



In the afternoon of 6 July, 2021, Samdech Techo Hun Sen attended the leaders' Summit between the Communist Party of China and World Political Parties

## Japan's AstraZeneca to Cambodia

(23 July 2021 — Extensive Excerpts and Unofficial Translation)

In addition to the prepared speech, Samdech Techo delivered the following off-the-cuff comments that CNV unofficially excerpted and translated for English readers/users.

### August 1 – Vaccination Campaign for Phnom Penh Teenagers (12 to 17 Years Old)

I would like to take this opportunity to inform His Excellency, Lok Chumteav, as well as our compatriots across the country that the vaccination campaign (against COVID-19) for children and adolescents or teenagers aged between 12 to 17 years will start on the morning of August 1, 2021. I will preside over this vaccination at Calmette Hospital. After the ceremony, I will hold a press conference there. I will bring my grandchildren, along with His Excellency Lok Chumteav, who has children and grandchildren in their 12 years old and up (to 17 years of age), to participate in the vaccination. (We) started the campaign from Phnom Penh as a strategic point of blossoming. Our vaccination may start on August 1 in Phnom Penh, but when we

have enough vaccines, in some places, we will vaccinate both adults and teenagers together.

### If 13 M People Vaccinated (82.25% of the Population), Immunity Achieved

We figured out our plan on vaccination. As we vaccinated 65.53 percent of the targeted ten million population, (it means) we have injected vaccines to 62.5 percent of the 16 million population. If we inject the teenagers of 12 to 17 years of age, which we estimated to be somewhere about two million, we will have vaccinated in all 12 million – 10 million (18 years and older) plus 2 million (teenagers between 12 and 17 years) we will have sixty-five percent of the population vaccinated. We could have more population and allow injections for those under the age of 12, if we get to somewhere around 13 million people, we would inject 82.25% of the population (- a percentage that) can be considered (good to ensure) immunity.

### Parents to Get Their Teenage Children for Vaccination

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## Covid-19 Combating Strategies

(01 July 2021 — Extensive Excerpts and Unofficial Translation)

Today, the National Commission to Fight COVID-19 is having its meeting through the ZOOM system, which allows us to do so from remote locations. I would take this opportune moment to affirm that while in fact I am in my (COVID-19) quarantine period and will be getting my last test tomorrow, on the 3rd (July), I have already made an appointment to receive foreign guests. I should have waited until after the end of the quarantine, but, if we wait, it would be late. Today in our commission, Samdech Krala Hom Sar Kheng is absent as he had to go to Kampong Chhnang for transference of the governor [...]

### Those Think about My Death Better Think of Own Health

Today's meeting is to evaluate the situation that we have done so far, but also to set out a strategy or principle, (which) we will have to implement in the time to come. I should add that I do not expect that so far there have been bad rumors outside that I died since the 23rd (of June) at 4 pm, while I was in quarantine. Even though on the 29th (of June), publicly people saw me participating in this meeting with the political parties leaders in ASEAN and the United Russia Party, there are still rumors that the video of me taking part in the meeting was a fake one.

I do not want to respond (to those people), but let me just say that that you think about my death that much, you had better think about your own health instead. Should there be death, why would it be necessary to hide Hun Sen's body? If I truly died, up to now, there could have been the seven-day wake

ceremony already, the National Assembly as well as the King would have appointed a new Prime Minister and there would be a formation of a new government already. Let me assure them that the death of a country's leader must at least be made known to the nation (and) the funeral of a leader of my level, perhaps there would have been a large number of guards of honor in accompany of my body. More so, the new Prime Minister or the funeral commission would have ordered the flag to fly at half-mast. This is what they would do when a leader of anyone country die.

### Three COVID-19 Battlefields – Preventing Importation, Infections and Provide Cure

I do not continue the story of my death because I am alive. About COVID-19, I should go back a little bit to get His Excellency, Samdech, Lok Chumteav, looking back to when it all happened. I have declared that we must fight three battles – in which the first battle is to prevent the importation (of cases), the second battle is to prevent the spread of infection into the community, and the third battle is to cure the infected. We need to look at the three battles that we have fought together. We have been working hard for over a year. From January 1, 2020 until now, we have 18 months of hard works. During the 14 months of the period, we managed to control the situation, including the importation

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of a case called “November 3 event” during the visit of the Hungarian Foreign Minister, at which time I had to go into quarantine too.

In addition, the Westerdam (cruise ship) was not a small event. It can be considered a high-risk event for our country. It could be a huge importation of cases, but for the lives of thousands of people on board, we were willing to accept this hardship, and the generosity of Cambodia freed them from going stranded at sea without a real destination. Cambodia was safe from the infection by allowing the ship to dock in its port. Of course, we still have the imported cases later, where such first major event involved mainly the British, French, and American who came on a Vietnamese cruise ship to Cambodia. The ship went up to Kampong Cham province and the people found with infection of COVID-19 had had treatments in Kampong Cham.

Next (there was this) event of infection brought in by more than 30 French tourists, but we still were able to prevent it and treated them and let them return to the country after they all recovered. We had a community infection event on November 28<sup>th</sup> and we were able to end it on December 29<sup>th</sup>. The battle took us just one month. There were only 41 COVID-19 cases and no one died. This is considered the first wave in Cambodia. Unfortunately, recently, the highly contagious Alpha variant, (known as lineage B.1.1.7 of SARS-CoV-2, the virus that causes COVID-19), has spread to a community. We call it the February 20 Community Event. This is the second wave of infection in our country and caused many deaths.

As of yesterday, we had 53,085 cases of infection and 602 deaths. According to figures released today, we have nearly 1,000 more infected people, or 999 to be exact. We do not know yet how many died. Our data release has taken a pattern of announcing today the figures of the day before. The highest

number of cases is yesterday, which was yesterday’s figure of 1,130 and the death toll was 27 people. Considering the first wave caused by such COVID-19 variant in Cambodia, we already have problems to deal with. With this, we are seeing that the presence of a new virus variant called “Delta” originating from India has also entered our neighboring countries, as well as in our country. The new variant (of the severe acute respiratory syndrome coronavirus 2 – SARS-CoV2) and the “Delta Plus” could worry us about causing the third wave of infection should we not take timely action.

### **COVID-19 in Neighboring Countries; Protect People’s Lives and Public Health**

This is a big concern. Not just Cambodia, the whole world will have the same problem. Now the ASEAN countries are in the same dire situation, only with different size of population. Indonesia, for example, today finds more than 20,000 a day and hundreds of deaths. Some countries in our region have locked down, but the closures have not led to a reduction in the number of infections or deaths. Even around us, Laos, considered a well-governed country, the infection already entered the community, leading to measures to lock down Vientiane and other areas. Yesterday, Laos also had up to 20 cases. Vietnam [...] also had more than 800 infections a day at certain point, yesterday, there were 450 people, more than half of whom were born in Ho Chi Minh City [...] For Thailand ... yesterday, 4,886 people were infected and 53 died [...] so, in our world, no country is free from community infection [...]

This situation has encountered us a (challenging) situation and owing to and through the second wave of events on 20 February, we have put in place legislations and relevant sub-decrees to combat the spread of COVID-19. The ultimate goal is to strive to protect people’s lives and public health.

### **Lockdowns Prompted Swap**

### **of Cash Subsidies to Food Supplies**

We have also taken measures to combat the disease, including the lockdowns of Phnom Penh and Takhmao, as well as the closure of travel between provinces. That closure helped us overcome the massive spread due to the influx of people during the (Khmer) New Year. We truly understand the difficulty of closing down a city. It is not easy. At that time, we planned to pay the allowance to our citizen, but even if we gave them the money, they would not know where to go shopping because we did not allow them to leave the house. Finally, we decided to provide food for more than 400,000 families so that they could feed themselves when they could not leave their homes in the closed down areas. Now, we are giving them extra cash, and some of the families receive helping out with the water and electricity bills that have already set. We used thousands of intervention forces to distribute food to about 400,000 families. Distributing rice and food is not as easy as paying subsidies through Wing agents or other cash registers.

### **Supports for Poor Households and Workers Continue for Three More Months**

We now continue to support our poor people as well as workers who have lost their jobs for the next three months. We spend more than US\$ 40 million a month to provide about 700,000 families, including unemployed workers, who receive US\$ 40 a month from the state, plus US\$ 30 a month paid by employers. They earn US\$ 70 per month. Separately, for workers in hotel-related services, only US\$ 40 from the government. This is an effort and considered lucky that we have saved more than three billion dollars for use in this social intervention. So far, we have spent a lot, but we have not become bankrupt to a level that we cannot pay salary (of armed forces and civil servants) as unfortunate propaganda spread by a few people [...]

### **Over US\$ 130 Million Contributed for Vaccines**

In addition, we are trying to find vaccines for the people. I will discuss in detail regarding the strategy (about vaccines) below. However, I would like to inform you that through the royal sponsorship, as well as the Queen Mother and philanthropists, (generous funding for vaccines has reached) US\$ 122,236,575 [...] and lately, Oknha Kith Meng, Oknha Leang Khun, Chip Mong Company and Oknha Thong Sarath contributed US\$ 5,050,000 for the purchase of rapid test equipment. This is a great contribution of our people in the fight against COVID-19 [...]

In addition, there are donations of civil servants and the Armed Forces through reduction from their salaries, which we have received in all more than 50 billion Riel or roughly more than 12 million US dollars. In total, for what we have received from the King, the Queen down to monks, civil servants, all kinds of armed forces and our compatriots, we have secured more than 130 million US dollars. This is the national movement against COVID-19. It is our joined effort to solve the challenges facing in our country.

Now let us evaluate whether we can end the February 20 event. Before proceeding, I would like to say that when I make this comment, I allow broadcast live on all radio and television stations. After my speech, [...] we will close the live broadcast and discuss the issue further.

### **Strategies/Principles with Measures for Future Implementation**

The question is, when would the COVID-19 end? (No one knows when and if the) COVID-19 will be gone in a short time. Maybe it stays with us for as long as the flu that it always happens to people. We have to keep working with new measures. Today I would like to suggest a strategy or principle for implementation in the fu-

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ture. Samdech, Lok Chumteav (may) add more (of your thoughts) related to the issues I raised. Of course, with the new revision structure, we have sub-commissions and executive commissions who have all met and made plan. Today, I would like to draw your attention to the strategic framework or the principles with some measures and hope that His Excellency will complement what I have set out.

**The first strategy is to prevent the import of new COVID-19 convertibles.** Previously we had this issue with imported COVID-19 virus, followed by the COVID-19 Alpha variant, but now, considered the most dangerous in the world, the Delta variant originated in India. (Virus) from England is known to have fast transmission, but (virus) from India is considered to be faster. That is why we need to put in place a strategy to prevent the import of new variant through five measures. I set out the strategy and pointed out the measures for His Excellency and Lok Chumteav to take actions.

***The first measure – strengthen control of land and air borders.*** We must do this work carefully. (Along) the land border, we did this job when Thailand had one of its explosions (of infection) before. We deployed the quarantine centers in those areas. When Vietnam erupted in January, we intensified our engagement with Vietnam. In particular, with Laos, there are no major problems. According to today's report, there are no crossings (at the Cambodia-Laos border). However, the virus is endemic in Thailand and Vietnam. In Vietnam, these days it has spread to the border with Cambodia. There has been a breakout in Ho Chi Minh City. The situation in Ho Chi Minh City is not different from the situation in Cambodia. Thus, eradicating infections in the city is difficult. We look forward to learning from Vietnam's experience in controlling the Ho Chi Minh City outbreak. Vietnam plans to sample 50,000 people a day. If Vietnam

can control it, we can also learn from Vietnam's experiment.

What is a big concern for us is the Cambodian-Thai border. The main problem is not Thais coming to Cambodia. It is the Cambodian workers going to work in Thailand. The fear is when they return to Cambodia. Unemployed and decided to return to Cambodia. Previously, we had to quarantine them at the border, but later we just had the temperature measured and checked, and then we transported them to quarantine centers inside the country. Lately, we do not quarantine them further in the country. We have to place them in quarantines at all borders. A high point of concern with the Thai border. We needed to look into issues of quarantines seriously. I will talk more below.

On the border with Vietnam, Cambodians rarely cross to Vietnam. The problem is that the Vietnamese expatriates from Cambodia went back to Vietnam, and then very same Vietnamese expatriates came back to Cambodia. The person can bring disease to Vietnam and from. That is why during the talks between the Vietnamese Prime Minister and me in Jakarta (we) agreed to strengthen border control. The day before, we met on the phone and talked about how to manage this time. So in areas where Vietnamese expats live, tell them to suspend crossing to Vietnam. To be honest, Vietnamese expats in Cambodia should suspend their travels first because traveling to visit their families in Vietnam requires them to be in a 14 days quarantine and when they return to Cambodia, another 14 days required.

Cambodians without necessary reasons do not need to cross the border into Thailand or Vietnam. Let strengthen control. If not necessary, do not allow crossing. No one country is safe if not all countries are safe. We cannot be safe alone if Thailand, Laos and Vietnam are not safe. Vietnam cannot be safe if Cambodia is not safe. It cannot be said that Cambodia transmit-

ted the disease to Vietnam or Vietnam transmitted the disease to Cambodia or Thailand transmitted the disease to Cambodia or Cambodia transmitted the disease to Thailand or Laos transmitted the disease to Cambodia and Cambodia transmitted the disease to Laos. We cannot speak that language. Now is not the time to blame each other, it is time to cooperate to fight COVID-19.

It is easier to control of the air border, because those who travel by plane to land in Pochentong or in Sihanoukville or land in Siem Reap all have to take sample and go to quarantine areas. What we are worried about is the land border, and there is some attention on the water border, which, when it breaks out on the Vietnamese side, I ordered Kampot, Kep and Sihanoukville to pay attention to patrol in case there could be some crossings at the water border. Vietnam has now set up a patrol force for the same border crossings issues. We help each other preventing it. That is the first measure to strengthen the control of entry and exit along the border – land, water and air borders.

***The second measure is to conduct special or rapid tests at the borders.*** Today we talk about rapid tests a bit more. I take a responsible decision in front of the Cambodian people, without waiting for the health sector with a conservative mindset unchanged. I have to take responsibility on overall politics, both at home and abroad. We must provide a means of rapid testing. All border crossings must have rapid test tools/equipment. In addition to the rapid test, in case of suspicion, a (polymerase chain reaction – PCR test is to carry out. (We have such) facilities in Battambang, also in Siem Reap [...]

Therefore, the Ministry of Health must have a clear responsibility. It should not be the case that only 1,000 sets of rapid test tools is given to request of 2,000 or 3,000 of them. The day before, I called Madam Yok Sambath (of Ministry of Health) and told her, "I want

you to buy it and use it, not to keep it." I called to all the provinces, and they groan about getting less number of rapid test kits that they were asking for. You may know that it would not be easy to come all the way from Ratanakiri for only 1,000 test kits. While the Ministry (of Health) approved, the warehouse manager made it difficult still. Let us ordered at least 10,000 for each province. (I have) the statistics here. The rapid test equipment registered in the warehouse are 1,144,450 in stores, and the remaining one million sets will arrive in the next few days. Another 300,000 are in my strategic stock. There is nothing to talk about having not enough. I told Lok Chumteav Youk Sambath that doing this was no different from sending troops into battle with insufficient ammunition or weapons. I have to ask around. I have to follow up.

The province sent me (messages) to thank for providing them with rapid test kits. So please pay attention [...] this is not a time to blame, but a time to make thing right. What are the materials that we have in stock? Thing like the ventilators or any other devices. When I make a shout once, they release them once. I shout again, they act again. Let us find out now what that we need to meet the demand. There is no shortage of money. Hun Sen's government has not reached the level of collapse due to COVID-19 in almost two years. We can still survive. I had to adjust with whatever happened. Let us speak frankly and directly to each other. The day the rapid test (equipment) was released to the province, there were almost 800,000 left that day, as I ordered to buy almost one million sets using the budget contributed by Oknha Kith Meng, Oknha Leang Khun, Oknha Thong Sarath. So I confirmed there must be rapid test kits available at all border crossings around the country. Remember that once we are quick to find the infected, we are quick to manage the situation too. This is a strategy.

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Why did professionals or the Ministry of Health not understand this? You may remember that there was a time when I, the Prime Minister, gave order to the labs because they run sample tests coming from random places and not the essential batches. We had to wait until 2 am to get the results. What the Minister of Health, Excellencies, Lok Chumteav in the Ministry of Health make of that [...] that was a time when our hands and feet shook. It was different from any military battle. Samples that need urgent test gotten left behind, while samples that come separately from here and there gotten tested first [...] I have said from the beginning that this is not the time to blame, but I must also know that this is the time for me to make adjustments to the leadership. If the Prime Minister does not get what is going on, it would not be possible [...] from today onwards we must follow closely. This is the second measure the ministry must give them.

**The third step is to make sure about quarantines.** Strengthen and supply sufficient all quarantine centers, especially in provinces bordering with Thailand. The provinces bordering with Thailand have the most workers. The construction and repair sub-commission headed by General Kheng Samet must look into this issue. Rain starts coming this month. Protect our brothers and sisters. Although Cambodia is poor, Cambodia must not leave its people returning from Thailand unattended. We must ensure provision of utensils such as mosquito nets, blankets, mats, other essentials and three meals a day. After a rapid test, we must proceed to quarantine. If in doubt, perform PCR test. After that, wait for the army truck to transport them to inner provinces. HE Kheng Samet, from the Sub-Commission on Construction and Renovation, join the border provinces to see what else is lacking and what to do next. Release the national budget. Let us purchase, store and supply quarantine equipment as Lok Chumteav Youk Sambath did

in the past. We have about 14,500 sets of such goods left. Even if s/he has her/his own, we just give it to her/him. When s/he left, s/he took them home. We put new ones for newcomers. HE Kheng Samet must see where to do what, where to add water, electricity, toilets, everything to help the provinces along the border. Border provinces mentioned including Koh Kong, Pailin, Pursat, Battambang, Banteay Meanchey, Oddar Meanchey and Preah Vihear. But most are directed to Banteay Meanchey, Battambang and Oddar Meanchey through Osmach.

**The fourth measure in this first strategy is to provide a separate treatment for the people who are positive of COVID-19 Delta or Delta plus variants.** We must arrange them a separate treatment and the quarantine should be up to 21 days, not 14 days. Be prepared for a catastrophic event that could turn out to be a tragedy in the country, as this type of (new COVID-19 variant) is very aggressive. Hospitals must always be prepared.

**The fifth measures is to make sure (Cambodian) workers in Thailand do not have to worry.** We have already cooperated with the Thai side. On the Thai side, the Thai ambassador has worked with our Ministry of Foreign Affairs [...] those with legal jobs are not afraid. Those who go there to work illegally, both employers and workers, are scared. The Thai side has already confirmed that. Should they find them, the Thai authority would not punish them but register them to work legally. This is encouraging to us. Thank you for the attention of the Royal Government of Thailand and the Thai authorities also helped solve the problem. The Cambodian workers will have jobs. Thailand also has its own economic progress, with workers coming from Cambodia [...]

**The second strategy is to reduce the size of the infected area and reduce the number of infections using education, health, administrative and**

**legal measures.** Here I would like to talk about the strategy of narrowing the area where the disease is contagious to keep it small. As in Phnom Penh before, we have a big red area. We shorten it to make it smaller and smaller. We need to reduce the size of the area (where there is an infection). Find all possible ways to reduce the size of the (COVID-19 infected) area. For example, if it used to be 100 villages, reduce it to 50 villages or less. Today, the number of infected people has risen to more than 1,000, and nearly 1,000 are finding ways to reduce the risk [...]

(I will have listed here the) strategy to reduce the number of infected areas, the number of infected people and the spread of infection. May each sub-commission think about it and use combined measures together – educational, health, administrative and legal measures. We have done educational measures every day. Even songwriters, singers are recording songs, and artists who have been infected with COVID-19 shared what they went through. On health measures, we introduce alcohol and gels in various places, and practice three protective and three preventive measures. The administration is concerned with the issue of transitional fines. We have law. We have a place to put those causing troubles, even if they have COVID-19. They can still be put in place if the law violated [...]

It does not matter who would say what. As we are making a law to protect the lives of our people, they say that the law violates the rights to express themselves. In short, up to this stage, we would not care what they talk about us. I need for my people to live and to live in peace. You may have different idea for your country. It is my country. I would do it differently. I started with the right to life, the right to be free from disease through various measures. I do not care what you say.

**Strategy 3 – Strive to find a way to cure the infected, reduce the death toll to low and**

**to zero.** Regarding this strategy, Singapore can do. Singapore has more people infected than we do, but Singapore has fewer deaths. Yesterday, Singapore recorded sixteen infected people. Singapore has 62,579 infected people, but in the end, Singapore lost only 36 people. Well, we find a way to cure it through the five measures that I would like to (suggest), because in the past, to be honest, more than a year ago, the Ministry assists me about 5 percent and I helped the Ministry 95 percent. That was why I frequently came out sending verbal messages. From now on, because we have a commission, with HE Aun Pom Moniroth in charge, I hope that I will not be working as assistant anymore. It is true that I would need to give direction on necessary issues [...]

**Among the five measures for this strategy, the first is to find an effective source of medicine.** Efforts have been made and in the past on this endeavor and the Chinese drugs have been used even in the Arab Emirates and in the Middle East. I am taking it too. I have that Chinese medicine before I go out [...] to take extra protection. Let us buy more because thousands of our patients are still at the treatment center. We have to monitor the supply of medicines, because I have information [...] and I am asking the treatment sub-commission to check on treatment practices. I cannot tell if it was the truth or not (about information that) there was a difference in the amount of medication being prescribed from place to place. Let's check it out. For example, at one place, two tablets of Vitamin C prescribed, while in another treatment place only one pill prescribed. Can we look at it to ensure the standard treatment practice? This is a point to pay attention to because this is a task that we must all do and for the welfare of our people.

**Measure 2 – Establish additional hospitals in provinces/districts equipped with adequate equipment, especially**

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**ICU emergency facilities.** That is why I keep reminding and lately I see that effort on this front is getting weaker. So try to check. I have repeatedly stated that believing that we have a problem is better than believing that there is no problem. If we expand the hospital, there is nothing wrong with that. Equip them respirators or vital sign monitors. If you do not use them for COVID-19, they can also use them for other patients [...]

**Measure 3 – Train more doctors to join this job.** We have already allowed recruitment of doctors or physicians, but the condition that I give is that they must volunteer to work within the framework of the battle against COVID-19. If anyone refuses to work according to the condition, just remove him/her from the framework or dismiss from the hospital. When (the Ministry of Health) asked for more than 3,000 recruits, we put conditions together to do the COVID-19 works. Should they get into the government payroll and not participate in the job, the Ministry (must) make a request to the Ministry of Public Function and send it to me to remove them [...] we are looking for volunteers.

**Measure 4 – order the necessary materials as soon as possible.** The list is there. HE Aun Porn Moniroth must provide funds for the purchase of this equipment as soon as possible to equip all medical facilities. Soldiers in the regional army must also be equipped as part of the operation to fight the COVID-19. Provinces (each in size) are very large. We can share to any location. Be sure to check it thoroughly. Now it is not only Phnom Penh, it has spread to the provinces.

**Measure 5 – home treatment.** I reminded and now am reminding again. Thank you for preparing the code for home treatment that I have already approved. The more patients we are able to treat at home, the better. It is our country's practice to take the (COVID-19) patients from home to the hos-

pital. I am talking about our diplomats in three European countries, where a few of them infected with COVID-19 and have not been hospitalized. They are given medicines to stay at home for treatment. So, if we do that a lot, it reduces the difficulties of the hospital and reduces the difficulties of patients as well. We take the serious cases to the hospital, but the moderate ones, we treat them at home. Let us push for this practice to become a reality. Let us see how much Phnom Penh can do or the center do or other provinces do? Make home treatment come true and report to me every evening [...] rather than having it on paper, it is useless [...]

**Strategy 4 – searching and managing strategy.** This strategy include five measures.

**Measure 1 – identify and prepare the sampling area and take the sample for inspection.** We have already done this and we will continue to do this work thoroughly.

**Measure 2 – strengthen the laboratory capacity and strive for new strains of the virus.** Our laboratory has been set up in Phnom Penh, (and we need to) further enhance the laboratory capacity of the military hospital and adding a laboratory in the dialysis center. We have four labs besides Pasteur institute. We have four labs in Phnom Penh and labs in Siem Reap, Battambang, Sihanoukville, and Takeo. Let us continue to strengthen the laboratory and continue to work hard to help the Pasteur Institute to find what we found in the past of the new virus variants [...] all laboratories need to be strengthened and, if necessary, build more to reduce the long journey to Phnom Penh. For example, we can put one in Kampong Cham for areas from Kratie, Stung Treng, Mondul-kiri and Ratanakiri. Kampong Thom can travel to Siem Reap. Kampong Cham may have right conditions and its location can serve the need for Tbong Khmum, Kratie, Stung Treng, Ratanakiri, Mondul-kiri, otherwise it will be too late to arrive

in Phnom Penh.

**The third measure is to expand the rapid test.** This is where I made the decision on behalf of the Minister of Health, who has been reluctant and thinking only the doctors can do it. There are for instance 15 district doctors for the population of up to 100,000. Could they respond to the job? We need to consider here for private companies to carry out testing for their employees. Today I take the decision. The state has to do what we are doing, but we need to give private companies the opportunity so that private companies can take over the tests of their employees as soon as possible. Tomorrow I have to take a major test and I will receive guest the day after. More importantly, there is no barber for me now because my barber is COVID-19 infected already [...] I call on all private companies to manage this test demand of their workers.

When there is a self-test on the staff, interested order should contact HE Chea Van Det, who imported rapid test kits from South Korea. When I first ordered them, it was expensive [...] almost 10 Dollars. From South Korean, the equipment (costs) only US\$ 3.7, including shipping costs. If a company with 2,000 workers, you should buy them in advance for to be on the safe side. There is no need to call a doctor or invite a doctor (to run the test). (If you needed) the doctor (to do it, s/he) must contact the minister, the relevant warehouse, and eventually, if you are sick, you already spread it. In order to manage quickly, it is necessary to enable each company to carry out tests itself, and this test tutorial is not as long as two hours. In the past, the Ministry of Health taught my bodyguards for two hours. Now they carry out the tests themselves [...]

I ask the question, what does it cost us if people can tests by themselves? There is no loss at all, only profit. First, they volunteered to test themselves. They found the disease they ran to the doctor. If they do not find it,

there is nothing wrong with us. Why we cannot let them do it. Now we have to do it and the doctors should start teaching them to take rapid test. Companies, factories, enterprises with 100 or more workers, or some 30 to 40 people can also carry out the tests themselves. We have nothing to lose, only profit and make our people know how to protect themselves. If they are suspicious and do not want to go to the doctor for a test, stuff their own nose on this side for 6 rounds, on that other side for 6 rounds and then put it in for 15 minutes to get the result. Why we cannot just let them do [...]

I order the military and the police to have access to these rapid test kits. Please issue such orders immediately. Upon arrival, one part of the kits need to be given to the Royal Cambodian Armed Forces, for the army to be divided into regional armies, divisions, battalions, and their platoons stationing far away and to police commissions and posts. That is strategy to protect ourselves from the COVID-19. Once we discovered it quickly, we could manage it quickly, and would not transmit it to other people. We just said it so far but we did not practice. Now I point out the practicality [...]

The state now has 1.4 million stocks (of rapid test kits), including the total strategic stock. Another 1 million sets will arrive. We can distribute to the army, to the provinces, etc. Let say that would need 1 million sets. We can order more. If the company of 5,000 workers is willing to buy 5,000 or so sets for them, it does not cost much, it is fast to clear doubt through always-available immediate test, rather than letting infected person walking through and causing more infections [...] because now the Delta variant is fast. I issued an order without the approval of the Minister of Health, because there is nothing to lose and it is not difficult. After talking about it a lot, we are still holding close at chests. If the provinces by any chance lack the rapid test kits, they can

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contact the (online-media) big group immediately and say that their test kits is no more, the medicine is gone, and there is a lack of this/that.

**The fourth measure is to prepare for the proper quarantines.** Find out where to keep sick persons – at the treatment centers or at home. There have to be proper quarantine places/practices. No quarantined persons allowed to go out for a walk, to drink, or to eat outside.

**The fifth measure is to follow up using the information technology.** There is a QR-code information technology can detect where/when a person found to be with COVID-19 was at particular points in time. Our issue here is to prevent those with COVID-19 from traveling and spreading the disease to others, which would be punishable by law. This fourth strategy has five points that I have already mentioned, but in that, it is to confirm the test to become one of the strategies of searching for and managing the disease, and to order training, rapid testing in a timely manner.

Strategy 5 – at this point, we have sub-commissions to manage and dispose of the corpses of COVID-19. Some said that I insulted the lives of the people, but if I did not do that, in event of death, we would have questions about how to proceed. We took a step ahead, but not enough. **My fifth strategy, which I want to talk about, is to prepare a good cremation or burial in four ways.**

**Measure 1- prepare crematorium in places where there are none.** We have taken this measure in hands at provincial level, but the problem has now reached the district. So all the provinces have to look at their geographical locations. If they die at this hospital, die at this place, where do we take the corpses to – which crematorium and where, or which burial places and where.

**Measure 2 – consider using crematorium available in local pagodas.** Go work with the

pagoda's chief monks seeking permission to use available crematorium because people might not only die of COVID-19 in hospital but here and there. If we carry the corpses too far, it will be difficult. That is why we must think of the normal practice and it is the crematorium in the Buddhist pagodas. If there is no pagoda, find a suitable place to build ones. Secondly, use the pagoda's crematorium available, and discuss thoroughly with the wise men, the pagoda chief monks, the pagoda committee to ensure safety.

**Measure 3 – prepare land for burial according to ethnic traditions.** Wherever there is ethnic minorities, for whom cremation is not their practices, some state land must be used as a burial ground. Minority areas of Ratanakiri, Monduliri, Stung Treng, Preah Vihear, some areas of Kampong Thom must set aside land for that purpose. Kampong Speu gives 70 hectares to Phnom Penh. Of this 70 hectares, we give part of it to the Muslims because Islam requires burial. The land is not selected in one place, in each province, many places have to be selected, and each place can be five or ten hectares. I warn some not to seek dark benefits from using state land for burial, taking wood for coffins, etc.

**Measure 4 – prepare the coffin for the corpse using the captured wood.** I asked Khuong Sreng (the Mayor of Phnom Penh) yesterday (and learnt that) sometimes the coffin is sponsored by philanthropists or sometimes we bought. Death under the Pol Pot era was one thing and the death of the COVID-19 era was sad. In a way, it was like a homeless corpse. At the very least, we must have the right coffin for cremation or burial. Well, the sub-commission on construction and repair discuss with the management commission on how to do a proper job concerning the body. Please check and discuss with HE Sao Sokha about the wood that we caught earlier so that we can make coffins for them. We must ensure that no death goes to crem-

atorium or burial ground without a coffin. We must respect the bodies of our citizens who have passed away due to this disgusting disease.

The Ministry of Environment, the Ministry of Agriculture, His Excellency Sao Sokha, the Commission for the Suppression of Forest Crimes, looks at where the woods/logs are, and if needed to, prepare the legal process to accelerate the confiscation. It is not always necessary to have fancy carving coffin, however, we do not bury or cremate the corpses without ones. In the immediate time, the Ministry of Economy and Finance must provide funds to purchase coffins that are available on sale and stored in hospitals in Phnom Penh and in the provinces. Each province listens and collects coffins. Now buy about 80% of the coffins from sellers and keep them in their hands. Yesterday, 27 people died, and in two days, nearly 50 people died. Before coffin producing starts, we have to buy available coffins and send them to a hospital that treats COVID-19.

When someone dies, we must immediately organize the corpse according to the health regulation and prepare the coffin carefully. Her/his children are not able to visit her/him. We are the only ones responsible for treating her/him from the moment s/he dies. Arrange for her/him to take her/him to the coffin, and take her/him to her/his resting place. If possible, purchase urn for them so that the families can put their remains in. We must think to the detail. That said, it sounds like the Prime Minister attends to very detail talking about coffins. It was because Hun Sen's attention to the details that Hun Sen has been able to sit in power for 42 years, 36 years of which he has been the Prime Minister. We have to think in advance and prepare. Some countries could not even find firewood to burn the dead or places corpses on top of each other in burial holes.

**Sixthly, the last but most important strategy, is to vac-**

**inate 10 million people as a first step and continue to think of vaccinations for children under 18 years of age.** I would like to confirm that so far we have received more than 11 million doses. As of last night, Lok Chumteav Or Vandin reported that we have already injected 4.2 million people, an equivalence to 42 percent of the 10 million people we plan to inoculate. The vaccine plan, including those provided as aid, is 29.7 million doses. However, I would like to propose to exclude from my consideration the portion of Covax's 7 million doses and from Australia 3 million doses – equal in total to 10 million doses, and turn to China as a strategic reference for the supply of vaccines. We keep others as supporting sources. My decision was right. People can say whatever they want. In fact, we will receive 20 million doses of the vaccine from China. According to HE Vongsey Visoth (of Economy and Finance), one million doses of Sinopharm will arrive on July 6, and another one million doses, on July 10. Three million doses of Sinovac will arrive on July 10 too. On this account, within the month of July, we will receive five million doses, and, in August, we will get four million doses, and that will make it the total 20 million doses needed.

If I do not embrace this strategy and still go back and forth, (we would now have injected not even 200,000 people, not to mention 4 million as I mentioned on Facebook page posting. Once I found Mr. So Soy in Koh Kong injected as the fourth million person to get the vaccine, immediately I made it clear that should there be no Chinese friend (to help and provide), (we could) not mention about injecting 4 million people, we could not even find the 200,000 doses. Covax, which promised us 7 million doses, came in only 324,000 doses. If so, we only have 160,000 vaccinated people. Many promised us billion doses, but there is no vaccine in real.

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## Covid-19 Vaccination for 2M Teenagers

(01 July 2021 — Extensive Excerpts and Unofficial Translation)

### Vaccination Planned for another 2 M Adolescents (12-17 Years Old)

*Dear compatriots, especially grandchildren and great-grandchildren,*

I mentioned a few days ago regarding vaccinations for people under 18 years of age. I discussed with His Excellency Aun Pommoniroth, Deputy Prime Minister and Permanent Deputy Chairman of the National Commission for Combating Covid-19, His Excellency Vongsey Visoth, Chairman of the Commission for Vaccine Procurement, and Lok Chumteav Or Vandin, Chairman of the Commission For Vaccination. We need to vaccinate children and adolescents between the ages of 12 and 17 after the vaccination process for people aged 18 and over (completes), whom, as of this moment, we have vaccinated 5.4 million of them (over the target ten millions already). (We have to take one further step forward on this matter) with serious consideration for the social surrounding and immunity, and consideration for the future of children and youth. Especially, we are focusing on their welfare. (We aim to) reopen schools, since (the closing of) which marked a huge loss for the world as well as for Cambodia, for human resource training after schools have been closed for a long time.

### We Could Have about 22 M Doses of Vaccine in Real

It is true that we have a need for vaccinations for children and young people from 12 to 17 years old, whereby, according to the statistics (provided by) HE Aun Pommoniroth, there are about 1.9 million people, which I would round it up to around 2 million people. We need four million or more doses of the vaccine for our children and adolescents. In such a situation, I have ordered for search of vaccine, which so far we can be sure to have about 22 million doses. (To include also figures

promised) in aids, we have about 31 million doses. However, we cannot be sure of promises that have not yet materialized.

### Two Options for Vaccinating Children and Adolescents

I have instructed His Excellency Vongsey Visot, Lok Chumteav Or Vandin, to (keep) searching for vaccines so that we can ensure timely inoculation for our people, who are in the process now. The point injection is ongoing on more than 4 million people to reach the target figure of 10 million. There is another option, though. We can launch vaccinations for our children and youth at the same time, by starting in Phnom Penh and Kandal province, as we have done in the past. This is an easy point for us in the vaccination process.

We can have two options. The first option is to finish vaccinating the 10 million adults over the age of 18 and then start the injection for children and adolescents. The first option is to finish one thing and then move on to another. The second option, however, is that while the immunization continues in the provinces for more than 4 million people, we can also start the immunization process (for children and adolescents) starting from Phnom Penh and Kandal province. We take the same measures as we did to deal with the situation as before, including Phnom Penh, Kandal, and then Sihanoukville. We should proceed in such a way that we did in the past [...]

### Achieve Social Immunity to Reactivate Socio-economic Activities

We want to achieve immunization in society in order to proceed to reactivate socio-economic activities, especially the schools that we have closed and are now on online learning mode. This is a loss for us. If we had vaccinated children and

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It would not be a matter that some say their minds. Now, some commentators even say that Hun Sen's best legacy is perhaps the vaccine. You are right. In a meeting on the Future of Asia, they asked me why I got too close to China. I said, if I am not allowed to rely on China, whom should I rely on? This is true. I do not know what to say, this person promises, that person promises, but in the end, it does not come true. Only the Chinese came. Some have gone this far, I do not want to reveal the name, to tell us to deposit money in advance for vaccines. However, s/he would not assure us as to when the vaccine arrive at all. Who in their right minds would agree to deposit millions of dollars, while there is no confirmation of the date of arrival of the vaccine?

Now in Singapore, Singaporeans can choose whatever vaccines they wish and many opt for the Chinese vaccine. In ASEAN, previously Singapore did not use the Chinese vaccine. Now I hear Singaporeans choose the Chinese vaccine. In Southeast Asia, almost all countries use the Chinese vaccines. Some people said to me to mobilize people to get vaccinated. I said there is no need for such motivation. Those who do not come to inject, leave them be, do not let them say that we are forcing them. In the end, you will see that in the room of 10 people, 9 people have had their jabs would not socialize with the none-jab one. The president of the Philippines said that those who do not get vaccination go to jail. I did not send them to jail. Let them be. We are not going to wait for them. Vaccination is now undergoing in Kampong Speu, in Kampong Som, and in Koh Kong. The injection in Kampong Cham started and the injection opportunity in Phnom Penh will be over soon. Those who came late and ask for injection would have to apply for it. Not like today. At that time, reasons for having missed the injection period would appear to be in quarantine. If you are there but

do not inject at the instigation of others, then wait until 2023. I am telling it straight [...]

I would like to reiterate that the first measure in the vaccination strategy is to find a vaccine that will inoculate 10 million people and to think about vaccinating children under the age of 18. Secondly, China must continue to be our strategic reference for the supply of vaccines, while other sources are a source of support. Foreign friends can understand the heart of Cambodia. At least, based on that, do not say Cambodia depends on China. If you do not give me, whom do I turn to? Who else I can depend if not on China? I need to protect my people too. Look at countries that depend on countries other than China, have they now already vaccinated. Thirdly, with the arrival of the vaccine, we distributed to the priority areas in order to speed up injection as soon as possible. (Since the complete batch of vaccine arrives) in August, I think by November our effort will be completed. Lok Chumteav Or Vandin tried to finish the injection in 11 months, because once we receive the batch of five million doses, we will dispatch them to the provinces.

Provincial Hospital will take the responsibility for the injection. Where there is demand, we will gather military doctors and volunteer doctors to help to complete it by November. We will proceed to think about children whom we start thinking of those from 15 years of age to 18, and figure out how many vaccines needed, and for another options, from the age of 13 to 17 years, because 18 years old we already inoculated [...] Sinopharm and Sinovac vaccines are valid for two years. AstraZeneca only 6 months [...] I would like to take this opportunity to thank the people who participated in all the works, especially the sub-national authorities who, this time, have undersigned our successes. The spirit is genuine and there is support from the national supply side, but the sub-national level does a lot of work. Now, this is what I have set out to do with our life ./.👍

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I urge parents/guardians to get their children for vaccination to prevent this pandemic. It is common for infants and children to receive a series of vaccinations to prevent many of the diseases. They have had their vaccination at birth. So do not worry. I would like to confirm that one of my grandchildren who is turning 17 years old, has already had vaccinated because he has to go abroad to study next month. Therefore, there is no risk as far as vaccination is concerned.

### **Once Again, Thanks to the Government and People of Japan**

Just before arriving here, I met with His Excellency Mikami Masahiro, Ambassador of Japan, and discussed further cooperation in the fight against COVID-19 and other cooperation. I would like to take this opportunity, once again, to thank the Government and people of Japan for providing the facilities, including the means for transporting patients, which has made it easier for Cambodia to transport patients to hospital. Through His Excellency, I would like to thank the Government and people of Japan on behalf of the Royal Government and the people of Cambodia. I hope that the remaining vaccines will be (delivered) to Cambodia so that we can use them in the campaign, which I hope that at the end of October we will be able to complete (vaccination of) 10 million people, and together, we can add 2 million or more of teenagers in our country.

### **The Royal Government to Vaccinate Target Aged Group That Doctor Allows**

As for Phnom Penh, we must be ready to start the (teenagers' vaccination campaign) from August 1. According to statistics, the current population of teenagers (aged between 12 and 17) in Phnom Penh is just over 190,000. Since those who come to work in Phnom Penh also have children (and bring them along), the statistic has recorded up to 280,000 of them. The

Vaccination Ad-hoc Commission will provide (vaccines for) 230,000 people [...] I would like to confirm that whether it will be 230,000 or 280,000, or even 500,000, we have to make sure they get the vaccines. (That the number of vaccine recipients) in Phnom Penh (increases is) because parents come to work and bring their children along, and there are teenagers who come to school too. It will also be relieving number of vaccine recipients in the province. On this note, we need to launch another campaign of this vaccination. At whatever cost it may take, the Royal Government of Cambodia must achieve immunization for targeted aged Cambodians whom the doctors allow.

### **Even with Vaccination, Continue to Implement Health Measures**

The world, as in Cambodia, is placing hope on vaccines. We have also seen signs of a decline (of infection), especially in the factory areas of Phnom Penh, where there is a decrease in infections. In the case of an infection, the condition does not lead to serious illness or death. Cases of two doses of vaccination and still infected and still dying happen. It is not something that happened just in Cambodia. Even in the United States, the UK and Europe, where they claimed to have mighty vaccines, it also happened. Therefore, whether vaccinated or not yet, we need to hold on tight to the three "don'ts" and three "dos" measures.

### **Inoculation of 80% of the Population – Intended Target**

... After the parents have vaccinated, (they know clearly that) there is no problem in getting their children at 12 years of age and older vaccinated. If only father and mother had vaccinated and three of their children had not, there would be no immunity in their house. On this remark, my goal is to vaccinate more than 80% (of the population). Let us think of this number. If 12 million people injected, we would have 75% rate of

vaccination. If 13 million people injected, we would have 81.25% (of the population). We then will reach our goal of achieving immunity in a society. There will be only small children left. Those little ones, however, already vaccinated against six diseases. This is a challenge that we must address. At any cost, we must make efforts to find vaccines for the Cambodian people.

### **Well-being and Life of the People Guaranteed – The Important Legacy**

Some have commented that perhaps Hun Sen's biggest legacy is vaccines. I would like to reiterate that Hun Sen's legacy is not just about vaccines. Hun Sen's legacy (has been to) save the people from the death of the (genocidal regime) on January 7, 1979. Hun Sen's legacy also has been to bring the Cambodian people out of the war (and) to bring peace and development to the country to this day. Hun Sen's legacy is much more. I just wanted to remind you whether it was an inheritance or not, what is important to me is to ensure the well-being (and) the lives of the people. Primarily, it is not the right of expression or democracy but it is to grant the right to life. (I do not care) who would say what. (They may) criticize Cambodian law should they wish to, but the Cambodian law is made to protect human life. They may say whatever they wanted to. All I have been doing is protecting people's lives.

### **Coffin Prepared for Covid-19 Corpses – Not an Insult but a Homage**

No matter how hard we try to protect, we cannot stop people from dying. Like the arrangement of the coffin, which some people considered it an insult, I consider it my homage to all the corpses killed by COVID-19. I do not want to see any Cambodian who, at the time of COVID-19's death, be wrapped in a mat and buried or cremated without a coffin. I want to emphasize that I have not insulted the lives of the people. In our Cambodian society, many old

people who make their own coffins so that when they die they have ones. Therefore, I am not guilty of (having) set up a burial place, a crematorium, and coffins for COVID-19 corpses.

[...] I did not have the opportunity to hold a press conference today. I will hold a press conference on August 1, 2021 next week. Once the vaccination campaign for teenagers launched, I would allow the press sometimes for questions. In the meantime, I cannot help but explain to the Cambodian people about my actions relating to the burial places, crematorium, and coffin making and arrangement.

Some have argued that in the end, one's destiny is a coffin. Well, (in fact) they should thank me for having prepared coffins for burial since they could be available for corpses of their relatives too. Do you want your relative to die and buried or burned wrapping in a mat [...]./■

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young people, at least we could have opened a secondary school where children and young people 12 and older could go to study. They could maintain social distance, the distance in the classroom, unlike those in the elementary school who would not yet know how to wear a mask and to protect themselves by keeping distance [...].

### **Search for Vaccines, Vaccinated – To Protect Oneself, Families and Communities**

No country has completely eradicated Covid-19. The difference now is maybe some have fewer or more infections, fewer and more deaths. I hope that we Cambodians can do what we have already done successfully. We will continue to work successfully to protect the health of our people by seeking vaccinations, by vaccinating efforts, by engaging our people to get vaccination for defense of each individual, for protecting families and communities [...]./■