Story of Significant Change:
Improving Coordination and Efficiency of the Disability Sector, Supporting Implementation of the National Disability Strategic Plan

“ACCESS’ approach is very unique, which enables a single streamline for disability sector in Cambodia that helps to avoid overlapped planning and intervention, reduce redundant activities, increase and optimize the resources.” Senior Program Manager, ACCESS implementing Partner.
Coordination in the Disability Sector before ACCESS Started

“Prior to the commencement of ACCESS, development partners worked very individually to address the needs of people with disabilities...” Program Manager, ACCESS implementing Partner.

Prior to 2018, there was no significant coordination mechanism for the disability sector as the Disability Action Council (DAC) had limited financial and human resources. The DAC had previously led some coordination under the guidance of the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY). This included consultation on the development of the National Disability Strategic Plan II (NDSP II), the review of NDSP I implementation and to develop or review disability policies or guidelines (e.g. regarding the quota system). UNDP had previously supported the DAC and provincial DACs to coordinate and implement NDSP I as part of the Disability Rights Initiative Cambodia 2014-2018 (DRIC) funded by Department of Foreign Affairs and Trade (DFAT). Most disability sector partners, however, worked individually to plan their own activities rather than as part of a coordinated process.
The coordination organized by ACCESS was a unique approach to bring attention from all relevant stakeholders to disability component. This practice was also considered as a social accountability practice which ensured that everyone was aware of each other’s activities and focuses.” Director of Representative Self-help group of Disability of Batheay, Kampong Cham.

Stakeholders interviewed cited a number of changes from the ACCESS led joint planning and coordination process. These included:

- Clear roles and responsibilities for each of the implementing partners were agreed e.g. UNDP to lead on coordination, HI on support to Physical Rehabilitation Centres (PRCs) and Cambodia Disable People Organization (CDPO) on building linkages to improve employment of people with disabilities.

- A more holistic approach to service delivery which responded to the Royal Government of Cambodia (RGC) priorities. By coordinating activities and project locations, gaps were identified and filled and overlapping activities deleted, optimising resources. For example, CDPO, Agile Development and Chamroeun Microfinance Plc. (CMP) now work closely together to support the Department of Welfare for Persons with Disabilities (DWPD) on employment, skills training and finance in several provinces through enhanced referral pathways for people with disabilities. The coordination has also enhanced coverage of disability employment services across ten provinces, allowing the interventions to reach more people.

- RGC stakeholders noted that it had strengthened their relationships with disability organisations and had allowed new RGC agencies such as the Ministry of Economy and Finance (MEF) to engage with the disability sector for the first time.

- ACCESS’ requirement of co-funding has contributed to increased resources in the sector. All of the partners made financial contributions to the program on average 19% of ACCESS funding for disability workstream. This includes funding by RGC partners for travel to support ACCESS activities.

- Disability organisations interviewed noted that the process increased attention to the importance of ensuring economic opportunities for people with disability, involving private sector organisations for the first time.
How ACCESS Supported these Changes Through Leading the Joint Planning Process

“ACCESS brought significant changes toward disability sector in Cambodia. I found that governments are taking the lead and it is also interesting to have the involvement of the MEF. I also viewed that ACCESS program design brought in the cost-effectiveness to whole sector”. Quote from Senior Program Manager, ACCESS implementing Partner

“In 2018, the Disability Coordination has progressed slowly, but since the third quarter of 2019, I found that Disability Coordination is improved significantly and many facilitation mechanisms are created to improve the response for disability sector within province” claimed by Deputy Director, Kampong Cham Provincial Department of Social Affairs, Veterans, and Youth Rehabilitation.

The ACCESS team assisted MoSVY and DAC to develop a single sector workplan with national and provincial stakeholders, to support NDSP II implementation. The process involved:

- A workshop in May 2019 to discuss and agree key priorities
- Submission of workplans by IPs for review by ACCESS and MoSVY to ensure alignment and identify linkages
- Consolidation by ACCESS of activities into a single joint workplan
- Validation and refinement of the work plan by all disability partners, as well as partners from the GBV workstream
- Finalisation and presentation of the final joint work plan following further consultation
- Dissemination workshops in three priority provinces in November and December 2019 and further refinement of work plans based on feedback.

Throughout this process, ACCESS prepared background documents for MoSVY officials, provided all the logistical support for arranging the workshops and consulted and solicited inputs from the counterpart officials in setting the agenda and topics. ACCESS also provided technical advice to MoSVY in relation to service provision, training and coordination and facilitated their leadership of the process, including engagement between the GBV and disability stakeholders, both different RGC Ministries and the different implementing partners.
Assessment of how ACCESS Contributed to the Change

While there was significant political will among sector stakeholders to improve collaboration, without ACCESS, there might not have been sufficient resources, influence or technical capacity to implement joint coordination and planning in an effective and meaningful way. Several interviewees noted that, when ACCESS started, the need for better coordination was already agreed by RGC and disability actors. However, no single agency had both the resources and influence to make it happen. Interviewees were all of the view that without ACCESS’ financial and technical support, coordination would likely have been delayed or lacking meaningful engagement from all actors. They noted that ACCESS’ active involvement also helped bring other ministries to the table, such as high-level officials from MoWA, DAC, MoSVY and MEF.

Lessons Learnt and Future Focus of ACCESS

Despite these benefits of the joint planning process, IP respondents to the ACCESS Partnership Survey noted that there was a need to further define roles and responsibilities and that improvements in communication are needed. ACCESS is seeking to address this by more regular meetings and clearer documentation of roles and responsibilities. All ACCESS stakeholders, including RGC have noted that more could be done to increase cross-workstream collaboration.

Significance of the change

The change is considered to be significant, with evidence suggesting that the stakeholders and government counterparts derived clear benefits from the joint planning process. Stakeholders and counterparts appeared committed to the process, with some initial signs that RGC counterparts demonstrated greater ownership and financially contributed to the process.

Level of ACCESS contribution

The level of ACCESS contribution to the change is assessed as highly significant. Those interviewed believe that without ACCESS, the reported change would not have happened. Despite the high level of will to change, RGC had insufficient technical capacity and resources to make the change.
1.1 The Strength of the Data Informing the Story of Significant Change

The overall strength of the evidence in support of the survey is judged to be moderate. It reflects that the evidence includes information collected from interviews and public forums and discussions involving ACCESS staff and so could potentially contain bias. However, this has been cross-referenced with information from the Partnership Survey led by an independent consulting company, Real Time Evaluation, which provides more frank assessment of the working relationships across the stakeholders. That said, the Partnership Survey has some limitations due to the sample size not being fully\(^1\) representative of the whole sector.

1.2 Data Sources

1. ACCESS Meeting Note: First Meeting of Disability Workstream, Disability workstream meeting on 1. January 23, 2020 at Phnom Penh Hotel (Carnation Room)


4. Interview Notes, SSC interview by ACCESS staff, Disability Workstream Meeting, 23 Jan 2020

5. Interview Notes, SSC interview by ACCESS staff at Meeting with POSVY and Representative Self-help group of Disability of Batheay in Kampong Cham on 06 February 2020

\(^1\) This judgement is based on a three-point scale of low, moderate or high evidence strength. Moderate confidence is indicated in non-peer reviewed publications, a limited scope of respondents including potentially some associated with the project, and or difficulty to triangulate the evidence broadly, It substantiates clear and trustworthy conclusions, Further research may change the overall rating.