



Baseline Findings from Study on Physical Rehabilitation Centres (PRC) Services

Acknowledgments

This report is the summary version of the full SAQUS study report (SAQUS - Service Access Quality Uptake Study) and has been made possible through joint collaboration and inputs from several individuals and institutions. ACCESS MEL team managed both the implementation of the SAQUS study and its summary. The team would like to thank Angkor Research and Consulting Ltd. for implementing the study, including the design, data collection and report writing.

We are also grateful to the ACCESS team and Clear Horizon advisers for their insights and support.



Introduction

Baseline Study on Service Access, Quality and Uptake (SAQUS) is a longitudinal study that seeks to assess the quality of PRC services available to persons with disabilities by collecting information directly from service providers and recent clients. This document summarizes the key findings and recommendations from a baseline (pre-intervention) study, with the purpose of highlighting strengths and weaknesses in service provision to help identify, design, and prioritize interventions to improve the system for service provision and the overall experience for persons with disabilities.



Methodology

The survey was conducted in July 2020 and collected baseline data from six PRC service providers and 243 clients who had recently visited these PRCs¹ to gain perspectives from both the supply and demand sides. Survey questions were designed to assess physical rehabilitation services against existing service standards using the 5 A's Framework, which includes measures of Availability, Affordability, Accessibility, Accommodation, and Acceptability.

¹ The small sample size, particularly in each province limits the level of analysis possible, and the representativeness of the sample should be considered with caution. Instead, the findings should serve as an indication of potential trends that require further research to confirm.

5 A's Framework

<p>Availability of services seems relatively strong, but there are areas of potential improvement, especially for victims of GBV</p>	<ul style="list-style-type: none"> ➤ PRC services widely available include those related to assistive devices, gait training, physical assessment, and physical therapy. However, more than half (60%) reported inconsistent availability of necessary assistive devices (e.g. wheelchairs, crutches, etc). ➤ While more than three-quarters (76.6%) of service providers seem to know where to refer clients for other disability related services, only a minority of clients (11.1%) mentioned that they received referral information from their main provider. ➤ Less than half of PRC service providers (46.7%) reported knowing where to refer women with disabilities who experience gender-based violence (GBV).
<p>Affordability of services seems high; cost is not barrier for most clients but transparency of service fees could be improved</p>	<ul style="list-style-type: none"> ➤ Almost all the services (88.4%) provided by PRCs are free-of-cost according to providers, however, only about half of the client respondents (47.7%) reported that accessing necessary services was affordable for them. This may suggest other hidden costs associated with the services and issues in transparency of service fees. ➤ The average price of services requiring payment was 61,421.90 riel, though the average prices of services for women with disabilities was significantly higher (152,200 riel).² ➤ Service price lists are not available across all PRCs. ➤ Aside from service costs, most PRC clients (96.3%) reported paying transportation related costs to arrive at the clinic.
<p>Accessibility of services is a concern across service providers, particularly for women. Accessibility of services could be improved by increasing awareness of sign language.</p>	<ul style="list-style-type: none"> ➤ Service providers expressed concern about the difficulties, that persons with disabilities face when trying to access services. Examples of difficulties included distance from home, transportation costs, and lack of appropriate chaperone.³ ➤ Women may have additional challenges related to safety and lack of child care options, which result in lower numbers of women clients at PRCs. ➤ All PRCs reported good accessibility for persons with physical disabilities. For example, all PRC offices include a ramp to facilitate access into the building for persons with disabilities. ➤ Almost all the PRCs could access a translator in case a patient did not speak Khmer, but PRCs severely lacked staff trained in sign language.
<p>Attention should be given to ensure privacy of the accommodations used to provide services.</p>	<ul style="list-style-type: none"> ➤ PRC services seem to be commonly provided in shared spaces, which may violate the privacy of the client. A majority (70%) of beneficiaries with disabilities reported receiving service in a room shared with others. ➤ 70% of service providers and 71.2% of persons with disabilities reported that the PRC they visited was clean.
<p>Acceptability of the services seems relatively high, with some concern about clients' ability to understand the service provider.</p>	<ul style="list-style-type: none"> ➤ The overwhelming majority of beneficiary respondents (approximately 91%) reported being satisfied with the information they received about PRCs services and the attitudes of the PRC staff. ➤ About one-fifth (16.7%) of beneficiary respondents feel that "Service providers should talk louder or shout to make sure persons with sensory disabilities understand them." ➤ 70% of service providers feel that "service providers should make the decisions regarding the services the person with disability should access", contrary to the service standard. However, most respondents with disabilities (89.7%) did not feel that service providers pushed them to do something they did not want to do.

2 Important to note that the SAQUS sample only included persons with disabilities who did receive services, which may skew the findings towards those who could afford the services.

3 The majority of PRC clients felt that reaching services was easy, though this result may be skewed by the sample, which did not include persons with disabilities who could not access the PRCs.



Recommendations

For Policy (Persons with Disability Foundation)

- Bring the issue of food and transport allowances to the attention of decision makers and identify measures to monitor the distribution of allowances to people with disabilities and create a more consistent and standard framework;
- Engage in additional research to understand why referral information is not being given to clients. Reasons may be related to lack of time, judgements about whether additional information is necessary, or lack of a designated social worker.
- Continue to work with PRCs and services providers on the importance of client centred care and ensure they are adequately trained in the service standards.
- Engage in additional research to gain a deeper understanding of the availability and use of private spaces for service provision. For example, physical therapy may not be delivered in private rooms due to lack of space, and in some cases women may prefer not to be seen in a private room with a male provider out of concern for safety or cultural appropriateness.

For Service Providers

- PRC service providers should be required to share information about other disability related services such as employment services with PRC clients and GBV services where appropriate (and receive training and / or other support as needed);
- PRCs should consider approaches to reducing service waiting times and more actively monitor any changes in waiting times;
- PRCs should have an arrangement in place so that people who can speak sign language or an ethnic language can be called upon to support people with hearing impairments or people speaking an ethnic language to access services;
- PRCs should investigate why so few women with disabilities are accessing services and pilot some projects to increase their access to services. This could include developing stronger referral pathways with health facilities;

Disclaimer

All opinions expressed in this report are that of Angkor Research and Consulting Ltd and do not necessarily reflect the views of Cowater International or AusAID.

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