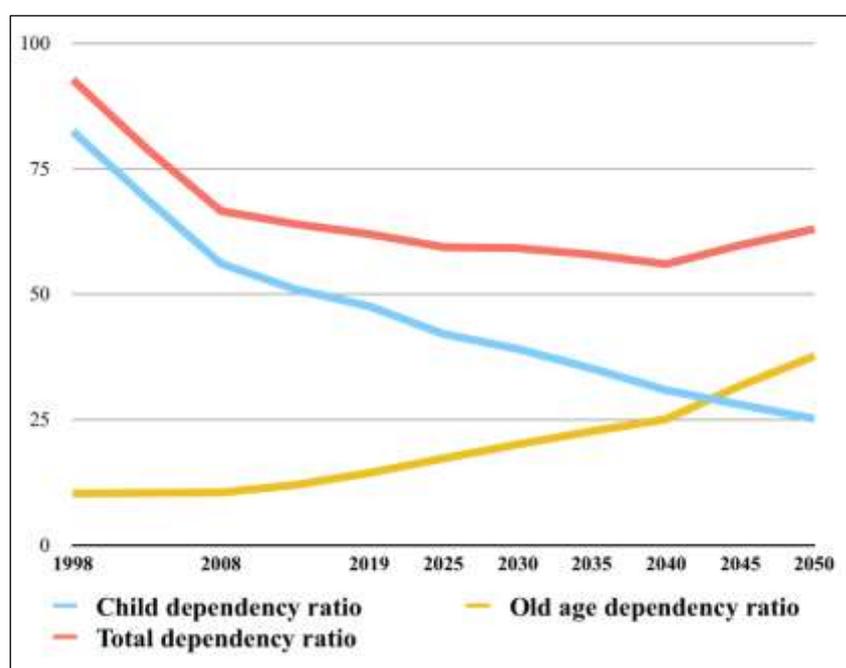
until about 2052 in the rapid fertility decline projection. The main reason for these differences is the difference in child dependency. They all face the same increase in the old age population.

**Table 3.7. Trends in dependency ratio, 2020-2050: three fertility projections scenarios**

	2020	2025	2030	2035	2040	2045	2050
<b>1. Dependency ratio (Per 100 persons aged 15-64)</b>							
Rapid fertility decline	54.3	50.4	50.0	48.8	46.8	45.1	48.2
Slow fertility decline	54.3	51.1	51.9	52.2	51.3	50.8	55.1
Constant fertility	54.3	51.8	54.0	56.2	56.7	56.7	61.1
<b>2. Dependency ratio (Per 100 persons aged 15-59)</b>							
Rapid fertility decline	62.0	59.5	59.2	58.0	56.0	60.0	63.0
Slow fertility decline	62.0	60.3	61.1	61.6	60.8	65.7	70.1
Constant fertility	62.0	60.8	63.4	65.8	66.5	71.8	76.0

Source: National Institute of Statistics

**Figure 3.3. Trends in dependency ratios, 1998-2050: rapid fertility decline scenario**



Source: National Institute of Statistics

**Note:** the youth dependency ratio is number aged 0-14 per 100 population aged 15-59. The old age dependency ratio (sometimes termed the support ratio) is the number aged 60+ per 100 population aged 15-59.

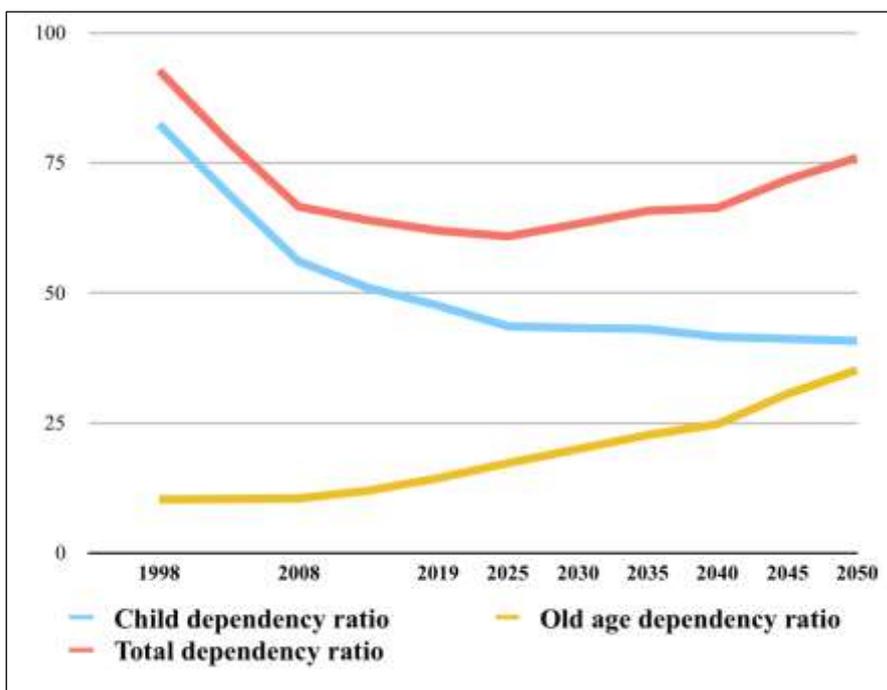
As the dependency ratio reflects two entirely different groups of dependents – children and old people – it is important to study how the share of these two groups has changed and will continue to change over time. Figure 3.3 shows the past and projected trend in Cambodia’s dependency ratio, as well as in its two components – the youth dependency ratio and the old age dependency ratio.<sup>13</sup> The trends are shown according to the usual Cambodian government convention of considering old age to begin at age 60.

<sup>13</sup> Trends in the support ratio are sometimes presented without showing trends in the child dependency ratio. This is reasonable as an indication of the issues of supporting the elderly, but is misleading as an indicator of the overall burden on the working age population, because it fails to show that the child dependency ratio is moving in the opposite direction.

What has clearly happened is that because of the sharp decline in fertility after the mid-1990s, which of course did not immediately affect the size of the working age population or the old age population, the child dependency ratio fell sharply and the old age dependency ratio barely changed up to the present, resulting in a sharp fall in the overall dependency ratio. In future, the child dependency ratio is expected to decline further, while the old age dependency ratio will increase, more sharply as time goes on. The two ratios will cross around 2042, and around that time the overall dependency ratio will begin to increase, as the increase in the old age dependency ratio will be sharper than the decline in the child dependency ratio. By 2050, the overall dependency ratio will be higher than it is at present, after continuing to decline slightly over the 20 years following 2019.

Alternative trends in fertility will make a substantial difference. Notably, if fertility remains constant at its 2019 level, the child dependency will remain roughly at its current level, raising the overall dependency ratio well above that in the rapid fertility decline projection throughout the period to 2050, pushed even higher in the 2040s by a sharp increase in the old age dependency ratio (see Figure 3.4).

**Figure 3.4. Trends in dependency ratios, 1998-2050: constant fertility scenario**



Source: National Institute of Statistics

**Note:** the youth dependency ratio is number aged 0-15 per 100 population aged 15-59. The old age dependency ratio (sometimes termed the support ratio) is the number aged 60+ per 100 population aged 15-59.

### 3.7. Cambodia's "youth bulge"

Another aspect of the changing age structure that needs to be examined is the so-called "youth bulge". This refers to the share of the adolescent and youth population (aged 15-29) in the total population. Over the period covered in Table 3.1, while the overall working-age population's share grew from 53.7% to 64.5%, there were totally different trends **within** the working age population, as shown in Table 3.8.

**Table 3.8. Trends in the components of the working-age population, 1998-2019**

	1998	2008	2019
Number aged 15-29 ('000)	2,985	4,222	4,106
Number aged 30-59 ('000)	2,939	3,808	5,505
Number aged 30-64 ('000)	3,145	4,089	5,972
<b>% of total population</b>			
Aged 15-29	26.1	31.5	26.4
Aged 30-59	25.7	28.4	35.4
Aged 30-64	27.5	30.5	38.4
<b>% of working age population (15-64)</b>			
Aged 15-29	48.7	50.8	40.7
Aged 30-64	51.3	49.2	59.3
<b>% of working age population (15-59)</b>			
Aged 15-29	50.4	52.6	42.7
Aged 30-59	49.6	47.4	57.3

Source: National Institute of Statistics

The working-age population covers a wide age group. Between 1998 and 2008, the numbers aged 15-29 grew very rapidly, but between 2008 and 2019, numbers in this age group actually declined, as a result of the sharp decline in fertility experienced in Cambodia in the 1990s and early 2000s. United Nations estimates of annual population trends enable us to time more accurately the trends in the “youth bulge”. Table 3.9 shows these trends.

The “youth bulge”, then, if defined by the share of youth in the total population, reached its peak around 2010, and has shown a steady decline since then. In other words, the youth bulge is over. By contrast, numbers and proportion of population in the 30-59 age group increased steadily, as numbers entering that age group were still reflecting the high birth rates in the pre-1990s period. An “ageing” of the working age population was Therefore, under way, and will continue well into the future. This is clearly shown in Figure 3.5. There are a number of clear implications. When a country succeeds in educating more of its youth population to a higher level, it will welcome the chance to replace older workers as they retire with many younger, better educated workers who are more suited to the kinds of jobs available in the emerging “digital economy” (Royal Government of Cambodia, 2021). However, since the numbers of these younger workers will not be growing much, and their share in the working-age population actually declining, it is exceptionally important that the best possible use is made of their talents, both by providing them with education fitted to the digital economy, and by ensuring that the jobs emerging are in keeping with the objective of moving the economy in higher-productivity directions.

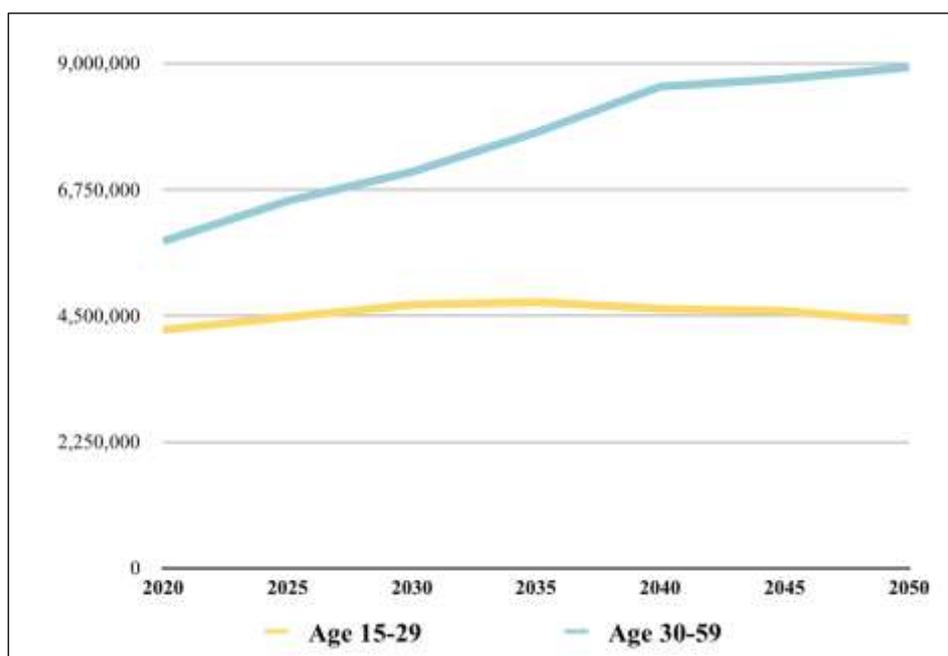
Note to Table 3.9: The figure of 4.475 million for 2008 is slightly larger (by 6.0%) than the figure of 4.222 million from the 2008 Cambodian Population Census, and the figure of 4.562 million for 2019 is slightly smaller (by 4.3%) than the figure of 4.765 million from the 2019 Cambodian Population Census. **However, the trend in the share of the 15-29 years age group in the total population is consistent with the trend shown by the census figures,** partly because the United Nations estimate of Cambodia’s total population for 2008 was also larger than the census estimate (by 3.6%), though for 2019 it was also slightly larger than the Census figure (by 2.5%).

**Table 3.9. Trends in share of the youth population aged 15-29 in Cambodia’s total population, 2000-2020**

Year	Number ('000)	Share of total population (%)
2000	3,318	27.3
2005	3,918	29.5
2006	4,083	30.3
2007	4,275	31.3
2008	4,475	32.2
2009	4,636	32.9
2010	4,718	33.0
2011	4,737	32.6
2012	4,690	31.7
2013	4,603	30.6
2014	4,519	29.6
2015	4,474	28.8
2019	4,562	27.7
2020	4,577	27.4

**Source:** United Nations Population Division, 2019, custom data acquired via website.

**Figure 3.5. Trends in the 15-29 and 30-59 working age groups in 2020-2050: rapidly fertility decline scenario**



### ***3.8. National Transfer Accounts approach to understanding implications of age structure trends***

National Transfer Accounts approach is a way for understanding implications of age structure trends. The process of population ageing is under way in Cambodia, as it is throughout Asia, with a steady rise in the share of the older population. In Cambodia, the process is expected to pick up pace after 2050, because of the particular characteristics of its

age structure. Over the next 30 years, the population ageing process, though rapid, should be quite manageable. Planners, however, need analytical tools in order to plan more effectively for dealing with the process of population ageing. The following section will outline one such approach that has been found useful: national transfer accounts.

To reap the full benefits of the age structure changes taking place in Cambodia (often referred to as the demographic dividend), by adapting allocation of public funds and in other ways, it is necessary to know how the “generational economy” works. The NTA helps understand by constructing accounts that measure how people at each age produce, consume and share resources, and save for the future, at both public and private levels.

## **Box 2. What are national transfer accounts?**

The national transfer accounts (NTAs) provide a linkage between population and the economy. It examines economic lifecycle of individuals and analyses the interaction between various support mechanisms of individuals, such as public and private transfer systems, capital markets or own work. This body of work has become increasingly important for policy makers as they are looking for responses on how to address concerns about the consequences for standards of living and the sustainability of government programmes arising from the fertility decline and population ageing.

Individuals go through extensive periods of dependency at the beginning and ends of their life: children and older persons consume more resources than they produce through their own labour. Conversely, working age adults produce more than they consume. The relative size of these age groups as well as the extent of their dependency determine the support needed from the working age population. What makes this economic lifecycle possible is the flow of resources over time and across generations through a complex system of social, economic and political institutions. NTA provides methodologies to improve the understanding of how population growth and changing age structures influence economic growth, gender and generational equity, public finances and other important macro-economic features.

In analysing changing age structures in relation to the economy, the NTA creates age profiles of labour income and consumption across countries using a standardized approach (United Nations 2013). One important feature of NTA is the estimation of economic resource flows between age groups, which shows how each age group relies on sharing and saving to support consumption at all stages of life-transfers and assets.

NTAs are compiled from a variety of data sources, ranging from national income and product accounts, government financial statistics and administrative records to nationally representative income and expenditure surveys, labour-force surveys, health-expenditure surveys and special purpose household surveys. Details on the methodology are explained in the National Transfer Accounts manual (United Nations, 2013) and other publications (Lee and Mason, 2011). By 2018, more than 90 countries had research teams to create NTA estimates that map the generational economy, with teams located at universities, research organizations and government agencies.

**(Source:** United Nations Population Division, 2019: 15).

The Box above gives a good summary of the way National Transfer Accounts work in analysing the implications of changing age structures for transfer of resources between generations and the appropriate policy responses from government. The basic point is a very simple one: both children and older persons consume more than they produce, whereas the opposite is true of the working-age population. Therefore, the society and economy in any country has mechanisms for resource transfers that will support the dependent population. The NTA estimates resource flows between age groups, and how these take place in different countries. Obviously, as an economy moves through the period of the demographic dividend, important shifts in age structure take place, not only through a declining, then rising, share of the dependent population, but through major changes in the composition of the dependent population: from a predominance of young dependents to a predominance of old dependents. The resource needs for these different groups within the population are very different. Not only this, but the age balance within the working population shifts over the course of the demographic dividend, further complicating the analysis of resource flows and their inter-generational balances.

The NTA methodology requires the calculation of three accounts: a life cycle account, a public age reallocation account and a private age reallocation account. These accounts then become part of the total NTA, which is calculated in three major steps for consumptions and labor income: estimating per capita age profiles from household surveys; using population data to construct a preliminary aggregate age-profile; and adjusting the aggregate profile and the per capita profile to match a macro control<sup>14</sup> taken from the national accounts.

How do countries deal with the issue of funding the gap between consumption and labour income for the elderly? The key issue is the relative importance of the three main funding sources: net private transfers (primarily familial transfers); net public transfers (e.g. pension and health care programs); and asset-based reallocations. On a world scale, only in a few Asian countries are net familial transfers important for the elderly. Thailand is one such country; Cambodia may well be another, though detailed evidence is needed to make this clear. Features of the economic lifecycle are important. Where the elderly are contributing more through continued work and consuming less, population ageing will be less of a problem. This may well be the situation in Cambodia.

In an economy such as Cambodia's, where fertility has been declining, leading to an ageing population, one point to make is that as people choose to have fewer children, they also tend to spend more on each child. Some of that spending may be pure consumption, but some may also be human capital spending (the much discussed quantity-quality trade-off). To the extent that enhanced human capital spending leads to more productive workers, the adverse effects of lowered fertility on population ageing will be offset to some extent.

Cambodia would benefit from conducting a detailed National Transfer Accounts study, because this would help to ascertain the answers to many questions relevant to planning appropriate government responses to the changing demographic structure. Such a study was planned in 2009, but was not carried through. The report on plans for conducting an NTA at that time provided useful detail about possible data sources for the various items of information needed (NIS, 2009). Many additional sources of data must have become available since then. Now may Therefore, be the appropriate time to conduct such a study.

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<sup>14</sup> Macro control refers to macroeconomic regulation and control for a country.

### ***3.9. Policy recommendations***

1. Cambodia needs to prepare for a growing population. Though growth will be slowing, both the backlog in provision of facilities resulting from earlier, more rapid growth, and the further growth expected, at least over the next decade, will require strong efforts in ensuring that facilities and services affecting many aspects of life meet required levels and standards. As the growth of the older population will be particularly rapid, adaptation of the health infrastructure will be needed, along with appropriate social protection mechanisms.
2. Invest to take maximum advantage of the demographic dividend. Cambodia has entered the period when its proportion of working-age population is highest; the most favourable period, when this proportion continues to rise, will last up to about 2040. Investment in education, stressing quality education oriented to expected labour market trends, needs to be stressed, particularly because the numbers of young people reaching the labour force ages will actually decline after 2025. It is Therefore, essential that when entering the workforce, they can help raise its average productivity per worker. In addition, since capturing the demographic dividend is about ensuring that productive jobs are available, following a long-term economic model that would maximize development outcomes will be crucial.

## Chapter 4

### Benefiting from the Demographic Dividend

#### 4.1. Pre-conditions for benefiting from the demographic dividend

The study by Kotschy et al (2020), cited in Box 2, concludes as follows: “... global population policies should adopt a comprehensive approach reflecting the insights from unified growth theory that development requires a demographic transition with fertility reductions, the associated changes in the age structure, and enhanced education attainment”.

#### Box 3. Debate over whether the demographic dividend is an educational dividend

Over the past two decades, the demographic dividend has achieved considerable prominence in the discussion of the interrelationship between demographic and economic change (e.g. Bloom and Williamson, 1998; Canning, Bloom and Sevilla, 2003). It has given strong weight to the argument for more rapid declines in fertility in countries where fertility rates remain high, and the need for stronger family planning programs. The notion that the demographic dividend is an age structure dividend arising from a sharp decline – both absolute and relative - in the size of the child population and increase in the working-age population has recently been challenged by studies that show a much stronger educational than age structure effect on economic growth. To state it more precisely, Lutz et al (2019: 12802) argue that “significant positive growth effects of increases in the share of population in working age are only prevalent in countries where a relatively large part of the population has achieved an educational attainment level beyond primary education”.

More recently, Kotschy, Urtaza and Sunde (2020) present the results of somewhat different econometric modelling to conclude that “an increase in the working-age population share has a strong and significant positive effect on growth, even conditional on human capital, in line with the conventional notion of a demographic dividend. An increase in human capital only has positive growth effects if combined with a suitable age structure.” Their results “show that the demographic dividend is not a mere education dividend but the result of a complex interplay between shifts in the age structure and educational composition”.

There is no need to pursue this discussion further here. Most past discussions of the demographic dividend have argued that the age structure changes by themselves will not achieve much, unless linked with strong investments in human development (especially education) and emphasis on increasing employment opportunities in more productive areas of the economy. That remains a key finding of the available evidence.

Chapter 3 (Table 3.7) showed some of the age structure implications of alternative fertility assumptions in population projections for Cambodia. Of the three projections, the more rapidly declining fertility projection produces the sharpest decline in the dependency ratio, and the constant fertility projection the shallowest bottoming out of the dependency ratio at 52 in 2025, compared with 45 in 2045 in the case of the rapidly declining fertility projection.

Attaining upper middle-income status for Cambodia depends crucially on (i) significant improvements in the shares of population with upper secondary and post-secondary education; (ii) improving economic competitiveness and diversification to sustain strong growth and create jobs. Adolescents and youth will have a critical role to play in achieving these goals. As already noted, there is no longer a “youth bulge”, although the youth population will continue to increase over the decade of the 2020s – by 10.5% - before ceasing

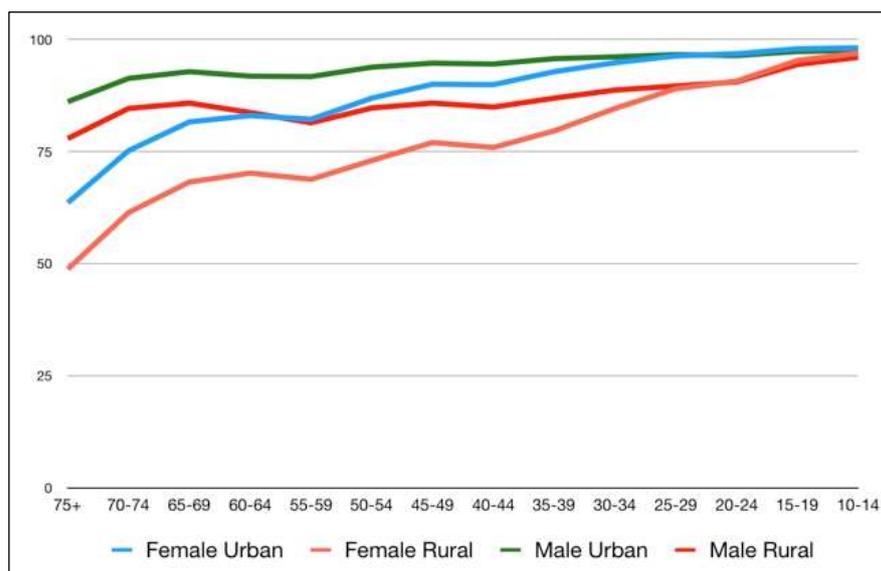
to increase over the decade of the 2030s. Whether Cambodia’s development goals can be achieved will depend to a great extent on the human development of the adolescent and youth cohorts. Educational trends will determine the possible role of youth in upgrading the productivity of Cambodia’s labour force. Broader forces determining the pace of economic growth and structural change in the economy will determine whether they can be provided with productive outlets for the skills they acquire during their periods of education and training.

This chapter, then, will focus particularly on the situation of adolescents and youth in the broader context of achieving the economic benefits of the demographic dividend. This needs to be done, however, in the broader context of addressing the four key planning areas crucially related to benefiting from the demographic dividend: namely, educational development, health development, labour force and employment, and economic growth.

#### 4.2. Educational situations

Literacy has become almost universal among the younger population in recent times, though above age 30, substantial numbers remain illiterate, the proportion illiterate rising with age. The differentials between urban and rural areas in measured literacy have narrowed during a period of quite rapidly rising literacy overall (Figure 4.1). This suggests that the expansion of opportunities for schooling have broadened from a heavier concentration in urban areas to a more widespread availability in more recent times. The figure shows literacy rates ranging from the oldest age group (75+) to the youngest age group (10-14) in 2019, separately for males and females, thus giving a clear indication of time trends in literacy. Among older groups, whose attainment of literacy occurred more than half a century ago, the urban-rural difference in literacy rates was greater than among younger groups. It is especially for those aged younger than the mid-30s that urban-rural differences narrowed sharply; for those in the teenage years in 2019, urban-rural differences had almost disappeared. Gender differences – in both urban and rural areas – had also largely disappeared at ages 30 and below.

**Figure 4.1. Literacy rate by age group and sex, urban and rural areas, 2019.**



Source: National Institute of Statistics

Literacy rate refers to the proportion of people who are able to read and write basic Khmer or other languages, here disaggregated by age group, sex, and residential location. The

proportion of the Cambodian population who have never attended school according to the 2019 Population Census shows important time trends. Among the population aged 25+, 27.9% have never attended school. However, this proportion drops to 14.5% among those aged 18-24, 9.1% among those aged 15-17 and 7.3% among those aged 12-14. In the 18-24 age group, a substantial gender difference remains – 11.9% of males have never attended school, compared with 17.1% of females. However, at younger ages, the gender difference narrows considerably, and has virtually disappeared at ages 12-14. An urban-rural gap remains, however. At aged 15-17, 4.6% of urban children have never been to school, compared with 10.2% of rural children.

School attendance differences between urban and rural areas among the population aged 6-14 narrowed considerably between 1998 and 2008, no doubt related to the provision of more primary and lower secondary schools in areas serving rural populations over that period. The narrowing of urban-rural differentials was marked for both sexes, though slightly greater for females than for males. By 2019, the gender differential had disappeared for this age group, in both urban and rural areas, as near-universal primary school education was reached.

The education enrolment trends for the population aged 6-14 and 15-19 in rural areas are remarkable. Already in 1998, three quarters of those aged 7-14<sup>15</sup> were in school in urban areas, with only small differences between males and females. In rural areas, 62% of this age group were in school. But by 2019, rural school attendance rates at ages 6-14 had more or less caught up with those in urban areas. Perhaps even more surprising, by 2019, the school attendance rate at age 15-19 in rural areas, which in 1998 was only 37.6% compared with 54.6% in urban areas, had almost caught up with the urban rate.

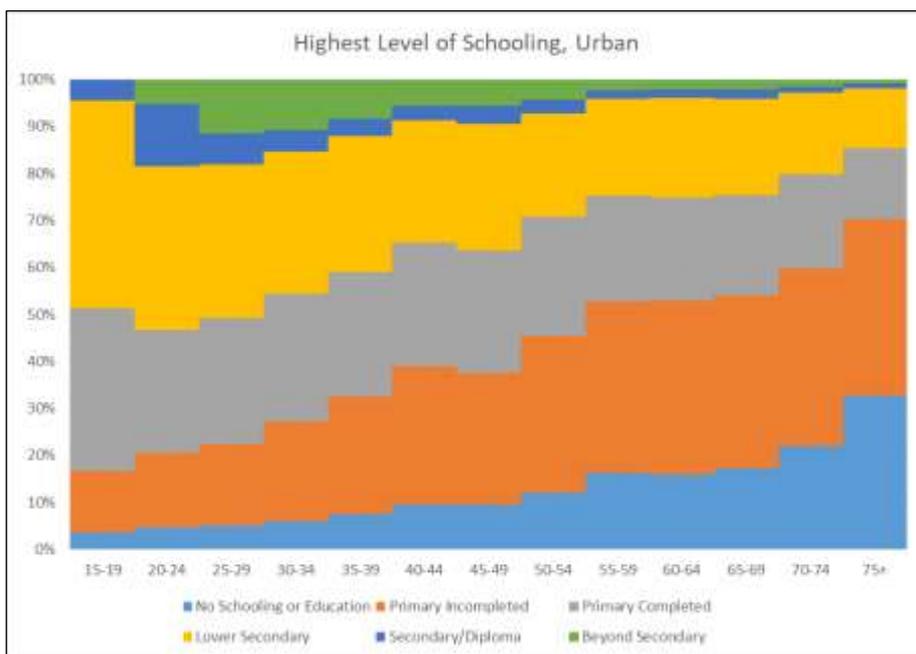
Figure 4.2 shows the educational attainment of the adult population in 2019, by 5-year age group. Like Figure 4.1, this enables time trends to be inferred. The rural population is more heavily concentrated in the “no schooling” and lower educational categories – incomplete or completed primary education. Of course, some of the urban population who have completed secondary and higher education have rural roots – having moved to the city in order to pursue these levels of education.

Perhaps the most striking feature of Figure 4.2 is the increase in the proportion of the population with secondary school education for cohorts aged in their 30s and below. In urban areas, more than half those aged in their 20s have lower secondary school education or more. While this proportion is considerably higher in urban than in rural areas, the rise in rural areas is also impressive: for those aged in their 20s, more than 30% have lower secondary school education or more, a sharp increase compared with earlier cohorts.

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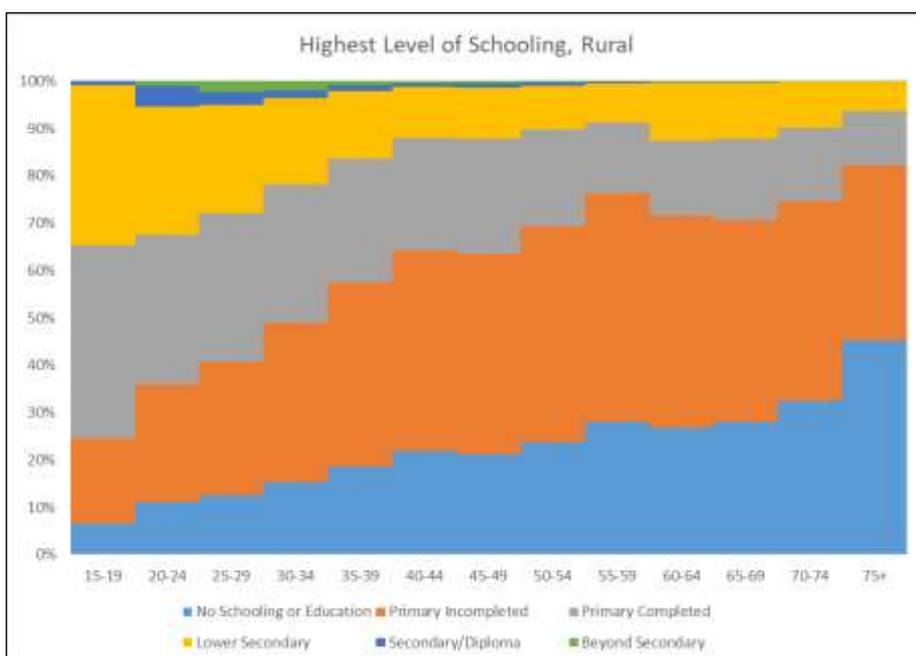
<sup>15</sup> The results were given for the 7-14 age group, not for the 6-14 age group, in the 1998 Census Report.

**Figure 4.2. Educational attainment by age group, 2019: Urban area**



Source: National Institute of Statistics

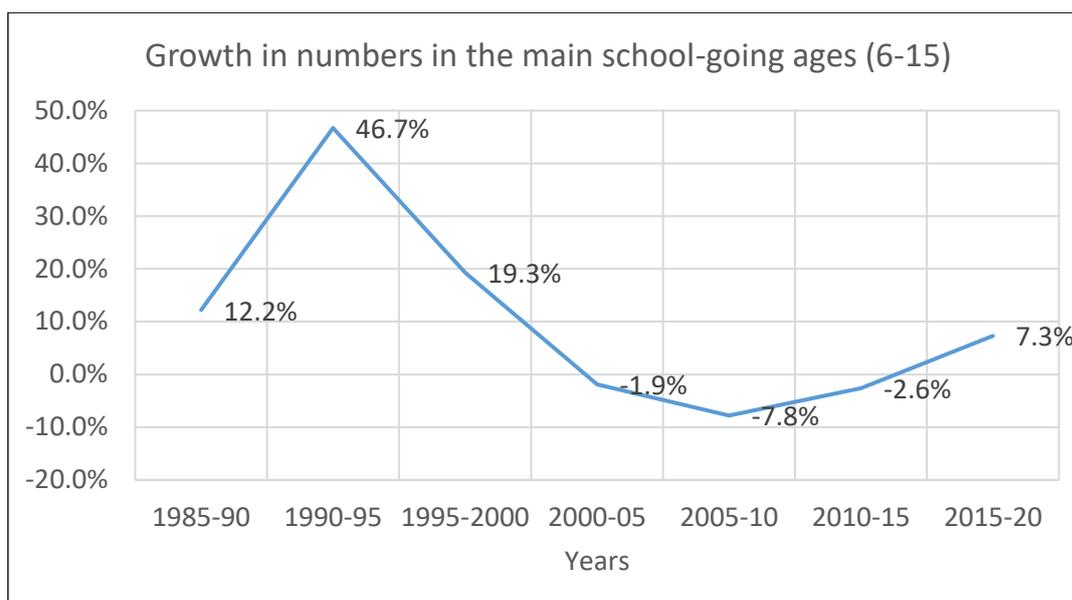
**Figure 4.3. Educational attainment by age group, 2019: Rural area**



Source: National Institute of Statistics

It should be stressed that Cambodia’s success in raising educational enrolment ratios in the final two decades of the 20<sup>th</sup> century was achieved in the face of rapidly increasing numbers in the school-going ages - a remarkable achievement. However, the contribution of declining fertility to the more recent success should also be stressed. The growth in numbers in the main school-going ages (6-15) from 1985-1990 to 2015-2020 is presented below (based on United Nations, Population Division, estimates).

**Figure 4.4. The growth in numbers in the main school-going ages (6-15)**



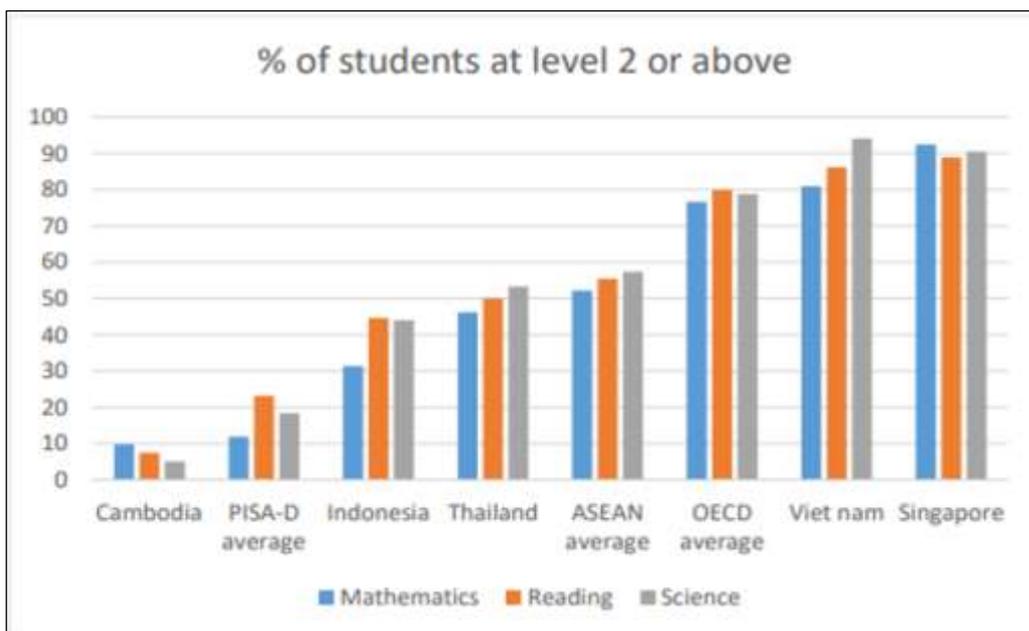
Source: National Institute of Statistics

The task of raising enrolment ratios clearly became much easier after the year 2000, when numbers of potential students declined steadily.

Numbers of children in school are only part of the story. The key issue is the quality of the education that they are receiving, and whether it is fitting them for productive employment in the rapidly changing economy. In this respect, some probing questions have to be asked about the Cambodian education system. The end result of education is not as hoped. INSEAD's Global Talent Competitiveness Index for 2020 ranked Cambodia 117 out of 132 countries (INSEAD, 2020). School dropout rates are high, and access to secondary education shows high inequalities across locations and socio-economic groups. Although rural and the poorest youth have an improved opportunity to enter the highest grades, their rate of school enrolment is still low compared to urban and affluent youth. "Both access and quality of education pose crucial issues and indicate a need for more relevant school curricula, sufficiently trained teachers, and more resources for school improvements", according to the OECD.

There are many possible indicators of educational quality. One important one is performance in international tests of 15-year-old student competence in reading, mathematics and science (PISA), and in mathematics and science (TIMSS). Cambodia does not have such data, but importantly, in 2018 it participated in OECD's PISA-D pilot project to make the PISA assessment more accessible and relevant to a wider range of countries. The PISA-D results identify some issues in Cambodian education, and make a set of recommendations (MoEYS, 2018; MoEYS, 2018a). These issues, briefly, are a high rate of grade repetition, school dropout and low student achievement. The percentage of Cambodian 15-year olds that has attained at least Grade 7 by age 15 in 2017 was only 28%, meaning that the remaining 72% of 15-year olds were either in grades below 7 or out of school. Grade repetition seems to be the main cause of this schooling problem. The PISA-D results also show that students aged 15 in Cambodia not only have low reading literacies but also low mathematics literacies (see Figure 4.5). Cambodia performs very poorly in comparison with its ASEAN peers.

**Figure 4.5. Percent of students aged 15 reaching the minimum proficiency level**



Source: National Institute of Statistics

Only 8% of the 15-year-old students in Cambodia achieved a minimum proficiency level (level 2) or higher in reading, and roughly 10% achieved a minimum proficiency level or higher in mathematics. These students have met the goal of SDG4. In science, only 5% of Cambodian students achieved this level. Overall, about 90% of Cambodian 15-year-old students still had a below basic competency level (below level 2) compared to those in ASEAN as a whole (43%) or those in OECD countries (21%).

The low academic performance among 15-year-old students in Cambodia on the PISA-D assessment suggests that much has to be done in lower grades to ensure they have a minimum knowledge and skills to be ready to perform better in secondary education given that the PISA-D assessment is a competency-based assessment model that measures cumulative knowledge and skills students are supposed to gain across grades. In this regard, Cambodia needs to put more efforts on student learning from primary to secondary levels; the emphasis is to be on the application of knowledge and skills in real-life situations, in particular reading skills and mathematical problem-solving skills rather than only on the content of textbooks. (MoEYS(b), 2018: 6)

The final chapter of this report will set out some of the recommendations of the PISA-D assessment for the improvement of the Cambodian education system.

Another possible indicator of educational quality is the proportion of teachers who have been adequately trained. In 2018, 73% of primary teachers and 86% of secondary teachers were qualified according to national standards (Kingdom of Cambodia, 2019: 22). While these figures were well ahead of the targets, the targets may well need upward revision.<sup>16</sup> Teacher preparation and development is crucial, especially for teachers teaching in rural/disadvantaged regions. The plan for all teachers to have at least a bachelor's degree to

<sup>16</sup> The target for percentage of secondary teachers qualified according to national standards in 2018 was only 39.6%.

teach at the K-12 education level is a good move (MoEYS, 2018: 141). But professional training activities for under-qualified teachers are also needed, and this is not the case at present (MoEYS, 2018: 76).

It is well known that adequate water and sanitation facilities in schools are important in retaining students, especially girls. In 2018, the proportion of Cambodian schools with basic sanitation facilities was 68.7% - again, ahead of target, but still leaving much room for improvement.

In Cambodia, however, as in much of Southeast Asia, retention of boys in secondary school is proving to be a greater problem than retention of girls (Jones and Ramchand, 2014; World Bank, 2018; UNESCO Institute of Statistics, 2018). A report specifically addressing this problem for Cambodia found that compared to adolescent girls, adolescent boys between the ages of 14 and 18 have higher expectations placed on them to work, and they also have higher paying and more work opportunities available to them. Adolescent boys are more likely to be influenced negatively by their friends and classmates, including being encouraged to leave school early by those who have already left. In the classroom, boys are less compliant than girls. Community members are particularly concerned about the influence of drugs on adolescent boys, and the negative peer influences involved in drug use (UNICEF Cambodia, 2020: 9).

Success in school, especially for children from disadvantaged backgrounds, can be assisted by participation in early childhood education programmes. However, in Cambodia, this avenue of preparing young children for later educational success is being used to only a limited extent; in 2014, only 14.5% of children aged 3-5 years were attending an early childhood education programme (DHS 2014, Table 15.1). Unfortunately, as is often found in other countries as well, early education programmes in Cambodia are serving to advance the interests of the better-off rather than those needing a more level educational playing field. Children living in urban areas (36%) are much more likely to attend an early childhood education programme than children living in rural areas (11%). Only 7% of children whose mothers have no education attend an early childhood education programme, as compared with 36% of children whose mothers have a secondary education or higher. Similar wide differentials are observed between poorer and wealthier households.

### ***4.3. Health situations***

Educational limitations are frequently inter-related with health issues. Health problems can hinder a child's educational advance, as well as affecting her or his ability to be an effective member of the workforce later in life. Human capital limitations begin early in life due to poor nutrition, lack of nurturing care, and absence of early stimulation. "Having grown up in a period of very high poverty and maternal and child malnutrition, the majority of Cambodia's current cohort of young workers likely experiences some of the lifelong, negative consequences of childhood malnutrition and other early life deprivations." (World Bank 2017:14). Estimates from international impact evaluation studies suggest that children stunted in early childhood may lose up to one fourth of their expected earnings in adulthood (Wodon et al., 2020: 7).

Cambodia is fortunate to have had Demographic and Health Surveys (DHS) in 2000, 2005, 2010 and 2014. It is less fortunate in not having had a Multiple Indicator Cluster Survey (MICS) - a series of surveys supported by UNICEF in many countries. The series of DHS's

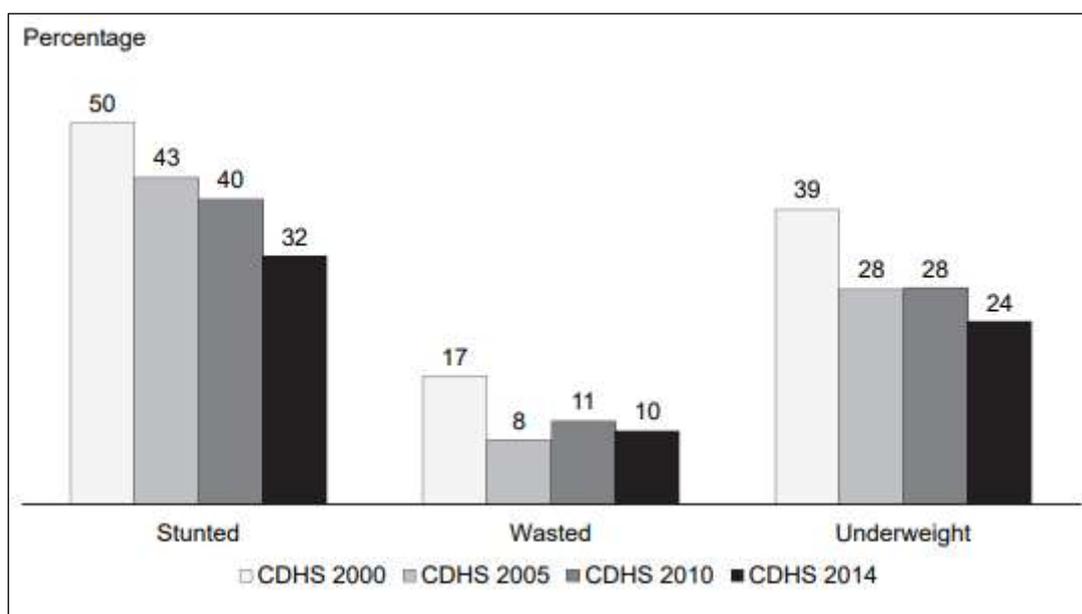
enable important comparisons to be made of trends in variables related to health (including reproductive health), nutrition, fertility and family planning over this important period of demographic change in Cambodia. Another DHS is being conducted at present, but its results will not be available for some time.

As already discussed in Chapter 2 (see Table 2.3), Cambodia’s under-5 mortality rate compares favourably with those of Lao PDR, Myanmar, India and Bangladesh. It declined rapidly from 85 in 2000-05 to 28 in 2015-20 – a remarkable decline in a 15-year period. Have trends in morbidity of infants been moving in the same direction? The DHS provides information on aspects of child health and nutrition, and some evidence will now be presented.

Figure 4.6 shows that there were improvements in the nutritional status of children in the 14 years to 2014. The percentage of children stunted fell consistently from 50% in 2000 to 32% in 2014. The percentage of children wasted declined from 17% in 2000 to 8% in 2005 before increasing to a slightly higher level in 2010 and 2014. Underweight declined from 39% in 2000 to 28% in both 2005 and 2010 and then to 24% in 2014. Rural children are more likely than urban children to be stunted, wasted or underweight. Mothers’ education has an inverse relationship with stunting, wasting and underweight levels; and higher wealth quintiles are also associated with lower levels of stunting, wasting and underweight.

International comparisons in Table 2.6 help to place Cambodia’s child health and nutrition situation in its broader context. The percentage of children stunted (32%) was much higher than in China or Thailand, higher than in Malaysia or Vietnam, and much the same as in the other countries in the table. The percentage of children wasted (10%) was higher than in China or Vietnam, and lower than in India, but much the same as in all the other countries.

**Figure 4.6. Trends in nutritional status of children under age 5**



Source: Cambodia DHS 2014, Figure 16.2

Another important indicator of the health status of children is vaccination prevalence. In 2014, two thirds of children aged 12-23 months were fully vaccinated by age 12 months. Children in urban areas were more likely to be fully vaccinated than those in rural areas, and the percentage of children fully vaccinated increased substantially with mother’s education

and with the wealth of the household. Importantly, full vaccination coverage had risen sharply since 2000, when it was 31%, but had fallen somewhat since 2010. (DHS 2014, Figure 14.1).

It can be expected that the next cohort of Cambodian youth to enter the labour force will on average have had better nutrition and less severe health issues than those who have recently joined the labour force. As noted above, trends have been in the right direction. But while the indicators of nutritional improvement are very welcome, there is still a need for more intensive interventions to lower these rates further. For example, school lunch programmes can both help keep children in school and contribute to their improved nutritional status. Better nutrition and health through childhood can make an important contribution to young people’s productivity when joining the workforce.

#### **4.4. Maternal health and reproductive health**

As shown in Table 2.3, Cambodia’s maternal mortality ratio is lower than Lao PDR, Indonesia and Bangladesh, and considerably lower than Myanmar. Cambodia’s MMR showed a dramatic decline from 472 in 2000 to 160 in 2017. The National Strategic Development Plan (p. viii) sets a goal for Cambodia is to lower the ratio from 170 in 2014 to 100 by 2023.

The Cambodia DHS provides information on maternal health and safe motherhood. Some information was already presented in Table 2.3. In Table 4.1, additional information is provided, on trends over time in place of delivery, assistance by trained personnel, and postnatal check-up. The data show a remarkable improvement over the course of just 14 years, in each of the indicators. Most remarkable of all was the increase in the proportion of deliveries in a health facility, from just 10% in 2000 to 83% in 2014.

**Table 4.1. Trends in safe delivery and postnatal check-up, 2000-2014**

<b>Year</b>	<b>% of deliveries in health facility</b>	<b>% of births attended by trained personnel</b>	<b>% postnatal check-up in first 2 days after birth</b>
2000	10	32	42
2005	22	44	64
2010	54	71	70
2014	83	89	90

Source: Cambodia DHS 2014

These trends in safe motherhood indicators have important implications, not only for the wellbeing of the women concerned, but also for the wellbeing of their children and for improving economic productivity. Women with fewer or no post-natal complications are in a better health state to raise their children effectively, and to return to economic activities themselves.

#### **4.5. Family planning**

Adoption of family planning, through its effects on fertility rates, was closely linked to the circumstances resulting in the demographic dividend. Family planning is also closely linked to the possibilities of benefiting from the demographic dividend. Women who can achieve their desired family size, and avoid unwanted pregnancies, are more likely to avoid health complications of too-frequent pregnancies, raise their wanted children well, and to have a broader range of options for their time utilization as their family grows up than women who gave birth to unwanted children.

As shown in Table 4.2, the contraceptive prevalence rate rose strongly between 2000 and 2014 - not surprisingly, as its trend would be expected to be the inverse of the strong downward trend in fertility experienced over the same period. Possible shortcomings in the way family planning is promoted and services provided, however, are hinted at by the rather high proportion of traditional rather than modern contraceptive methods. The gap between total contraceptive prevalence and prevalence of modern methods widened from 5 percentage points in 2000 to 13 percentage points in 2005, and further to 16 percentage points in 2010 and 18 percentage points in 2014. A well-executed family planning program should be able to narrow this gap in future.

**Table 4.2. Trends of fertility, contraceptive prevalence and unmet need for family planning**

Year	TFR (3 years preceding survey)			CPR	CPRm	Unmet need for FP
	Cambodia	Urban	Rural			
2000	4.0	3.1	4.2	23.8	18.5	33
2005	3.4	2.8	3.5	40.0	27.2	25.1
2010	3.0	2.2	3.3	50.5	34.9	16.6
2014	2.7	2.1	2.9	56.3	38.8	12.5

**Source:** Cambodian Demographic and Health Surveys for 2000, 2005, 2010, 2014.

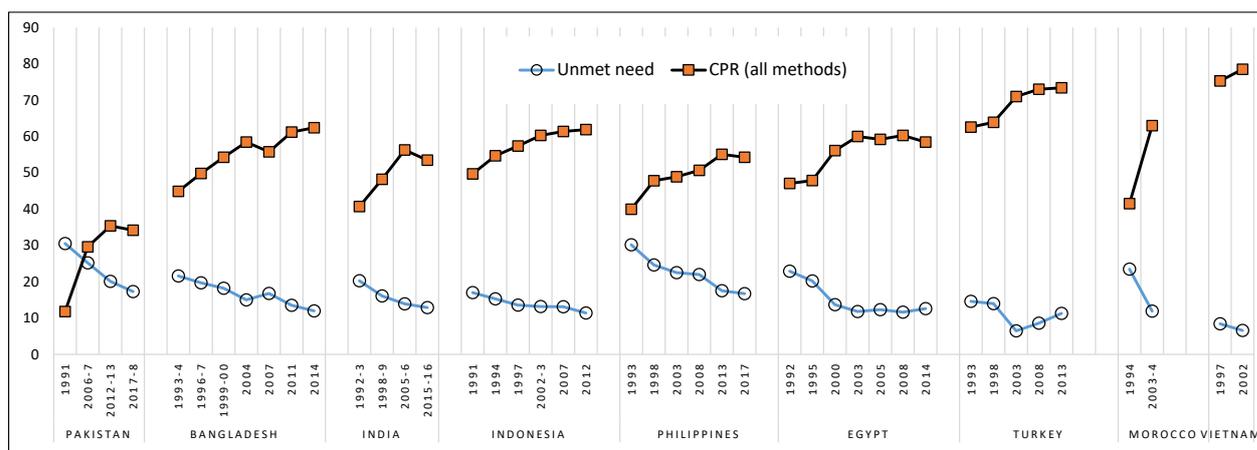
**Note:** CPR is the contraceptive prevalence rate. CPRm is the prevalence of modern contraception.

Table 4.2 also shows the trend in unmet need for family planning. This has declined steadily in Cambodia, from the high figure of 33% in 2000 to 12.5% in 2014, indicating that over this period of declining fertility, an increasing proportion of women have been able to meet their family planning needs, even if not always by the method they would most prefer.<sup>17</sup>

What typically happens to unmet need as contraceptive prevalence rates rise and fertility falls? The data in Figure 4.7 shows the trends in a number of countries. Typically, levels of unmet need fall as CPR rises. Usually, this reflects in part the increasing success of family planning programs and private sector suppliers in meeting the needs of couples. In Cambodia, too, unmet need has been declining as CPR was rising, appearing to reflect a degree of success in meeting the birth spacing and stopping needs of women.

<sup>17</sup> Indeed, it can be argued that family planning programmes should emphasize reducing unintended pregnancies among women who are already using contraception, rather than focusing exclusively on fulfilling unmet need among women who are not using contraception (Jain, 1999).

**Figure 4.7. Trend of Contraceptive Use and Unmet Need for Family Planning among various Countries**



Source: National Institute of Statistics

An important driver of future practice of contraception and of fertility levels is the desire for more children by women and men with different numbers of children. Table 4.3 gives some information on this. The desire of Cambodian couples to limit childbearing to a relatively small number of children is clear, as almost half of both women and men with two living children do not want any more, and almost three quarters of those with three living children do not want more.<sup>18</sup> This indicates a substantial demand for family planning services. This demand is being met to a considerable extent; the decline over time in unmet need, a halving between 2005 and 2014 from 25% of currently married women aged 15-49 to 12.5% (see last column of Table 4.2) is very impressive. However, there is still more to be done, as the remaining unmet need in 2014 (12.5%) was still quite considerable. We do not know how unmet need has changed in the quite long interval since 2014, but if it has remained at the 2014 level, it can be inferred that providing more effective family planning services in future is not likely to lead to a very substantial further decline in fertility, because it is never possible to succeed in meeting the entire unmet need.

**Table 4.3. Percent of currently married women and men aged 15-49 who want no more children, by number of living children: 2005, 2010 and 2014**

Want no more children: survey year	Number of living children							Total
	0	1	2	3	4	5	6+	
<b>WOMEN</b>								
2005	3.8	12.3	46.1	67.8	82.3	83.6	83.2	55.5
2010	2.8	10.8	49.2	73.4	80.6	90.2	88.2	53.8
2015	4.4	9.6	48.4	71.0	79.3	81.8	85.7	48.4
<b>MEN</b>								
2010	7.9	9.4	43.8	68.6	86.4	89.8	93.6	52.3
2015	6.3	8.7	48.4	70.2	84.8	85.6	93.8	49.8

Source: Table 9.3 from CDHS 2005, Table 9.1 from CDHS 2010 and Table 10.1 from CDHS 2014.

<sup>18</sup> This is very similar to the figures in Indonesia, where 73% of women and 62% of men with 3 living children wanted no more, and much higher than in Pakistan, where only 43% of both women and men with 3 living children wanted no more (data for 2017 for both countries).

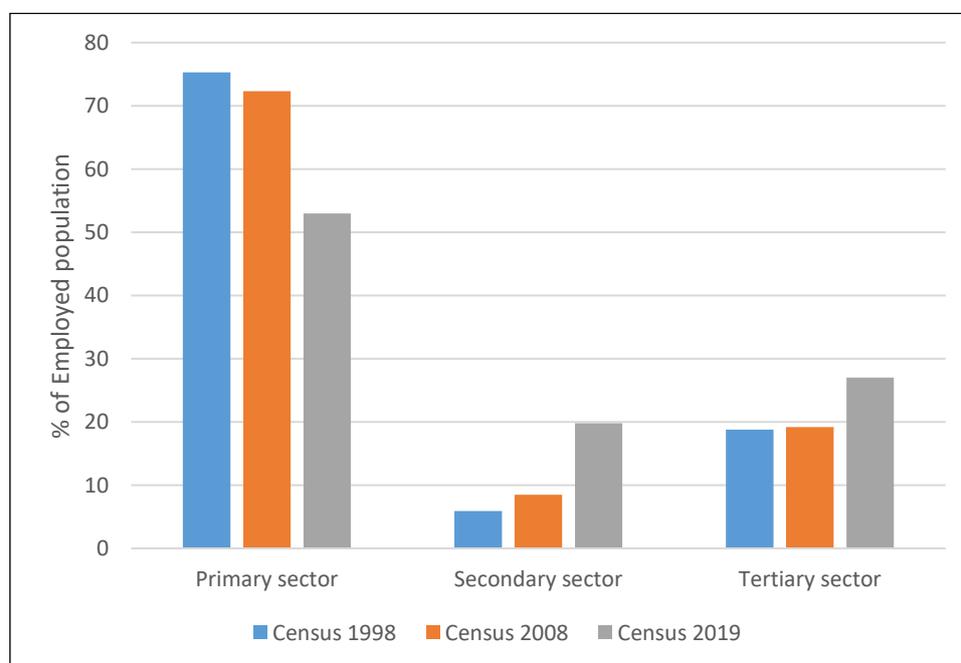
#### 4.6. The economy and employment

Benefiting from the demographic dividend requires a strong economy, providing productive employment opportunities for the increasingly well-educated cohorts of young people graduating from the education system. Cambodia has a very high labour force participation rate, for both men and women. Whereas some South Asian countries have very low proportions of working-age women in the workforce (about 22% in India and Pakistan, higher in Bangladesh and Sri Lanka), in Cambodia, 76% of all women aged 15+ are in the workforce. The female labour force participation rate is higher in rural than in urban areas, but even in urban areas, 59% of women aged 15+ are in the workforce.

It is very positive that high proportions of Cambodians are working, but an important issue from a socio-economic planning point of view is whether these people are working in productive occupations, earning enough to support their families adequately and making a strong contribution to national product.

There are various sources of information to help in understanding this issue. In Chapter 2, it was noted that primary industry's share of Cambodia's national product has been declining, reaching as low as 23% in 2019. Yet agriculture's share of employment is about 55% (NIS, 2021, Table 2.16); see also Figure 4.6. This means that product per worker in agriculture is far lower than in the other sectors of the economy. Secondary industry, with 19% of the labour force, produces 34% of Cambodia's output, and the tertiary sector, with 27% of the labour force, produces 40% of the output. Overall, then, product per worker in manufacturing is about 4.3 times that in agriculture, and product per worker in services is about 3.6 times that in agriculture.

**Figure 4.8. Employed population aged 15-64: Percentage by industrial sector**



**Source:** National Institute of Statistics, 2021: Figure 2.51.

To deal with this issue, two trends are needed: in the primary industry sector, the product mix needs modification to move towards higher value crops, livestock and fishing and aquaculture products, and technology to raise yields needs to be adopted; at the same time,

be fostered. These needs are well recognized by Cambodian development planners and among its development partners.

The projected growth of the working-age population in Cambodia will continue at the rate of less than 1.7% per annum over the 2020s and 1.2% per annum over the 2030s. An economic growth rate of 7% per annum, which has been achieved over a sustained period in the past before COVID-19 caused a setback, and which can probably be regained once COVID-19 has been controlled around the world, should be enough to provide ample employment opportunities for the growing workforce. Cambodia's very low unemployment rate of 1.2%, not very much higher in urban areas, testifies to the ability of the economy up to this point to absorb the potential workers, albeit there is substantial underemployment and inadequate employment, or a mismatch between a worker's skills and the work she or he is actually engaged in. The key issue will be, not whether jobs will be available to absorb the net increase in the working population into employment, but the **kinds** of jobs that can be provided, given the need to raise levels of productivity and income in Cambodia to move into the upper middle income group of countries.

#### ***4.7. Policies for improving economic competitiveness and diversification and sustaining strong economic growth***

Different reports have summarized the policies needed to improve Cambodia's economic competitiveness and sustain strong economic growth. For example, in the review of Cambodia's performance in meeting the SDGs, it is noted that Cambodia needs to diversify and expand its manufacturing base by moving away from labour-intensive industries – notably the garment industry – to those that demand a more skilled workforce, more advanced technologies, and higher value added. Registration of unregistered companies should be accelerated, the roughly 100 measures in the Industrial Development Policy 2015-2025 need to be implemented, the numerous challenges facing the One Village One Product (OVOP) need to be dealt with, and improved infrastructure is needed to support the development of tourism (Kingdom of Cambodia 2019: 25).

Similarly, the National Strategic Development Plan 2019-2023 notes that Cambodia's growth base remains narrow. "The current growth pillars i.e. agriculture, tourism, garment and construction cannot ensure high growth in the long term due to structural change of domestic economy and demography, rising competition and vulnerability to external shocks. In this regard, it is necessary to identify new sources of growth through promoting the development of new economic sectors, creating and increasing value-added in the existing growth pillars." (Royal Government of Cambodia, 2019: 175). Priorities mentioned include transforming Sihanoukville Province into a multi-purpose Special Economic Zone; formulating and implementing the garment and footwear sector development strategy to improve competitiveness, create value-addition, establish supporting industries and develop the industry's value chains; further improving the operation of SEZs to attract more investment and create industrial bases; and preparing a master plan for the tourism sector (Ibid).

#### ***4.8. Adolescents and youth as a priority group***

Adolescents and youth will be on the front line with regard to the issues of education, economic growth and employment discussed in this chapter. As already shown, the adolescent and youth population (age 15-29) in Cambodia is a numerically very important group, in 2019

numbering 4.1 million and accounting for 26.4% of Cambodia’s population. This group is important for other reasons as well. Comprising as it does young people completing their education, beginning to form families, entering the labour force, or in the early stages of their working career, this group will play a significant role in Cambodia’s development trends over the coming decade and beyond. Therefore, suitable policies of youth development are essential in ensuring that youth are able to lead a fulfilling life and their potential mobilized to support national development efforts.

First, the projected trends in the adolescent and youth population are shown in Table 4.4. It was noted in Chapter 3 that Cambodia’s “youth bulge” – if defined as a peak in the share of the age group 15-29 in the total population – had already ended by 2010. The proportion of the youth population will keep declining over the next three decades (though only fairly slowly, especially in the rapid fertility decline projection).

**Table 4.4. Trends in Cambodia’s youth population (aged 15-29)**

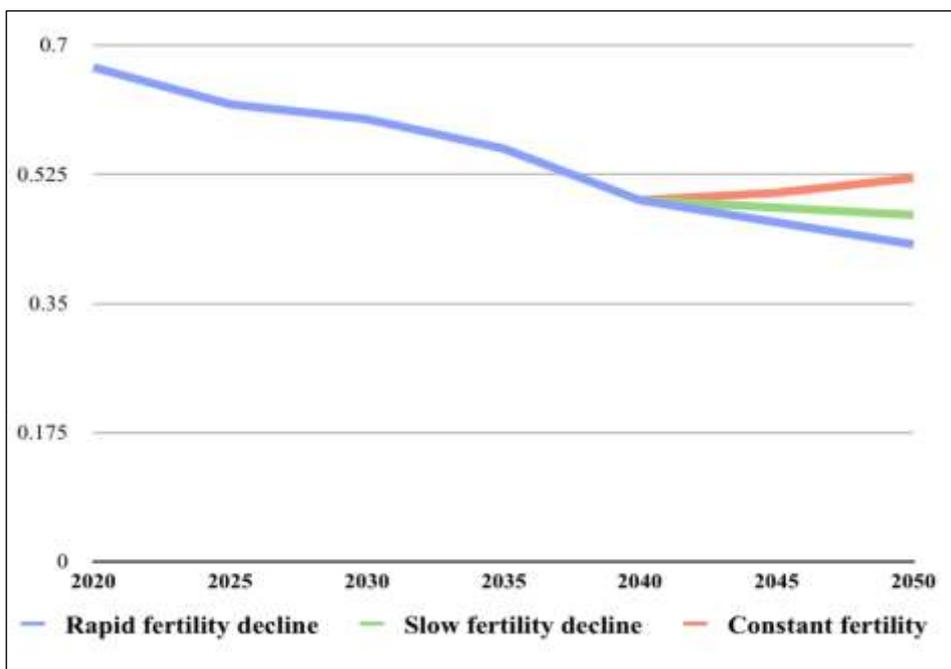
<b>Projection</b>	<b>2020</b>	<b>2025</b>	<b>2030</b>	<b>2035</b>	<b>2040</b>	<b>2045</b>	<b>2050</b>
	<b>Population aged 15-29 ('000)</b>						
Rapid fertility decline	4,253	4,480	4,699	4,746	4,631	4,590	4,401
Slow fertility decline	4,253	4,480	4,699	4,750	4,711	4,817	4,847
Constant fertility	4,253	4,480	4,699	4,753	4,793	5,083	5,385
	<b>Percentage of total population</b>						
Rapid fertility decline	26.0	25.5	25.1	24.0	22.5	21.6	20.3
Slow fertility decline	26.0	25.4	24.8	23.5	22.0	21.5	20.7
Constant fertility	26.0	25.3	24.4	22.9	21.5	21.4	21.4
	<b>Percentage change in numbers aged 15-29</b>						
		<b>2020-2030</b>		<b>2030-2040</b>		<b>2040-2050</b>	
Rapid fertility decline		10.5		-1.4		-5.0	
Slow fertility decline		10.5		0.3		2.9	
Constant fertility		10.5		2.0		12.4	

Source: National Institute of Statistics

The actual numbers of youth will increase by 10.5% over the 2020s, but in the 2030s will increase no more, or even decline slightly in the rapid fertility decline projection. The important implication of this is that there will be a significant “ageing” within the working-age population, because the numbers aged 30-64 will continue to grow rapidly. Trends in the ratio of youth (15-29) to older working-age population (30-64) are shown in Figure 4.7. There will be a sharp decline in this ratio in all projections, though the ratio will rise again slightly in the 2040s in the constant fertility projection.

An important implication of the slower growth – and then cessation of growth - of the younger segment of the working population is that this will slow the transition to higher average educational attainment of the working population as a whole, because the newly entering workers are, on average, better educated than the older workers. This underlines the importance of ensuring that each cohort of youth receives better education than the cohort preceding it, which will help offset the effect of the decline in the youth cohort’s share of the working age population in slowing the increase in the overall educational attainment of the labour force.

**Figure 4.9. Ratio of population aged 15-29 to population aged 30-64.**



Source: National Institute of Statistics

As already noted, Cambodia did remarkably well in raising educational enrolment ratios of its youth population at the time when the “youth bulge” was taking place. But the task is far from completed. In 2019, about 42% of Cambodians aged 15-24 had lower secondary education or above. While this is considerably higher than the figure of 27% in 2008,<sup>19</sup> it means that the majority of the youth population have an educational level lower than that needed to fit them for work in the more productive sectors of the economy. In countries such as Republic of Korea and Singapore, roughly 97 or 98% of the youth population have lower secondary education or above.<sup>20</sup> That is the level Cambodia should be aspiring to if it seeks to raise its economy to the levels reached in these two countries. Using Thailand as a comparator, being a country not quite in the same league of socio-economic development as the Republic of Korea or Singapore, roughly 78% of Thai youth have lower secondary education or above.

Cambodia’s voluntary national review of the SDGs in 2019 gave considerable attention to SDG4<sup>21</sup>, providing a detailed table on progress in achieving the targets for a long list of indicators. By 2018, Cambodia was ahead of target or on track to reaching all of the targets, except for one where data were not available (Kingdom of Cambodia 2019, Table 3). The government aims to “ensure that all schools transform themselves into learning organizations ensuring high quality education for all through competent, motivated and well-supported teachers in the smart classrooms providing the best opportunities to learn to all students ...” (Kingdom of Cambodia, 2019: 22).

<sup>19</sup> Both figures are calculated from Tables 4.3.1 and 4.4.1 in the 2019 Population Census report. Figures for educational attainment in the census report age given only for the literate population, but figures for the overall population can be calculated by adjusting for the proportion literate.

<sup>20</sup> In Republic of Korea, OECD data show that 70% of 25-34 year olds have completed some form of tertiary education.

<sup>21</sup> “By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes.”

Some of Cambodia’s targets for SDG4 are relatively modest, and meeting them will not necessarily mean that the education system is enabling all young people to reach even basic levels of education, or that those who do will be able to become perceptive, well-educated and productive members of society later in life. For example, targets 4.1.1 and 4.1.2 are to reach completion rates of 84% in primary school and 44% in lower secondary school by 2018. Target 4.a.2 is to ensure that the proportion of schools with basic sanitation facilities (an important consideration for parents, particularly in relation to sending daughters to school) reaches 66%.

Cambodia’s adolescent and youth population makes up a larger proportion of the urban population (29.0%) than of the rural population (24.6%). This results in particular from migration of young people from rural to urban areas in search of good education and the jobs that are available in urban areas. The main focus of such migration is the capital city of Phnom Penh.

Table 4.5 shows the status of Phnom Penh’s population aged 15-29 – whether they were born in the city, or if born elsewhere, how long they have lived in Phnom Penh. The bottom part of the table shows the same information for those who are employed. A considerably higher proportion of employed males and females aged 15-29 were migrants: for example, while 44% of males aged 15-29 were migrants, among working males aged 15-29, 51% were migrants. This serves to emphasize that among adolescents and young adults the motive of seeking work is a key factor attracting them to Phnom Penh.

**Table 4.5. Percent distribution of length of residence for Phnom Penh residents aged 15-29 by sex: 2019**

Sex and age group	Born in Phnom Penh	Born elsewhere			Total	Number
		Length of residence				
		Less than 2 years	2-9 years	10+ years		
All males 15-29	56.0	16.6	20.9	6.5	100	337,212
All females 15-29	53.4	16.4	23.2	7.0	100	369,484
Employed males 15-29	48.8	20.2	24.3	6.7	100	220,969
Employed females 15-29	46.2	19.7	27.0	7.1	100	235,443

Source: NIS, forthcoming, Table 28.

The migration of large numbers of youth to the cities has exacerbated housing issues, which were already severe as a result of lack of social housing policy and the emphasis of developers on the housing needs of middle and upper income groups. In May 2014, the Council of Ministers approved a National Housing Policy, focused on providing low and middle income families with adequate housing and improving mechanisms for tenure security. However, little progress appears to have been made in reaching these goals.

A Youth Well-being Policy Review of Cambodia was prepared by the OECD Development Centre in 2017 in co-operation with the Ministry of Education, Youth and Sports (MoEYS) of Cambodia. This valuable study first provided Cambodian youth profiles and discussed the policies and institutional framework for youth, then the remainder of the report

focused on two areas – (1) characteristics and pathways of school dropouts, and (2) employment challenges for young women in Cambodia.<sup>22</sup>

Some of the key findings of this study are as follows:

- (1) In relation to education: Cambodia has made significant progress in achieving universal primary education. But, especially at secondary school level, both access and quality of education are crucial issues, and indicate a need for more relevant school curricula, better trained teachers and more resources for school improvements. Young Cambodians themselves are pessimistic about the return on investment in education.
- (2) Limited education and training, poor access to job information and inadequate skills make it hard for young people to integrate into the labour market. “Skills shortage is the biggest challenge in the labour market. Only 31% of youth have matching qualifications for their occupations, while 23% are over-educated and 46% are under-educated” (OECD Development Centre, 2017: 37). About half of working youth in Cambodia are in the agriculture sector; to enable more of them to break out of the hard labour and low income this involves for most, policies support the training of farmers and rural youth in business development and marketing.
- (3) Teenage (15-19) pregnancy affects 12% of girls. Early marriage and early pregnancy negatively affect education and employment outcomes of young women. Young rural women are three times more likely to become teenage mothers than their urban peers.
- (4) Youth participation in politics has been limited. Most youth, especially those living in rural areas and migrant workers in towns, are excluded from the initiatives of political parties and NGOs. The spread of social media, however, is enabling youth to be more informed and increasingly engaged in civic and political activities.

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<sup>22</sup> Note: The OECD youth study took youth as 10-24. But the ILO-supported study (SWTS) in 2014 took youth as 15-29.

#### Box 4. The Youth Well-being Policy Review of Cambodia

The Review made the following recommendations for government action:

##### Health

- Improve SRH services for youth, especially for young women in rural areas
- Promote youth-friendly health services and gender-sensitive clinics
- Implement SRH education in schools and communities to overcome gender-based discriminatory social norms

##### Employment

- Promote on-the-job-training and flexible Technical and Vocational Education and Training (TVET) to address the skills mismatch issue
- Review the TVET system in depth, align training with the needs of new sectors and SMEs
- Introduce certification schemes to improve signalling to potential employers, especially for youth in the informal sector

##### Education

- Remove economic barriers leading to early school dropout through conditional cash transfers
- Improve transport infrastructure to facilitate physical access to school from remote areas
- Provide training and better salary incentives to teachers to improve the quality of education
- Adapt school programmes to the seasonality of agriculture activities so as to keep children in school
- Offer second-chance programmes and vocational training to out-of-school and low-skilled youth

##### Participation

- Make civic activities part of the regular school curriculum
- Raise awareness about how youth can become better informed and engaged citizens
- Establish open debates and a formal inclusion of youth in decision making
- Use social media to foster more open political debate and respect for freedom of speech, so that youth can voice their opinions without fear

Another very important source of information about issues facing Cambodia's youth is the School-to-work-transition survey (SWTS), which provided a rare opportunity to analyse the specific challenges of young people in the labour market. The data collected provided rich insights into these challenges. For example, Table 4.6 shows the reasons for leaving school for youth with uncompleted education; economic reasons (could not afford, too poor, needed to earn money to support the family) make up a massive 62% of all such cases. By contrast, "no school nearby" was mentioned by only 4% of respondents. Clearly, provision of more accessible schools would make little difference to continuation of young people in school unless the economic reasons for dropping out were dealt with.<sup>23</sup>

The SWTS results also provided information on educational attainment of youth compared with that of their parents. The significant improvement of educational attainment over time is clearly evident. In total, 54% of youth finished their education at a level higher

<sup>23</sup> Another survey – the Cambodia Socio-Economic Survey 2017, Table 14 – also collected information about the reasons for not attending school, but for a younger age group – aged 6-17. But again, the economic reasons were mentioned in 60% of cases, and lack of a school nearby by only 1%.

than their father and 70% finished higher than their mother. Only 6% of youth stated their father finished his education at a higher level than themselves and 2% claimed to be less educated than their mother.<sup>24</sup>

**Table 4.6. Youth with uncompleted education by reason for leaving school, 2014**

	<b>Total (%)</b>	<b>Male (%)</b>	<b>Female (%)</b>
Failed examination	7.0	9.8	5.1
Not interested in education/training	3.5	3.9	3.3
Wanted to start working	12.7	11.7	13.4
To get married	3.5	2.3	4.4
Parents did not want me to continue	3.0	2.0	3.6
Economic reasons (could not afford, too poor, needed to earn money to support family)	62.0	61.9	62.0
No school nearby	4.2	3.0	5.0
Other	4.1	5.4	3.2
Total pre-primary school leavers	100.0	100.0	100.0
Number	2,491,358	1,014,449	1,476,909

**Source:** School-to-work-transition survey (SWTS), 2014. Kanol (ed), 2015, Table 10.

The main findings of the SWTS have been summarized in Kanol (ed), 2015: 2-4, as follows:

- Too many young people are not benefiting fully from the education system, but still there has been clear progress in the area of education when this generation of youth is compared with previous generations.
- Education has a significant influence on the young person’s labour market transition
- Unemployment is low among youth in Cambodia, but higher unemployment rates among the more educated youth implies a mismatch between education and skills demand in the labour market.
- The vast majority of young Cambodians are working, but the quality of employment is often low, which does not allow the youth (and the country) to make the most of their economic potential.
- Agriculture remains the most important employer in the country.
- Most youth in Cambodia have already completed their labour market transitions and the transitions were relatively short, reflecting low turnover in the Cambodian labour market.
- Urban residence, household income and level of education are good determinants of who does better in the labour market transition. Young men have a slight advantage over young women in obtaining the few “good” jobs and completing their labour market transition.

Moving on to other youth issues, there are a number of risk areas for youth in matters related to sexual activity. These can be related to early marriage, early onset of sexual activity (whether within or outside marriage), resultant adolescent pregnancies, and incidence of sexually transmitted infections (STIs) and HIV/AIDS. The Cambodia DHS 2014 provides information on these matters.

Teenage childbearing is a major health concern because teenage mothers and their children are at high risk of illness and death. The social consequences of teenage childbearing

<sup>24</sup> There was quite a large group – about 13% - who did not know the educational level of their parents.

can also be dire, curtailing women’s educational and employment opportunities. Table 4.7 shows the proportion of young Cambodian women (age 15-19) who have begun childbearing (i.e. have had a live birth or are pregnant with their first child), by certain background characteristics. Overall, 12% of these young women have begun childbearing, the great majority of them at ages 17 and upwards. Teenage childbearing is much more common in rural than in urban areas, and among those with primary school education or less. It is much less common among those in the two highest wealth quintiles (not shown).

**Table 4.7. Percentage of women age 5-19 who have begun childbearing, 2014**

Background characteristic	% who have begun childbearing	N
<b>AGE</b>		
15	0.6	640
16	3.8	556
17	7.9	577
18	18.4	577
19	31.3	542
<b>RESIDENCE</b>		
Urban	6.2	532
Rural	13.3	2,361
<b>EDUCATION</b>		
No education	37.1	82
Primary	18.4	852
Secondary and higher	8.1	1,959
<b>ALL WOMEN AGE 15-19</b>	<b>12.0</b>	<b>2,893</b>

Source: 2014 DHS, Table 6.8

Information on self-reported prevalence of STIs and STI symptoms among women and men who have ever had sexual intercourse was also collected in the DHS. Among those aged 15-24, 4.4% of women and 0.6% of men reported having had an STI in the 12 months before the survey. When those who had experienced abnormal genital discharge or a genital sore/ulcer are added, a total of 11.8% of women and 2.7% of men in this age group reported either having an STI or symptoms of an STI in the 12 months preceding the survey.<sup>25</sup>

How serious an issue is HIV/AIDS in Cambodia? And in particular, for young people? Cambodia, along with Thailand, was previously a “hotspot” for HIV/AIDS in Asia. However, efforts to combat the disease have been very successful. In 2018, 1,300 people died of HIV/AIDS, down 48% from over 2,500 deaths in 2010. New infections numbered 880, down 62% from 2,300 in 2010. There have been changes in the main ways of transmission, however. In 2018, 25% of new HIV infections were among men who have sex with men, more than a three-fold increase from 7% in 2010 (Shi, 2019).

The most common mode of HIV transmission in Cambodia is through unprotected sex with an infected person. Therefore, it is important to know what proportion of young women and men aged 15-24 have sexual intercourse with more than one partner. This proportion was very low in the 2014 DHS: only 0.1% of young women and 1% of young men reported having more than one sexual partner in the previous 12 months. This may, of course, have been under-

<sup>25</sup> One reason for the higher proportion among women than among men is that the symptoms of genital discharge among women do not always result from an STI.

reported. It is striking that 25% of young women and 18% of young men who had sexual intercourse in the 12 months before the survey had been tested for HIV, suggesting that more than one partner may have been more frequent, or alternatively that trust in the faithfulness of the one partner was not high (see DHS Tables 18.16 and 18.17).

#### **4.9. Policy recommendations**

1. The potential role of the youth population in Cambodia's future development will be greatly affected by the way the education system develops. Despite success in raising educational enrolment ratios, the quality of education received by the cohorts entering or soon to enter the labour force is not satisfactory, and will leave many young workers lacking the kinds of skills needed in the modernizing economy Cambodia seeks to achieve. Cambodia's aspirations to build a digital economy and society (Royal Government of Cambodia, 2021) and higher productivity industries require the school system to play its part. Upgrading of the quality of Cambodia's education system is an urgent priority.
2. Raising enrolment ratios and educational quality needs to go hand in hand with plans for modifying the employment structure, and should be directed especially to filling the labour requirements of higher-productivity industries being built up within Cambodia. The education system should be providing young people with the kinds of education, skills and problem-solving ability that is needed in such an economy. Educational, industrial, and labour market planning must go hand-in-hand in this endeavour.
3. Strong emphasis should be given to ensuring that all children complete primary education and proceed into, and through to completion of, secondary school. With only a slow increase, and then contraction, in numbers of children, it should be possible to make good headway with this.
4. Economic reasons have been shown to be the main cause of early school dropout. Therefore, conditional cash transfer programs, as recommended by the Youth Well-being Policy Review (see Box 3) and the School Feeding Breakfast Program (included in the National Social Protection Policy Framework, p. 14) are important initiatives that need to be pursued vigorously. As well as ensuring better continuation rates, they can contribute to better equity in the education of children.
5. Likewise, strong progress is needed in provision of early childhood education. It has been persuasively argued that investment in early childhood development is the most cost-effective among all the social investments (Heckman, 2006). Early childhood education has been shown in international studies to facilitate major improvement in educational performance at higher levels of the system. It also has the potential to level the educational playing field if emphasis is on provision of pre-school education to disadvantaged groups (UNDP 2019: 76-78), though it must be recognized that it can further widen educational differentials if it is availed of mainly by wealthier groups. Increasing the access to early childhood education with quality, equity and inclusiveness is mentioned as a priority in the National Strategic Development Plan 2019-2023 (p. 144).
6. Levels of unwanted fertility and of unmet need for family planning are quite high, though declining over time. Therefore, efforts to improve availability and choice of family planning methods, especially in more disadvantaged communities, are needed. This will

enable a higher proportion of women to meet their goals for the number and spacing of their children.

7. Practical steps are needed to broaden the understanding of sexual and reproductive health and rights to include meeting the needs of unmarried youth and adolescents, and provision of appropriate services to them.

## Chapter 5

### The Gender Dividend

#### *5.1. Gender dividend*

Gender dividend refers to an economic growth potential resulting from investments in women and girls. The term “the gender dividend” is being increasingly used. It is important to understand the meaning being given to this term. The main idea is that, because gender inequality has negative impacts for girls and women throughout their lives, reducing gender inequality is the right thing to do; **but there are also substantial economic benefits resulting from reduction of gender inequality.** Hence the gender dividend has been called the “business case” for gender equality, in that overcoming the negative influences of gender inequality on human capital would bring about a significant increase of human capital and productivity of the labour force (National Institute of Statistics, 2021: 135).

One study of the costs to economies of gender inequality argued that they occur in five main areas: “(1) earnings and standards of living; (2) educational attainment, child marriage and early childbearing; (3) fertility and population growth; (4) health, nutrition, wellbeing and violence; and (5) agency, decision-making, and social capital” (Wodon et al., 2020: 13). The same study recommended solutions to achieve gender equality, along a simple life cycle model: “(1) Investments in early childhood development to reduce the impact of gender inequality on young children; (2) Investments in adolescent girls to delay marriage and childbearing while also improving educational opportunities; and (3) investments in adult women to improve employment and earnings opportunities and increase human capital wealth” (Wodon et al., 2020: 13)

A United Nations report notes that “advocates for equality between women and men have long made the case that women’s empowerment benefits everyone – not just women” (UN Women, 2011). The World Economic Forum reports that across 134 countries, greater gender equality correlates positively with per capita Gross National Product. UN-ESCAP estimates that the Asia-Pacific region alone loses more than US \$40 billion per year because of women’s limited access to employment, and \$16-\$30 billion because of gender gaps in education (UN Women 2011).

#### *5.2. Some demographic characteristics of Cambodia’s female population*

In the 2019 Population Census, females comprised 51.3% of Cambodia’s total population. Many characteristics of the female population have already been discussed in Chapter 4, particularly those relating to the adolescent and youth population (aged 15-29). Some summary demographic characteristics of the male and female populations are shown in Table 5.1.

The marital status of the population aged 15+ differs considerably between males and females. More males than females remain single, whereas more females than males are currently married. The male-female difference is greatest in the case of the marital status categories of widowed and divorced, which include roughly three or four times as many women as men. These differences are related to the tendency for men to marry women younger than themselves, so that a larger proportion of wives than husbands outlive their spouse, and also for remarriage after divorce or widowhood to be more common for men than women.

The literacy rate in Cambodia is higher in urban than in rural areas, and gender differences in literacy are wider in rural areas. The same is true of the proportions proceeding to lower secondary education or above. These are considerably higher among males at ages above 25, but rising proportions of girls proceeding further in school has resulted in the male-female difference almost disappearing at age 20-24. Labour force participation rates are higher for males than females at ages above 25, but lower at ages 15-24. In international perspective, Cambodia's female labour force participation rates are very high - far higher than in South Asian countries, and indeed the highest among all ASEAN countries (NIS, 2021, Table 4.1).

**Table 5.1. Some demographic characteristics of Cambodia's male and female population, 2019**

Characteristic	Males	Females	Male/female ratio
<b>Total population ('000)</b>	7,572	7,980	0.95
<b>Marital status, population aged 15+ ('000)</b>			
Single	1,629	1,389	1.17
Married	3,447	3,819	0.90
Widowed	79	362	0.22
Divorced	66	172	0.38
<b>Literacy, population aged 15+ (%)</b>			
Urban	95.3	91.4	1.04
Rural	87.8	80.2	1.09
Total	90.9	84.8	1.07
<b>% with lower secondary education or above</b>			
Age 20-24	47.0	45.2	1.04
Age 25-59	37.0	26.9	1.38
Age 60+	24.3	18.0	1.35
<b>Labour force participation rate, age 15+</b>			
Age 15-24	57.1	63.2	0.90
Age 25-59	96.8	87.3	1.11
Age 60+	75.5	53.7	1.41
All ages 15+	80.8	76.0	1.06

Source: 2019 Population Census

### 5.3. Cambodia's female workforce

A high proportion of Cambodian women are in the workforce. What are they doing? This can be considered from the perspective of the industry and occupation in which they are employed, which is shown in Tables 5.2 and 5.3. The distribution of male workers across these industries and occupations is also shown, as an aid to interpretation of the female patterns.

There is little difference between males and females in the allocation of the workforce between the three broad sectoral divisions- primary, secondary and tertiary, though female workers do outnumber males slightly in the primary sector and by more in the secondary sector, while males outnumber females by a wider margin in the tertiary sector. However, focusing on particular sub-sectors within the secondary and tertiary sectors, much wider gender differentials emerge. Within the secondary sector, manufacturing is the dominant area for female employment, providing 17% of all female employment and employing only 66 males per 100 females. The ready-made garment sector is the dominant area of manufacturing for women. By contrast, construction is a dominant sector for males, employing 8% of employed males but only 2% of employed females. Wholesale and retail trade is an important

employer of both men and women, but women do predominate, with only 73 males per 100 females employed in this sector. Wholesale and retail trade provides 12.6% of all work for females in Cambodia. Most of the other sectors in the table are male-dominant, but still provide considerable employment for women. Administrative and support service activities employ 1.9% of working women, and education 1.7%.

**Table 5.2. Employed population by economic sector and main industry category by sex**

	Number employed		% distribution		Sex ratio
	Males	Females	Males	Females	
<b>TOTAL</b>	4,396,850	4,229,927	100	100	103.9
Total primary sector	2,324,621	2,385,224	52.9	56.4	97.5
Total secondary sector	788,934	833,215	17.9	19.7	94.7
Total tertiary sector	1,283,295	1,011,488	29.2	23.9	126.9
<b>Main industrial categories</b>					
Agriculture, forestry and fishing	2,324,621	2,385,224	52.9	56.4	97.5
Manufacturing	408,690	734,130	9.3	17.4	55.7
Construction	356,104	91,105	8.1	2.2	390.9
Wholesale and retail trade; repair of motor vehicles & motorcycles	388,458	532,038	8.8	12.6	73.0
Transportation and storage	193,118	24,298	4.4	0.6	794.8
Accommodation & food service activities	63,218	88,198	1.4	2.1	71.7
Financial and insurance activities	37,803	25,377	0.9	0.6	149.0
Professional scientific and technical activities	24,847	19,469	0.6	0.5	127.6
Administrative and support service activities	113,925	79,711	2.6	1.9	142.9
Public administration and defence; compulsory social security	213,327	46,822	4.9	1.1	455.6
Education	85,400	72,504	1.9	1.7	117.8
Human health and social work activities	27,469	24,823	0.6	0.6	110.7
Arts entertainment & recreation	32,064	28,832	0.7	0.7	111.2
Other service activities	87,453	59,438	2.0	1.4	147.1

**Source:** National Institute of Statistics

**Note:** Industry categories with fewer than 5,000 females employed are omitted.

Table 5.3 shows the 10 most common industrial groups for women. The importance of agriculture, the garment industry and retail industries is clear. Apart from these activities, no other industry category employs more than 1.4% of the female workforce. There are many industrial groups that do not reach into the top ten, as evident from the 15% of total female employment in the “all other” category, which combines all industrial groups employing fewer than 0.9% of the female workforce.

**Table 5.3. Cambodia: Top 10 most common industrial groups for women, 2019.**

Industrial group	Number employed women	% of total employed women
TOTAL	4,229,927	100.0
Growing of non-perennial crops	2,137,931	50.5
Manufacture of wearing apparel	639,047	15.1
Retail sale in non-specialized stores	272,618	6.4
Retail sale of food, beverages and tobacco in specialized stores	148,797	3.5
Growing of perennial crops	135,159	3.2
Restaurants and mobile food service activities	59,294	1.4
Support activities to agriculture and post-harvest crop activities	57,324	1.4
Office administrative and support activities	54,216	1.3
Other personal service activities	53,709	1.3
Primary education	39,139	0.9
All other	632,693	15.0

Source: NIS, 2021a, Table 2.15.

Turning to occupational categories, as shown in Table 5.4, there are three main categories where females predominate - skilled agricultural forestry and fishery workers (by a small margin), craft and related trades workers (by a large margin) and services and sales workers (by an even larger margin). These three categories employ 88% of all female workers. The important contribution of females in the agriculture sector is clear in this table as well as in Tables 5.2 and 5.3. The downside of this predominance is that this sector makes the lowest per capita contribution to the GDP, and closely related to this, provides lower returns to labour than other sectors. Therefore, the aim of shifting workers from this sector to higher productivity sectors, either fully or by adding part-time non-farm employment to their scope of work, applies not just to male workers in the sector, but even more to female workers.

**Table 5.4. Employed population: main occupational categories by sex**

Occupational category	Number employed		% distribution		Sex ratio
	Males	Females	Males	Females	
TOTAL	4,315,762	4,220,596	100.0	100.0	102.3
Managers	48,139	26,043	1.1	0.6	184.8
Professionals	180,410	122,562	4.2	2.9	147.2
Technicians and associate professionals	87,469	33,706	2.0	0.8	259.5
Clerical support workers	165,621	112,219	3.8	2.7	147.6
Services and sales workers	436,106	636,984	10.1	15.1	68.5
Skilled agricultural forestry and fishery workers	2,244,708	2,315,774	52.0	54.9	96.9
Craft and related trades workers	652,237	765,792	15.1	18.1	85.2
Plant and machine operators and assemblers	173,316	21,180	4.0	0.5	818.3
Elementary occupations	327,756	186,336	7.6	4.4	175.9

Source: NIS, 2021a, Table 2.10

Although women in Cambodia have made considerable progress in finding employment in key emerging sectors including the RMG and tourism sectors, a gender wage gap continues to characterize the labour market. A recent UNDP study (Sothea (ed), 2021) based on analysis of data in Cambodia Socio-Economic Surveys of 2014, 2017 and 2019

found that the gender wage gap between women and men is 19%; in other words, women earn, on average, 19% less for the same work as men.<sup>26</sup> Small amounts of the gap can be attributed to gender disparities in education and experience, and over-representation of women in low-skilled occupations. However, unobservable characteristics, which are usually interpreted as evidence of labour market discrimination, but could also be the result of other factors such as soft skills or quality of education that are not captured in the survey, explain 105% of the wage gap.

#### 5.4. Cambodia's ranking in gender inequality indexes

It can be argued that Cambodia does not rank badly in terms of a number of indicators of gender inequality. For example, school enrolment rates are quite similar for girls and boys, and have been beginning to tilt in favour of girls in recent years (Kingdom of Cambodia, 2019: 21); and a very high proportion of Cambodian women are in the labour force. However, there are many other indicators of how different countries are doing in terms of gender equality, so it will be useful to see where Cambodia ranks according to a number of these indices.

**Table 5.5. Some measures of gender inequality**

Index	Year	Source	Cambodia's rank	Cambodia's group
Female Human Development Index	2019	UNDP Human Development Report	130 out of 166	n.a.
Gender Development Index (GDI)	2019	UNDP Human Development Report	n.a.	4*
Gender Inequality Index (GII)	2019	UNDP Human Development Report	117 out of 162	n.a.
Global Gender Gap Index	2021	World Economic Forum	103 out of 166	n.a.

**Source:** First three rows: UNDP *Human Development Report 2020*; Global Gender Gap Index: World Economic Forum, 2021.

\*Group 4 comprises countries with medium to low equality in HDI achievements between women and men (absolute deviation from gender parity of 7.5-10%)

Note: The GDI measures gender inequalities in achievement in three basic dimensions of human development: health, education and command over economic resources. The GII reflects gender-based inequalities in three dimensions – reproductive health, empowerment and economic activity. (The specific measures used are the maternal mortality ratio, adolescent birth rate, share of seats in parliament, population with at least some secondary education, and the labour force participation rate – the last two separately for males and females). The Global Gender Gap Index has four main components: economic participation and opportunity, educational attainment, health and survival, and political empowerment.

Table 5.5 tells the story. Among all the world's countries, Cambodia ranks in the bottom third according to the Female Human Development Index and the GII, and in the bottom 40% according to the Global Gender Gap Index. Clearly, Cambodia has some way to go to reach medium to low levels of gender inequality.<sup>27</sup>

<sup>26</sup> An earlier study of the gender pay gap in the garment industry found that Cambodia had a smaller adjusted pay gap than Pakistan, India, Thailand, Philippines, or Vietnam.

<sup>27</sup> For further detail on Cambodia's situation with regard to measures of gender inequality, see National Institute of Statistics, 2021: 124-131.

### 5.5. Teenage marriage

Age at marriage for both females and males has been rising in Cambodia over time. A consolidated figure for age at marriage (the singulate mean age at marriage) for females was 23.3 in 2008 and 24.0 in 2019, according to Population Census data. How does the Cambodian figure compare with other Asian countries? The 2008 figure was approximately the same as the Philippines, much lower than East Asian countries and Singapore, Malaysia and Myanmar, but higher than Indonesia, India and Pakistan and much higher than Bangladesh (United Nations, 2017). The 2019 figure probably maintained roughly the same relative position.

Cambodia has relatively high numbers of women marrying at an early age. Cambodian DHS data show that the percentage of women ever-married at age 15-19 in 2005 was 10.8%, and in 2010 10.9%, but by 2014 this had risen substantially to 16.6% (NIS, Directorate General of Health, and ICF International, 2015, Table 9.1). This rise should be viewed with concern; in most countries the percentage married at this age is falling, not rising. How did Cambodia's figure compare with other countries in the region? It is much higher than East Asian countries and some other Southeast Asian countries, but roughly comparable to Indonesia, Thailand and India.<sup>28</sup> It is well below the figures for Bangladesh and Nepal, where roughly 30% of females age 15-19 are married (Jones, 2018, Table 19.4).

Unfortunately, there is inconsistency in the marriage data between the 2014 Cambodia DHS and the 2019 Population Census, which makes it difficult to interpret trends. As shown in Table 5.6, there are two matters leading to uncertainty. First, the proportion of women aged 20-24 married before age 18 according to the Census (14.9%) is less than the percentage for women aged 20-24 five years previously (18.5%). This is consistent with what might be expected with the passage of time in a situation in which the proportions marrying young had been falling over time, but as noted above, there is some uncertainty even about this comparison, because the 2014 CDHS showed a surprising rise in the proportion of women ever-married at age 15-19, between 2010 and 2014. Of course, it is quite possible that since 2014, the proportion marrying at young ages resumed its earlier decline. Second, at ages 25-29 and beyond, the proportions marrying below age 18 according to the Census are far lower than the proportions for the same cohorts according to the CDHS. The Census report on gender (NIS 2021) argues that “the more plausible explanation is that older women, in a relatively cursory interview such as that of the census, prefer not to admit that they were married at younger ages than the legal minimum of 18 years. This implies that the percentage for the 20-24 year age group may also be under-estimated, but probably less so because women in this age group may find it harder to hide that they have been married for several years already.”

**Table 5.6. Percentages of women of specified current age groups who declare ages at first marriage below 18: Census 2019 and CDHS 2014**

Current age group	2019 Census	2014 CDHS
20-24	14.9	18.5
25-29	9.0	18.6
30-34	8.3	24.5
35-39	9.7	29.5
40-44	10.5	30.3
45-49	9.6	28.2

Source: NIS 2021, Table 2.10.

<sup>28</sup> As in Cambodia, it has been rising recently in both Thailand and Indonesia.

Table 5.7 shows data from the 2014 Cambodia DHS on trends in median age at marriage for women between older and younger cohorts. There was a clear rise between the cohort aged 35-39 and that aged 25-29, a rise that was more marked in urban than in rural areas, resulting in a widening gap between urban and rural areas. Differences according to educational background were striking. Comparing the cohort aged 35-39 with that aged 25-29, there was barely any change in age at marriage for those with no education or primary education, but a sharp rise for those with secondary and higher education. So for the cohort aged 25-29 in 2014, a wide gap had opened between those with no or little education and those with secondary and higher education.

**Table 5.7. Median age at first marriage for women by background characteristics, 2014.**

Background characteristic	Age at survey					Women aged 25-49
	25-29	30-34	35-39	40-44	45-49	
<b>Residence</b>						
Urban	23.6	22.2	20.1	20.5	21.2	21.7
Rural	20.8	20.5	20.1	19.7	20.3	20.3
<b>Education</b>						
No education	19.7	19.9	19.4	19.4	19.7	19.7
Primary	20.3	20.2	20.1	19.7	20.2	20.1
Secondary and higher	22.7	22.4	20.7	20.4	22.1	21.9
<b>TOTAL</b>	<b>21.2</b>	<b>20.7</b>	<b>20.1</b>	<b>19.8</b>	<b>20.5</b>	<b>20.5</b>

Source: Cambodia DHS 2014, Table 9.4.1

Chapter 4 already discussed the interrelationship between poverty, teenage marriage, early childbearing and limited opportunities for rewarding employment for young mothers. It is to be hoped (and expected) that the continuing rise in the proportion of girls continuing to secondary and higher education will lead to further increases in the median age at first marriage and at having a first birth.

### **5.6. Women in politics/administration**

Over the decade to 2020, there was a significant increase in women in leadership positions. As of 2020, about 21% of members of the National Assembly were women (up from 6% two decades earlier) and 16% of senators. In the executive branch, three Ministers, 45 Secretaries of State, and 69 Under Secretaries of State were women, a rise from 7.4% in 1998 to 14.5% in 2018. Women's participation in the judiciary is relatively low: women constitute 15% of judges, 14% of prosecutors, 22% of lawyers, and 12% of notary publics (General Secretariat of the National Assembly, 2020:3).

Incentives and appointment strategies resulted in the number of women civil servants reaching 41% in 2017, showing a steady increase of approximately 2 percentage points a year. Female civil servants are a higher proportion of the total at the sub-national level (a rise from 40% in 2014 to 43% in 2017) than at national level (from 27% in 2014 to 31% in 2017) (Kingdom of Cambodia 2019: 44). There is a Gender Mainstreaming Action Plan (GMAP) to promote gender equality in the civil service.

### **5.7. Gender-based violence and ways of tackling it**

The 2014 Cambodian DHS collected information on gender-based violence. Some of the findings can be briefly presented here. It is important to bear in mind that such data are

difficult to collect, and many respondents are reluctant to provide information about domestic violence in a survey administered by strangers. Therefore, the information collected on this topic is certain to be less than completely reliable, but given the careful training of interviewers and the fact that the questions asked had been tested in a variety of international settings, the data can be considered to meet the standards expected of survey data on such a sensitive topic.

**Table 5.8. Percentage of women aged 15-49 who had experienced physical violence since age 15 by background characteristics**

<b>Background characteristic</b>	<b>Percent who had ever experienced physical violence since age 15</b>	<b>Percent who had experienced physical violence in the past 12 months</b>	<b>Number of women</b>
<b>Age</b>			
15-19	6.8	3.1	729
20-24	16.1	5.8	687
25-29	15.1	5.7	647
30-39	26.9	11.5	1,260
40-49	27.2	9.7	985
<b>Residence</b>			
Urban	18.4	3.6	740
Rural	20.4	8.8	3,567
<b>Education</b>			
No education	29.9	14.6	561
Primary	24.7	10.3	1,991
Secondary or higher	11.7	3.0	1,755
<b>Wealth quintile</b>			
Lowest	28.2	14.8	755
Second	22.2	9.3	823
Middle	19.3	8.4	851
Fourth	16.9	5.6	898
Highest	15.7	3.1	980
<b>Total</b>	<b>20.1</b>	<b>7.9</b>	<b>4,307</b>

**Source:** Cambodian DHS 2014, Table 20.1

Gender-based violence is all too common in Cambodia and much of it goes unreported. The implications are serious. There are different forms of violence, but in common perception, physical violence is the most prominent. Table 5.8 shows the proportion of Cambodian women who have ever experienced physical violence since age 15, and Table 5.9 shows the persons committing such violence.

From Table 5.8, it is clear that one fifth of women have ever experienced physical violence, and 8% have experienced it in the past year. Not surprisingly, the percentage rises with age of women, because older women have had longer to experience such violence. However, even experience of violence in the past 12 months tends to increase with age of women. There is a strong inverse relationship between experience of violence and education, and an inverse relationship between experience of violence and wealth quintile, a relationship that is stronger in the case of violence in the past 12 months than in the case of ever experiencing violence.

As shown in Table 5.9, among ever-married women, the most commonly reported perpetrator of physical violence is their current husband or partner (56%), followed by their

mother/stepmother (23%) and former husband/partner (20%). These findings indicate a high proportion of spousal violence. For never-married women, the perpetrators are most commonly close family – father/stepfather, mother/stepmother and sister/brother.

**Table 5.9. Percentage of women experiencing physical violence by persons committing physical violence and women’s marital status**

Persons committing physical violence	Marital status*		Total
	Ever married	Never married	
Current husband/partner	56.3	na	51.7
Former husband/partner	19.6	na	18.0
Current boyfriend	0.4	3.1	0.6
Former boyfriend	0.2	0.4	0.2
Father/stepfather	14.3	37.0	16.1
Mother/stepmother	22.7	26.2	23.0
Sister/brother	6.4	30.5	8.4
Daughter/son	0.3	0.0	0.3
Other relative	5.4	8.7	5.7
Mother-in-law	0.1	na	0.1
Other in-law	1.1	na	0.6
Teacher	1.4	3.6	0.6
Employer/someone at work	0.3	0.0	0.3
Polics/soldier	0.0	0.2	0.0
Other	1.1	0.9	1.0
Number of women who had experienced physical violence since age 15	795	70	865

Source: CDHS 2014: Table 20.2

\* Among women age 15-49 who have experienced physical violence since age 15, percentage who report specific persons who committed the violence, according to the respondent’s current marital status, Cambodia 2014]

Turning specifically to spousal violence, some women have been married or partnered more than once. When previous husbands or partners are included as perpetrators, the percentage of ever-married women who report having ever experienced physical or sexual violence by any husband or partner is 18% (see Table 5.10).

Focusing on recent experience of violence, it is found that 11% of women experienced physical or sexual violence by any husband or partner in the past 12 months. The percentage is highest among those aged 30-39 and those from rural areas. Experience of such violence is much higher for women with no education and for those in the lowest two wealth quintiles than for those with secondary and higher education and in the highest two wealth quintiles.

How do Cambodian women deal with gender-based violence? Overall, more than 4 in 10 women (43%) who have experienced any type of physical or sexual violence from anyone did seek help to stop the violence, but 38% never sought help and never told anyone, and 19% never sought help but told someone. The most common sources of help were the woman’s own family (59%), neighbours (29%) and the police (12%).

**Table 5.10. Percentage of ever-married women who had ever experienced violence by husband or partner, by background characteristics: 2014**

Background characteristic	Emotional violence	Physical or sexual violence	Physical or sexual or emotional violence	Number of ever-married women
<b>Age</b>				
15-19	13.5	7.5	15.2	108
20-24	15.2	14.4	22.3	461
25-29	18.7	13.1	24.3	577
30-39	27.7	20.5	33.9	1,161
40-49	30.9	21.7	36.7	938
<b>Residence</b>				
Urban	18.2	13.4	23.2	489
Rural	25.9	19.1	29.7	2,756
<b>Education</b>				
No education	31.2	26.9	37.9	495
Primary	29.2	19.9	32.6	1,725
Secondary and higher	14.2	11.3	17.7	1,025
<b>Wealth quintile</b>				
Lowest	31.8	25.9	37.1	620
Second	30.3	21.1	33.1	621
Middle	23.8	17.8	27.3	676
Fourth	23.2	15.2	26.2	659
Highest	15.6	12.0	20.6	670
<b>Total<sup>1</sup></b>	<b>24.8</b>	<b>18.2</b>	<b>28.7</b>	<b>3,245</b>

Source: 2014 DHS, Table 20.10

Violence against women is a problem common to almost all societies, and Cambodia is no different in this regard. Nor is it different in respect of where most such violence occurs: in the home, at the hand of the husband or partner. Some policy recommendations for tackling such violence, along with other ways of advancing gender equality, are provided in the final section of the chapter. First, however, government programs and mechanisms for advancing gender equality are reviewed in the following section.

### **5.8. Programmes and mechanisms for advancing gender equality**

The National Strategic Development Plan notes that the government has achieved some great results such as mainstreaming gender equity in the policy framework and national development plan, reducing the gender gap in education, vocational training and the civil service; widening women's entrepreneurship initiative, and reducing domestic violence and sexual abuse against women and children (Royal Government of Cambodia, 2019: 156). The voluntary national review of the implementation of the Agenda for Sustainable Development has assessed progress in achieving gender equality (SDG 5) (Kingdom of Cambodia, 2019). The Government's review notes that social norms related to gender relations continue to constrain development of women's potential and hinder their empowerment in economic, social, public and political life. For example, the general attitude of rural parents towards the education of their daughters results in low participation of girls in STEM fields. The review notes programmes for gender mainstreaming in the civil service and elsewhere, a significant increase in women in leadership positions in parliament, the civil service and in Commune/Sangkat councils. In relation to Gender-based Violence (GBV), Multi-sectoral Coordinated Response Mechanism (CRM) networks, involving relevant government

departments and officials, were established in eight provinces in 2016 and 2017 to facilitate effective, efficient and timely responses for GBV survivors; service providers have been trained in relevant service standards.

Cambodia has strong policy frameworks and national plans for advancing gender equality and women's empowerment. The Rectangular Strategy aims to empower women in the economy, education, and public leadership, dismantle negative gender behavioural norms and stereotypes, combat gender-based violence, trafficking and sexual exploitation, and further mainstream gender in policies. The government continues to implement affirmative actions that designate at least one woman in a leadership position at (i) the provincial, capital, municipality, district and Khan level, (ii) at the commune/sangkat level as the focal person with the Commune Committee for Women and Children and (iii) the village level. The 2002 government sub-decree that requires at least one women to hold one of the three village leadership positions is an example of a good practice aimed at increasing both the number of women in leadership positions and strengthening women's leadership capacity at the local level.

The national machinery for gender equality and women's empowerment includes the Cambodian National Council for Women (CNCW), the Ministry of Women's Affairs (MoWA), and is strengthened through the Technical Working Group on Gender (TWG-G) and the Gender Mainstreaming Action Groups (GMAGs) in line ministries and government agencies. There is a *National Action Plan to Prevent Violence against Women*, which sets out key priorities and actions for effective prevention of and response to GBV across multiple sectors, but evidence is needed about the degree to which this has been translated into actions which serve to reduce gender-based violence.

The *5<sup>th</sup> Rattanak Woman Plan 2019-2023 prepared by the Ministry of Women's Affairs*, among other objectives aims to: 1) Strengthen the capacity of institutions and mechanisms at the national and sub-national levels to integrate gender into the process of formulating and implementing laws, policies, strategic plans, national programs and sectors in all areas equitably and inclusively. 2) Expand programs to change social attitudes in promoting gender equality and eliminate forms of discrimination against all women and girls in the family, community and society. The plan focuses on gender mainstreaming as a multi-sectoral strategy and has six sectoral strategies: 1) to increase women's economic empowerment; 2) to improve the education of women and girls; (3) Promote the health of women and girls 4) Legal protection for women and girls 5) Women in public sector, politics and leadership; and 6) Gender mainstreaming in climate change programs.

The government recognizes the need to further strengthen monitoring and evaluation mechanisms, including the collection and analysis of disaggregated data and gender statistics, in order to document progress, identify areas of improvement and develop gender responsive interventions.

### ***5.9. Some policy recommendations***

1. The issues of teenage marriage and childbearing and school drop-out are inter-related and policies to address them need to be developed in tandem. Some teenage marriage and childbearing is encouraged by parents, and community programs are needed to convince parents of the disadvantages of early marriage. Some teenage marriage and childbearing happens because of accidental pregnancy; such pregnancies

can be reduced if effective family life education is provided in schools and family planning information and services are made available to unmarried teenagers in culturally acceptable ways. The benefits of continuing in school and entering rewarding parts of Cambodia's rapidly developing labour market need to be made clear to girls throughout their school career.

2. Births to adolescent mothers have been declining over time, but only very slowly over the past decade. As the great majority of adolescent pregnancies and births occur to girls who are already married, effectively limiting the numbers of underage marriages will *ipso facto* reduce the incidence of adolescent childbearing; thus policy on underage marriages and on adolescent childbearing needs to be closely integrated. Advocacy efforts need to stress particularly, but not only, the detrimental effect of adolescent childbearing on the health of mother and child; and adolescent-friendly family planning information and services should be routinely available in all health centres.

3. As education greatly reduces adolescent childbearing, policies with respect to extending girls' time in educational institutions, addressing underage marriage and addressing adolescent childbearing need to be recognized as closely inter-related, and an integrated approach adopted.

4. Women with children are over-represented in non-wage jobs. The propensity to work in these sectors significantly increases with children, suggesting that these jobs may provide flexibility to balance work and home responsibilities (Gavalyugova and Cunningham, no date: 29). Providing affordable and quality child care options for families with young children, including pre-school facilities, while desirable for other reasons as well, would widen the work options for mothers. Childcare facilities could be provided in certain workplaces, including public sector institutions and garment factories, and guidelines have already been prepared by the Ministry of Women's Affairs.

5. As the rewards to education in the labour market appear to be restricted to those with a secondary education, career counselling for girls is needed, to emphasize the range of employment options and the need to acquire a secondary education. Such career counselling should also encourage them to enter non-traditional STEM areas (science, technology, engineering and mathematics), in line with Cambodia's digital economy policy.

6. A more difficult and longer-term policy must be to modify community and workplace norms so that men play a more active role in the household and are willing to accept women as their managers. It is important for women to observe possibilities of holding higher level and managerial positions.

7. Further efforts are needed to reduce morbidity levels and improve the nutritional status of children and their mothers. While considerable progress has been made over the 2001-2016 period in reducing stunting and underweight in children under the age of 5, further progress is needed. Improvement of the nutritional status of pregnant women is one appropriate focus of these efforts, contributing both to the reproductive health of the mother and the survival and healthy development of the child.

8. In relation to gender-based violence, reluctance of women to report or seek help in such situations needs to be tackled, partly through longer-term efforts to foster wider community discussion of the issues, but also by publicizing options for confidential reporting by the woman to relevant authorities, and provision of refuges to which women can go for safety.

9. Harmonious family life in Cambodia requires that the unacceptably high incidence of spousal violence be reduced. Reducing gender-based violence requires gender transformative approaches to change attitudes and behaviours that violate the rights of women and girls. This should be done through promoting dialogue within the family, among community and religious leaders, and among adolescent girls and boys, both in and out of school.

## Chapter 6

### Ageing Trends and Policy Responses

Almost every country in the world is going to experience population ageing (that is, a rising share of older persons in the total population) over coming decades. In Cambodia, as already shown in Chapter 3, the share of the population aged 65+ is not yet very high, but it is expected to increase dramatically, from 6% in 2020 to between 16% and 17% by 2050. To set these trends in perspective, between 2020 and 2050 the share of population aged 65+ in Southeast Asia as a whole is expected to increase from 4.9% to 16.7%, while in Cambodia's neighbours Thailand and Vietnam, it is projected to increase from 6.5% to 29.6% and from 6.4% to 20.4%, respectively.

In Cambodia, then, while population ageing will be rapid, the pace of ageing will be much the same as in Southeast Asia as a whole, and considerably slower than in Thailand and Vietnam. It should be noted that Thailand will be one of the world's most rapidly ageing populations over this period.

Note that ageing in Cambodia will slow in the early 2040s, because the small cohort born in the Khmer Rouge years will enter the 60-64 age group in that period. After that, however, the growth of the older population will accelerate as the large cohorts born in the very high fertility period of the 1980s will be entering their old age period.

#### *6.1. Alternative measures of population ageing*

Before moving on to discuss ageing trends in Cambodia according to the new set of population projections based on the 2019 census results, details of the alternative measures of ageing will be discussed.

The **old-age dependency ratio (OADR)** is a conventional measure of ageing. It is defined as the number of old-age dependents (persons aged 65 years or over) per 100 persons of working age (aged 20 to 64 years). The OADR is expected to rise very sharply in Eastern and South-Eastern Asia between 2020 and 2040, more sharply than in any other region of the world. United Nations Population Division, 2019, Figure 5).

The OADR does not take into account that, first, older persons are quite diverse with respect to both economic activity, including labour force participation and functional capacity, and second, not all persons in the traditional working ages are active in the labour force, with some being economically dependent themselves.

For this reason, prospective measures have been developed that redefine population ageing based on remaining life expectancy instead of on the number of years lived, to capture increases in life expectancy in a population over time. One such measure is the **prospective old-age dependency ratio (POADR)** that defines old age based on remaining life expectancy of 15 years. POADR is calculated as the number of persons above the age closest to a remaining life expectancy of 15 years relative to the number of persons between age 20 and that age (Sanderson and Scherbov, 2007).<sup>29</sup>

At the global level, the POADR has actually slightly declined between 1990 and 2019, but it is projected to increase by 50% from 11.6 in 2019 to 17.3 by 2050 – slower than the

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<sup>29</sup> See more the calculation beneath Table 6.1 below.

projected increase in the OADR (79%). As for the OADR, the POADR is expected to rise most rapidly in Eastern and South-Eastern Asia between 2019 and 2050.

A further measure of population ageing is the **economic old-age dependency ratio (economic OADR)**, which uses information about the population, consumption and production patterns in a given economy, disaggregated by age. The economic OADR is defined as the effective number of consumers aged 65 years or over divided by the effective number of workers at all ages (in practice, often multiplied by 100). This measure of dependency is closely related to the National Transfer Accounts (see Box 5).

For Eastern and South-Eastern Asian countries, the POADR is considerably less than the OADR, indicating a more manageable ageing process, while the economic OADR is a little higher than the OADR, but much less severe than in Europe and North America, and this will remain so for the foreseeable future (United Nations Population Division, 2019, Table 3). The more manageable economic OADR in these Asian countries than in Western countries is because most older persons in the Asian countries continue to work longer and consume relatively less than other age groups.

In the present study, the economic OADR for Cambodia cannot be presented, because its calculation requires detailed data on consumption and production patterns, disaggregated by age, requiring a separate study. Such a study should certainly be conducted for Cambodia.

## ***6.2. Ageing population projections***

Table 6.1 shows the projection of old age dependency in Cambodia according to the two measures discussed above. The traditional old age dependency ratio (OADR) shows a steady rise in the number of old people per 100 persons aged 20-64, from 10.8 in 2020 to between 26.9 and 27.9 in 2050, an increase which will accelerate further beyond 2050 because of the entry of large cohorts born in the post-Khmer Rouge period into the old ages. The prospective old age dependency ratio (POADR) shows a much more muted increase, from 8.0 in 2020 to between 12.1 and 12.5 in 2050. This is because the life expectancy of older persons at any given age is increasing, so the age at which a person can expect to live a further 15 years is rising. Like the OADR, the POADR will also accelerate once the post-Khmer Rouge birth cohorts enter old age, but the timing of that rapid increase will be delayed by five years or so because of the higher age at which ageing is considered to start in the POADR.

Cambodia's dramatic demographic history means that its ageing trend will differ from those of most countries. High mortality and low fertility during the Khmer Rouge period, followed by a baby boom in the subsequent period, set in motion a momentum that assures that the cohort born in the 1980s and early 1990s will greatly swell the ranks of the older population when they reach their late 60s from the late 2040s through the 2050s. Before that time, the older population in Cambodia will not be growing as rapidly as in some other Southeast Asian countries.

**Table 6.1 Trends in two different measures of old age dependency, 2020-2050**

	2020	2025	2030	2035	2040	2045	2050
<b>OLD AGE DEPENDENCY RATIO (OADR)</b>							
Rapid fertility decline	10.8	12.5	15.0	17.7	20.0	21.9	27.9
Slow fertility decline	10.8	12.5	15.0	17.7	20.0	21.8	27.4
Constant fertility	10.8	12.5	15.0	17.7	19.9	21.6	26.9
<b>PROSPECTIVE OLD AGE DEPENDENCY RATIO (POADR)</b>							
Rapid fertility decline	8.0	8.3	8.8	10.2	11.4	11.6	12.5
Slow fertility decline	8.0	8.3	8.8	10.2	11.4	11.5	12.3
Constant fertility	8.0	8.3	8.8	10.2	11.4	11.5	12.1

Source: National Institute of Statistics

OADR = persons aged 65 or older per 100 persons aged 20-64.

POADR=number of persons above the age closest to the remaining life expectancy of 15 years relative to the number of persons between age 20 and that age (x100). Note: Life expectancy is the reference age, while life expectancy minus 15 is the age threshold and the age threshold can vary depending on each country's definition. Example of calculation: Cambodia's life expectancy for both sexes was 75.5 in 2019. This POADR =  $[(N \text{ of aged above } (75.5-15)) / N \text{ of aged } 20 \text{ to } (75.5-15))] * 100$ .

## Box 5. World issues in population ageing

Before focusing directly on Cambodia's ageing issues, it is worth considering a few key messages about world population ageing contained in a recent UN report (United Nations, Department of Economic and Social Affairs, 2019):

- **Conventional indicators of population ageing that are based on chronological age (years since birth), with a fixed threshold of “old age” at age 65, show that populations are becoming older in all regions of the world.**

The old age-dependency ratio, the number of persons aged 65 years or above relative to number of persons aged 20 to 64 years, is projected to more than double in eastern and South-Eastern Asia.

- **New measures of population ageing based on prospective age (years of life remaining), with a dynamic threshold of “old age” that rises progressively with increasing life expectancy, point toward a slower process of population ageing than what is indicated by the conventional measures.**

The prospective old-age dependency ratio is rising more slowly than the old-age dependency ratio in all regions of the world.

- **Indicators that incorporate both demographic and economic information suggest that the extent of population ageing depends on age-patterns of production and consumption.**

- **The consumption of older persons is financed in various ways around the world, including through public transfers, private transfers and income from assets and labour.**

Assets are the primary means of financing consumption of older persons in countries where public transfers are relatively low, such as in South-Eastern Asia.

- **Population ageing will put increased financial pressure on old-age support systems**

In countries where public transfers are relatively low, such as many in South-Eastern Asia, individuals and families face greater pressure to finance their consumption during old-age. It is important to establish social protection programmes that can be sustained over the long term to prevent poverty, reduce inequality and promote social inclusion among older persons.

- **Population ageing does not lead inevitably to macroeconomic decline – with well-chosen policies, just the opposite may be true.**

### 6.3. Issues related to ageing population in Cambodia

There have been a number of excellent studies on ageing in Cambodia, which set out clearly many of the issues facing the older population in both rural and urban areas. Studies of particular note since 2005 are Knodel and Zimmer, 2009; Zimmer and Khim, 2013; and National Institute of Statistics, 2014. What are some of the key issues that are answered by such studies?

#### 6.3.1. What proportion of the older population are able to look after themselves?

The 2004 Survey of Elderly in Cambodia showed the proportion with ADL limitations and functional limitations, among the population aged 60+. Table 6.2 shows a summary of the findings.

**Table 6.2. Cambodia: Percent reporting any and most severe ADL and functional limitations, age 60+, by gender, 2004**

	Any limitation	Serious limitation
<b>ADL limitations<sup>30</sup> (at least one)*</b>		
Men	19.1	7.4
Women	25.8	10.6
<b>Functional limitations<sup>31</sup> (at least one)**</b>		
Men	71.1	37.8
Women	88.2	61.9

**Source:** Knodel and Zimmer, 2009, Table 7.

\* ADL includes getting up from bed, eating, taking shower, dressing etc.

\*\* Functional limitations include partial ability or lack of ability to perform activity or movement in the manner considered as normal that results from impairment; such as difficult to lift an object, to walk 200 meters, to walk up the stairs, to grasp an object with fingers, etc.

### 6.3.2. *What proportion of the older population live with their children?*

In Cambodia, living with an adult child, especially a daughter, has been the traditional pattern for older persons. This continued to be the case in 2004, as evident from data collected in the Survey of Elderly in Cambodia (Knodel and Zimmer, 2009). Whether still living with a spouse or not, the great majority of Cambodian elders lived with a child (85% of men and 76% of women). “Skip generation households” are also not uncommon: where grandparents live with dependent grandchildren but in the absence of any of their adult children who have all either migrated or died. As many as 11% of older men and 14% of older women were living in skip generation households.

Well over 90% of older parents in Cambodia have at least one of their children living in the same village – mostly living in the same household. Contact with the children who live outside the households tends to be relatively frequent (half at least weekly and two thirds at least monthly).

### 6.3.3. *What are the particular problems faced by older women?*

The 2004 Survey of Elderly in Cambodia showed that 15.5% of older women as compared to 1.9% of older men reported losing a spouse through violence during the Khmer Rouge era. The impact on older persons in 2004 who were in their middle-age in the Khmer Rouge era is very evident. The excess of male over female deaths at that time explains the high proportion of women among the older population in Cambodia, and the much higher proportion of older women than of older men who are not married. Elderly women are far less likely than elderly men to have a surviving spouse or to be literate. Women report worse self-assessed health and more health symptoms and physical functioning problems than men but

<sup>30</sup> ADL limitations refer to activities of daily living (getting up from lying down, eating, bathing, and dressing. Having at least one of these can be considered as having a disability.

<sup>31</sup> Functional limitations are more general, and include tasks that relate to conducting bodily movements: lifting things above one’s head, walking 200 meters, climbing a flight of stairs, crouching and grasping things with fingers. Because these are general movement tasks, the percent reporting these difficulties is higher than for the ADLs.

have higher survival rates. Although men are more likely than women to have work or pension income, there is little gender difference in a number of indicators of material wellbeing including housing quality, household possessions, and self-assessed economic situation (Knodel and Zimmer, 2009).

Cultural attitudes mean that older women have triple burdens compared to older men. Although earning a living to support the family is primarily men's responsibility, women are expected to earn extra income where possible. As well, older women are often responsible for the care of their children and grandchildren as well as for the care of their elderly husbands.

The process of cohort succession will lead to younger cohorts, who have not been subject to the distorting influence of the unusually high male mortality associated with past civil strife, replacing the current cohorts in the older range. Thus, by mid-century, women are projected to constitute only 54% of the much larger number of older people compared with 61% in 2020.

*6.3.4. When children migrate to cities, leaving older people behind, will the latter be neglected?*

There is relatively little information related to this question, but a study of a rural area of Battambang Province (Zimmer and Knodel, 2013) showed that high rates of out-migration do not leave the older parents without alternative means of support. While most older persons in the area had a migrant child, most also had a co-resident child. (This was possible because of the relatively large number of children of those age in their 60s and 70s. This will be less possible in future, given the sharp decline in fertility rates). Migrant children often remain in contact by mobile phone. Most adult children remit money to their parents, though the majority of remittances are small. The study notes that migrants to Phnom Penh or across the border to Thailand remit more than those to other parts of Cambodia, and that while remittances can help ameliorate rural poverty, in many cases they are too small to make very much difference.

#### **6.4. Policy responses to the ageing population**

Cambodia is a signatory to the Madrid International Plan of Action on Ageing (MIPAA). The National Policy for the Elderly People was launched in 2003 as a direct response to the Madrid Plan. It highlights the responsibility of the Cambodian Government to support older people via social, health and economic sectors. The policy also highlights the need for research on the social, health and economic issues that affect older people. The Policy makes provision for the technical training of health staff on the care of older people.

There have been a number of government reports into planning for an older population in Cambodia. These include a report on planning for social protection of the older population (National Committee for Population and Development, 2007); the National Ageing Policy 2017-2030 and its Action Plan for 2018-2020 (Ministry of Social Affairs, Veterans and Youth Rehabilitation, 2017); and the National Health Care Policy and Strategy for Older People (Ministry of Health, 2016).

Aside from policies specifically focusing on the older population, other social protection policies in Cambodia are designed to benefit the older population, among others. The National Social Protection Policy Framework 2016-2025 will be discussed in more detail in Chapter 9, but it can be noted here that the Social Security pillar of the framework includes

pensions as one of five components. The Policy Framework notes that the tradition in Cambodia is to rely on support from their children/grandchildren when old, creating a high risk of poverty in old age. So far, only civil servants, including national police officers and soldiers (around 7% of the total population) receive retirement pensions. A publicly managed pension scheme for private employees is in the development stage.

The existing pension schemes are Pay-As-You-Go schemes, which are unsustainable in the long run, given the projected population ageing. In many countries, there is a tendency to change from defined benefit pension schemes (DB or pay-as-you-go schemes) to defined contribution schemes (DC). In looking ahead, the Policy Framework states that the government will conduct a comprehensive study on types of pension schemes most suitable for Cambodia.

The long-term vision for the pension system in Cambodia is to provide universal coverage, offering financial protection in old age to all Cambodian citizens. The aim is an integrated pension system, based on three principles: affordability, efficiency and sustainability (Royal Government of Cambodia, 2017a: 23). As well as modifying the current scheme for civil servants, the government is assessing possibilities for operating a pension scheme for workers and employees which are under the provision of the Labor Law. More challenging still is the aim of developing a pension scheme for the non-poor working in the informal sector (e.g. market vendors). This would have to be implemented step by step, starting with the encouragement of voluntary participation and making it compulsory later. The Social Protection Framework also notes that the government will assess possibilities of supporting elderly people who are members of poor households holding an ID Poor card.<sup>32</sup>

A further plan is to provide alternatives for long-term savings for people with medium and high income by enabling the operation of voluntary pension schemes by financial institutions. This would be an important development in the context of the demographic dividend, as the second demographic dividend is gained when the savings and investment in the country increase as a result of the working-age population putting more funds aside to cover their retirement needs in the context of population ageing.

In Cambodia, as in other countries, a group of elderly who may need particular support is those who have no living children to help take care of them. Although this is not a very large group, they are likely to be in a particularly vulnerable situation, and for this reason ways of meeting their needs should be carefully considered.

It is clear that considerable attention is being devoted to issues of ageing in Cambodia, even though the process of population ageing is still in its early stages. This is a very positive sign, because the process of population ageing is going to accelerate, and advance preparation is crucial to ensure that support measures – income support, health support and social support – are in place in time.

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<sup>32</sup> The IDPoor Programme provides regularly updated information on poor households to a large number of government and non-government agencies to help them target services and assistance to the poorest and most vulnerable households. The aim is to ensure that assistance is provided to those households who most need it. IDPoor is essentially a community-driven proxy means test that is implemented by local residents of each village and then checked and validated by the community as a whole.

### **6.5. Learning from other countries' experience**

Cambodia can learn from the experience of other countries in the region which are further along in the process of population ageing. Singapore, for example, has an Action Plan for Successful Ageing (2015) which notes that ageing is not just the concern of a specific segment of society but a whole-of-society issue. The Plan reflects Singapore's tenets of aged care – ageing-in-place and community-based care – which are founded on the social philosophy of the family and the community as the first and second lines of support respectively. The Plan outlines three strategic thrusts to make Singapore “A Nation for All Ages”. These thrusts involve the individual (“Opportunities for All Ages”), community (“Kampong for All Ages”) and the nation (“City for All Ages”). “Opportunities for All Ages” focuses on providing opportunities for lifelong employability, lifelong learning, volunteerism, supported by longer healthy life expectancy and financial adequacy. “Kampong for All Ages” focuses on building cohesive intergenerational communities which can support older persons to age in place – in which older persons are regarded with love and respect, and in which older persons are supported to stay connected to the communities they live in (Mehta, 2019).

Thailand has also given a great deal of attention to issues of population ageing. The National Agenda on Aged Society (2018) aims to encourage active ageing of the Thai elderly. Among key measures to improve the quality of life of older people are: establish a system of welfare and social protection for older adults; promote elder employment and sustainable income; develop a health system for an aged society; and modify housing and public spaces for elder safety. While the family remains the key support mechanism for most Thai elders, others need community support. The Village Health Volunteers (change agents of good health and hygiene in their community), while not dedicated to caring for the elderly, play a critical role in linking elders to the community health care system. There is also a Home Care Volunteers for the Elderly program. In 2018, Thailand launched the Time Bank Initiative, under which volunteers provide care to the elderly in exchange for credits that entitle them to equivalent help in the future (Glinskaya et al., 2021: 23-25).

### **6.6. Policy recommendations**

- To maximize the benefits and manage the risks associated with population ageing, governments should support continuing and lifelong education and health care for all; encourage savings behaviour and healthy lifestyles throughout the life course; promote employment among women, older persons and others traditionally excluded from the labour force, including through a gradual increase in the official retirement age; and support family-friendly policies to facilitate work-life balance and increased gender equality in both public and private life.
- As women will be a particularly large, though gradually decreasing, majority of the older population, policies are needed to relieve them, as far as possible, from the threefold burden of earning extra income, care for their children and grandchildren, and care for their elderly husbands.
- The further development of plans for pension schemes should be expedited. The need for schemes to cover more than a small fraction of the population is urgent.
- Understanding the implications of the ageing process could be assisted by a study utilizing the approach of the National Transfer Accounts, already discussed in Chapter 3.

## Chapter 7

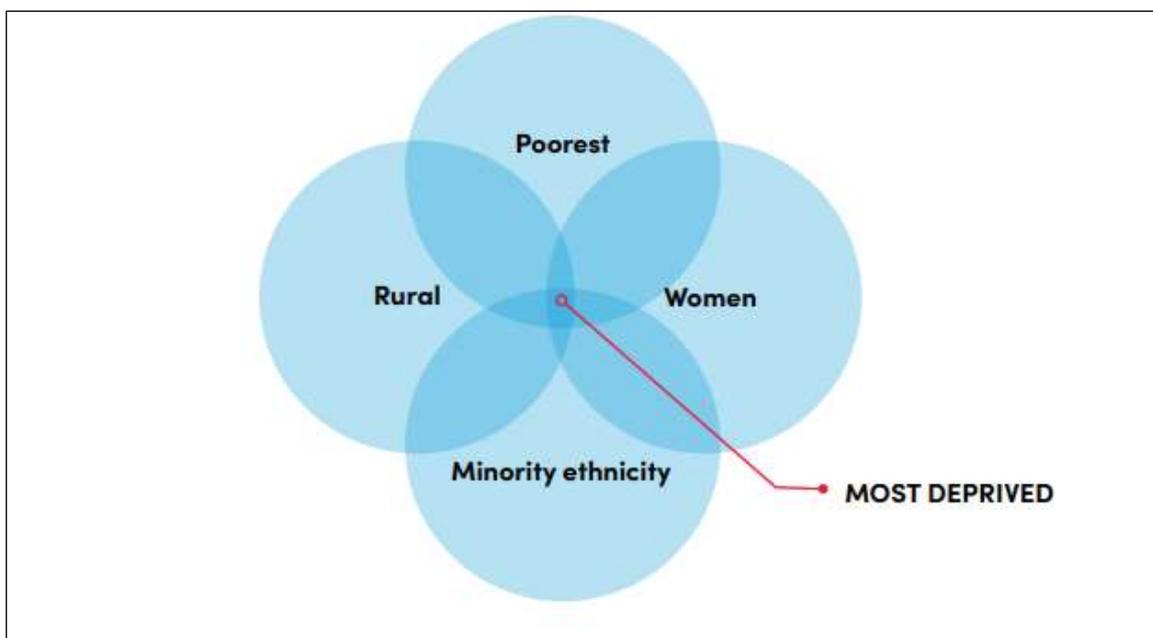
### Populations At Risk

#### 7.1. Vulnerable groups and populations at risk

In this chapter, issues facing a number of populations at risk will be discussed. What at-risk populations are we talking about? The chapter will focus on the poor and near-poor, remote populations, minority ethnicities, the physically and mentally disabled, and migrant workers. Of course, this list is not exhaustive. Other areas of deprivation could be added, including for example slum dwellers in cities.

The 2021 *ASEAN Gender Outlook* provides a useful diagram (reproduced below) showing overlapping areas of deprivation, the most deprived group being situated where these areas of deprivation overlap. It stresses that the poorest women and girls of minority ethnicities, living in rural areas of remote provinces are all disadvantaged when it comes to SDG progress.

**Figure 7.1. Deprived population groups**



Source: ASEAN and UN Women, 2021: 10.

“Their personal characteristics often make them targets of discrimination, which in turn results in deprivation for sustainable development outcomes. ... As additional forms of discrimination cluster together, so does the severity of deprivation.” (ASEAN and UN Women, 2021: 10), Available data indicate that the poorest women and girls of minority ethnicities, living in rural areas of remote provinces are particularly affected. These groups of women are lagging behind not just in regard to one of the Goals; they are finding challenges across all dimensions of sustainable development.

#### 7.2. The poor and near-poor

Cambodians who are poor or near-poor are vulnerable in many ways. If an unexpected health crisis occurs, or if a natural disaster destroys an income source, they have no resources to fall back on. That is why social support is so important.

As discussed in Chapter 2, Cambodia has done well in reducing the percentage of population living below the official poverty line – from 47.8% in 2007 to 13.5% in 2014. The target is to reduce poverty to below 10% by 2023. That now appears very unlikely as a result of the COVID-19 pandemic, which led to an economic contraction of 3.1% in 2020 and a forecast increase of only 2.5% in 2021 (announced by the Prime Minister on August 1, 2021, a reduction of the earlier prediction of 4.1%). Moreover, the proportion of population living only marginally above the poverty line is quite large, and they can easily descend into poverty through unexpected circumstances such as natural disasters, health crises in the family, or – in recent times – effects of COVID-19 on livelihoods.

The Health Equity Fund (HEF) is providing financial risk protection to around two million poor Cambodians when using healthcare services at public health facilities, paying the user fees for those healthcare services on behalf of the poor people, including out-patient services (including birth delivery), and in-patient services (including surgeries). The HEF “is a massive “financial risk concentration” mechanism which helps to ensure an effective investment of state budget in promoting health of the poor, reducing out of pocket expenditure on health care, preventing risks associated with healthcare expenses and preventing people falling into poverty because of health-related issues.” (Royal Government of Cambodia, 2017a: 27). Financial support for this fund comes from the Royal Government and development partners, but the government intends to take over full responsibility for the Fund.

### ***7.3. Remote populations and minority ethnicities***

Many in these groups, including indigenous population, are doubly disadvantaged – through remoteness and through being minority ethnic groups. Government services are difficult to provide in such areas, including health and education services, and though on the whole, primary schools are accessible, the quality of education available tends to be lower because the schools are under-resourced and more often staffed by new teachers.

### ***7.4. The physically and mentally disabled***

Persons with disabilities, especially poor people with disabilities, face social discrimination and suffer from physical and financial difficulties that prevent them from receiving health services, education and vocational training. As a result, they are unable to contribute to increasing productivity in the economy or benefiting from economic factors (RGC, 2019: 85-86). The mechanism of identification of people with disabilities is still inadequate, leading to some people with disabilities not benefiting from available programs. The support scheme for people with disabilities operates in only five provinces because of the limited identification of poor people with disabilities and limited budget allocations and limited capacity of sub-national officials (RGC, 2019: 86).

Children with disabilities – particularly disabled girls and children with intellectual disabilities – are two times as likely to be out of school compared to their peers, and only 4% of disabled adolescents have completed lower secondary education, compared to 41% of their non-disabled peers. Pervasive cultural beliefs (such as disability being a result of bad karma) and low understanding about non-physical disabilities contributes to discrimination against children with disabilities. They also face practical barriers to education, such as lack of transport, limited access to assistive learning devices, or do not have teachers who can respond to their learning needs (Child Rights Now Coalition, 2019: 1).

### ***7.5. Vulnerable groups in the labour market***

The report on “Economic Activity and Employment” from the 2019 Population Census discusses five groups of disadvantaged and vulnerable groups in the labour force: children, youth, older persons, disabled persons and migrants. Youth and older persons are discussed separately in Chapters 4 and 7. The other groups will each be discussed briefly now.

Child labour has to be distinguished from child work. Child labour can be distinguished from child work when it (a) is physically, mentally, morally or psychologically unhealthy and harmful; (b) places a burden on education; (c) Prevents children from attending school; or (d) forces them to drop out of school or forces them to combine school with long and/or heavy working hours. In practice, however, it is virtually impossible in a census to make a distinction between child work and child labour (NIS, 2021: 95). Keeping this problem in mind, the census indicates that at ages 10-11, just over 1% of children are working, rising to 4% by age 13, 8% by age 14 and 16% by age 15. Levels of child work are somewhat higher in rural than in urban areas.

Children not living in ordinary households were much more likely to be working than those living in ordinary households. These children are more vulnerable, firstly because they have no regular home, and secondly because they have to work at a young age.

Disabled persons are vulnerable in many ways, and not just in relation to their situation in the labour market. But in regard to the labour market, the 2019 Census revealed that for those with a mild disability, both men and women, participation rates in the labour force hardly differ from persons without such problems. “Apparently the Cambodian context allows mild problems to be overcome to the extent that work is available” (NIS, 2021: 128). As disabilities are more severe, participation rates decline roughly at a similar rate for the various categories of disability. But even for a complete disability the rates remain at about half of the level of those who are not dealing with a handicap.

### ***7.6. Social protection and socioeconomic challenges***

There are major challenges for any lower middle income country aspiring to meet the social protection needs of its population. Cambodia is no exception, as the issues noted in this chapter have shown. The main problem is that not all those suffering from social disability of one kind or another can be assisted through government programs. Improved coordination and monitoring can help, but the shortage of funds means that there will always be issues at the margin about which programs can be funded and which ones will miss out.

The Cambodian government has addressed issues of social protection in systematic ways, brought together in its National Social Protection Policy Framework 2016-2025. Many programs are being implemented, for example the already-discussed Health Equity Fund (HEF), which pays user fees for poor people at public health facilities. Other programmes such as a nutrition programme for pregnant women and children to promote maternal and infant health, scholarship programmes, school feeding programmes and vocational training programs do exist, but it is not clear whether a very large proportion of needy people are supported by such programmes.

The IDPoor process for targeting services and assistance to the poorest and most vulnerable households is an important element in a range of government programs targeting the poor. It is essentially a community-driven proxy means test that is implemented by local

residents of each village and then checked and validated by the community as a whole. This participatory design means IDPoor is effective in identifying the poor and is widely trusted.

In relation to disability, The Cambodian Government has followed up on the Incheon Strategy, adopted by Asian-Pacific countries in 2012, to strive towards an inclusive, barrier-free and rights-based society for disabled persons, with the National Disability Strategic Plan 2019-2023, following an earlier plan for 2014-2018. This strategy, among many other things, encompasses the establishment of job facilities for disabled people who complete vocational training and are capable of working.

### ***7.7. Effect of COVID-19 on vulnerable households***

There is no doubt that COVID-19 is adversely affecting vulnerable households, in a number of ways. A recent survey by World Vision International Cambodia (2021) found that reduced livelihood opportunities are fast creating more food insecurity. Incomes have been reduced and jobs lost, with more respondents reporting increasing difficulties in covering necessary living expenses, especially in Phnom Penh. Damaging coping mechanisms are reported by many, including reducing food spending, taking on more debts and spending their savings. The effect on education is also serious, with one third of children reporting that they are not continuing to learn during school closure, because of lack of learning materials at home, no access to devices required to access online learning materials, and lack of internet access at home.

### ***7.8. Policy recommendations***

1. Poverty reduction approaches need to be informed by a careful analysis of which groups are particularly affected by poverty – according to factors including geographical location, ethnic background, family size, social group and educational background. Demographers should be involved in such “poverty mapping” as their analytical tools are well suited to this task, in tandem with those of other disciplines.
2. A human rights-based approach to health services should be linked to poverty reduction approaches. The human rights based approach defined by the UN and bilateral development agencies is based on seven key principles: availability, accessibility, acceptability, quality of facilities and services, participation, equality and non-discrimination, and accountability. Attention to these seven key principles should ensure that disadvantaged groups in the population receive additional help in lowering mortality levels and improving their health, including women’s reproductive health, and so getting closer to the goal of “leaving no one behind”.
3. The National Social Protection Policy Framework acknowledges that coverage of social assistance and social security is limited and cannot reach certain groups of citizens (Royal Government of Cambodia, 2017: xvi). This being the case, targeting of such programs to reach the most needy is essential, along with imaginative ways of collaborating with NGOs and development partners in order to expand coverage. This is particularly important during the period when COVID-19 is adversely impacting vulnerable groups. For targeting, the IDPoor can continue to play an important role.

## Chapter 8

### National Policies and Stakeholder Analysis

In different chapters of this report, related national planning and policy documents have been reviewed. In the present chapter, the key planning documents will be reviewed to assess how well they cover the main population-related areas. This assessment has benefited from discussions with stakeholders during the course of this assignment.

Which documents will be reviewed?

- Rectangular Strategy for Growth, Employment, Equity and Efficiency
- National Strategic Development Plan 2019-2023
- National Population Policy 2016-2030
- Action Plan 2016-2018 of National Population Policy 2016-2030
- Cambodia's Voluntary National Review 2019 on the Implementation of the 2030 Agenda for Sustainable Development
- National Social Protection Policy Framework 2016-2025

#### *8.1. Rectangular Strategy - Phase IV*

The Rectangular Strategy - Phase IV for Growth, Employment, Equity and Efficiency is very important document for Cambodia's development strategy. Modified over time, the Rectangular Strategy went through three phases over 20 years before beginning Phase 4 in September 2018.

There is a warranted sense of pride in the document's noting that "Cambodia, previously perceived as an economically-underdeveloped country mired in poverty and food insecurity, is now a food exporting country, one of the fastest growing economies in the world and a great performer in terms of poverty reduction and improvement in social indicators which has recently graduated from low-income country status to lower middle-income country."

The four strategic goals include ensuring sustainable economic growth of around 7% per annum; creating more jobs, in number and quality, for the citizens of Cambodia, especially the youth; achieving the poverty reduction target of below 10%; and further strengthening the capacity and governance of public institutions, to ensure effectiveness and efficiency of public services delivery. The goals are closely aligned with the SDGs.

Demographic considerations figure implicitly or overtly in a number of aspects of the Rectangular Strategy. The "challenges" section stresses the need to develop quality, competent and productive human resources, and also notes that the quality of healthcare services remains a challenge despite remarkable improvements. The "opportunities" section mentions the demographic dividend and increase in the size of the middle class (one of only six opportunities mentioned) as creating a favourable condition for Cambodia to achieve high economic growth for the next three decades.

Notably, the core of the strategy is accelerating governance reform, thus recognizing the centrality of good governance in achieving many of Cambodia's goals. "Crackdown on corruption" based on the National Anti-Corruption Strategy is highlighted.

The Rectangular Strategy document assesses its strengths and weaknesses. Its strength lies in its provision of intertwined, comprehensive consistent policy framework which covers major sectors for all ministries-institutions to participate in its implementation. The weakness lies in the implementation effectiveness, which is primarily related to institutional capacity, and the effectiveness of inter-institutional-ministerial coordination in laying out and implementing concrete policy measures.

Overall, the Rectangular Strategy provides a framework in which the critical importance of human development, and the possible benefits of the demographic dividend, are explicitly recognized. As such, it provides the opportunity for a more detailed population policy to mesh well with the broad national development goals.

### ***8.2. National Strategic Development Plan 2019-2023***

The National Strategic Development Plan is the Cambodian government's second important policy document and is the roadmap for the implementation of the Rectangular Strategy. Through this document, the government sets out its socioeconomic platform within the framework given by the Rectangular Strategy, centred on the themes of Growth, Employment, Equity and Efficiency. It is supplemented by documents on Sectoral Development Strategies. NSDP 2019-2023 was formulated for the implementation of the Rectangular Strategy Phase 1V, identifying priorities, indicators and timeframe for the implementation, and mechanisms for assessing progress (Royal Government of Cambodia, 2019: i-ii).

As would be expected, given the role of the Strategic Development Plan in focusing on implementation of the Rectangular Strategy, the Rectangular Strategy's emphasis on the critical importance of human development, and reaping the benefits of the demographic dividend, are again on view. As expressed in the document (p.5), the aim is to "reap the full benefits of the demographic dividend and low dependency ratio, to build social security and healthcare systems. This is a route to reducing personal and economy-wide vulnerabilities and risk-aversion, and in turn boosting productivity and economic growth".

The document notes Cambodia's limited institutional capacity to integrate population and demographic dynamics issues into sectoral development plans, and limited understanding of population issues and development at both national and sub-national levels. A training manual on National Population and Demography Policy has been used to train officials in the provincial planning departments in 25 capitals and provinces (p. 90).

On gender equity, the document notes that this has received much attention from government in the previous five years. Women's empowerment has focused on the following key issues: Women's economic empowerment; legal protection for women and girls, crippled women and vulnerable groups; women in the public sector and politics; gender and health; and promoting social morality, women's value and Khmer family including women and education (p. 91-93).

### ***8.3. National Population Policy 2016-2030***

This document is of the greatest importance in assessing Cambodia's policies for integrating population issues in development planning. It notes that the Royal Government of Cambodia launched its first ever National Population Policy in 2003, addressing the demographic changes by integrating demographic dynamics into the development planning

process. “The National Population Policy 2016-2030 continues to be based on the principles stipulated in the NPP2003 by respecting and supporting the right for all couples and individuals to have the basic right to decide freely and responsibly on the number and spacing of their children and to have access to the information, education, services and means to do so” (p. 1). But it was noted that it was now time to “update the National Population Policy through a consultative and a participatory process by taking into consideration contemporary and future population and development concerns” (p. 1). The overarching objective “is to facilitate the integration of population dynamics into social and economic development planning and ensure its implementation in a synergistic manner by the year 2030” (p. 18). The policy will be aligned with the SDGs (p. 18).

The policy document observed that the TFR had fallen marginally from 3.0 in 2010 to 2.7 in 2014, but that there was an unmet need for family planning, mainly for birth spacing among younger couples aged between 15 and 24, and for birth limiting among older couples. While noting that other reproductive health indicators had improved considerably, there was much more to be done, especially improving access to safe water, (limited to less than half the country’s population), and access to sanitation and toilet facilities, (limited to one-third of the population) (p.5).

The policy document noted the remarkable progress made on demographic, social and economic fronts, but recognized that much remained to be done. Noting the changing demographic structure, in the near future, Cambodia would have to overcome two challenges simultaneously: to cater to the youth and to start planning for the elderly from a development perspective (p.9).

The National Population Policy 2016-2030 then goes on to discuss:

- The social and demographic setting of Cambodia (under the demographic setting, stressing spatial and regional disparities; age-structure change; the demographic dividend; population ageing; and migration and urbanization).
- Demographic consequences of development (focusing on poverty and unemployment; agriculture, land, water and environment; education; health; infrastructure; and gender equality and women’s empowerment)
- Guiding principles (including the Rectangular Strategy; follow-up of the PoA of the ICPD beyond 2014; and the SDGs)
- Policy and Program Directions (infrastructure expansion and development; managing migration and urbanization; expansion of agriculture and allied activities; and social sector investments and human capital development, under which education, health, ensuring gender equality and women’s empowerment, and population ageing were included).
- The Policy went on to discuss implementing agencies, and specifically address the roles of 24 Ministries, as well as of development partners and civil society organizations.

The National Population Policy 2016-2030 is a comprehensive document, appropriately addressing the main aspects of population-development relationships. Three points worth noting are (1) The Policy (p. 19) mentions that the Royal Government will achieve population stabilization, but it does not clarify what is meant by population

stabilization<sup>33</sup> (2) the Policy pays attention to the “youth bulge” without defining exactly what a “youth bulge” is; this issue has been discussed in Chapter 3. (3) The policy gives emphasis to reducing pressure on Phnom Penh by lowering rural-urban migration and fostering the growth of “semi-urban towns”.

It is probably now time to update the Policy, given changing circumstances (in particular the COVID-19 outbreak and its impact on many aspects of population and development in Cambodia) and the availability of relevant new sources of data, notably the 2019 Population Census, which enable updating our knowledge of many aspects of Cambodia’s population.

#### ***8.4. Action Plans of the National Population Policy 2016-2030***

The Action Plan is a very detailed document, outlining the actions to be taken by different arms of government in order to implement the National Population Policy. In the Preface, the Prime Minister notes that the implementation of the National Population Policy through a well-orchestrated action plan will make a significant contribution to national development, particularly to sustained human capital development, and that the Ministry of Planning will play a central coordinating role in preparing the Action Plan and monitoring and reviewing the implementation in each three-year cycle of the plan.

It is noted that in the implementation process of the action plan, in order to ensure a consistent national policy framework consisting of the Rectangular Strategy Phase III, the National Strategic Development Plan and Sectoral Strategic Development Plans, as well as to ensure that the implementation of programmes, sub-programmes, projects and activities focusing on the four priority areas of the NPP 2016-2030, the General Secretariat for Population and Development (GSPOD) of the Ministry of Planning will play a coordinating role in reviewing whether or not programmes, sub-programmes, projects and activities are incorporated in the 3-year rolling public investment programmes or the programme budgeting of concerned ministries and agencies.

The action plan has two main aims: (1) to translate the policy and programmatic directions into concrete actions to be implemented by line ministries and agencies; (2) to be used as a tool for monitoring and evaluation of the results of the implementation of the activities identified in each stage of the implementation of the NPP 2016-2030.

The Action Plan Therefore, consists of 64 detailed pages of matrices, detailing the targets, sources of financing and cost estimates, and responsible Ministry/Institution for all the activities developed under the rubric of the NPP 2016-2030. In addition, there are 17 pages outlining the sources of financing and cost estimates.

Action plans of the National Population Policy 2016-2030 are divided into 5 stages, each with 3 years duration. Implementation of the Action Plan 2016-2018 has been completed, and the Action Plan 2019-2021 has been implemented.

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<sup>33</sup> Population stabilization is a rather slippery concept. For example, if fertility were to fall quickly to replacement level, and then stay at that level, this could be considered one kind of “stabilization”. However, population momentum resulting from earlier high fertility would result in considerable further population increase over at least three decades before the population reached a stationary state.

### ***8.5. Cambodia's Voluntary National Review 2019 on the Implementation of the 2030 Agenda for Sustainable Development***

A number of the SDGs are closely related to the population-development issues highlighted in this report. Relevant issues highlighted in the Review will be presented briefly below.

SDG4 – “Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all”. The completion rate at primary and secondary levels has increased between 2015 and 2019. Cambodia achieved gender parity in the education sector, and this is beginning to tilt in favour of girls in recent years. However, the problems of equitable and inclusive access, low transition rates from primary to lower secondary and high drop-out rates at the lower secondary level, and quality issues at all levels, are noted. The Government has initiated a number of key policy and strategic interventions for the period 2019-2023, 13 of which are listed in the Review.

SDG8 – “Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all”. Cambodia has achieved high economic growth and a reduction in poverty. Cambodia's economy is forecast to continue growing robustly, with further structural change in favour of industrial development, from 27.7% of GDP in 2015 to 38.2% in 2022. Challenges include the need to diversify and expand the manufacturing base by moving away from labour-intensive industries – mainly the garment (cut-trim and make) sector to those that demand a more skilled workforce, and more advanced technologies, and higher value added; lack of quality electricity, skills and logistics; lack of infrastructure to support the growth of tourism.

SDG10 – “Reduce inequality”. Policies directed to this goal include the formulation of a Cambodian Health Equity Fund to provide access to free health care to people characterized as poor. The prerequisite is a so-called IDPoor status with a family based “membership card”. However, identification of appropriate recipients is not well developed. There is limited coverage of social services. To reduce inequality, the government will continue to focus on pro-poor rural development. Social protection, including social safety nets and social insurance policies, needs to be strengthened.

SDG5 – “Achieve gender equality and empower all women and girls”. The National Programme for Public Administrative Reform 2015-2018 focuses on mainstreaming gender issues in the civil service. There has been a significant increase in women in leadership position over the past decade (details were given in Chapter 6). The key challenge noted is that social norms related to gender relations continue to constrain development of women's potential and hinder their empowerment in economic, social, public and political life. It is noted that the Government is committed to promoting positive social norms through the implementation of national laws, policies, plans and programmes at all levels.

### ***8.6. National Social Protection Policy Framework 2016-2025***

Social protection is closely related to population policy goals, which include the wellbeing of disadvantaged groups within the population. The Government has defined its long-term vision for the development of the social protection system, as follows: “The construction of a social protection system based on inclusiveness, effectiveness and financial sustainability as a tool to reduce and prevent poverty, vulnerability and inequality and which will contribute to the development and protection of human resources and stimulate economic

growth” (Royal Government of Cambodia, 2017a: x). The Social Protection Policy Framework (SPPF) recognizes that the current coverage of such programmes remains low, and cannot reach certain groups.

The SPPF has two main pillars: Social Assistance and Social Security. **Social Assistance** is divided into four components: (1) emergency response; (2) human capital development; (3) vocational training; (4) welfare of vulnerable people. **Social Security** has five components: (1) pensions; (2) health insurance; (3) employment injury insurance; (4) unemployment insurance; (5) disability insurance.

The social protection policy is closely related to population policy in a number of ways. One is in strengthening and broadening of human resource development. Its possible contribution in this area can be seen through its contribution to raising health and education levels amongst the poorest population groups. In terms of health care, the Health Equity Fund (HEF) pays user fees for poor people at public health facilities. As of 2017, it was helping around two million poor Cambodians (nearly 20% of the population) (Royal Government of Cambodia, 2017a: 27-28). Another programme already implemented was a nutrition programme for pregnant women and children to promote maternal and infant health. In terms of education, there was a scholarship programme for primary schools to encourage school attendance, especially for children from poor households; school feeding programmes to support students’ physical and mental development; and vocational training programs to promote vocational skills to meet labour market demands. It was not clear from the report how many children had actually been helped by such programmes, but future strategies mentioned included feasibility studies on the implementation of a cash transfer program for pregnant women and children in response to malnutrition; and on expansion of coverage of scholarship programmes in primary and secondary schools as well as of school feeding programmes.

## Chapter 9

### Data, Technology and Research Needs

#### *9.1. Population data*

Every country needs a range of timely, accurate and reliable population data. There are a number of key sources of such data: population censuses, inter-censal surveys (recognizing that the 10-year interval between censuses is too long), surveys covering a range of population-related information (such as Demographic and Health Surveys (DHS) and Socio-Economic Surveys), and vital statistics – registering vital events (births and deaths).

Cambodia is quite well covered by such sources, having had Population Censuses in 1998, 2008 and 2019, Demographic and Health Surveys in 2000, 2005, 2010 and 2014, with another currently in the field, and Socio-Economic Surveys in 2004, 2009 and annually since 2013. However, it has not had a Multiple Indicator Cluster Survey (MICS), supported by UNICEF in many countries.

Data from censuses and surveys are never perfect, and it is important to be aware of particular groups that tend to be missed. This includes the institutional population in DHS surveys, which can lead to an undercount of single women and a resulting overestimate of fertility rates (Hull and Hartanto, 2009), and also an undercount of some of the most vulnerable populations, including the homeless, people living in institutions, and migrant labourers. While children outside households may represent a small proportion of children overall, in almost all cases, they are living in extreme poverty. One estimate was that household surveys may overlook up to a quarter of the poorest wealth quintile (Carr-Hill, 2013).

A study in Cambodia involving the National Institute of Statistics has been designed to enumerate two key subgroups of children outside of households: children living in residential care institutions and homeless children living on the street or in other public places (Rubenstein and Stark, 2016). A total of 24 sentinel sites across the country were identified. This is a valuable effort to complement traditional sources of data by measuring a hard-to-reach sub-population.

#### *9.2. Civil registration and vital statistics*

The area of demographic data where Cambodia has been seriously lacking (along with many other Asian countries) is civil registration and vital statistics. In countries with a complete system for registering births and deaths (including causes, in the case of deaths), it is possible to track, from year to year, trends in fertility rates (disaggregated by age of mother, region, and background socio-economic variables), and mortality rates (again, disaggregated by region, age and sex, cause of death, etc.). Such data are extremely valuable in tracking fertility and mortality trends from year to year, without having to wait on the delayed production of data from household surveys and censuses with wide intervals between them. The reason why Cambodia has lacked such a vital registration system is that setting up an effective system is effortful, costly and requires a high degree of compliance. Requiring a birth certificate for many purposes, including entry into the school system and registering for social services, can help develop awareness among the population of the importance of registering births.

Detailed recommendations for the setting up and management of a vital registration system have been made by the United Nations Statistics Division (2001). Unfortunately, few developing countries have taken up the challenge of developing such a system. It is estimated that the coverage of vital events in the world has not progressed very far from the 50% level of the 1960s. The main reasons include, among others, deficiencies in the registration law such as failure to make registration compulsory, problems in the organization of the civil registration system, for example failure to coordinate the roles of hospitals, ministries of health and statistics, or other administrations, general lack of awareness of the need to register, or lack of incentives to register, lack of political support at the highest levels of government and lack of long-term funding.

Producing and maintaining national registration systems for statistical purposes is not appealing to many governments; the system may not be considered cost effective if used only for statistics. However, birth registration has recently been adopted in Cambodia “to provide evidence of every birth, stillbirth, death, adoption and marriage and provide a secure repository for public records” (NIS, 2020a: 22). Births must be registered at the local commune office within 30 days of the birth. After the paperwork has been completed, a copy of the Birth Certificate is given to the parents.

The completeness of birth registration has risen sharply: the proportion of children aged 0-4 whose have a birth certificate has risen from 73.8% in 2014 to 84.9% in 2016 and to 92.2% in 2019/20. In 2019/20 a further 2.9% had their births registered but had no certificate. The percentage of births registered in 2019/20 ranged from 98.7% in Phnom Penh to 96.2% in other urban areas to 94.1% in rural areas (NIS, 2020a: 22).

The possible value of the birth registration system for up-to-date tracing of fertility trends and for demographic analysis is immense. Though registration is not complete, the trend toward completeness is remarkable, and the registration system promises to be an important resource for tracking fertility from now on. It is already time for efforts to be made to track annual changes in fertility rates in areas with almost complete birth registration (such as Phnom Penh).

The situation with regard to death registration is less favourable. Death registrations are less common despite legislation technically requiring a death certificate before burial. A “one-window” service for birth and death notification and registration is currently being expanded to cover all provinces, to increase registration within the stipulated timeframe (within 30 days for births, 15 for deaths).

In further refining the birth registration system in Cambodia, advocacy on various grounds will probably be useful. For example, civil registration systems provide the legal/reliable documentation of the identity of individuals. In Cambodia, there may also be a case for linking the development of a vital registration system with a registration system under which people can receive benefits from social assistance programs and social security schemes. The ID Poor Card system to identify eligible people to receive benefits from social assistance programmes is the responsibility of the MoP, but NSSFC, NFV, NSSF and PWDF all run separate systems, leading to the possibility of one citizen having more than one ‘identity’, causing targeting problems for social protection policies and other development policies. The Government plans to reform the identification management system by using biometric information to prevent overlapping entries (Royal Government of Cambodia,

2017a: 48). It would be a wasted opportunity if such reform was conducted without linking it with possible action in developing effective vital registration.

### ***9.3. Health information systems and surveillance systems***

Sentinel surveillance systems have been used in Cambodia to monitor the HIV/AIDS outbreak (Sreng et al., 2010) and more recently, to monitor influenza, which enabled an outbreak of influenza in a pagoda in August 2020, following relaxation of national COVID-19 mitigation measures, to be brought under control (Sovann et al., 2021). Such surveillance systems can be relatively long-term, or short-term to deal with a particular health problem in the broader community or in a particular population group.

### ***9.4. Educational and employment data***

Tracking the interactions between demographic change and socio-economic development requires good data on education and employment. Cambodia has good sources of data on both, though in the case of education, different sources of data present a different picture about the proportion of students who find their way through to graduating from secondary school. And in the case of employment data, it is noteworthy that Cambodian Socio-Economic Survey data give a considerably lower proportion of agricultural employment in total employment than that given by the censuses (National Institute of Statistics, 2021: 83-4). Careful assessment of definitions and data collection procedures is always necessary in interpreting different sources of data.

### ***9.5. Data according to gender***

Cambodia has made substantial progress when it comes to data availability to monitor the SDGs from a gender perspective. Data are available for 55% of all gender-specific indicators, a rate well above the global average of 31% (ASEAN and UN Women, 2021: 37).<sup>34</sup> Of course, further improvement of the data base is desirable, and will help in documenting progress toward meeting gender goals and identifying areas needing improvement. A recent report notes the need for data on women and men officers in the legislative branch, for education reports to show not only percentage distributions but also absolute numbers of women and men in the same educational category, and for the educational background of women and men leaders in the public and private sectors to be collected and compiled for further study.

### ***9.6. Disaggregated data***

For effectively planning Cambodia's socio-economic development and poverty alleviation programmes, the data collected through official sources need to be disaggregated not only by age and sex, but also by region, urban-rural residence and socio-economic group. Much of Cambodia's data meets these requirements, but further progress is needed in some areas.

### ***9.7. Research needs***

Research - both the effective analysis of data in the national statistical systems already discussed - and other kinds of research - is needed in tracking demographic trends,

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<sup>34</sup> [https://data.unwomen.org/sites/default/files/documents/Publications/AR2019Annex/Women-Count-Annual-Report-2019\\_WEB\\_FINAL.pdf](https://data.unwomen.org/sites/default/files/documents/Publications/AR2019Annex/Women-Count-Annual-Report-2019_WEB_FINAL.pdf)

understanding their relationship to aspects of national and regional socio-economic development planning, and identifying ways to influence demographic trends, particularly in ways that will benefit disadvantaged sections of the population. Special surveys can be designed to investigate matters that are not covered, or not in enough detail, in the existing data sources.

The series of reports currently being produced, based on the 2019 Population Census, will provide important in-depth analysis of topics such as mortality and maternal mortality, fertility and nuptiality, situation of children and youth, literacy and educational attainment, population distribution and urbanization, gender and women's status, disability and international and internal migration, and ageing and living conditions.

An area of research which needs further development in Cambodia is in-depth sociological and anthropological studies, using ethnographic and other methods, to enable an in-depth understanding of household decision-making related to matters such as marrying children, keeping children in school, dealing with health crises, making decisions about childbearing, dealing with issues of juggling childcare with labour market responsibilities, moving (or having a family member move) to the city, and dealing with sexual harassment and domestic violence. Such studies can greatly enrich understanding of data on related issues collected in the more conventional sources of data.

## Chapter 10

### The Way Forward – Linkages between Population and Gender Dividend and Economic Policy

Cambodia is in a good situation to prioritise human rights in carrying forward its population policy. It has reached relatively low fertility levels, and is well placed to cope either with stalling of fertility decline, or with slow or rapid fertility decline. A further decline in fertility appears to be the most likely trend in Cambodia, though the pace of such decline, and at what point it is likely to end, is very difficult to predict.

Very few Asian countries now have to worry about high fertility and the brake it imposes on development – Pakistan and Afghanistan are two remaining examples. Some Asian countries have to worry about ultra-low fertility and its implications for population decline and a rapidly ageing population. But many – and this includes Cambodia – are in a favourable zone where fertility is in the vicinity of replacement level, and they can continue to benefit from the demographic dividend for quite some time. Many of these countries, including Cambodia, still face considerable population growth as a result of population momentum. But with sound planning, this growth can be coped with.

#### *10.1. Prospects of benefits from the demographic dividend*

The population projections indicate that the dependency ratio in Cambodia is likely to continue falling for another 25 years, then start to increase as the rise in the old-age dependency ratio exceeds the decline in the child dependency ratio. Though it will be increasing, the dependency ratio will remain in a relatively favourable zone until about 35-40 years from now.<sup>35</sup> In this context, planners and policy makers need to take maximum advantage of this favourable age structure if they are to achieve the goal of reaching upper middle income status by 2030, and upper income status by 2050.

#### *10.2. The roadmap for harnessing the demographic and gender dividend*

Human development and structural change in the economy are keys to effectively reaping the demographic dividend and reaching upper middle-income status. There are two important (and intertwined) aspects of human development: health and education. The nutritional and general health history of young people entering the workforce is improving over time, and can be expected to benefit their productivity and earnings in adulthood. However, an inadequately educated workforce is among the top three concerns of Cambodian entrepreneurs, and human capital is expected to be increasingly critical as Cambodia tries to move up the value chain and diversify beyond garment manufacturing (World Bank, 2017: 69). How is Cambodia to achieve the needed increase in human capital? First of all, national data show that Cambodia spent around 2.7% of its GDP on education, representing 18.3% of the total public expenditure. “In the global education context, the expense at this rate is a challenge for sustainable development. ... Vietnam and Thailand spend between 6% and 7% of their GDP” (MoEYSa, 2018: 8). Health expenditures also need to be increased.

With declining numbers of students, it should be possible to improve both the educational attainment of the young cohorts entering working age, and the quality of education they are receiving, if enough resources are put into education and smart strategies are adopted

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<sup>35</sup> Only 28 years in the case of the constant fertility projection, but it is unlikely that fertility will not decline further from its 2020 level.

to make the most of the money spent. Cambodian planners were wise to involve Cambodia in the PISA-D assessments – it is crucial to know the shortcomings of the education system, in particular in comparison with other countries, if they are to succeed in making Cambodia competitive over the longer run.

The findings of the PISA-D assessment are very relevant here. Its key recommendations are as follows:

- Reduce grade repetition, particularly among boys through the establishment of support programs for slow or poor learners, a peer support program or a study club and through the encouragement of teachers to pay more attention to poor students by giving them more exercises or practices. The reduction of grade repetition is a major factor in reducing school dropout.
- Ensure quality learning time (no loss of learning time and students are actually learning) through strengthening school discipline and school management (Cambodia has lost a lot of learning time due to the fact that both teachers and students frequently come late to school and are absent).
- Strengthen “school standards” to ensure effective school management.
- Improve the quality of instruction by improving teacher education and strengthening the concept- and competency-based curriculum in teacher education and teaching methods to enable students to learn independently and to have high critical thinking.
- Additional investment in the kindergarten and basic education to improve students’ universal basic skills.

Cambodia’s key development documents are also placing strong emphasis on human resource development and provision of productive employment. These are the two needs for taking maximum advantage of the demographic dividend. As these development documents recognize, underlying the strategy for human resource development and provision of productive employment must be an economic development strategy that focuses on maximizing economic growth and benefiting from the digital economy (see Royal Government of Cambodia, 2021).

Planning for the economic recovery from the COVID-19 pandemic needs to prioritize human development issues. Budgets for education and health must be protected, because further improvements in these sectors are the crucial underpinning for further human development, which in turn is the underpinning for maintaining the pace of economic development (Bloom et al., 2021).

### ***10.3. Poverty and effect of COVID-19***

Cambodia’s poverty reduction record has been impressive, but the vast majority of families who escaped poverty did so by a small margin. Around 4.5 million people remain near-poor and vulnerable to falling back into poverty when exposed to economic and other external shocks.

As noted in Chapter 4, survey findings show that it is not the lack of nearby schools that is keeping Cambodian children out of school, but overwhelmingly economic reasons – poverty, and the need to help support the family. These are the issues that need to be addressed through efforts to help Cambodian children progress through the school system. Information is available about many schemes that have worked in other countries, and one study in

Cambodia, addressed specifically at girls (Filmer and Schady, 2006) showed very good results.

“Poverty has increased due to the COVID-19 pandemic. More than 710,000 households (2.8 million people) received cash transfers during the COVID-19 in January 2021, while only 560,000 households (2.3 million people) were eligible in early June 2020. This implies that at least 150,000 households (0.5 million people) have been identified as newly poor between June 2020 and January 2021.” (World Bank, 2021)

At the time of writing (September 2021), the COVID-19 situation in Cambodia had worsened as a result of the spread of the Delta variant. As of 22 September, Cambodia had recorded 106,000 cases and 2,154 deaths. Its deaths per million population from COVID-19 (127) were fewer than in its neighbours Malaysia (732), Thailand (225) and Vietnam (178), but more than in Lao PDR (2). The effects on poverty recorded in January 2021 (see previous paragraph) may well be becoming more severe.

The rapid development of vaccines has been the bright spot for the world in dealing with the COVID-19 pandemic. Effective interventions to deal with the pandemic and vaccinate the population will be a *sine qua non* for further success in alleviating poverty in Cambodia, and in enabling educational, health and other programmes to maintain and increase their dynamism. However, the likelihood of the virus becoming endemic means that, as in other countries, Cambodia may have to come to terms with a “new normal” in its adaptation mechanisms.

#### ***10.4. Reducing inequalities.***

Reducing inequalities must play an integral role in the drive to raise productivity and quality of human resources. This is not only because it is those in the most disadvantaged groups who most need an improvement in their levels of health and education, but also because social harmony is under threat if levels of inequality are too great.

#### ***10.5. The family planning programme***

Cambodia’s unmet need for family planning had declined to 12.5% in 2014 from considerably higher levels in earlier years. We do not know how unmet need has changed since then, and the upcoming DHS will provide the required information. Unmet need is not the only indicator of a family planning programme’s success. Other indicators include access to modern methods of contraception, and prevalence of unintended pregnancies among women who are already using contraception.

In Cambodia, the gap between total contraceptive prevalence and prevalence of modern methods widened from 13 percentage points in 2005 to 18 percentage points in 2014, indicating a need for more effective information programmes and supply mechanisms for modern contraception. A well-executed family planning program should be able to narrow this gap in future.

Providing more effective family planning to meet the unmet need for contraception is not likely to lead to a very substantial further decline in fertility, because it is never possible to succeed in meeting the entire unmet need. The main determinant of future fertility trends will be the number of children Cambodian couples desire, and how this changes over time.

## ***10.6. The gender dividend***

Some policy options to enable Cambodia to profit more from a gender dividend are as follows:

- (1) Investment in early childhood development, focusing on reducing gender inequality where it is clearly present
- (2) Investment in adolescent girls to delay marriage and childbearing while improving education opportunities
- (3) Investment in adult women to improve employment and earnings opportunities.

Cambodia does not suffer as much as many countries (notably in South Asia) from gender inequalities in these areas, but much can still be done to yield a gender dividend. Early marriage and childbearing, while it has been lessening over time, still remains unacceptably high; women's employment opportunities in the more productive occupations in Cambodia remain lower than men's, and a gender gap in earnings persists. The most effective targeted interventions to delay marriage and childbearing are probably those that enable girls to remain in school, especially though incentives offsetting the out-of-pocket and opportunity costs of schooling (Wodon et al., 2020: 12).

Improving women's employment and earnings prospects can be tackled in a variety of ways. Reducing the amount of unpaid home-based work done mainly by women can be achieved by providing better access to basic infrastructure services (water, electricity, energy); enhancing women's mobility through better and safer modes of transportation; provision of child and elderly care services to reduce women's care work load. Better social protection systems would help promote women's participation in the labour market and help them seek better employment. Another need is to involve adult male household members more in care and household maintenance work.

The glass ceiling operates in Cambodia, as in many countries. The working environment looks more appealing to men than to women, and issues of household maintenance responsibilities intrude on women's possibility to take managerial positions. Women tend to be concentrated in sectors traditionally associated with women and at lower levels within the government or organization. In government, the only way to raise the proportion of women in senior positions rapidly would be to use a "fast track" approach, but this has not yet been done in Cambodia. However, the Ministry of Women's Affairs has partnered with other government agencies to promote the cause of women in leadership and good governance (General Secretariat of the National Assembly, 2020: 34); to succeed, such efforts require support from men in senior positions.

## ***10.7. The ICPD25 three zeros***

At the ICPD25 Nairobi Summit, Cambodia joined other countries in making a commitment to achieving the "three zeros" – Zero unmet need for family planning, Zero preventable maternal deaths, and Zero Gender-based violence including harmful practices. What does Cambodia need to do to meet its commitment to these goals at the Nairobi Summit? Needed policies have been discussed in the relevant sections of this report. The key issue is the degree of priority to be given to these policies. Given that reducing gender-based violence, improving access to a range of family planning methods and lowering the rate of maternal death to the lowest possible level are clear priorities for the Cambodian government, a

renewed commitment to the relevant policies, and initiatives to broaden them in appropriate directions, is now appropriate.

### ***10.8. Conclusion***

Cambodia has done remarkably well in rising from the devastation of the Khmer Rouge period, to becoming one of Asia's star performers in socio-economic development. It was singled out by the United Nations for its success in achieving the MDGs, and it is making good progress in reaching the SDGs. Its economic growth has continued at a remarkably rapid pace. School enrolment ratios have continued to increase steadily.

The danger is that these successes could lead to complacency. The list of Cambodia's shortcomings is also long. Educational advances are real, but the quality and relevance of the education Cambodia's children are receiving are significantly deficient in relation to the challenge of fitting those who are graduating from this system into the kinds of jobs the economy needs to provide if the country is to achieve upper middle income status by 2030. Cambodia must increase education's share in its overall government expenditure patterns if it is to achieve its goals for educational quality. Aspects of Cambodia's economic performance also face challenges moving forward. Just as for other countries, the ultimate impact of COVID-19 remains to be seen, but it has already raised the proportion of the population living in poverty.

Sound planning is the key to ultimate success. Cambodia's "Rectangular Strategy for Growth, Employment, Equity and Efficiency", and the planning mechanism based on it, have provided a sound platform for the remarkable advances in recent years. Plans and strategies in a wide range of areas have been noted in this report, prepared by government Ministries, committees and working groups, often in collaboration with international agencies. Cambodia has done well in preparing plans covering all aspects of economic and social development, as well as population policy. It is not always clear, though, whether the step from planning to effective implementation has been carried out.

Viewed from a population policy perspective, Cambodia's goals and strategies are well oriented to meeting the goals of the ICPD-PoA and the national commitment at the Nairobi Summit (ICPD+25) in 2019. It should be possible for the United Nations system, and UNFPA specifically, to continue to work effectively with the Royal Government of Cambodia in meeting these shared objectives.

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## Annex Tables: Population Projections 2020-2050

*Annex Table 1. Rapid fertility decline and ageing population 65 plus*

	2020	2025	2030	2035	2040	2045	2050
<b>POPULATION ('000)</b>							
0-14	4,765	4,643	4,598	4,407	4,085	3,732	3,362
15-29	4,253	4,480	4,699	4,746	4,631	4,590	4,401
30-64	6,341	7,207	7,788	8,533	9,418	10,074	10,260
65+	979	1,248	1,651	2,077	2,491	2,888	3,705
<b>Total</b>	16,338	17,578	18,735	19,763	20,625	21,283	21,728
<b>PERCENTAGE DISTRIBUTION</b>							
0-14	29.2	26.4	24.5	22.3	19.8	17.5	15.5
15-64	64.8	66.5	66.7	67.2	68.2	68.9	67.5
65+	6.0	7.1	8.8	10.5	12.1	13.6	17.1
<b>All ages</b>	<b>100</b>						
15-29	26.0	25.5	25.1	24.0	22.5	21.6	20.3
30-64	38.8	41.0	41.6	43.2	45.7	47.3	47.2
<b>DEPENDENCY RATIO</b>							
<b>Total</b>	54.2	50.4	50.0	48.8	46.8	45.2	48.2
Child	45.0	39.7	36.8	33.2	29.1	25.5	22.9
Aged	9.2	10.7	13.2	15.6	17.7	19.7	25.3
<b>Ageing index</b>	20.5	26.9	35.9	47.1	61.0	77.4	110.2
<b>Old age support ratio</b>	10.8	9.4	7.6	6.4	5.6	5.5	3.9

**Note:** The ageing index refers to the population aged 65+ per 100 persons younger than 15 years old.

The old age support ratio is the number of people aged 15-64 per one older person aged 65+.

*Annex Table 2. Slow fertility decline and ageing population 65 plus*

	2020	2025	2030	2035	2040	2045	2050
<b>POPULATION ('000)</b>							
0-14	4,769	4,723	4,825	4,853	4,764	4,677	4,628
15-29	4,253	4,480	4,699	4,750	4,711	4,817	4,847
30-64	6,341	7,207	7,788	8,533	9,418	10,074	10,264
65+	979	1,248	1,651	2,077	2,491	2,888	3,705
<b>Total</b>	16,342	17,657	18,962	20,213	21,384	22,456	23,444
<b>PERCENTAGE DISTRIBUTION</b>							
0-14	29.2	26.7	25.4	24.0	22.3	20.8	19.7
15-64	64.8	66.2	65.9	65.7	66.0	66.4	64.5
65+	6.0	7.1	8.7	10.3	11.6	12.9	15.8
<b>All ages</b>	100	100	100	100	100	100	100
15-29	26.0	25.4	24.8	23.5	22.0	21.5	20.7
30-64	38.8	40.8	41.1	42.2	44.0	44.9	43.8
<b>DEPENDENCY RATIO</b>							
<b>Total</b>	54.2	51.1	51.8	52.1	51.3	50.8	55.1
Child	45.0	40.4	38.6	36.5	33.7	31.4	30.6
Aged	9.2	10.7	13.2	15.6	17.6	19.4	24.5
<b>Ageing index</b>	20.5	26.4	34.2	42.8	52.3	61.7	80.1
<b>Old age support ratio</b>	10.8	9.3	7.6	6.4	5.7	5.1	4.1

**Note:** The ageing index refers to the population aged 65+ per 100 persons younger than 15 years old.

The old age support ratio is the number of people aged 15-64 per one older person aged 65+.

*Annex Table 3. Constant fertility and ageing population 65 plus*

	2020	2025	2030	2035	2040	2045	2050
<b>POPULATION ('000)</b>							
0-14	4,772	4,805	5,092	5,392	5,569	5,706	5,858
15-29	4,253	4,480	4,699	4,753	4,793	5,083	5,385
30-64	6,341	7,207	7,788	8,533	9,418	10,074	10,267
65+	979	1,248	1,651	2,077	2,491	2,888	3,705
<b>Total</b>	16,345	17,740	19,229	20,754	22,272	23,750	25,215
<b>PERCENTAGE DISTRIBUTION</b>							
0-14	29.2	27.1	26.5	26.0	25.0	24.0	23.2
15-64	64.8	65.9	64.9	64.0	63.8	63.8	62.1
65+	6.0	7.0	8.6	10.0	11.2	12.2	14.7
<b>All ages</b>	100	100	100	100	100	100	100
15-29	26.0	25.3	24.4	22.9	21.5	21.4	21.4
30-64	38.8	40.6	40.5	41.1	42.3	42.4	40.7
<b>DEPENDENCY RATIO</b>							
<b>Total</b>	54.2	51.8	54.0	56.2	56.7	56.7	61.1
Child	45.0	41.1	40.8	40.6	39.2	37.6	37.4
Aged	9.2	10.6	13.2	15.6	17.5	19.1	23.7
<b>Ageing index</b>	20.5	26.0	32.4	38.5	44.7	50.6	63.2
<b>Old age support ratio</b>	10.8	9.4	7.5	6.4	5.7	5.2	4.2

**Note:** The ageing index refers to the population aged 65+ per 100 persons younger than 15 years old.

The old age support ratio is the number of people aged 15-64 per one older person aged 65+.

**Annex Table 4. Rapid fertility decline and ageing population 60 plus**

	2020	2025	2030	2035	2040	2045	2050
<b>POPULATION ('000)</b>							
0-14	4,765	4,643	4,598	4,407	4,085	3,732	3,362
15-29	4,253	4,480	4,699	4,746	4,631	4,590	4,401
30-59	5,832	6,550	7,069	7,769	8,587	8,728	8,931
60+	1,488	1,905	2,370	2,840	3,323	4,233	5,034
<b>Total</b>	16,338	17,578	18,735	19,763	20,625	21,283	21,728
<b>PERCENTAGE DISTRIBUTION</b>							
0-14	29.2	26.4	24.5	22.3	19.8	17.5	15.5
15-59	61.7	62.7	62.8	63.3	64.1	62.6	61.4
60+	9.1	10.8	12.7	14.4	16.1	19.9	23.2
<b>All ages</b>	<b>100</b>						
15-29	26.0	25.5	25.1	24.0	22.5	21.6	20.3
30-59	35.7	37.3	37.7	39.3	41.6	41.0	41.1
<b>DEPENDENCY RATIO</b>							
<b>Total</b>	62.0	59.4	59.2	57.9	56.0	59.8	63.0
Child	47.2	42.1	39.1	35.2	30.9	28.0	25.2
Aged	14.8	17.3	20.1	22.7	25.1	31.8	37.8
<b>Ageing index</b>	20.5	26.9	35.9	47.1	61.0	77.4	110.2
<b>Old age support ratio</b>	6.78	5.81	4.94	4.40	3.98	3.15	2.65

**Note:** The ageing index refers to the population aged 60+ per 100 persons younger than 15 years old.

The old age support ratio is the number of people aged 15-59 per one older person aged 60+.

*Annex Table 5. Slow fertility decline and ageing population 60 plus*

	2020	2025	2030	2035	2040	2045	2050
<b>POPULATION ('000)</b>							
0-14	4,769	4,723	4,825	4,853	4,764	4,677	4,628
15-29	4,253	4,480	4,699	4,750	4,711	4,817	4,847
30-59	5,832	6,550	7,069	7,769	8,587	8,728	8,935
60+	1,488	1,905	2,370	2,840	3,323	4,233	5,034
<b>Total</b>	16,342	17,657	18,962	20,213	21,384	22,456	23,444
<b>PERCENTAGE DISTRIBUTION</b>							
0-14	29.2	26.7	25.4	24.0	22.3	20.8	19.7
15-59	61.7	62.5	62.1	61.9	62.2	60.3	58.8
60+	9.1	10.8	12.5	14.1	15.5	18.9	21.5
<b>All ages</b>	100	100	100	100	100	100	100
15-29	26.0	25.4	24.8	23.5	22.0	21.5	20.7
30-59	35.7	37.1	37.3	38.4	40.2	38.9	38.1
<b>DEPENDENCY RATIO</b>							
<b>Total</b>	62.0	60.1	61.1	61.5	60.8	65.8	70.1
Child	47.2	42.8	41.0	38.8	35.8	34.5	33.6
Aged	14.8	17.3	20.1	22.7	25.0	31.3	36.5
<b>Ageing index</b>	20.5	26.4	34.2	42.8	52.3	61.7	80.1
<b>Old age support ratio</b>	6.78	5.79	4.97	4.39	4.01	3.19	2.73

**Note:** The ageing index refers to the population aged 60+ per 100 persons younger than 15 years old.

The old age support ratio is the number of people aged 15-59 per one older person aged 60+.

*Annex Table 6. Constant fertility and ageing population 60 plus*

	2020	2025	2030	2035	2040	2045	2050
<b>POPULATION ('000)</b>							
0-14	4,772	4,805	5,092	5,392	5,569	5,706	5,858
15-29	4,253	4,480	4,699	4,753	4,793	5,083	5,385
30-59	5,832	6,550	7,069	7,769	8,587	8,728	8,938
60+	1,488	1,905	2,370	2,840	3,323	4,233	5,034
<b>Total</b>	16,345	17,740	19,229	20,754	22,272	23,750	25,215
<b>PERCENTAGE DISTRIBUTION</b>							
0-14	29.2	27.1	26.5	26.0	25.0	24.0	23.2
15-59	61.7	62.2	61.2	60.3	60.1	58.2	56.8
60+	9.1	10.7	12.3	13.7	14.9	17.8	20.0
<b>All ages</b>	100	100	100	100	100	100	100
15-29	26.0	25.3	24.4	22.9	21.5	21.4	21.4
30-59	35.7	36.9	36.8	37.4	38.6	36.7	35.4
<b>DEPENDENCY RATIO</b>							
<b>Total</b>	62.0	60.9	63.4	65.8	66.4	71.9	76.0
Child	47.2	43.6	43.3	43.1	41.6	41.3	40.9
Aged	14.8	17.3	20.1	22.7	24.8	30.6	35.1
<b>Ageing index</b>	20.5	26.0	32.4	38.5	44.7	50.6	63.2
<b>Old age support ratio</b>	6.78	5.81	4.98	4.40	4.03	3.27	2.84

**Note:** The ageing index refers to the population aged 60+ per 100 persons younger than 15 years old.

The old age support ratio is the number of people aged 15-59 per one older person aged 60+.