



Exploring the Implementation and Impact of the Village Hive Project: A Community-Driven Approach to Poverty Alleviation and Family Resilience in Battambang Municipality, Cambodia

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ABSTRACT :

The Village Hive Project in Battambang Municipality adopts an innovative, community-driven upstream approach to alleviating poverty by addressing interconnected challenges such as economic hardship, food insecurity, health barriers, and educational obstacles faced by vulnerable families. This qualitative case study explores the project's implementation, impact, and sustainability through stakeholder perspectives—including local authorities and frontline staff,—and examines socio-economic, health, and educational factors influencing outcomes. Utilizing purposive sampling, focus groups, and grounded theory analysis, the study identifies key barriers including communication gaps, social issues, limited resources, and low participation. Despite challenges like service accessibility and persistent poverty, the project has achieved notable progress in improving nutrition, school engagement, and family resilience by fostering local leadership, enhancing coordination, and delivering tailored interventions in education, health, and economic empowerment. The research also assesses feasibility and strategic requirements for national scaling, highlighting the need for clearer communication, strengthened training, stable funding, and collaborative governance to sustain and expand impact. The findings provide actionable recommendations to enhance community outreach, stakeholder collaboration, service delivery, and long-term support networks, contributing to informed policymaking and the design of scalable, sustainable social services that empower vulnerable families and promote holistic community development across Cambodia.

Keywords: Vulnerable families, Upstream approach, Early intervention, Education support, Economic empowerment, Health access, Sustainability, Family resilience, and Community collaboration

Introduction

The Village Hive Project offers a comprehensive and community-driven approach to tackling the key challenges faced by vulnerable families, including caregiver burdens, economic hardship, food insecurity, health struggles, and educational barriers. By providing early intervention services such as financial literacy, vocational training, and crisis support, the project empowers caregivers and promotes family stability. Its focus on economic empowerment through micro-business opportunities and job creation helps families overcome income instability and poverty. Nutritional support and health services address food insecurity and caregiver strain, while strengthening local health clinics and offering psychosocial support improves overall family well-being. Additionally, the project's efforts to enhance school infrastructure, teacher training, and access to educational resources help remove barriers to learning and support children's academic success. Overall, the Village Hive Project exemplifies an effective model for improving the socioeconomic and health conditions of vulnerable households through coordinated, locally-informed interventions (Ngath, 2025a).

1.1 Problem Statement

While the Village Hive Project has shown effectiveness in tackling the complex challenges faced by vulnerable families in Battambang Municipality—such as caregiver strain, economic hardship, food insecurity, and barriers to education—through early intervention and community-based strategies, a critical gap remains in understanding the perspectives of local authorities involved in its implementation. Although families and children have provided valuable feedback through both quantitative and qualitative methods, the voices of local government stakeholders—who play a vital role in coordinating and supporting project activities—have not been adequately documented. Without their insights, it is difficult to fully assess the project's operational impact, long-term sustainability, and alignment with local systems.

To build a more complete picture of the project's implementation challenges and strengths, it is equally important to consider the perspectives of CCT employees and project staff who work directly with families and children. These individuals are deeply involved in the day-to-day delivery of services and possess valuable firsthand knowledge of what works well and what does not. However, their experiences and professional insights have not been sufficiently documented or analyzed. The absence of both local authority and staff perspectives limits a comprehensive understanding of the Village Hive Project's implementation. Collecting input from these key stakeholders is essential not only for evaluating the project's effectiveness and refining its design but also for strengthening collaboration, enhancing accountability, and promoting long-term community empowerment.

Looking ahead, there is also limited understanding of the potential challenges and benefits that may arise if the Village Hive Project is adopted at the national level. While the project has demonstrated promise locally, scaling it nationwide would require navigating multiple layers of governance, ensuring sufficient resource allocation, and coordinating across diverse provincial and national institutions. It remains unclear how the model would adapt to different regional contexts, whether existing systems can absorb and sustain its interventions, and what unintended consequences might occur. Likewise, while there may be broader benefits—such as improved service delivery, integration into national policy, and stronger recognition of community-based approaches—these outcomes remain speculative without further investigation. Gaining insight into these dimensions is critical to making informed decisions about scaling and preserving the project's core principles and effectiveness across a broader implementation framework.

1.2 Research Objectives

In response to the identified gaps and challenges surrounding the implementation and potential scaling of the Village Hive Project, this study aims to systematically explore the various factors that influence its effectiveness and sustainability. The objectives are designed to capture the perspectives of key stakeholders, understand the socio-economic and educational dynamics affecting vulnerable families, and evaluate the project's health and social service interventions. Furthermore, the study seeks to assess the feasibility and implications of expanding the project nationally, ensuring that any scaling efforts maintain the core principles of community empowerment and coordinated service delivery. Through these objectives, the research intends to provide actionable insights that will inform program refinement, enhance collaboration, and support the long-term resilience of families and communities served by the Village Hive Project.

The specific research objectives are as follows:

- To identify and analyze the key barriers and enablers of communication and engagement within the Village Hive Project, focusing on how stakeholder collaboration, community involvement, and outreach strategies influence project implementation, service delivery, and the long-term resilience of the community.
- To examine the interconnected socio-economic, familial, and educational factors contributing to school dropout and youth disengagement, and to explore how family, school, and community support systems can be strengthened through targeted interventions that enhance access to education, skill development, and sustainable livelihood opportunities.
- To investigate the primary economic and social challenges faced by vulnerable families that limit their engagement with support services, and to evaluate how the Village Hive Project's interventions promote financial self-reliance, skill acquisition, and long-term family resilience.
- To assess the challenges and successes associated with health service access and the implementation of the Village Hive Project, aiming to identify effective strategies for improving community well-being, enhancing local health capacity, and ensuring the sustainability of social welfare initiatives through community-driven approaches.
- To explore the opportunities and challenges related to scaling the Village Hive Project to the national level, with the goal of developing a standardized, government-recognized model that strengthens local service delivery, builds institutional capacity, fosters stakeholder collaboration, and improves the welfare of vulnerable families throughout Cambodia.

Literature Review

2.1 Upstream Approaches to Ending Poverty: The Village Hive Model

Traditional charity hasn't reduced global poverty because it focuses on crisis relief rather than preventing problems at their source. In places like Cambodia, social services are often controlled by foreign charities, which respond only after people are already in crisis, keeping the cycle of need—and donations—alive. To truly solve poverty, efforts must shift "upstream" to building high-quality, community-controlled public social services that prevent crises before they start. Cambodian Children's Trust exemplifies this approach through its Village Hive project, which partners with local communities to develop a sustainable social protection system, with full community control planned by 2032. Early results show improved living standards and reduced social issues, demonstrating that breaking the cycle of poverty requires breaking the cycle of charity dependence (CambodiaCCT, 2024).

The Village Hive employs a three-tiered upstream social protection model designed to address poverty by preventing crises before they occur. The first tier, Universal Prevention, provides services accessible to the entire community to promote well-being and create safe, healthy environments, with a focus on strengthening public education and healthcare systems such as commune clinics, schools, and childcare. The second tier, Early Intervention, targets children, youth, and families identified as vulnerable or with special needs, offering essential support like nutrition, education, healthcare, and safe housing, alongside programs that foster financial literacy, vocational training, and income generation to build resilience and self-reliance. The third tier, Crisis Response, delivers specialized, intensive services to those already in crisis, aiming to minimize long-term harm through child protection, emergency hotlines, counseling, crisis accommodation, and addiction support. Together, these integrated tiers work to reduce the reliance on costly crisis services by addressing root causes and supporting communities proactively (Cambodian Children's Trust (CCT), 2025).

2.2 The Review on Family, Economic, Health, and Educational Issues in the Village Hive Project

Vulnerable families, particularly caregivers in single-parent or fractured households, face significant challenges managing emotional, health, and economic pressures without sufficient support. Persistent economic hardship—marked by income instability, unemployment, and debt—limits access to food, shelter, and education, trapping many in cycles of poverty. This financial strain directly contributes to food insecurity and nutritional deficits, especially among children, leading to long-term health and developmental issues. Caregivers also struggle with managing chronic illnesses and mental health concerns, increasing stress and family vulnerability. Educational barriers, such as lack of resources and inconsistent school access, further hinder children's opportunities despite caregivers' strong aspirations. Effective solutions require targeted interventions across community support, healthcare, nutrition, education, and economic empowerment to break these interconnected cycles (Ngath, 2025a).

To better understand these challenges, baseline data from the Village Hive project highlights significant socioeconomic disparities, with average household income per capita at \$1.65—well below Cambodia’s poverty line of \$2.70—and expenses often exceeding income, indicating widespread financial hardship. Although families generally reported adequate nutrition, school enrollment, stable health, and safety, these conditions varied considerably across households. Endline comparisons show statistically significant improvements in nutrition (from 2.81 to 3.02 on a 4-point scale) and safety (from 3.83 to 4.00), while other welfare indicators showed slight, non-significant gains. Financially, per capita income rose to \$2.46 and monthly income to \$323.31, yet income remained below the poverty line and disparities persisted. A strong positive correlation between income and nutrition (income elasticity of 16.82%) highlights the critical role of economic stability in enhancing family welfare, particularly in improving food security (Ngath, 2025b).

Beyond family circumstances, the school environment also plays a critical role in shaping children’s well-being and educational outcomes. Students identified various environmental and interpersonal challenges within schools—such as poor hygiene, stray animals, and bullying—that disrupted their focus and well-being. At the same time, they valued clean classrooms, green spaces, and extracurricular activities that encouraged learning and participation (Ngath, S., Vang, S., & Hum, S., 2025a).

After-school care programs played a crucial role in providing academic help, meals, and safe spaces, especially for students facing food insecurity or lacking support at home. While these programs were praised, concerns about affordability, discipline, and equitable access were also raised. Many students described how financial strain, parental conflict, and child labor hindered their educational progress and emotional health. Despite these difficulties, they remained hopeful that improved family income could reduce the need for child labor and enhance their ability to concentrate on school. A holistic approach—addressing school conditions, family financial stability, and after-school support—is vital to ensuring students can succeed academically and thrive personally (Ngath, S., Vang, S., & Hum, S., 2025a).

The Village Hive project has brought substantial improvements to family and community well-being by enhancing economic stability, education, and health. Through access to electricity, vocational training, and startup capital, families have been able to launch small businesses, reduce reliance on aid, and keep children in school. Educational support—including scholarships, transportation, after-school care, and improved school infrastructure—has increased attendance and engagement. Health initiatives have boosted nutrition and mental well-being, aligning with global standards. However, challenges persist, such as poor infrastructure, ongoing financial hardship, educational barriers, and social concerns like limited inclusion for young children and excessive mobile phone use. Community members have recommended improving social services, school management, and road conditions; expanding emotional and educational support; and promoting healthier lifestyles through school gardens and food policies. Continued support and infrastructure investment are needed to sustain and build upon the progress made (Ngath, S., Vang, S., & Hum, S., 2025b).

Methodology

3.1 Research Design

This study employed a qualitative research method, drawing on a combination of descriptive, exploratory, and explanatory research designs to gain a comprehensive understanding of the Village Hive Project’s implementation and impact. It described the existing conditions surrounding communication, stakeholder engagement, service delivery, and the socio-economic challenges faced by families. It also explored the underlying factors contributing to school dropout, disengagement, and barriers to service access.

In addition to describing and exploring these complex issues, the study applied an explanatory approach to understand how specific strategies within the Village Hive Project contributed to outcomes such as improved family resilience, educational engagement, and community well-being. While the study did not employ statistical correlation, it incorporated correlational thinking to interpret relationships between socio-economic conditions and educational or health-related outcomes. Furthermore, the study adopted a case study design, focusing on the Village Hive Project as a unique, community-driven initiative. This methodological approach allowed for an in-depth and context-rich analysis, informing practical recommendations and assessing the project’s potential for national scaling.

3.2 Population and Sampling

The target population for this study comprised local authorities and relevant stakeholders involved in the implementation of the Village Hive Project. These included individuals who played a role in supporting, supervising, or coordinating project activities at the community level.

A purposive sampling method was employed to select participants who were directly involved in the Village Hive Project. The sample was drawn from three communes where the project was actively embedded. This approach ensured that data was collected from those with firsthand knowledge and engagement in the project.

In addition to local authorities, staff members from the Cambodian Children’s Trust (CCT) and project personnel were also included in the sample, as they were integral to the implementation and coordination of the Village Hive.

A total of 111 individuals participated in the study, including 20 men. The sample consisted of the following categories:

- 3 Commune Chiefs
- 5 Commune Council for Women and Children (CCWC) representatives
- 2 Commune Police Officers
- 1 Provincial Social Worker
- 4 Educational Officers
- 7 Village Chiefs and Deputy Chiefs
- The remaining participants were CCT staff and project staff

This sampling strategy enabled the study to gather diverse perspectives from various stakeholders involved in the Village Hive Project, thereby enriching the understanding of its implementation and impact.

3.3 Data Collection Methods

This study employed qualitative methods to collect data from participants directly involved in the Village Hive Project. Data collection activities included two community forums and one all-hands meeting with CCT staff, project staff, and local stakeholders.

The first community forum was held in the first commune where the Village Hive was embedded (referred to as CFSSO), while the second forum was conducted in the second commune (CFSS). These forums engaged local authorities and stakeholders in semi-structured group discussions focused on community development, family well-being, and service provision. The process was highly participatory, with observers actively joining the discussions to better understand the context, listen to different perspectives, and contribute when appropriate.

Discussions were guided by the following key questions:

- What positive changes have you observed in your community?
- What challenges or issues still exist in your community?
- What services do schools, health centers, and the district-led project (Village Hive) provide to support children and families?
- What aspects of these services are satisfactory, and what still needs improvement?
- What progress have you seen in schools, health centers, and social protection services?
- What more should be done to support children's development and improve community well-being?

In addition, an all-hands meeting was conducted with CCT staff, project staff, and key stakeholders. During this session, participants were divided into eight focus groups for concurrent Focus Group Discussions (FGDA). These discussions were also participatory in nature and guided by the following questions:

- What are the benefits of having the project recognized and integrated at the national level?
- What challenges might arise?
- What are the obstacles to the development of targeted families, schools, and health centers?

After the discussions, each group presented their key points and received feedback from both peers and observers. The use of semi-structured guiding questions in both the community forums and FGDA sessions enabled rich, focused dialogue while allowing flexibility for participants to express their unique experiences and perspectives in a collaborative setting.

3.4 Data Analysis

This study employed Grounded Theory as the methodological approach to analyze the qualitative data collected from community forums and focus group discussions. The aim was to identify recurring themes and patterns that emerged from participants' perspectives and experiences and to develop a theory grounded in the data itself. The analysis process followed four stages.

In the first stage, open coding was conducted by carefully reviewing transcripts line by line to identify and label key concepts, ideas, and actions. This allowed for the recognition of recurring words, phrases, and expressions directly from participants' responses. The second stage involved axial coding, in which the initial codes were organized into broader categories or themes. During this phase, the relationships between categories were examined to understand how various aspects of community development, family well-being, and service delivery were connected.

Next, selective coding was carried out to identify a central theme or core category that integrated all other categories. This step refined the analysis and helped construct a coherent narrative explaining the main patterns observed across the different stakeholder groups. Finally, in the theory generation stage, a grounded theory was developed to explain the underlying processes and conditions that influenced community change and family development within the context of the Village Hive Project.

Throughout the analysis, direct quotes from participants were incorporated to illustrate key findings, enhance authenticity, and provide deeper insight into the coded themes. This use of participants' own words emphasized the participatory and context-sensitive nature of the research process.

4. Presentation of the Results

4.1 Communication and Engagement

4.1.1 Barriers to Engagement and Implementation in the Village Hive Project

Communication Gaps across Stakeholders: A consistent challenge is the communication disconnect between families and service providers. For instance, "misunderstanding or misperception of VH staff visits" and "poor communication from parents to schools about attendance" (CFSS) have negatively impacted collaboration. Among local authorities, an "initial lack of understanding by authorities regarding project procedures" (FGDA1) hindered early-stage engagement. These issues were compounded by "frequent updates to forms and procedures [that] make usage unclear" (FGDA1), creating confusion across partners.

Resistance to Structured Support: Some families expressed reluctance toward structured interventions. A notable theme was a "desire for independence from structured plans" (CFSS), even as many remained "dependent on NGOs despite support for business startups" (CFSS). This contradiction signals the importance of managing expectations and providing a clearer pathway toward sustainable autonomy. Furthermore, economic challenges persist, as "families still lack food security" (FGDA1), reinforcing the recommendation to "clarify planning before livelihood support to avoid dependency" (FGDA1).

Delays and Procedural Burdens: Procedural inefficiencies have slowed down project implementation. Families and service providers alike reported "long wait times and frequent meetings" (CFSS), and authorities were often unavailable for follow-ups due to "limited availability of authorities for family follow-ups due to other duties" (FGDA1). In addition, a "long implementation period due to procedural formalities" (FGDA1) has impacted timely service delivery and weakened momentum.

Structural Vulnerability and Family-Level Risks: The project operates in contexts marked by severe socioeconomic hardship. Respondents described families facing "poverty, debt, large household size, elderly members, unstable shelter, unemployment, health issues, lack of legal documents, substance

abuse, and domestic violence” (FGDA4). Internal household dynamics, such as “gambling, drug and alcohol abuse” (FGDA5, FGDA6), further inhibit constructive engagement, resulting in a “lack of willingness to participate and cooperate within families” (FGDA7).

Low Participation and Competing Priorities: Participation remains low in part due to competing daily demands and a lack of clarity about project objectives. Common concerns included “lack of cooperation from families due to busy schedules,” “slow participation in outreach and other project activities” (CFSS), and a “lack of clarity about project goals among households” (CFSO). In many cases, “household non-cooperation with services” (CFSO) stemmed from mistrust or negative prior experiences with support providers.

Capacity Constraints across the Ecosystem: Stakeholder capacity has emerged as a core limitation. Many “stakeholders and authorities have insufficient time to participate” (FGDA4), and families often face “skill and knowledge gaps” (FGDA5) that hinder their ability to plan livelihoods, access services, or understand project benefits. These issues are intensified when “families and children are in crisis or at high risk” (FGDA5), such as during episodes of violence, illness, or forced displacement.

Service Delivery and Coordination Challenges: Service delays and inadequate dissemination of procedures have affected trust and effectiveness. Families shared that “delayed service delivery contributes to frustration” (FGDA5), and there is a continuing concern about the “limited dissemination of economic resilience procedures for vulnerable families” (FGDA6). In addition, “limited knowledge and skills among staff” (FGDA6) occasionally led to miscommunication or errors in delivery. Nonetheless, there have been positive strides in coordination among partners.

Mental Health, Addiction, and Motivation Gaps: In communities heavily affected by addiction and psychological distress, engagement remains a significant hurdle. Caregivers who “use drugs/alcohol and experience mental health issues” and “struggle with debt and lack motivation” present persistent challenges. These households often exhibit a “lack of family commitment and participation” and continue to express a “desire for independence from structured plans” (CFSS), making it difficult to build sustained cooperation.

Educational Disengagement and Practical Barriers: Parental involvement in education remains low, with concerns raised about “low parental involvement in school-related activities” (FGDA5). Practical barriers, such as the “lack of proper ID Poor cards or money to access healthcare” and, in some cases, an “unwillingness to seek services” (FGDA4), further hinder engagement. At the community level, a “lack of willingness and ability to participate due to skill and knowledge gaps” (FGDA5) has been observed. Additionally, some families “do not cooperate with the project’s goals” due to compounded challenges such as “family violence, drug and alcohol use,” as well as “education-related issues, social isolation, school discrimination, and health concerns” (FGDA8).

4.1.2 Impact of Stakeholder Collaboration and Community Engagement in the Village Hive Project

Collaboration with Schools, Daycare Centers, and Local Authorities: Effective collaboration with schools, daycare centers, and local authorities has been central to the success of the Village Hive (VH) project. As one participant emphasized, there is “*strong collaboration with local authorities*” (CFSS) and “*positive relationships with daycare and schools*” (CFSO), which have significantly contributed to its achievements. These strong partnerships have been instrumental in promoting “*high student retention and recognition in daycare*” (CFSO) and delivering “*improved learning outcomes via after-school care and school collaboration*” (CFSS), clearly demonstrating the value of inter-sectoral cooperation.

Improvements in School Infrastructure and Learning Environments: The project has also facilitated tangible improvements in school infrastructure and learning environments. Participants noted “*improved school infrastructure and provision of learning materials*” (CFSS), along with contributions that “*supported school development plans*” (CFSO). These enhancements have directly benefited students and supported the broader goal of quality education.

Communication and Coordination with Local Authorities: Communication and coordination with local authorities have further strengthened the project’s success. Notably, “*effective and timely communication with families*” (CFSS) and a “*prompt child abuse response protocol with authorities*” (CFSS) were cited as key enablers of timely and efficient service delivery. The “*local authority collaboration and support*” (CFSO) has provided a solid foundation for integrating services and addressing urgent needs.

Integration at the Commune and Sangkats Level: Moreover, the project’s integration at the commune and sangkat levels has enabled local governments to “*gain sufficient budget to implement project activities*” (FGDA4) and “*respond to community poverty in a timely way*” (FGDA4). This deeper engagement has led to more effective responses to local challenges and made “*public services... more accessible to citizens*” (FGDA5), supporting long-term development while reducing migration.

Impact of Strong Stakeholder Cooperation on Service Delivery: While some challenges remain, areas with strong cooperation among stakeholders have seen marked improvements in service delivery. One participant observed that “*the project directly supports public services*” (FGDA8), while another remarked, “*good relationships facilitate easier collaboration with the community*” (FGDA8). Indeed, “*strong cooperation among stakeholders*” (FGDA7) has allowed the project to “*expand reach to assist the poor more effectively*” (FGDA7), resulting in job creation, improved livelihoods, and better access to essential services.

Increased Family Participation and Community Engagement: In communities with strong engagement and alignment between VH initiatives and local goals, family participation has increased significantly (CFSO). The success of VH in these areas is attributed to the availability of resources, structured plans, and commune-level ownership. One participant noted that the project has successfully “*increased family access to jobs, skills, and understanding of VH programs*” (CFSS), supported by “*clear and well-implemented objectives and plans*” (CFSS). The implementation of prompt response protocols and tailored engagement strategies has further fostered community involvement (CFSO, CFSS).

Improved Access to Services and Educational Opportunities: The benefits of this collaborative approach are evident in increased access to services, improved living standards, and greater educational opportunities for children. As one participant noted, “*Families receive support through the project*” (FGDA5), which has led to better living conditions, reduced poverty, and improved access to education: “*Family living conditions improve, poverty decreases, and children access education*” (FGDA5). This expanded support has also enabled “*broadier service coverage for other children and families*” (FGDA5), helping reduce migration as more families choose to remain in the area due to “*improved local conditions*” (FGDA5).

The Role of Outreach Efforts in Sustaining Progress: Participants emphasized that outreach efforts have played a pivotal role in addressing local needs and sustaining progress. Recommendations included providing “*clear and thorough explanations of the project to communes and sangkats*” (FGDA4) and “*seeking additional sources of funding for implementation*” (FGDA4), to ensure the momentum is maintained.

Benefits of Proactive Outreach in Access to Services: In areas where proactive outreach has been emphasized, families have gained access to employment, healthcare, and child protection services. As one focus group participant shared, “*Communities benefit by creating jobs and income opportunities*” (FGDA8), while the project has also “*directly supported public services*” (FGDA8) in meeting urgent needs. These efforts have fostered trust and sustained collaboration, as highlighted by the statement: “*Good relationships facilitate easier collaboration with the community*” (FGDA8).

Long-Term Impact on Community Resilience and Well-Being: Overall, the VH project has laid the groundwork for community resilience and long-term well-being by “*responding to issues in a timely manner*” (FGDA8) and “*promoting development in both the community and national society, reducing poverty*” (FGDA8). As summed up by one participant, “*Families benefit from the project’s initiatives*” (FGDA8), reinforcing the project’s success in improving quality of life for vulnerable communities.

4.2 Education and Youth Support

4.2.1 The Interconnected Challenges Driving School Dropout and Disengagement

Socio-Economic Barriers to School Enrollment and Attendance: The issue of declining school enrollment and persistent dropout rates remains a significant challenge, influenced by a combination of socio-economic and educational factors. Families facing poverty and large household sizes often struggle to prioritize education, with economic hardships exacerbated by child labor and fatigue from night activities. As highlighted in the reports, “*high student absenteeism due to child labor or fatigue from night activities*” (CFSS), alongside factors such as “*unstable employment, low income, substance abuse, and domestic violence*” (FGDA5), limits the support students receive at home. These barriers create an environment where regular school attendance becomes increasingly difficult.

Family-Level Challenges Impacting School Enrollment and Attendance: At the family level, irregular attendance or non-enrollment is often linked to economic hardship and caregiving duties. As one participant explained, children may be kept from school due to “*economic responsibilities, or sibling care*” (FGDA4). Families often face a range of challenges, including “*poverty, debt, large household size, elderly members, unstable shelter, unemployment, health issues, lack of legal documents, substance abuse, and domestic violence*” (FGDA4). These complex factors contribute to a cycle of disengagement, making it difficult for students to stay enrolled and engaged in school.

Specific Challenges for Vulnerable Groups: Family challenges also include issues specific to vulnerable groups, such as early pregnancy. Reports highlight that “*school dropout and early pregnancy issues among girls under 18*” are particularly concerning, as this demographic faces compounded obstacles to staying in school (CFSSO).

Barriers to Skill Development for Youth: Skill development barriers further compound the situation. For children under 15, “*skill development barriers*” (CFSSO) prevent the acquisition of necessary academic and life skills. For youth over 18, “*limited vocational training options*” (CFSSO) hinder opportunities for skill-building and employment, contributing to long-term disengagement. Additionally, “*household reluctance to plan for improved living*” (CFSSO) limits families’ ability to support their children’s educational and vocational aspirations.

School Infrastructure and Resource Challenges: At the school level, inadequate facilities and limited resources further contribute to dropout rates. As noted, “*inadequate teaching materials,*” “*deteriorating or old school buildings,*” and “*shortage of primary school teachers*” (FGDA6) make it difficult for students to stay motivated and for teachers to engage them effectively. In addition, “*teachers lacking qualifications and adherence to ethical standards*” (FGDA6) worsen the situation, leading to further student disengagement.

Lack of Extracurricular Activities and Engagement Opportunities: The lack of extracurricular activity spaces also plays a critical role. Without opportunities for broader engagement, students miss out on experiences that could motivate them to stay in school. The “*lack of extracurricular activity space*” has been identified as a key barrier (CFSSO), emphasizing the need for more dynamic and supportive learning environments.

Interconnected Cycle of Disengagement and Dropout Rates: The cycle of disengagement among youth is deeply interconnected, with absenteeism, lack of family support, school environment challenges, and skill gaps reinforcing each other. Family-related issues such as “*family violence, drug and alcohol abuse*” (FGDA7) and a “*lack of willingness to participate and cooperate within families*” (FGDA7) create unstable home environments, weakening students’ ability to stay engaged in education. Meanwhile, school-related deficiencies like “*outdated infrastructure*” and “*inadequate teaching materials*” (FGDA6) not only hinder the learning experience but also increase disillusionment among students. As one report notes, “*students may struggle to stay in school*” (FGDA6), further fueling the cycle of disengagement and dropout. Together, these family and school factors create a feedback loop that makes it increasingly difficult for students to break free and succeed.

4.2.2 Progress and Impact: Strengthening Families, Schools, and Communities

Progress in Family Support and Economic Empowerment: Despite ongoing challenges, significant progress has been made through re-engagement efforts and improved service delivery. The project has played a central role in expanding family access to employment, skills training, and educational opportunities, resulting in notable improvements in financial literacy and household stability. As reported, there have been “*increased work opportunities for families,*” “*skill-building opportunities for families,*” and “*improved financial management among families*” (CFSSO).

Enhancing School Development and Student Support: In parallel, the project continues to prioritize school development and student support by enhancing learning environments and providing essential materials. Achievements include “*supported school development plans*” and the “*provision of student materials and recognition*” (CFSSO). These efforts have contributed to a more inclusive and effective educational experience for both families and students.

Broad Community Impact and Integration into Development Strategies: Re-engagement initiatives, strengthened service delivery, and improved access to education have collectively delivered tangible benefits to local communities. As highlighted by FGDA4, “*communities benefit from development and improved access to services,*” reflecting the broader impact on community well-being. Additionally, the project’s integration into wider community

development strategies has helped uplift living conditions, reduce poverty, and expand opportunities for children's education. FGDA5 confirms that these efforts have led to *"improved family living conditions, reduced poverty, and children gain access to education."*

Targeted Solutions Addressing Family, and School Needs: As a result of this progress, the project has successfully developed several targeted and context-specific solutions that directly address the needs of families and schools. For families, the project has reduced school absenteeism and improved learning outcomes by raising awareness of legal rights and expanding access to training and employment opportunities. FGDA6 highlights that the project has promoted *"legal education for the general public"* and supported families through *"skill training and job opportunities."* These efforts have empowered caregivers to play an active role in their children's education and have addressed root causes of vulnerability.

Addressing Resource Limitations and Infrastructure Gaps in Schools: For schools, the project has made significant progress in addressing resource limitations and infrastructure gaps. It has worked to *"provide schools with adequate teaching materials,"* and *"repair and build school infrastructure,"* (FGDA6). These efforts have been essential in creating a safe, supportive, and engaging learning environment for both students and educators.

4.3 Family Challenges and Support System

4.3.1 Economic Struggles and Barriers to Support Engagement in Families

Economic Challenges and Debt Burden: Many families in the region face severe economic hardships, including high levels of debt and financial insecurity. These challenges are worsened by delayed salary payments and reliance on unstable daily wages, which create unpredictable income streams. According to one of the community forum with stakeholders (CFSS), *"financial strain [is] caused by salary delays"* and *"daily wage reliance and discouragement from debt"* are common, underscoring the instability that many households face. Moreover, persistent family debt acts as a major obstacle to progress, with many families prioritizing debt repayment over long-term development. As stated in the Focus Group Discussion in all-handed meeting (FGDA2), *"families are in debt and use their capital for repayments, hindering development."* This cycle of poverty, unstable employment, and mounting debt traps families in a state of chronic hardship. The CFSS further highlights *"debt accumulation from equipment loans"* and the burden of *"family debt and care responsibilities,"* reinforcing the deep link between debt and economic instability in the region.

Service Resistance and Limited Engagement: Alongside economic pressures, many families also resist engaging with support services. This resistance often stems from mistrust, limited understanding of program goals, or a desire to remain independent from structured plans. For instance, the other community forum with stakeholders (CFSS) notes that some families *"reject services with young children"* and *"lack clarity about project goals."* A similar trend is seen in the CFSS, which points to *"a lack of understanding about the value of education among families"* as a barrier to participation. Misunderstandings about visits from Village Hive (VH) staff and reluctance to follow external plans further weaken engagement. Low financial literacy compounds the problem; families are often *"unable to manage or sustain small businesses,"* and many experience *"debt accumulation from equipment loans"* (CFSS). Additionally, deep-rooted social issues—such as *"family violence, drug, and alcohol use"* (FGDA8) and *"dropout from vocational training due to drug use"* (CFSS)—make it even harder for families to seek support or make lasting progress.

Barriers to Economic Mobility: Widespread poverty is further aggravated by large household sizes, unemployment, and limited access to essential resources. As FGDA4 highlights, families commonly face a combination of *"poverty, debt, large household size, elderly members, unstable shelter, unemployment, health issues, lack of legal documents, substance abuse, and domestic violence."* These intersecting vulnerabilities limit families' capacity to engage with services or explore opportunities for economic advancement. A consistent barrier is the lack of startup capital, which prevents many from launching income-generating activities. As FGDA5 notes, *"lack of startup capital remains a consistent barrier for families."* This financial constraint significantly restricts their potential for upward mobility and broader community development.

Substance Abuse and Its Compounding Effects: Substance abuse—particularly drug and alcohol use—adds another layer of complexity, often undermining the effectiveness of interventions. According to FGDA3 and FGDA5, *"families struggle with debt, substance abuse, and domestic violence,"* and face *"unstable employment, low income, debt, and substance abuse."* These issues frequently lead to mental health problems and further destabilize the household environment, making it difficult for families to engage in support programs. FGDA5 also reports that *"families and children are in crisis or at high risk,"* which limits their capacity to seek out help. The urgency of managing immediate needs—such as food, housing, and health—often takes priority over longer-term recovery or development strategies.

Impact on Education and Livelihood Opportunities: Addiction within families not only creates health and social challenges but also limits access to educational and vocational opportunities. FGDA2 notes that *"health issues limit ability to pursue livelihood, jobs, or vocational training."* Children in these families often experience *"education issues, social isolation, school discrimination, and health issues"* (FGDA8), all of which contribute to poor school attendance and increased dropout rates. Hesitancy toward educational services can stem from feelings of mistrust or the stigma sometimes associated with receiving external support. As FGDA8 notes, *"some families do not cooperate with the project's goals,"* which may reflect broader challenges in building trust and understanding around assistance programs.

Domestic Violence as a Barrier to Progress: Domestic violence—often fueled by substance abuse—further complicates intervention efforts. Families experiencing both addiction and violence are frequently caught in a cycle of crisis, which limits their capacity to engage in meaningful change. FGDA6 reports that *"domestic violence within families"* and *"drug and alcohol abuse"* significantly hinder participation in livelihood or vocational programs. These overlapping issues—substance abuse, mental health challenges, and family violence—undermine the impact of support services and trap families in a cycle of poverty and instability. As FGDA8 emphasizes, *"family violence, drug, and alcohol use"* are major barriers to achieving sustainable improvements.

4.3.2 Empowering Families through Economic Self-Sufficiency and Skill Development

Expanding Economic Opportunities through Skill Development: The project has significantly expanded economic opportunities for families by providing skill-building initiatives and financial management training. These efforts have empowered families to manage their resources more effectively, leading to improved living conditions. For instance, activities such as *"Increased work opportunities for families"* and *"Skill-building opportunities for families"* (CFSS) have equipped families with essential skills for stable employment. Furthermore, *"Improved financial management among families"* (CFSS) has enhanced their ability to budget and plan, contributing to greater financial independence. This focus on skills development is central to

fostering self-reliance and lifting families out of poverty, as reflected in *“Increased family access to jobs, skills, and understanding of VH programs”* (CFSS).

Legal and Financial Support for Economic Stability: Additional initiatives have helped families obtain legal documents and manage household finances, further strengthening their economic well-being. These interventions promote long-term stability by equipping families with practical tools for income generation and budgeting. For example, *“Help families obtain legal documents”* and *“Teach families how to track income and expenses”* (FGDA4) address critical barriers to financial independence. Likewise, efforts such as *“Raise awareness about the benefits of learning skills and vocational training”* (FGDA5) support the project’s broader goal of building financial resilience among families.

Impact of Economic Support Programs on Family Livelihoods: Economic support programs have made a tangible difference in improving family well-being. When families have access to vocational training, job opportunities, and legal assistance, they are better equipped to break the cycle of poverty. Holistic interventions such as *“Provide collaborative and timely intervention services, including counseling”* (FGDA6) address underlying family challenges in a coordinated way. Moreover, initiatives that offer *“multiple benefits for the community (e.g., community development through employment, livelihoods, and skills)”* and encourage families to *“develop an understanding of their income and expenses and engage in daily work for financial stability”* (FGDA7) underscore the lasting value of financial literacy and capacity-building in promoting long-term self-reliance.

Promoting Financial Self-Reliance and Reducing NGO Dependency: The Village Hive Project (VH) plays a critical role in promoting self-reliance by encouraging families to transition from dependency on NGOs to forming savings groups and developing long-term financial plans. By promoting *“self-reliance instead of NGO dependency”* and supporting families to *“form savings groups and provide follow-up and advice”* (CFSS), VH empowers families to take control of their financial future. The successful *“transition of projects from NGO to commune”* (CFSS) further demonstrates the sustainability of these efforts. Additionally, the focus on *“clarifying planning before livelihood support to avoid dependency”* and providing *“financial management training and expense tracking tools”* (FGDA1) ensures that families are well-prepared to manage their finances independently.

Community Collaboration and Leadership for Sustainable Growth: Collaboration with local authorities and community-wide engagement has also been essential. Programs aimed at leadership development and self-sufficiency have provided families with the necessary tools to overcome challenges and sustain progress. VH has fostered *“strong collaboration with local authorities”* (CFSS) and improved *“family access to jobs, skills, and understanding of VH programs”*—a foundation for long-term success. Other achievements include *“improved learning outcomes via after-school care and school collaboration”* (CFSS), contributing to the holistic well-being of families and communities.

Comprehensive Support for Family Well-being: Beyond foundational support, VH has implemented programs that address essential aspects of family life—such as access to startup capital, housing, and family planning. These initiatives help reduce poverty and ensure that children can attend school, as shown in *“Family living conditions improve, poverty decreases, and children access education”* (FGDA5). By responding to key challenges like *“lack of startup capital”* (FGDA5), the project supports families in transitioning from survival to sustainability.

Building Long-Term Self-Reliance and Family Resilience: Finally, efforts to increase family income, enhance financial awareness, and promote healthy family environments are central to long-term self-reliance. Programs encouraging families to *“develop an understanding of their income and expenses”*, *“increase income beyond expenses”*, and *“be aware of the harmful effects of drug use and violence”* (FGDA7) reinforce the importance of holistic support. Initiatives such as *“Promote the harmful effects of drug use (including electronic cigarettes)”* and *“conduct weekly educational sessions through schools”* (FGDA8) address crucial social challenges, helping families build safe, stable households. Together, these comprehensive efforts equip families with the tools needed for lasting independence and sustainable growth.

4.4 Service Delivery and Program Management

4.4.1 Challenges and Barriers to Accessing Health Services and Project Integration

Access to Health Services and Challenges: Families in the community face significant barriers to accessing essential health services, which negatively affect their overall well-being and limit opportunities to improve their livelihoods. Health centers often struggle with limited medical supplies, inadequate equipment, and a shortage of specialized professionals: *“Medical equipment and medicines are insufficient, requiring additional purchases”* (FGDA5); *“Lack of medical supplies and medications,”* and *“shortage of specialized medical professionals”* (FGDA6). These gaps hinder the delivery of effective care. Moreover, the *“quality of public health services is limited,”* and some families *“hesitate to use health services”* or *“misuse medications”* (FGDA1). Additional barriers include low awareness of health center locations and administrative challenges, such as lacking identification cards: *“Lack of awareness or difficulty accessing health center locations”* (FGDA1); *“families are unaware of the process or do not possess identification cards to access services”* (FGDA4).

Impact of Health Issues on Livelihood and Training: Health-related challenges extend beyond service access, directly impacting families’ ability to participate in income-generating or skill-building activities. Chronic health conditions, often untreated, prevent individuals from pursuing vocational training or securing employment: *“Health issues limit ability to pursue livelihood, jobs, or vocational training”* (FGDA2). This further entrenches poverty and limits pathways to self-sufficiency.

Broader Community Challenges Affecting Family Health: Health issues are also linked to wider community problems such as domestic violence, substance abuse, and child labor. For instance, *“domestic violence within families”* (FGDA6) undermines both physical and emotional well-being, while *“drug and alcohol abuse”* and *“child labor exploitation”* (FGDA6) weaken family structures and reduce the impact of support services. These interrelated issues create complex barriers for families, increasing their vulnerability and straining already-limited community resources.

Health Centers’ Struggles with Resources and Infrastructure: In addition to external challenges, health centers themselves face significant limitations. The shortage of equipment and medicine often compels families to make additional purchases (FGDA5), increasing their financial burden. Concerns about the quality of care, including issues related to professional conduct and service standards (FGDA6), can further erode trust in the healthcare system, leaving families with limited reliable options for medical care.

4.4.2 Key Factors Contributing to the Success and Sustainability of the Social Welfare Project

Community Engagement and Local Authority Management: The project's success is primarily driven by active management from local authorities and strong community engagement, which ensures responsiveness to community needs and leads to positive outcomes like increased work opportunities and skill-building for families. One of its primary strengths lies in the active management by local authorities and strong community engagement, which ensures that the project remains responsive to the needs of those it aims to serve. As one source notes, "*Authorities actively manage the project*" (CFSO). This engagement has been instrumental in creating a sense of ownership within the community, contributing to both stability and positive outcomes. As a result, families have gained access to increased work opportunities and skill-building initiatives, such as "*increased work opportunities for families*" and "*skill-building opportunities for families*" (CFSO), which have not only enhanced their economic standing but also equipped them with valuable skills for long-term sustainability. Furthermore, the project has contributed to "*community-wide support and timely service access*" (CFSO), underscoring the effectiveness of local involvement in ensuring the project's success.

Collaboration between Local Authorities and the Community: The collaboration between local authorities and the community has been crucial in building trust, ensuring timely resource allocation, and aligning efforts with community needs, contributing significantly to the project's success. A significant achievement of the project has been the collaboration between local authorities and the community, fostering an atmosphere of trust and cooperation. As one source highlights, "*Local authority collaboration and support*" has been a key success factor (CFSO). This collaboration has ensured that resources are available when needed and that services are delivered in a timely manner, as reflected by "*community-wide support and timely service access*" (CFSO). Additionally, the clear understanding of the project's goals by local authorities has played a pivotal role in its success, ensuring that efforts are aligned and community needs are effectively addressed, which is exemplified by "*project alignment with goals*" (CFSO).

Training and Capacity Building for Local Authorities: Training local authorities has enhanced their technical skills, enabling them to respond efficiently to community needs, which has led to broader support for the project and improved stability for local stakeholders. Effective monitoring and management have been realized through the training of local authorities, equipping them with the knowledge and tools required to respond swiftly to community needs. As one source notes, "*Local authorities gain new technical skills, knowledge, and experiences*" (FGDA4). This proactive approach has ensured that issues are dealt with efficiently, leading to broader recognition and support for the project, as reflected in the statement "*Broader recognition and support for the project*" (FGDA6). This sense of stability has been crucial in maintaining momentum and securing the ongoing commitment of local stakeholders, which is supported by "*Project staff and partners achieve improved stability*" (FGDA6).

Transition to Commune-Level Implementation: One of the project's major achievements is its shift from NGO-led initiatives to commune-level implementation, ensuring sustainability by empowering local authorities to manage services effectively, thus benefiting vulnerable families with increased job and skill opportunities. The transition from NGO-led projects to commune-level implementation stands as one of the Social Welfare Project's greatest achievements, underscoring a focus on sustainability. This is highlighted by the statement: "*Transition of projects from NGO to commune with sustained success*" (CFSS). By transferring responsibility to local authorities, the project ensures that its successes are sustained and integrated into the community. This shift has empowered local authorities to manage public services more effectively, as indicated by: "*Better local service delivery due to adequate resources*" (CFSS), enabling them to better respond to the needs of vulnerable families. In addition, families have gained increased access to employment and skills, providing them with greater opportunities for economic stability and independence, as reflected in: "*Increased family access to jobs, skills, and understanding of VH programs*" (CFSS).

Enhanced Service Access and Sustainability at Commune-Level: The move to commune-level implementation has improved access to services due to resource proximity and enabled communes to secure independent funding, ensuring long-term sustainability and the ability to meet evolving community needs. National recognition and integration have fostered stronger collaboration among stakeholders, enabling improved access to services due to the proximity of resources, as indicated by: "*Improved access to services for beneficiaries due to proximity*" (FGDA1). The transition to commune-level implementation has significantly enhanced the project's reach and impact, ensuring that services are tailored to local needs and are more accessible. This is further supported by the quote: "*Easier and faster support interventions*" (FGDA1), which highlights how the transition facilitates quicker responses and a more localized approach.

Empowerment and Capacity Building at the Commune Level: Decentralizing project responsibilities has significantly enhanced the capacity of local authorities, equipping them with technical skills to better support vulnerable families. This shift has improved the project's responsiveness and adaptability. Commune-level implementation plays a crucial role in promoting sustainability by ensuring that local governments have adequate financial resources to operate independently: "*Communes and sangkats ... gain sufficient budget to implement project activities*" (FGDA4). Financial autonomy enables them to maintain services and adjust to changing community needs. As noted, "*Sangkats receive funding to develop communities and gain new experiences and technical skills*" (FGDA5), and they "*build capacity to support vulnerable families effectively and in a timely manner*" (FGDA5). This localized empowerment is central to the long-term success and flexibility of the project.

Local Engagement and Long-Term Sustainability: The shift to commune-level implementation has fostered greater local engagement and decision-making, promoting a sense of ownership and responsibility in the community, ensuring that interventions remain relevant and effective in addressing local needs and crises. Additionally, the shift to commune-level implementation has fostered greater local engagement, aligning the project more closely with the unique needs of the communities it serves. Involving local authorities and communities in decision-making has instilled a sense of ownership and responsibility, vital for long-term sustainability, as highlighted: "*Good relationships facilitate easier collaboration with the community*" (FGDA8). This localized approach allows for context-specific responses, ensuring that interventions remain relevant and effective, with the project "*responding to issues in a timely manner*" (FGDA8) and "*addressing crises such as poverty and orphaned children*" (FGDA8). Furthermore, the project's emphasis on local development contributes to broader benefits: "*The project promotes development in both the community and national society, reducing poverty*" (FGDA8).

4.5 National Integration and Recognition

4.5.1 Challenges in Scaling and Implementing the Project at the National Level

Delays in Scaling Up: Potential delays in scaling up and interpreting national guidelines may present significant challenges to the effective implementation of the project. One possible obstacle is the risk of limited understanding among local authorities regarding project procedures, as noted: “initial lack of understanding by authorities regarding project procedures” (FGDA1). Such gaps in understanding, if combined with complex procedural formalities, could lead to extended implementation periods: “long implementation period due to procedural formalities” (FGDA1). Furthermore, the availability of technical expertise and skills may remain uneven across areas, potentially hindering the smooth integration of national guidelines: “insufficient technical expertise and skills available across areas” (FGDA3).

Communication Challenges: A critical issue anticipated during national integration is the challenge local authorities may face in effectively disseminating project information. The process of raising awareness about the project could be time-consuming, as it requires clear and thorough explanations to ensure all stakeholders are adequately informed and aligned. As noted, the “dissemination of project information is time-consuming” (FGDA4). This potential communication gap may lead to delays, as stakeholders must be fully briefed on the project’s guidelines and procedures before they can participate effectively.

Financial Constraints: In addition to communication challenges, the project is expected to face significant financial constraints during national integration. The need for substantial funding to scale up implementation and align with national guidelines presents a critical barrier, as “implementation requires high financial costs” (FGDA4). These financial limitations, combined with already limited resources, may hinder effective collaboration and stakeholder participation—both of which are essential for the project’s success, as “limited resources hinder collaboration and participation” (FGDA4).

Lack of Staff Expertise and Personnel: Moreover, staff involved in national-level implementation may face difficulties due to a limited understanding of the project’s guidelines, which could lead to inefficiencies and delays in scaling up. This anticipated challenge is reflected in the concern over “limited knowledge and skills among staff” (FGDA6). Such knowledge gaps may hinder the smooth adoption and integration of national policies, potentially slowing overall progress. In addition, a possible shortage of personnel in key roles—particularly family financial support officers—could affect the timely and effective implementation of national guidelines, as highlighted: “shortage of personnel in roles related to service delivery (e.g., family financial support officers)” (FGDA6). These potential staffing gaps could create bottlenecks that obstruct the smooth execution of planned activities.

Alignment with National Guidelines: Finally, limited budgets and resources could pose a significant financial strain on the project, potentially hindering efforts to scale up in alignment with national guidelines. If adequate funding is not secured, the project may face challenges in establishing the necessary infrastructure and support for full implementation, as “limited budget for project execution” (FGDA7) may restrict progress. Additionally, a shortage of resources could lead to situations where “the implementation does not fully align with the project guidelines” (FGDA7), complicating the process of expanding the project while meeting national standards.

4.5.2 From Model to Movement: National Integration and Local Empowerment Through Standardized Implementation

Standardized Project Model and National Guidebook: The ongoing development of national models and standardized practices is expected to play a pivotal role in enhancing the effectiveness and scalability of the project. A standardized project model is being designed for future nationwide implementation, accompanied by the creation of a national guidebook. This guidebook is intended to serve as a framework for community-level execution, outlining procedures and best practices to ensure uniformity across regions and streamline service delivery. As noted, “A standardized project model will be implemented nationwide” (FGDA2), and the “development of a national guidebook as a model for community-level implementation” (FGDA1) further emphasizes this structured, forward-thinking approach. Additionally, the anticipated “establishment of a clear, structured, step-by-step process” (FGDA1) is expected to guide local authorities and stakeholders through implementation, fostering alignment and consistency throughout the project’s rollout.

Collaboration and Stakeholder Involvement: The creation of this model is envisioned to be supported by strong collaboration among stakeholders at all levels, aiming to build the project on a foundation of shared knowledge and resources. As highlighted, there is an expectation of “strong involvement and cooperation among stakeholders at all levels” (FGDA1), which is anticipated to play a key role in the model’s successful development. This collective effort is expected to lead to the establishment of a well-structured, step-by-step implementation process that promotes consistency and clarity across regions, as indicated by the plan for an “establishment of a clear, structured, step-by-step process” (FGDA1). By integrating best practices at the national level, the project aims to scale effectively while maintaining high standards of quality, supported by the ongoing “development of a national guidebook as a model for community-level implementation” (FGDA1).

National Recognition and Service Expansion: National recognition is expected to strengthen the development of standardized practices, potentially expanding service coverage and improving access to public services. As noted, “communes and sangkats may gain sufficient budget to implement project activities” (FGDA4), potentially enabling local authorities to respond promptly to community needs. Additionally, it is anticipated that “communes and sangkats can respond to community poverty in a timely way” (FGDA4), highlighting the expected swift intervention capabilities made possible by financial support. If secured, this funding could be crucial in ensuring that services are not only available but also tailored to the local population’s needs. Furthermore, it is hoped that “public services will be made more accessible to citizens” (FGDA5), ensuring that the project’s benefits can reach the wider community.

Strong Stakeholder Cooperation and Community Benefits: A key advantage of national integration is the potential for strong cooperation among stakeholders, fostering a unified approach. It is hoped that “strong cooperation among stakeholders” (FGDA7) will be critical in developing a unified strategy. This collaboration is expected to lead to the creation of standardized practices that could enhance community development, such as “community development through employment, livelihoods, and skills” (FGDA7), potentially contributing to poverty eradication. By extending the project’s reach, national integration could create “multiple benefits for the community,” including improved livelihoods and opportunities. As a result, national integration may play a significant role in community welfare, and the project “could contribute to poverty eradication” (FGDA7). This comprehensive approach could amplify the project’s impact and position it as a leader in advancing sustainable development.

Official Recognition and Resource Acquisition: The formal recognition of the project could significantly enhance its capacity to gain support and ensure sustainability. It is anticipated that the project “will gain official recognition from the ministry” (FGDA2), providing a strong foundation for securing resources. With this official recognition, the project team could “request government or donor funding for implementation” (FGDA2), potentially enhancing its financial stability and building trust in its objectives. This recognition may also “increase trust in the project” (FGDA2) from donors, while raising the project’s visibility and credibility, positioning it for greater success at both the national and local levels. As a result, the project is expected to be poised for widespread implementation, benefiting “vulnerable and at-risk families nationwide” (FGDA2).

Collaboration between Authorities and Communities: Stakeholder collaboration could be crucial to the project’s future success. It is expected that local authorities and communities will “strongly involve and cooperate at all levels” (FGDA1), actively supporting the project. This collaboration could be vital in “strengthening relationships between authorities and citizens” (FGDA1), which may improve “access to services for beneficiaries due to proximity” (FGDA1). As a result, mutual commitment from both authorities and communities could foster a sense of ownership, leading to increased participation from stakeholders at all levels.

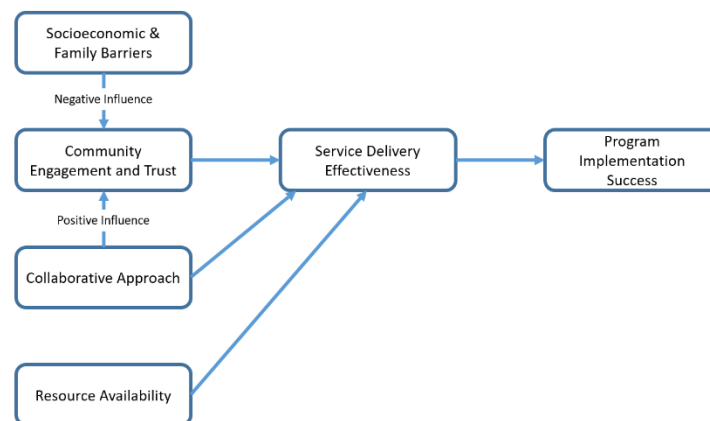
Capacity Building and Expanded Coverage: National recognition could facilitate access to technical expertise and additional resources for communes and sangkats, enabling them to better support vulnerable families. It is anticipated that “Sangkats will build capacity to support vulnerable families effectively and in a timely manner” (FGDA5). This expanded capacity may allow the project to scale and reach a larger number of beneficiaries, contributing to “broader service coverage for other children and families” (FGDA5). Furthermore, recognition at both national and sub-national levels could ensure “timely service delivery to beneficiaries” (FGDA6), potentially leading to improved outcomes for the project.

Community Development and Mutual Benefits: Moreover, the recognition is expected to bring mutual benefits to the communities involved. The project could create job opportunities, enhance skills, and directly address poverty, contributing to greater economic stability. As mentioned, the project has the potential to foster community development through employment, livelihoods, and skills, with citizens likely to gain mutual benefits “from the project” (FGDA7). Additionally, communities could benefit from the creation of jobs and income opportunities, further promoting economic growth. The project may help drive development at both the community and national levels, working to reduce poverty “by promoting development in both the community and national society, reducing poverty” (FGDA8). National-level recognition could also streamline collaboration between stakeholders and communities, leading to more efficient service delivery. Positive relationships could facilitate smoother collaboration, enabling the project to respond promptly “by responding to issues in a timely manner” (FGDA8), ensuring that the needs of vulnerable families are met sustainably.

Discussion

5.1 Integrating Community Participation and Resource Management for Sustainable Family Support

The effectiveness of social welfare programs, like the Village Hive project, hinges on a dynamic interplay between community participation, resource management, and service delivery. Successful program implementation depends on overcoming challenges such as communication barriers, economic strain, and institutional resistance, while leveraging opportunities like strong community engagement and effective collaboration among stakeholders.



Village Hive Project: A Conceptual Framework Linking Barriers, Collaboration, and Service Delivery

5.1.1 Communication and Cooperation

Effective communication between households and service providers is fundamental to overcoming resistance to services and promoting cooperation. Misunderstandings about roles, service delays, and lack of timely information often lead to friction that undermines program effectiveness. The Social Exchange Theory (Homans, 1958) helps explain this dynamic by suggesting that individuals are more likely to participate in relationships or programs when they perceive a clear benefit. In the context of the Village Hive (VH) project, open and effective communication enhances the perception of mutual gain, making families more willing to engage. Similarly, the Diffusion of Innovations Theory (Rogers, 1962) underscores the role of communication in the adoption of new services. When information is clear and accessible, it accelerates the community’s acceptance and trust in the project, while delays or confusion slow down this process and may lead to resistance.

The importance of communication is further highlighted by theories that focus on the interaction between individuals and their broader environments. Bronfenbrenner’s Ecological Systems Theory (1979) points out that families function within complex systems, including schools, service agencies, and communities. Poor communication disrupts these systems—particularly the connections between the microsystem (family) and exosystem (services)—resulting in disengagement. Ajzen’s Theory of Planned Behavior (1991) adds that when communication is clear and roles are well defined, families are

more likely to form positive attitudes toward participation, feel a sense of control, and engage with services. Without this clarity, uncertainty and mistrust increase, weakening service uptake.

Other communication-focused theories also reinforce the critical role of clear, culturally appropriate, and timely interactions. Communication Accommodation Theory (Giles, 1973) emphasizes that service providers who adapt their language and style to fit family contexts are more likely to foster cooperation and reduce misunderstanding. Gittell's Relational Coordination Theory (2002) similarly stresses that shared goals and mutual respect—built through consistent and accurate communication—are key to effective collaboration. Empowerment Theory (Zimmerman, 1995) underlines that informed families are more likely to participate actively when they understand their rights and options. Finally, Systems Theory (Luhmann, 1995) reminds that all components of a system must communicate effectively to function well; any breakdowns between families and service providers weaken the system as a whole and compromise outcomes for children and communities.

5.1.2 Economic and Educational Factors

Families experiencing economic hardship or educational disadvantages often struggle to engage fully with development programs. Barriers such as poverty, debt, or limited access to vocational training reduce their capacity to participate in or benefit from available resources. According to Maslow's Hierarchy of Needs (1943), individuals must first satisfy their basic needs—such as food, shelter, and safety—before they can focus on higher-level goals like education or personal development. Similarly, the World Health Organization's Social Determinants of Health Framework (2008) identifies economic stability and education as critical factors influencing well-being and engagement in society. When these foundational elements are lacking, families may disengage from programs, regardless of their potential benefits.

Several theories further emphasize how strengthening economic and educational conditions can enhance family participation. Empowerment Theory (Zimmerman, 1995) highlights the importance of access to skills and opportunities, suggesting that interventions offering financial literacy, vocational training, or education empower families to take active roles in improving their circumstances. Bronfenbrenner's Ecological Systems Theory (1979) shows how family participation is shaped by multiple, interconnected systems—meaning that family-level disadvantages can be mitigated if broader systems such as schools and economic services offer appropriate support. The Theory of Planned Behavior (Ajzen, 1991) also explains that perceived control over one's situation influences behavior; families who lack confidence or resources may choose not to participate unless they are supported. Finally, Human Capital Theory (Becker, 1964) reinforces the idea that investments in education and skills development not only increase economic productivity but also enhance the ability of individuals to benefit from and engage with social programs.

5.1.3 Service Delivery and Public Health Gaps

Addressing service delivery and public health gaps is a crucial component of program success, as these gaps can significantly hinder community well-being and the achievement of intended outcomes. According to Systems Theory (Bertalanffy, 1968), effective functioning depends on the interdependence of various elements within a system—such as policies, infrastructure, and human resources. When these components fail to operate cohesively, service breakdowns occur, reducing access and trust in health systems. Relational Coordination Theory (Gittell, 2002) reinforces this by highlighting the need for strong communication and collaboration among service providers. Without such coordination, fragmentation and inefficiencies arise, leaving community needs unmet and weakening the overall impact of public health efforts.

In addition, behavioral and motivational theories shed light on the consequences of inadequate service delivery. The Health Belief Model (Rosenstock, 1974) suggests that individuals' engagement with health services is influenced by perceived benefits and barriers; poor service quality or inaccessibility heightens perceived barriers, reducing community participation. The Social Ecological Model (McLeroy et al., 1988) further emphasizes that service gaps at institutional or policy levels undermine individual and community-level interventions. Moreover, Public Service Motivation Theory (Perry & Wise, 1990) suggests that when systems align with public service values and provide necessary support, professionals are more motivated and effective, which in turn enhances service delivery. Altogether, these theories highlight the importance of strengthening service infrastructure and coordination to close public health gaps and ensure meaningful outcomes.

5.1.4 Family Empowerment and Self-reliance

Long-term success in social welfare projects depends on transitioning families from dependency on external aid to self-reliance. This shift involves building self-sufficiency through skills training, economic opportunities, and family development initiatives. Empowering families in this way lays the foundation for sustainable improvement, as it enhances their ability to meet their own needs and make meaningful contributions to their communities. Empowerment Theory (Zimmerman, 1995) underscores this by highlighting the importance of enabling individuals and communities to access resources, develop competencies, and participate in decisions that affect their lives. Similarly, the Capability Approach (Sen, 1999; Nussbaum, 2000) emphasizes expanding real freedoms—such as education, health, and income generation—which allows families to pursue lives they value and achieve lasting independence.

Several other theoretical frameworks further support the value of family empowerment and self-reliance. The Strengths-Based Approach (Saleebey, 1996) encourages programs to focus on the inherent strengths and resilience within families, promoting long-term stability and agency. Self-Determination Theory (Deci & Ryan, 1985) explains that intrinsic motivation and well-being are enhanced when people experience autonomy, competence, and connectedness—key elements in building self-reliant families. Finally, Maslow's Hierarchy of Needs (1943) illustrates that families must first have their basic needs met—such as safety and financial stability—before they can achieve self-actualization. Together, these theories emphasize that empowering families is not only an ethical imperative but also a strategic necessity for sustainable development.

5.2 Conclusion and Recommendation

5.2.1 Conclusion

The Village Hive (VH) Project has faced many challenges in connecting with families, service providers, and local leaders. Communication problems, delays, and some resistance to structured support have made teamwork difficult. Many families deal with tough issues like poverty, substance abuse, and

trouble getting legal documents or social services. These struggles often make it harder for them to get involved with the project. Participation has also been low due to unclear goals, practical problems, and limited skills among those involved. In some communities, addiction and mental health challenges have lowered motivation even more, while social problems and school disengagement continue to be serious concerns.

School dropout and lack of engagement among youth come from a mix of complicated factors. Poverty, unstable jobs, child labor, and family care responsibilities often keep students from attending school regularly. These problems are even bigger for vulnerable groups, where early pregnancy and few job training options make it harder for older youth to stay in school. Many schools lack good facilities, enough teaching materials, or after-school programs, which makes learning less appealing. Family problems such as domestic violence, substance abuse, and little support at home also deepen these struggles and hurt students' chances of success.

Many families in the target areas face ongoing money problems like unstable incomes, high debts, and trouble accessing key services. Irregular paychecks, daily wage work, and large families add to their stress. Because of financial pressures, families often focus on paying debts instead of investing in education or better jobs. Substance abuse, family conflict, and mistrust of outside help also keep families from getting the support they need. Misunderstandings about the project, low financial know-how, unemployment, health issues, and missing legal documents all add to the barriers that stop families from improving their lives through education or training.

Getting health care is another big hurdle for many families, which hurts their well-being and makes it hard to improve their livelihoods. Local health centers often lack enough supplies, equipment, and specialized staff. Poor service quality, not knowing where clinics are, and missing ID papers make it even harder to get care. When families can't access health services, it becomes tough for them to join job training or find steady work, trapping them in poverty. Other issues like domestic violence, substance abuse, and child labor make family life even more unstable, while shortages in health services only deepen these challenges.

Trying to expand the Village Hive Project across the country brings more hurdles. Rules and procedures slow things down, and many local officials don't fully understand the project yet. There isn't enough technical know-how or enough trained staff to support the work. Communication is often slow or gets stuck, and limited funding means fewer people can get involved or aligned with the project's goals. To grow successfully, the project needs better training, clearer communication, and steady funding.

Despite these challenges, the Village Hive Project has made important progress through strong partnerships with schools, daycare centers, and local leaders. Working together at the local levels has helped improve governance, boost school facilities, and respond faster to poverty issues. These efforts have opened up more access to services, created job opportunities, and supported families better, making communities stronger and healthier.

VH takes a broad approach to tackle the root causes of poverty and school dropout. The project has boosted financial literacy, helped families find jobs and develop skills, and improved living conditions. At schools, efforts to upgrade buildings, provide learning materials, and create supportive environments have helped more kids stay in school. These combined actions are helping youth stay engaged longer and building hope for future generations.

To help families become financially independent, VH offers skill training, savings groups, and financial education. Legal help and income management support empower families to stand on their own. The project also provides after-school care, housing help, and drug prevention programs to build stronger families. By working closely with local leaders, VH supports families as they move from simply surviving to thriving.

Moving more control to local authorities has made the project more sustainable. Local officials now play a bigger role in managing services and meeting community needs. Training has strengthened their skills, and services delivered closer to home have become easier to access and more responsive. This local focus keeps the project aligned with what communities truly need, helping build lasting progress and reduce poverty.

Building on these local wins, VH is working on a national plan to create a standard project model and guidebook. Official recognition by the government will boost the project's credibility, open up more funding, and help reach more people. Stronger partnerships between communities and authorities will build trust and encourage shared responsibility, leading to more sustainable and effective community development.

5.2.2 Recommendation

The Village Hive Project faces various challenges that impact children and families in Battambang Municipality. To tackle these issues effectively, the following top 10 guiding strategies—identified through focus group discussions during the all-handed meeting—have been developed to promote better collaboration, resource access, and community empowerment.

1. **Enhance Community Outreach and Awareness:** Use targeted campaigns, educational materials, and informational sessions to dispel myths and increase community understanding and trust in the project. Improve after-school care infrastructure to boost family and student participation (CFSS).
2. **Clarify Roles and Strengthen Collaboration among Stakeholders:** Conduct regular training and define clear roles for local authorities, service providers, and project staff to improve coordination, build trust, and ensure smooth information sharing (FGDA1).
3. **Improve Service Accessibility and Reduce Barriers:** Streamline case evaluations, standardize procedures, ensure sufficient staffing, and communicate clearly to reduce delays and increase access to services, especially for vulnerable families (FGDA1, FGDA4).
4. **Address Social Issues through Education and Awareness Campaigns:** Target community challenges such as substance abuse, domestic violence, and mental health via school- and community-based education to improve family engagement and motivation (FGDA5).
5. **Support Family Financial Stability and Economic Resilience:** Provide vocational training, job search support, and financial literacy education (e.g., tracking income and expenses), plus livelihood startup capital to help families achieve financial stability, fostering better support for education (FGDA4).
6. **Strengthen School Resources and After-School Programs:** Invest in adequate teaching materials, infrastructure repairs, and develop extracurricular and vocational training opportunities to engage students and create a motivating learning environment (FGDA6, CFSS).
7. **Deepen Family Involvement and Awareness:** Organize regular parent meetings (family gathering), community outreach, and transparent school monitoring to increase family participation, educate about education's value, and raise awareness on harmful social issues (CFSS, FGDA4, FGDA5).

8. **Build a Comprehensive Network for Long-Term Support:** Foster collaboration between families, schools, local authorities, and community leaders to ensure sustained engagement, follow-up, and a supportive environment for students and families (FGDA5, FGDA8).
9. **Implement Specialized Interventions for Complex Challenges:** Develop tailored support plans for families facing substance abuse, mental health issues, or domestic violence, including rehabilitation programs, safe relocation, and preventive education. Coordinate closely with health centers and NGOs (CFSO, FGDA8).
10. **Strengthen Project Implementation through Training and Coordination:** Establish working groups, conduct regular training for staff and local officials, clarify procedures, develop joint action plans, and monitor activities closely to improve project execution and stakeholder alignment (FGDA1, FGDA4, FGDA5, FGDA8).

Appendix A. Proposed Monitoring & Evaluation Framework

Theory: Social Welfare Program Effectiveness – Integrating Community Participation and Resource Management for Sustainable Family Support

Key Components	Indicators	Data Sources	Data Collection Methods	Frequency	Responsible
1. Communication & Cooperation	- % of households reporting clear communication with service providers- Number of community meetings held- Reduction in service resistance incidents	Surveys with households and service providers, Meeting records, Complaint logs	Household surveys, interviews, focus groups, document review	Quarterly	M&E Officer, Community Facilitators
2. Economic & Educational Factors	- % of families enrolled in vocational training programs- Average household income improvement- Number of families receiving economic support	Program records, Household income surveys, Training attendance lists	Surveys, program data tracking, interviews with participants	Semi-annually	Program Manager, Training Coordinators
3. Service Delivery & Public Health Gaps	- Number of health service referrals made- % of referred families accessing health services- Time taken to resolve service delivery issues	Health clinic records, Referral logs, Service delivery reports	Service provider reports, beneficiary feedback, case tracking	Monthly	Health Coordinator, Field Officers
4. Family Empowerment & Self-reliance	- % of families demonstrating increased self-sufficiency (e.g., income-generating activities)- Number of families graduating from aid programs- Skills acquisition rates	Follow-up surveys, Program completion records, Focus groups	Longitudinal household surveys, success stories, case studies	Annually	Program Manager, Community Facilitators

Appendix B. Proposed Survey Questionnaire for Future Quantitative Study

Questionnaire: Assessing the Effectiveness of the Village Hive Social Welfare Program

Respondent Information

- Name (optional): _____
- Household ID/Code: _____
- Location/Village: _____
- Date: _____

Section 1: Communication & Cooperation

1. How often do you receive information from Village Hive service providers about the program?
 - Weekly
 - Monthly
 - Rarely
 - Never
2. How clear and understandable is the information provided by the program staff?
 - Very clear
 - Somewhat clear
 - Unclear
 - Very unclear
3. Have you ever experienced difficulties or misunderstandings when communicating with program staff?
 - Yes
 - No
 If yes, please explain briefly: _____
4. How would you rate the cooperation between your household and the program staff?
 - Excellent
 - Good
 - Fair
 - Poor

Section 2: Economic & Educational Factors

5. Has your household participated in any vocational training or skill-building activities through the program?

- Yes
- No

If yes, please specify the type of training: _____

6. Since participating in the program, has your household income:
 - Increased significantly
 - Increased somewhat
 - Stayed the same
 - Decreased
7. What economic challenges does your household currently face? (You may select more than one)
 - Lack of steady income
 - Debt
 - High expenses for education
 - Other (please specify): _____

Section 3: Service Delivery & Public Health Gaps

8. Have you or your household members been referred to health or other social services by the program?
 - Yes
 - No
9. If yes, were you able to access these services in a timely manner?
 - Yes
 - No

If no, please explain: _____
10. How would you rate the quality of health and social services accessed through the program?
 - Excellent
 - Good
 - Fair
 - Poor
11. What challenges have you faced in accessing health or social services?
 - Distance/travel issues
 - Cost
 - Service availability
 - Other (please specify): _____

Section 4: Family Empowerment & Self-reliance

12. Since joining the program, has your family started any new income-generating activities?
 - Yes
 - No
13. How confident do you feel about your family's ability to support itself without external aid?
 - Very confident
 - Somewhat confident
 - Not confident
14. Have you received any training or support in financial management, vocational skills, or family development?
 - Yes
 - No
15. What additional support would help your family become more self-reliant?

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