







DISABILITY RIGHTS INITIATIVE CAMBODIA ANNUAL PROGRAMME NARRATIVE PROGRESS REPORT REPORTING PERIOD: 1 JANUARY – 31 DECEMBER 2016

| Programme Title | & Project Number | Country, Locality(s), Priority Area(s) / Strategic Results |
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| | ty Rights Initiative Cambodia | Priority area/ strategic results Programme Objective: Improve quality of life for people with disability in Cambodia. Programme outcome: People with disability have increased opportunities for participation in social, economic, cultural and political life through effective implementation of the National Disability Strategic Plan (NDSP). Outcome 1: MoSVY/DAC effectively coordinates implementation of the National Disability Strategic Plan, aligned to the CRPD. Outcome 2: Disabled People's Organizations effectively represent the needs and priorities and advocate for the rights of people with disability. Outcome 3: Improved Rehabilitation services for people with disabilities. Outcome 4: Increased capacity of and collaboration between subnational decision makers, civil society and communities to achieve the rights of people with disabilities. |
| Participating (| Organization(s) | Implementing Partners |
| UNDP, UNICEF and | WHO | MoSVY, MoI, MoH, DAC, PWDF, NCDD/DoLA, DPOs and CDPO |
| Programme/Pro | oject Cost (US\$) | Programme Duration |
| Total approved budget as per p US\$12,727,86 | roject document: | Overall Duration: 5 Years |
| | 11g/p0 050 050 | Start Date: December 2013 |
| Funded budget (DFAT): Unfunded budget: | US\$8,279,376 US\$4,448,493 | Original End Date: 31-Dec-2018 |
| TOTAL: | US\$12,727,869 | Current End Date: 31-Dec-2017 |
| Programme Assessment | /Review/Mid-Term Eval. | Report Submitted By |
| Assessment/Review - if applica □ Yes □ ✓ No Date: dd.n Mid-Term Evaluation Report - □ ✓ Yes □ No Date: 27 | am.yyyy if applicable please attach | Name: Kristina Seris Title: Joint Programme Coordinator Participating Organization (Lead): UNDP Email address: kristina.seris@undp.org |

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Executive summary

This Consolidated Annual Narrative Report on activities implemented under the Joint UN Programme "Disability Rights Initiative Cambodia (DRIC)" covers the period from 1 January to 31 December 2016. The report is in fulfillment of the reporting requirements set out in the Standard Administrative Arrangement (SAA) concluded between the Administrative Agent (UNDP MPTF Office) and the Donor. In line with the Memorandum of Understanding (MOU), the report is consolidated based on information and data submitted by Participating UN Organizations (PUNO). The report provides a comprehensive overview of achievements and challenges associated with the Joint Programme, which are expected to enable strategic decisions making and correction measures where required.

Active implementation of all the four components during the year 2016 and synergetic work of the three implementing agencies succeeded in keeping the rights of the persons with disabilities high on the agenda in the development processes in Cambodia. The commitment of the Royal Government of Cambodia (RGC) to promote the rights of persons with disabilities was demonstrated by the decision to increase the allocation for the Disability Action Council (DAC) mechanism in the 2017 national budget by 700 per cent (compared to 2016). This will significantly contribute to sustainability and ownership of the programme results.

The disability movement in Cambodia remains vibrant with Cambodian Disabled People's Organization (CDPO) and its members Disabled People's Organization (DPOs) increasing their capacities to effectively act as the channel to raise the voices of persons with disabilities. Representatives of CDPO are active in technical working groups and committees constituted for the purpose of drafting legislations and policies.

The secondary analysis of the 2014 Cambodia Demographic Health Survey (CDHS) on healthcare utilization of persons with disabilities was finalized. The report generated important evidence on inequalities in the utilization of health care for persons with disabilities and will serve as an advocacy tool to further strengthen health care provision.

The majority of persons with disabilities live in rural parts of Cambodia and DRIC has been striving to promote inclusive community development for these citizens with disabilities. The programme continued its efforts to raise awareness and promote understanding on disability issues at local level, promote inclusion of persons with disabilities in the decision-making process on subnational level and encourage disability inclusion in annual subnational sectoral plans, 5-year development plans and 3-year investment programmes.

The programme continued with the implementation of the recommendations of the Functional Analysis report. Around 80 per cent of the recommendations have been implemented throughout the work of DAC including the revision of roles and responsibilities of the key government disability mechanisms, strengthening organizational management and leadership, capacity development for government ministries to fulfill their mandates as well as the allocation of national budget for disability inclusion. The remaining recommendations will be implemented in 2017. The Initial State Report on UNCRPD was drafted in broad consultation with stakeholders including government ministries, DPOs, NGOs and the private sector to provide input and comments on this report. The Royal Government intends to submit the report by mid-2017.

It is pertinent to notice that after 30 months of active implementation, DRIC has succeeded in ensuring that disability is addressed in the policies and programmes of the key ministries of the government with the constitution of DAWGs in the key ministries. DRIC continued to contribute to promoting disability rights on both national and subnational levels and inclusion of persons with disabilities and their organization in decision making processes.

I. Purpose

The Cambodian United Nations Development Assistance Framework (UNDAF) 2014-2018 in line with the National Strategic Development Plan (NSDP) explicitly includes persons with disabilities in its definition of most vulnerable groups in Cambodia. The UNDAF highlights the need to strengthen inclusivity, including in relation to disability and the reduction of inequities deriving from disadvantages such as disability. One out of its ten selected UN human rights mechanism recommendations, is to implement and strengthen policies and laws to protect and promote the rights of persons with disabilities and ensure that these mechanisms enjoy a human rights-based approach consistent with the CRPD and in consultation with civil society. In line with the above, the main objective of the DRIC programme is to create more opportunities for the participation of persons with disabilities in the politico-economic as well as socio-cultural life by developing the capacity of the government to implement the NDSP in alignment with the CRPD. The programme aims to strengthen the Cambodia Disabled Peoples Organization (CDPO), the representative body of the DPOs in Cambodia to advocate for the rights of persons with disabilities. As physical rehabilitation is critical to empower persons with disabilities and to enable them to regain their optimal level of functioning, the programme aims to support and strengthen the nodal ministries to acquire leadership of the sector and simultaneously provide support to the Physical Rehabilitation Centers (PRC) that are in a state of transition of management from INGOs to the People with Disabilities Foundation (PWDF). The programme also intends to include persons with disabilities in the process of decentralization and to make provincial governance accessible, participatory and inclusive. Lastly, the programme supports much needed services for persons with disabilities as the role of Government and CSOs remain critical through a small grant modality.

II. Assessment of Programme Results

i) Narrative report on results

Outcomes

The end of programme outcome of DRIC is to ensure that there is an increase of opportunities for persons with disabilities to participate in the politico-economic and socio-cultural life based on the National Disability Strategic Plan (NDSP) which was developed in alignment with the regional strategy and the Convention on the Rights of Persons with Disabilities (CRPD) to realize the rights of persons with disabilities. Throughout 2016, DRIC consistently engaged with Government and non-government actors and the disability movement to create a more enabling environment for persons with disabilities to access their rights and to increase their participation in society. The following provides a summary of the progress made against outcomes related to (1) Systems strengthening, (2) Capacity development, (3) Participation, (4) Service delivery and (5) Inclusive UN programming.

Systems strengthening: In order to address sustainability, a key outcome area of DRIC is the strengthening of local systems. This approach is embedded across all components and aims at systems strengthening for enhanced processes as well as technical capacities to deliver against organizational mandates. DRIC's systems strengthening outcome is implemented through the support for DAC at the national and subnational levels and legally mandated structures to coordinate with the sectors to promote and protect the rights of persons with disabilities. The increased capacity of the DAC Secretariat is best evidenced through the securing of national budget to support its operation and programmes. Cooperation with the Ministry of Health (MoH) and bringing their work closer to the disability sector is key to embedding a health systems response to disability and a greater role for the health sector in service delivery and governance of the rehabilitation sector in the future. In the interim, support to the PWDF that is tasked to manage the transfer of PRCs from INGOs to Government is key to strengthening the system to deliver critical services and to increase Government capacity to manage services. Cooperation with the Ministry of Interior (MoI) is crucial in building into the Decentralization and Deconcentration (D&D) reform and developing competencies and

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capacities for the local governance structure to be more disability inclusive. DRIC support to MoSVY's National Community-based Rehabilitation (CBR) Coordination Committee is strengthening the Government mechanism to promote community-based support and care for persons with disabilities, with a focus on quality assurance and coordination of services. From a process side, the UN Harmonized Approach to Cash Transfer (HACT) framework requires financial compliance from Government counterparts and a system that promotes results-based budgeting and planning. By using HACT, partners are becoming more effective in developing results-based work plans and reports as well as sound financial reports (liquidation). These practices will enhance partners' organizational capacities beyond the lifespan of DRIC.

<u>Capacity development</u>: DRIC trough all its components supports the capacity development of programme stakeholders with positive results as demonstrated through action and practice. The DAC Secretariat received substantial support to develop its capacity to lead on disability rights and on the coordination at the national level and at the sub-national level, where the newly established Provincial DACs received support and guidance. To better mainstream disability into sector policies and programmes, DRIC supported the capacity development of the Ministry Disability Action Work Groups (DAWG) to improve the understanding of their role and to successfully mainstream disability into action plans with a corresponding budget. In addition, the PWDF and MoSVY received sustained support through DRIC to more effectively manage the physical rehabilitation sector. Examples of growing capacities of relevant actors include the development of price lists for local and imported orthopedic components, costing for PRC services for the contract with the National Social Security Fund (NSSF) and a joint PWDF-INGOs procurement committee to improve the procurement of supplies. The Cambodian Disabled People's Organisation (CDPO) as the umbrella organization of persons with disabilities representatives has progressively increased its capacity as a lead organization, in particular with regards to advocacy as evident in below key outputs. With more than 15 CSO partners, DRIC supports civil society through capacity development both on organizational as well as technical issues through dedicated training workshops and one on one coaching. According to feedback from CSOs, their systems have been strengthened through the partnership with DRIC in particular related to financial management, procurement, budgets and work plans and results-based programming.

Participation: In line with the principle of 'Nothing about us, without us', DRIC has focused on increased participation of persons with disabilities throughout the whole programme. This can be seen through the active role of CDPO, DPOs, Self-Help Groups (SHGs) and persons with disabilities in all activities from the national to sub-national levels. DRIC succeeded in increasing the awareness of disability inclusion and lend greater credibility to programming. Key examples of greater participation at the national level include (1) the participation of CDPO and other representatives of persons with disabilities in policy review development and monitoring of implementation; (2) advocacy initiatives related to employment and voter registration, and; (3) active participation in national events such as International Day of Persons with Disabilities. At the sub-national level, critical engagement of the disability movement took place with the delivery of disability inclusion training for commune and district level sub-national authorities and through mobilization of SHGs to engage with commune councils and village chiefs. Participation of persons with disabilities had a strong focus on gender with explicit engagement with the Women with Disabilities Forum (WWDF) as well as capacity development of individual female leaders.

<u>Service delivery</u>: Access to services is a key outcome area of DRIC that will increase the potential of persons with disabilities to actively engage in day to day life more meaningfully and with dignity. The services supported through DRIC include physical rehabilitation from both Government and INGO managed PRCs, outreach services to families, ear health and hearing aid fittings, livelihoods support, access to education for children with disabilities, specialized services for children with autism and intellectual disabilities, community-based care centers, parent support and training, psycho-social counselling, etc. In total, through the Cambodia Disability Inclusive Development Fund (CDIDF) 67,277 (30,792 females) directly benefitted from services supported by CSOs and 26,447 persons benefitted from physical rehabilitation services supported by the Government and INGO managed PRCs.

Inclusive UN programming: As a result of the sustained engagement of UN agencies through the DRIC, there is an increase in commitment to inclusive programming in the overall UN system in Cambodia and specifically within the PUNO. This is translated into the establishment of an Informal Development Partners Working Group on Disability, that is chaired on a rotating basis by UNDP, UNICEF and WHO. In addition, UNDP leveraged funds from its HQ to conduct an initial "access to justice" study. UNICEF, an active member of the social protection working group, is providing technical support to MoSVY to implement the disability allowance for poor persons with disabilities in addition to its work with MoEYS on inclusive education and MoSVY and MoWA on inclusive alternative care initiatives, violence prevention and response. WHO closely cooperated with MoH to develop the National Policy and Strategy for Older People Health Care which is linked to disability as well as including rehabilitation into the MoH Minimum Package of Activities for health centers and making disability intervention a part of the WHO Country Cooperation Strategy (CCS) 2016-2020.

In March 2016, DRIC underwent an independently conducted Mid-Term Review (MTR)¹. Based on the recommendations, the PUNO prepared a management response that is currently being implemented and throughout the second half of 2016, DRIC implemented several actions to move the recommendations forward.

Outputs

Outputs related to component 01

- The most significant achievement in relation to the Disability Action Council (DAC) in 2016 is the mobilization of national budget to support its operation and programmes, highly presenting the improved capacity of DAC as well as the commitment of the government to respond to the needs and rights of persons with disabilities. DAC has increased their national budget to fulfill their mandates as a disability mechanism by around 700 per cent compared to the 2016 budget.
- Nine out of 17 DAWGs developed their action plans for 2016-2018 with allocated budget for their implementation.
- 80 per cent of the recommendations from the functional analysis have been implemented throughout the works of DAC. Examples include the revision of roles and responsibilities of the key government disability actors, organizational management and leadership and capacity development to government ministries to fulfill their mandates as well as the allocation of national budget for disability inclusion.
- UNDP worked with DAC in creating inclusive processes in the development of policies aimed at improving the rights of persons with disabilities. Most of the key policies related to disability were reviewed and developed in wider consultation with all government ministries, DPOs, NGOs and the private sector. The policies include a road map for the amendment of the national disability law. In addition, an Inter-Ministerial Prakas on National Accessibility Guidelines was drafted, a sub-decree on financial reward for persons with disabilities on skills competition and Special Olympics and financial reward to trainers has been issued. In addition, the Inter-Ministerial Prakas on Type and Level of Disability Classification were reviewed.
- The Initial State Report on UNCRPD was drafted in broad consultation with stakeholders including government ministries, DPOs, NGOs and the private sector to provide input and comments. The government intends to submit the report by mid-2017.
- UNDP in collaboration with Light for the World, an international disability organization provided a consultative workshop to develop action plans for DAWGs and DAC-SG. Following the workshop,

¹ Please refer to below III. Other Assessments or Evaluations, page 15

- 9 out of 17 DAWGs who attended developed action plans for 2016-2018 with allocated budget for implementation.
- DAC organized the international day of persons with disabilities which was presided over by Prime
 Minister Hun Sen. Around 2,500 persons with disabilities attended the event to celebrate this
 important day. The presence of Prime Minister at the event was important to promote the disability
 inclusion across sectors. He also provided key recommendations to both public and private sector to
 improve the quality of services and create employment opportunities for persons with disabilities.
- DAC has promoted the implementation of employment quota at both public (2 per cent) and private sector (1 per cent). As a result, 2,573 persons with disabilities were employed in the public sector in 2016. Few private institutions have recruited persons with disabilities by providing reasonable accommodation, i.e. accessible workplaces, parking lots and bathrooms.
- DAC has advocated for and facilitated the dialogue on persons with disabilities rights to access the infrastructure and public transport in Cambodia. The dialogue was engaged with government, private sector, DPOs, NGOs and persons with disabilities to share their concerns related to inaccessible infrastructure in Cambodia. As a result, the Phnom Penh municipality will receive a donation of around 100 accessible buses from China which will pave the way to accessible public transportation in Phnom Penh. This initiative is expected to be expanded to provinces.
- An on/offline Disability Service Directory² in Cambodia was launched by DAC. The directory has the potential to provide a full picture for all sectors to find the available services for persons with disabilities in Cambodia.

Outputs related to component 02

- As a result of CDPO advocacy with the National Election Committee (NEC), 12,652 persons with disabilities have registered for the 2017 commune elections. This number is significantly higher than in 2013 when 3,531 persons with disabilities registered. The NEC also committed to provide reasonable accommodation for diverse persons with disabilities in the next voter registration process.
- Through the active involvement of CDPO, the draft law on Access to Information, includes disability in most of its articles and has been finalized. It was submitted to the Council of Ministers for review and the draft law is expected to be adopted by the RGC by end of 2017.
- 13 out of 25 provincial DPOs have improved their capacities to fulfill their mandates in terms of organizational management, leadership and disability rights advocacy as a result of training and coaching from CDPO.
- Since provincial DPOs are members and included in the provincial DAC, they have a better understanding of the changing roles and responsibilities of government mechanism related to disability. In addition, DPOs are now recognized as the experts to provide advice to the local government authority on disability related issues/needs.
- The capacities of DPOs have been improved in terms of communication and advocacy with local government authority. DPOs advocated with the local authorities and private institutions for better services for persons with disabilities. Persons with disabilities now have better access to the communes' program such as WATSAN, disaster risk reduction, animals raising, physical infrastructure (road infrastructure, ramps, ID poor cards, social security fund etc.). In addition to the strong engagement with the local authorities, DPOs created donation boxes and placed it at pagodas, restaurants and other private institutions in order to raise some fund to support their organizations as well as for emergency support to members, e.g. for medical treatment and funeral events.
- The Voice of Persons with Disabilities (VPD) radio show produced by CDPO conducted an online survey to measure the level of audience satisfaction regarding the radio broadcasting programs. 80

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² http://dac.org.kh/directory/index.php/en/site/index

- per cent of 1,327 callers rated the VPD program as 'excellent' and claimed to have learnt a lot about the disability and development.
- A Sales Management Policy (SMP) has been developed by the CDPO resource mobilisation working group and was adopted by CDPO governing board to mobilize both financial and non-financial resources for the VPD program and other CDPO programmes.
- CDPO has formed an employment working group which consists of government representatives, the
 national employment agency, UN agencies, private sector, DPOs and NGOs with the aim to improve
 the sustainable employment of persons with disabilities and to ensure that recruitment practices and
 workplaces are physically and culturally inclusive.
- In terms of promoting gender inclusion, 22 per cent of CDPO governing board are women with disabilities and 33 per cent of CDPO staff are women with disabilities and playing an important role within the programme management. About 20 per cent of CDPO member organizations are led by a woman, and 40 per cent of DPOs' governing board members are female.
- CDPO in collaboration with Panhasasstra University has conducted a study of the situation of access
 to justice for persons with disabilities in Cambodia with a small grant from UNDP-HQ. The
 recommendations from the research have been used to develop a project proposal on access to justice
 for persons with disabilities.

Outputs related to component 03

- The recommendations from the Rehabilitation Transition Analysis Report were adopted by MoSVY in September 2016, including the recommendation on establishment of a multi-stakeholder National Rehabilitation Transition Committee to support the establishment and implementation of the next 5 years' rehabilitation transition plan. With involvement from different stakeholders, the ToR for the committee were drafted and approved by MoSVY. The committee is expected to start functioning by May 2017 following the approval from the Minister of MoSVY.
- In 2016, DRIC supported the handing over of the Orthopedic Components Factory from the International Committee of the Red Cross (ICRC) to the PWDF. Main results emerging from this process include the development of a price list for local and imported orthopedic components, costing for PRC services for the contract with National Social Security Fund (NSSF) and a joint PWDF-INGOs procurement committee to improve the procurement of supplies.
- To contribute to the Rehabilitation System Strengthening, Rehabilitation Guidelines for Stroke were adopted by MoH and a launching event and two three-day training workshops for over 50 health and rehabilitation professionals were organized in late November and early December 2016. The guidelines serve as a practical resource for the rehabilitation management of stroke in Cambodia and as an awareness and educative tool to fill the gap in provision of rehabilitation services at hospital and rehabilitation settings.
- The secondary analysis of the 2014 Cambodia Demographic Health Survey (CDHS) on healthcare utilization of persons with disabilities was finalized and a dissemination workshop is planned for early 2017. The report has generated important evidence on inequalities in the utilization of health care for persons with disabilities and will serve as an advocacy tool to further strengthen health care provision. Two additional studies, Health and rehabilitation services for people with spinal cord injury and Rehabilitation sector financing are expected to be finalized in Q1-2 of 2017.
- Basic rehabilitation intervention of selected health conditions is now included in the new Minimum Package of Activities (MPA) at health center level and the final guidelines will be ready by Q2 of 2017
- MoH and MoSVY agreed to revise Joint National Physiotherapy Standards. The ToR are finalized and the committee is expected to start functioning by early March 2017.
- A total of USD 240,000 was provided to PWDF and INGOs to support the transition process of 9 of the 11 Physical Rehabilitation Centers (PRCs) and a national Orthopedic Components Factory (OCF). In 2016, there was only a slight drop in the number and percentage of persons with

- disabilities that received services from these 9 PRCs in 2016 (15,078 and 4 per cent decreased relative to 2015) indicating that service level was only minimally impacted by the transition of services.
- As one of the two Provincial Rehabilitation Demonstration Projects (PRDP) established in early 2015, Kampong Cham witnessed a 29 per cent increase in clients accessing PRC services compared to 2014. 98 per cent of clients of PRC in Kampong Cham are highly satisfied with its services. The referral materials were developed and more than 513 participants, including civil servants, self-help groups and service users themselves were trained on identification and referral. Over 80 per cent of participants reported improved knowledge.
- The number of clients who received services from Takeo and Siem Reap PRCs increased by 18 per cent from 2,383 in 2013 to 2,813 in 2016. The clients are reporting high levels of satisfaction with PRC services; out of 80 clients asked from Siem Reap PRC 90 per cent were completely satisfied and 10 per cent moderately satisfied with the general services.

Outputs related to component 04

- Full implementation of the joint work plan with Ministry of Interior's Department of Municipality, District, Commune, Sangkat Administration Affairs (DDC). UNICEF and MoI successfully implemented all activities in the 2016 work plan related to disability inclusion. The work plan included some of the key achievements below as well as the implementation of an assessment of the 2014/2015 disability sensitisation workshops in 9 provinces and 11 districts. The DDC/MoI team conducted a post-assessment of the disability sensitisation workshops organized in 2014. In total, 92 persons (of 427 participants) were interviewed and overall it was assessed that there were positive changes both in terms of knowledge, attitude as well as some practical actions on disability inclusion. Some examples of different types of actions taken by participants/institutions included (1) Disability inclusion activities/priorities included in the 2017 sector work plan and the commune work plan; (2) Support and encourage disability inclusion in the 5 years development plan and 3 years investment program; (3) Improved accessibility for persons with disabilities, i.e. ramp constructions and modifications and physical accommodations by provincial, district administration and commune; (4) Meetings with sectoral departments, institutions, community and stakeholders to raise awareness and promote understanding on disability issues; (5) Key disability issues raised in Board of Governor meetings and the consultative committee for women and children meetings to identify, take and follow-up on actions on the implementations of the government guidelines and policies related to persons with disabilities i.e. provision of food items and fee exemption for health services for person with disabilities and families.
- Finalisation of the training package on disability inclusion for local authorities. The training package that was drafted and pre-tested in 2015 was finalised in Khmer. The process involved multiple stakeholders to conduct quality assurance both technically and of the Khmer language; stakeholders included representatives of persons with disabilities, as well as MoI, MoSVY, DAC and NGOs working in the disability sector. The collaborative efforts helped build relationships and contributed to a stronger training package. The package once approved by MoI was provided with an introductory letter from H.E Sak Setha of MoI/NCDD-S and printed for use.
- Successful implementation of one Training of Trainers (ToT) workshop for the disability inclusion training package and 10 sub-national trainings in Ratanakiri, Battambang and Kratie facilitated by MoI/DDC. A second ToT for the sub-national disability inclusion training package was conducted in May of 2016. The ToT included representatives from the Provincial Investment Division, Human Resource Division, Capacity Building Advisor, the District Advisor and District Office to support Commune Sangkat, Provincial/Social Affairs and DPO of four provinces: Battambang, Kratie, Siem Reap and Ratanakiri. With the new cadre of master trainers, starting from September 2016,

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implementation of the training at sub-national level was initiated reaching 357 (73 females) officials from three districts, one each, of Kratie, Battambang and Ratanakiri. The trainings were led by the core trainers and DPO resource persons. The trainings received oversight and technical backup support from the DDC team but were implemented by the Provincial level trainers. This is a very positive first step in strengthening awareness at sub-national levels of local governance structures and strengthening MoI's role in promoting an inclusive D&D reform.

- Delivery of grants to 15 CSO partners (round 1 and 2 of CDIDF). As a result of the 15 partnerships, a total of 67,277 (30,792 females) direct beneficiaries benefited from disability-inclusive and specific support services in the 14 targeted provinces and Phnom Penh. Of this number of direct beneficiaries, 6,797 (2,872 girls) or 11 per cent, were children with disabilities. UNICEF's grant partners delivered on track against their planned results for 2016. Programme monitoring visits revealed that partners are providing critical support for children and families with disabilities in the absence of specialised support services.
- Inclusion of disability into the local budget guideline: The commune social expenditure guideline
 was revised through field discussion with the local authorities, commune councils and the national
 ministries. The initial result from this process is that disability has received attention from the local
 level and it has been suggested to be included in the draft guideline of social expenditure for the
 commune.
- Support to MoSVY for National CBR Coordination. The grant to MoSVY, managed through UNICEF's Child Protection team has enabled the National CBR Coordination team to conduct field monitoring visits of CBR projects in Takeo, Kampot and Kep. The purpose of the visits was to learn about quality services that are being provided by CBR NGO partners, assess the level of collaboration between DoSVY officials and NGO partners and documentation of good practices of SHGs. The CBR field monitoring by the National Committee increases their understanding of practices on the ground, key challenges and the importance of coordination for monitoring of quality of services. In December 2016, MoSVY organized the National CBR workshop in Ratanakiri, with the intention of highlighting the importance of CBR in remote, under serviced and hard to reach areas. The workshop successfully brought together 75 participants from Government Ministries, local authorities, NGO Representatives and persons with disabilities. Working through UNICEF's Child Protection unit bring a stronger focus to child protection issues, children with disabilities and builds synergies within MoSVY between the Department of Child Welfare and the Department of Welfare for Persons with Disabilities.
- Delivery of capacity development and support activities for CSO partners. A key feature of the CSO partnerships held by UNICEF is to provide on-going support and where relevant, learning opportunities. The purpose of this approach is to build local capacity and promote sustainability of local organisations working to support children with disabilities and their families. In May 2016, UNICEF held a CDIDF partner meeting which was led by in-house expertise and reviewed Child Protection, Finance training, Procurement policy and practice, Results-based management and information on extension of existing grants. The workshop included a session on identifying and mapping partner areas of interesting for learning and development. Based on the first partner meeting, a second learning focussed partner meeting on Monitoring and Evaluation was facilitated by UNICEF partner Light for the World. The workshop was held over two days and catered to programme monitoring staff and management. Feedback from both partner meetings was positive and this will be an on-going activity into 2017.

Delays in implementation, challenges, and lessons learned & best practices

Throughout 2016, DRIC has identified several key challenges and lessons learned that will influence the way forward for 2017 as well as potentially inform future engagement to support the disability sector in Cambodia.

- There have been delays in forming the five remaining provincial DAC due to with the upcoming commune/sangkat election. The upcoming commune/sangkat election is a key challenge for enhancing the provincial government offices to formulate the members and consideration for the implications of national elections in 2018 on the Provincial DAC should be given.
- The RGC is delayed in submitting the Initial State Report on UNCRPD due to time constraints and technical staff shortage within the DAC Secretariat. However, DAC has committed to finalize the report in early 2017 and is expected to submitted it to the UNCRPD committee by next 2017. The additional roles of DAC Secretary General within the MoSVY has resulted to delay in finalizing the report.
- The NDSP M&E framework is pending the approval by the President of DAC and has therefore not yet been put into practice. These presents a challenge in monitoring the implementation as data collected may be more ad hoc or not structured around baselines and targets.
- A recent UNESCO and DAC collaboration to assess the inclusiveness of the National Disability Strategic Plan 2014-2018 found many positive dimensions to the policy; however, the exercise underscored the fact that there remain challenges in terms of the knowledge and awareness of Government officials of the NDSP, in particular from line ministries and those from the sub-national level.
- Sustainability of local NGOs and their interventions remain a challenge, in the context of DRIC however more broadly in the context of service delivery. While NGOs are increasingly seeking to diversify the funding sources and some trialling models of scale payment for services for those who can afford them, the dependency on donors remains. Further discussion with Government is required in the long term, as well as lessons from the rehab sector and handover of the PRCs, to inform how service delivery for disability support services will be managed and financed in the medium to long term.
- Capacity development and support to CSOs is a key element to partnerships. The capacity of CSOs varies and their existing systems also vary in terms of thier robustness. Significant time is required from UNICEF in day to day support and guidance for the CSO partners on budget planning, reporting and liquidation. There is still a tendency to focus on activity reporting rather that results-based reporting. A longer-term partnership has allowed UNICEF greater time to support partners in developing their systems and working with a results-based focus. In 2016, one CSO partner finalised a new procurement system while other partners worked with UNICEF to develop joint programme documents, during which they learnt to apply results. Several partners also report that the way in which UNICEF disburses funds has increased their capacity to plan and manage their budgets. UNICEF has however noted, that a majority of the CSO partners have relatively low absorptive capacity and funds and work plans should be developed taking this into consideration.
- While there is significant effort from civil society as well as Government to coordinate, effective coordination mechanisms have yet to be fully developed and there remain gaps in information flow, coordination and coverage of activities. This applies in particular at the sub-national level where coordination and dialogue is still developing.
- Recruiting civil servant remains a challenge for the non-priority ministries, including MoSVY as this would require special consideration of Prime Minister as done in 2011.
- After the handover of the Orthopaedic Component Factory (OCF) by the ICRC to the PWDF, a delay in the supplies provided by the OCF to the PRCs was observed. In addition, some materials

- procured by PWDF were not supplied on-time to the PRCs due to the long process taken under the government procurement system.
- Significant turnover of technical staff hampered the good delivery of rehabilitation services to potential clients and affected the number of clients coming to the PRCs.
- The restructuring of the Department of Welfare for persons with disabilities and especially the departure of its director caused a delay in establishment of the national CBR coordination.
- The National CBR Workshop identified some key areas for improvement to be addressed going forward, namely to improve the protection and promotion of the rights of persons with disabilities through capacity development of district and commune officials to reduce discrimination against children and persons with disabilities in the community and at school. The workshop also identified some key challenges including the fact that the commune databases only capture persons with physical impairments and no others such as intellectual disabilities; some SHGs are not consistently functioning due to family migration; the majority of children with disabilities in remote provinces are reported to not have birth certificates, to have never attended school or dropped out because school environments were not friendly and the majority of the teachers have not received inclusive education training.
- Important ground level challenges that were identified through monitoring by the National CBR Coordination team include a lack of statistics and information on the situation of persons with disabilities at DoSVY and commune level; inaccessible infrastructure (e.g. at commune offices), and on-going discrimination and exclusion of persons and children with disabilities. In addition, there almost no professional social workers who could provide counselling and case management for children with disabilities. Local authorities seem not to be aware of the Law on the Promotion and Protection on the Rights of Persons with Disabilities (PPRPD) of 2009. Specific to the provinces visited by the National CBR Coordination team in 2016, services for persons with disabilities in Takeo and Kampot are very limited and some NGOs that formerly provided CBR services have closed their offices due to lack of funding.
- In terms of the National CBR Coordination Committee way forward, both government and NGO partners have agreed to focus on activities to (1) support capacity development of commune officials on disability classification using the social model; (2) advocate for the inclusion of persons with disabilities issues into the commune investment plan and allocation of more budget to support persons with disabilities; (3) improve inter-sectoral cooperation between government ministries, NGOs, DPOs, media, Persons with Disabilities and their families; (4) revise the CBR field monitoring and NGO reporting forms; (5) continue to disseminate the Law on the Protection and the Promotion of the Rights of Persons with Disabilities, and; (6) build greater linkages and networking between MoSVY CBR National Coordination Committee and the NGO CBR Network. It was also agreed to organize quarterly meetings with NGOs who are providing CBR services, and the TOR of the national CBR team will be reviewed in 2017. The Department of Welfare of Persons with Disabilities will work closely with the Department of Child Welfare to improve the quality of care for children with disabilities who are currently living in Residential Care Institutions.
- UNICEF decided to not provide the planned funds (10K) for the online Disability Services Directory that was drafted in 2015 and put online on the DAC website in 2016. The rationale for this decision is since technical inputs were provided during the development stage, along with Handicap International and GIZ and GIZ has continued to provide support for this activity. Accordingly, to optimize benefit of the DFAT funds to DRIC, these funds have been re-allocated to existing Component 4 activities. Equally, there is some concern in investing in the current online services directory given DAC's current capacity to manage and maintain it as well as their relatively low commitment to this specific part of their work.

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Lessons Learned

- In order to mitigate a decrease in funds as a result of exchange rate depreciation, UNDP negotiated with project partners to review the activity plan, and it was decided to utilize the available funds without cutting down the activity plan and in addition mobilize supports from UNDP HQ and other development partners such as Light for the World, HI and Oxfam to complement it.
- The reform of Government disability mechanisms in terms of functions, roles, responsibilities and human resources has provided a clear picture for the sector to get support and cooperation.
- The establishment of DAWGs at line ministries and the provincial DAC benefited to the disability sector as these mechanisms are central in mainstreaming disability across their policies and programs. Some of DAWGs and provincial DAC have mobilized national budget ranging from USD 2,000 to 30,000 which focused on disability awareness raising and strengthening capacities to fulfill their roles and responsibilities. Through this commitment, it will improve the situation of persons with disabilities on the ground/grassroots level through the engagement with local DPOs.
- The on/offline Disability Service Directory has the potential to be a new modality for Cambodia to provide information on disability services and mapping of the organizations and institutions that provide support to persons with disability in Cambodia. This should be monitored and maintained going forward by DAC; further capacity development for DAC in this regard is needed.
- The Sales Management Strategy is a very important approach to sustain the VPD radio program in terms of additional incomes from development partners and donors, which was one of the key outcome results related to sustainability and ownership.
- The improved capacity of DPOs to advocate with policy makers as well as the local government authority to include disability into the policies and strategic plans and programs is the most significant change in terms of behavior changes and practices.
- The access to justice project, supported by UNDP HQ, has filled the gap of the program in terms of social justice for persons with disabilities. It also documented how the social injustice impacted the quality of life of persons with disabilities.
- While the donation boxes established by DPOs do not fully align with global disability rights approaches, outwardly reproducing pity and charity models towards persons with disabilities, it is important to note that it is felt that these boxes are appropriate for the cultural context of Cambodia. In the Cambodian context, the donation boxes are seen to help DPOs in terms of raising funds for operation costs, emergency needs of members, etc. The boxes carry messages that look at rights, for example "I am a part of society" or "Your contribution can make a change".
- As DRIC was not designed with an explicit focus on access to justice, the access to justice study
 complemented the programme by documenting how the lack of access to justice negatively impacts
 the quality of life of persons with disabilities.
- There was a significant increase of new clients to services as demonstrated by the Provincial Rehabilitation Demonstration Project (PRDP) in Kampong Cham. This resulted from the involvement of PRC's clients, local authorities and health facilities in to the identification and referral. There was also a significant increase of new clients to services as demonstrated by the Priority Rehabilitation Service Scheme (PRSS) in Siem Reap because of the mobile activity, additional support for client's food and transportation allowances.
- People with disabilities benefited from the Commune Investments Plan budget for their transportation fees to PRC services as a result from the close collaboration and engagement of commune councils into identification and referral of clients
- Clients' feedbacks collected through client's satisfaction surveys were helpful for the PRC team to identify the practices and needs for improving the services.
- The MTR process reinforced the lessons from 2014 and 2015 that the identification and selection of the CDIDF grant partners is a cumbersome and lengthy process as it combines an open tender selection that must follow internal UNICEF CSO engagement guidelines. Based on this lesson

learned, the open selection process was removed and the decision to extend existing partnerships was taken. This approach allows longer term partnership, deeper programme development and on-going capacity development for the supported CSOs.

- The important relationship with MoI and UNICEF's support to the decentralization and deconcentration (D&D) reform process in Cambodia through the ten-year National Programme for Sub-National Democratic Development (NP-SNDD) has seen greater leadership by MoI in 2016. This is evidenced in the implementation of the work plan, in particular in the sub-national training activities and the impact assessment of disability sensitisation workshop. While the knowledge of MoI in disability rights is limited, working with the MoI to reach local government is a unique approach to promoting inclusive development. By engaging with MoI, DRIC contributes to slowly embedding principles of equity and disability awareness into a key reform (D&D). For instance, the impact from the capacity building on inclusive disability for sub-national councils and local decision makers and the commune/sangkat social budget expenditure guideline will potentially impact the lives of persons with disabilities on the ground.
- Collaboration with and leadership by Government is critical for embedding new initiatives and generating more institutional buy-in. The involvement of MoI in all stages of developing a disability inclusive training package for sub-national decision makers to be rolled out through MoI structures as well as for use by other stakeholders, has been critical. MoI as well as other relevant stakeholders such as DAC, MoSVY and key NGOs have been engaged throughout the whole process. MoI has demonstrated an increase in understanding of disability inclusion as well as leadership in embedding the work in the D&D framework.
- Equally, the adoption of National Rehabilitation Guidelines for Stroke and the inclusion of rehabilitation intervention in the new Minimum Package of Activities (MPA) of Health Center by MoH that will contribute to the future inclusion of rehabilitation in the health system and the engagement with the leadership from the Ministry of Information has resulted in an accessible new Law on the Access to Information.
- The linkages between DRIC funded activities and UNICEF programming have the potential to maximise benefits. For example, CDIDF activities related to inclusive education have the potential to benefit from UNICEF's inclusive education work and its relationship with MoEYS. Equally, this could relate to UNICEF and UNDP's work on social inclusion and WHO's work on health systems strengthening.

Qualitative Assessment

Overall, DRIC is on track to delivering against its planned results. In 2016, the programme has consolidated important gains made in 2014 and 2015 in terms of promoting the rights of persons with disabilities through a multi-pronged approach that engages Government at the national and sub-national levels, the disability movement and service delivery providers.

Key Government programme partners – DAC, MoH, PWDF and MoI – are demonstrating increased capacity to implement disability inclusive programming. This is evident in (1) the functioning of a number of DAWGs in line ministries with budgeted work plans; (2) the work of DAC-SG to advocate for disability rights at the national level; (3) the establishment of a multi-stakeholder National Rehabilitation Transition Committee; (4) the PRPD model of service delivery bringing together MoH with MoSVY, and (5) the MoI leadership in implementing sub-national level disability inclusion training. The achievements made in 2016 demonstrate that the sustained engagement with the different RGC institutions have the potential to embed more inclusive practices and to move disability up on the Government's agenda and list of priorities.

The disability movement has been active and with support from DRIC, CDPO as an umbrella organization representing persons with disabilities, has grown in confidence as well as ability to effectively advocate at the national and increasingly also at the subnational level. In 2016 this was clearly demonstrated with the registration of 12,652 persons with disabilities for the upcoming commune election in June 2017 and the achievement that NEC committed to provide a reasonable accommodation for diverse persons with disabilities in the next voting registration process. Equally, with CDPO's active involvement in the drafting of the law on access on information, it includes disability in most of its articles. In addition, DPOs and SHGs have been supported by CDPO and other DRIC NGO partners with capacity development, networking with local authorities and in the case of some SHGs with seed money. Local level organizations that bring together persons with disabilities have increased visibility, empowered individuals and are potential local level advocacy networks.

In addition to positive achievements from Government and disability movement partners, partnerships with numerous civil society organizations were key to the achievements of DRIC in 2016. These partnerships enable delivery of services that are not available through Government systems or limited in coverage. A total number of 58,260 (18,231 female) persons with disabilities of which 22,365 are children with disabilities have directly benefitted from programme supported services related to physical rehabilitation, access to education, livelihoods and skills training, access to sport and play, aural rehabilitation, psychosocial counselling, home-based care and physical accommodations to public and private facilities through UNICEF's CDIDF partners and WHO's supported PRCs. While issues around sustainability and Government delivery of services remain, DRIC has continued to play a key role in service delivery for persons with disabilities in Cambodia.

DRIC has observed many positive trends and achievements in 2016. However, there remain some critical challenges that must be addressed for the remainder of the DRIC programme but also considered in the design of any future iterations of DRIC by DFAT and UN agencies alike. These challenges can be broadly classified along the lines of:

- Challenges in cross-sectoral coordination as well as coordination within the sector
- Developing capacities within partner institutions and organizations that limit the ability to strategically plan and implement disability inclusive policies and programmes
- Whole of Government buy-in and commitment to disability
- Sustainability of current services delivery models, primarily through NGOs, in the context of decreasing external funds to Cambodia has yet to be addressed;
- Uneven coverage of services results in unequal access to services and left-behind persons with disabilities
- Uneven development of the disability movement throughout the country which results in varying levels of local level advocacy

ii) Indicator Based Performance Assessment

For readability reasons the indicator table has been annexed; please refer to Annex 1, page 19.

III. Other Assessments or Evaluations

In March 2016, a Mid-term review (MTR) of DRIC was conducted by an independent consultant. According to the MTR findings, the programme is largely on track in achieving the stated outputs. However, the MTR raised concerns and provided recommendations over the overall sustainability of the results achieved and related to effective programme coordination, communication and building synergies across the components, as well as on external communication and coordination.

The following recommendations were suggested for the programme:

- Strengthen and increase the coordination and communications around the programme
- Strengthen institutionalization of capacity development
- Continue monitoring of the NDSP review workshop follow up actions
- Promote the development of provincial level DPOs
- Revise the efficiency of small grants identification and contracting
- Review and revise some of the outputs, targets and indicators as identified by the agencies, across all components
- Place greater focus on advocacy
- Focus future programming mainly on influencing normative agenda of government and on related capacity building.

Based on the above, the PUNO prepared a management response to the recommendations that is currently being implemented and throughout the second half of 2016, DRIC implemented several actions to move the recommendations forward. These include an extension of the existing grant partnerships, greater inclusion of DPOs in work with NGOs, follow up on the NDSP reflection workshop and actions taken by DAWGs, facilitation of regular dialogue between PwDF and INGOs and a functional analysis of the Programme Coordination which resulted in the revision of the Programme Coordination job description and direct technical support to MoSVY. Moving forward into the last funded year of DRIC, these important recommendations and reflections will be taken into consideration in programming as well as in future programme planning and design.

IV. Resources

Human Resources: Based on the recommendations from the MTR, the joint management response included a functional analysis of the TOR for the Joint Programme Coordinator (PC) position. The result was to revise the TOR with a strong focus on coordination and to lower the professional level from P4 to P3. In addition, it was decided that a Technical Adviser to be placed in MoSVY will be recruited on a national consultant contract. While a transition period was foreseen to allow sufficient time for the recruitment of the two new PCT members, the PC decided to leave in November 2016.

Acronyms

ASEAN Association of South East Asian Nations

CBR Community Based Rehabilitation

CCWC Commune Committee for Women and Children
CDHS Cambodia Demographic and Health Survey
CDIDF Cambodia Disability Inclusive Development Fund

CDP Commune Development Plan

CDPO Cambodian Disabled People's Organization

CIP Commune Investment Plan

CRPD Convention on the Rights of Persons with Disabilities

CSO Civil Society Organization
DAC Disability Action Council

DAC-SG Disability Action Council Secretariat General

DAWG Disability Action Working Group

DFAT Department of Foreign Affairs and Trade (Australian Government)

DP Development Partner

DPO Disabled Persons Organization

DoSVY District Office of Social Affairs, Veterans and Youth Rehabilitation

DRA Disability Rights Administration
DRIC Disability Rights Initiative Cambodia

DWPWD Department of Welfare for Persons with Disabilities (MoSVY)

ERW Explosive Remnants of War IO International Organization

KT Krousar Thmey

M&E Monitoring & Evaluation

MoH Ministry of Health MoI Ministry of Interior MoP Ministry of Planning

MoSVY Ministry of Social Affairs, Veterans and Youth Rehabilitation

MPTF Multi-Partner Trust Fund

NCDD National Committee for Sub-National Democratic Development

NCDP National Centre for Disabled Persons

NDSP National Disability Strategic Plan 2014-2018

NGO Non-government organization

OHCHR Office of the UN High Commissioner for Human Rights

PCT Programme Coordination Team PRC Physical Rehabilitation Centre

PRDP Provincial Rehabilitation Demonstration Project

PRSS Priority Rehabilitation Service Scheme

PUNO Participating UN Organizations

PWD Persons with Disabilities

PWDF Persons with Disabilities Foundation RGC Royal Government of Cambodia

SHG Self Help Group SR Siem Reap

SWP Standard Working Procedures

ToC Theory of Change
ToT Training of Trainers
UN United Nations
TBD To be discussed

UNCT United Nations Country Team

UNDAF United Nations Development Assistance Framework

UNDP United Nations Development Programme

UNICEF United Nations Children's Fund
UN RC United Nations Resident Coordinator

WCCC Women and Children Consultative Committee WCDF Women and Children with Disabilities Forum

WWDF Women with Disabilities Forum WHO World Health Organization

Table: Indicator Based Performance Assessment

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|--|---|---|--|
| Component 1: Supporting | g Government implementation of the NDSF | | |
| Outcome 1: NDSP implemented through rights-based and inclusive approach Indicator: RGC reflects a rights-based & inclusive approach to disability Baseline: New NDSP Limited knowledge of rights-based & inclusive approach Planned Target: 50% of NDSP responsible ministries/ institutions reflect a rights-based & inclusive approach to implementing policies & programs Disability Law in line with CRPD by 2018 | 17 Disability Action Working Groups have been established at the line ministries, and 20 provincial Disability Action Council have been established and functioned. The roles and responsibilities of this mechanism is to provide coordination and advisory mandate related to disability issue/need at both national and sub national level as well as to implement and monitor the NDSP. | | DAWGs quarterly meeting reports DAC progress report |
| Output 1.1: Capacities of implement NDSP Indicator 1.1.1: Recommendations of Functional/ capacity assessment reflected in the revised strategic plan/annual work Plan of DAC/DAC -SG | Recommendations of functional capacity assessment have been progressed very well in terms of government ownership as follows: DAC-SG with support from UNDP has developed the roadmap for proposition the amendment to ensure the tracking | Achieved as planned | draft road map for proposal to amend the national disability law draft DAC guiding documents capacity development action plan workshop |
| | process.Roles and responsibilities of key government institutions working | | reportDAC annual progress report |

| Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|--|--|---------------------------|
| on disability have been reviewed and reformed in terms of institutions' structures, leadership, management and functions. O Guiding documents for DAC, DAWG and provincial DAC has been developed by DAC-SG in Khmer version. National disability guideline was developed and drafted in consultation with different stakeholders to ensure the guideline would be | | |
| comprehensive tools to support both physical and communication/information accessibility. The inter-ministerial Prakas between MoSVY and MoLMC has been developed and drafted. | version is being revised since there was some changes in relations to role and | |
| o UNDP in collaboration with Light for the World had provided a two-day consultative workshop to develop the capacity actions plan for DAC-SG and DAWGs. The action plan has been developed for the period of 2016-2018 to align with the NDSP life-span. | responsibility of DAC-SG's units. | |
| 30 new staff including 9 persons with disabilities have been recruited as civil servants to be placed at DAC-SG. | | |
| o The national budget for 2017 has been increased for DAC – around 700% has been increased compared to budget in 2016. The increased budget will use for operation, monitoring and organise events related to disability. | | |

| | Achieved Indicator Targets | Reasons for Variance with Planned Torget (if any) | Source of Verification |
|--|---|---|---------------------------|
| | 9 out of 19 Disability Action Working Groups have developed action plans with allocated specific national budget to implement the NDSP for example MoWA, MoT, MoEYS, MoA, MoRD, CoM, MoMI, MoI, MoPWT. The budget allocated in between USD2, 000 to 30,000. Most activities focused on meeting, training/workshop and monitoring. | Target (if any) | |
| Indicator 1.1.2: DAC members and SG staff active in regional networks, exchange of experiences/good practice | DAC attended the 9th sessions on Convention on the Rights of Persons with Disabilities in United Nations New York, and provided a ten-minute statement on the progress of disability development in Cambodia. The Cambodian delegation also hosted a side event with involved other countries and DPOs to share good practices in Cambodia. The Cambodian delegation built relationship with key people such as special rapporteur, new elected member of CRPD committee and mental health association in Europe. DAC in collaboration with CDPO hosted an exchange learning meeting with Korean University regarding disability policy between Cambodia and Korea. DAC joined the exchange visit to Malaysia to learn more about the disability coordination mechanism and rehabilitation service hosted by Malaysian government. Malaysia provided an overview for DAC to learn how to formulate the health and rehabilitation working group at national level. It allowed them to learn the different role of coordination and service provider. The exchange visit supported by WHO Philippine and Cambodia offices. DAC was invited by one private company in Japan to have an exchange study on the situation of persons with disabilities at the workplace. After the | Achieved as planned | DAC annual report |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|--|---|--|
| | visit, DAC learnt a lot how to promote employment opportunity for persons with disabilities within private sector. DAC facilitated the few young persons with disabilities to join the IT competition award in Indonesia. Unfortunately, the group didn't win any award but they got lesson learnt how to well prepare for next year competition. | | |
| Indicator 1.1.3: Civil servants, including women & persons with disabilities, participate in workshops or other capacity development activities | DAC had organized many workshops and meetings over the year such as: Consultative workshop on reviewing the Inter-Ministerial Prakas on Type and Level of disability classification – around 90 participants including government staff, DPOs and persons with disabilities attended the workshop. | Achieved as planned | Training and workshop reports DAC annual report |
| | Consultative workshop on capacity development action plan with involved from governments staff. Around 80 government staff attended. | | |
| | Consultative workshop on assessing the capacity of disability rights institutions with involved from government staff, DPOs and persons with disabilities. About 180 participants attended. | | |
| | Organized quarterly meeting between DAC-SG and NGOs/DPOs stakeholders to share knowledge and update on disability development within the organizations and identified possible solutions together. | | |
| | DAC –SG organized a training on project management to staff to improve their capacity in | Page 2 | |

| | Achieved Indicator Targets | Reasons for Variance with Planned | Source of Verification |
|---|--|---|---------------------------|
| | | <u>Target</u> (if any) | |
| | reporting writing and monitoring. 35 staff of DAC-SG attended the training, provided by Secretary General of DAC. | | |
| | DAC organized consultative workshop on reviewing the draft initial report on UNCRPD with involved from government staff, UN agencies, DPs, DPOs and persons with disabilities. About 150 participants attended the workshop | | |
| 0 | DAC conducted a consultative workshop on development of National Accessibility Guideline. National Accessibility Guideline has been drafted as well as Interministerial Prakas on National Accessibility Guideline. | | |
| | DAC conducted a national forum on employment with private sector to promote the employment opportunity for persons with disabilities. around 170 participants attended the forum. | | |
| | DAC facilitated the dialogue on persons with disabilities advocating toward a rights to access the infrastructure and public transport in Cambodia which supported by Handicap International and Queensland University. As resulted, the Phnom Penh municipal will be received donation aound 100 accessible buses from China to promote the accessible public transports in Phnom Penh and this will be also expanded to the provinces as well. | | |
| 0 | DAC organized a consultative workshop on "Promotion of Social Inclusion Services on | | |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|---|---|---------------------------|
| | Public Policy in Cambodia" which involved from line ministries (DAWGs) and NGOs. The workshop aimed to understand the public policy related disability issue and provide recommendations and the way forwards for social inclusion. The final findings and recommendations will be finalised and presented in the first quarter of 2017 | | |
| Indicator 1.1.4: New Sub-Decrees / Prakas initiated to revise mandates of DAC, PwDF, DWPwD and/or DRA in accordance with functional/ capacity analysis to clarify roles & functions | Role and responsibilities of DAC-SG, Department of Welfare for persons with disabilities, persons with disabilities foundation (PWDF) and Disability Rights Administration (DRA) have been reviewed and reformed in terms of institutional structures, leadership, management and functions. Within the 2016, DAC has reviewed and formulated several Sub decrees, Prakas and policies as follows: The inter-ministerial Prakas on Type and Level of Disability Classification has been reviewed. | Achieved as planned | DAC annual report |
| | DAC guiding document has been developed The National Accessibility Guideline has been developed and drafted. | | |
| | The inter-ministerial Prakas on Accessibility Guideline has been developed and drafted. | | |
| | The road map for proposal to amend the national disability law has been drafted. | | |
| | sub decree on financial reward to persons with disabilities on skills competition and special Olympic | | |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|---|---|---------------------------|
| Indicator 1.1.5: Extent to which funded activities in DAC-SG work plan achieved | and financial reward to trainers and trainer's assistant SOR CHOR NOR of Ministry of Interior on disability inclusion into the infrastructure of sub national government. Produced TV talk show through national television – TVK with specific topics below. Tuk Tuk for all Sport for persons with disabilities Understanding of Down Syndrome and Autism Pension for poor persons with disabilities in Community Sign Language in Cambodia Readiness of persons with disabilities in participation in election Intervention on access to justice for persons with disabilities Organized national and international events related to disability for instance international day for Down syndrome and Autism with involved around 500 children with Down syndrome and Autism, International children's Day and sport activity event for children and youth with intellectual disability. Organized international day of persons with disabilities which presided over by Prime Minister Hun Sen. Organized inclusive running to promote disability awareness among | Variance with Planned | |
| | the public and private sector as well as to celebrate the international day of persons with disabilities. About 95 % of budget had spent as planned. Organized field visit to support provincial DACs in terms of roles and responsibilities in supporting disability inclusion at sub national level. Reviewed and developed policies related to disability as described on output 1.1.4 | | |

| | Achieved Indicator Targets | Reasons for | Source of |
|--------------------------------------|---|------------------------------|---------------------|
| | | Variance with | <u>Verification</u> |
| | | Planned Cf | |
| | | Target (if any) | |
| | Organized and facilitated workshops | | |
| | and meetings as described on output | | |
| | 1.1.3 | | |
| Outcome 2: Increased | DAC conducted sensitization on | The national | DAC annual report |
| capacity of DAC to | NDSP and other policies related | NDSP | |
| coordinate | disability to DAWGs and provincial | reflection | |
| implementation of NDSP | DACs. It aimed to increase the | workshop has been shifted to | |
| | knowledge on NDSP and disability | Q3 2017 | |
| Indicator: Annual progress report on | awareness. The government ministries | Q3 2017 | |
| implementation of | and local government committed to improve the programmes/services for | | |
| NDSP presented to | persons with disabilities. | | |
| RGC | persons with disabilities. | | |
| Baseline: inception | | | |
| report | | | |
| Planned Target: | | | |
| Annual progress report | | | |
| presented to RGC by | | | |
| end of 1st quarter of | | | |
| each year starting 2016 | | | |
| Output 2.1: Implementar | tion of NDSP is monitored transparently acre | oss the whole-of-go | overnment |
| Indicator 2.1.1: | The NDSP M&E framework was not | Due to time | DAC annual report |
| DAC-SG staff trained | approved by President of DAC. UNDP | constraint and | |
| to efficiently implement | provided a support to DAC-SG in | the upcoming | |
| M&E framework to | developing NDSP implementation | election for | |
| monitor NDSP | plan followed by the NDSP M&E | commune/sangk | |
| | framework. | at in 2017, | |
| | • 35 DAC-SG staff received training on | DAC –SG | |
| | project management which focused on | didn't have time | |
| | reporting writing and monitoring. | to review the | |
| | | final draft | |
| | | NDSP M&E | |
| | | framework. It | |
| | | will be reviewed at the | |
| | | same time of | |
| | | the annual | |
| | | NDSP review | |
| | | workshop in Q1 | |
| | | 2017. | |
| Indicator 2.1.2: | • 17 DAWGs were established at line | The M&E tool | DAC annual report |
| DAWGs monitor & | ministries and several ministries had | for monitoring | • |
| report on NDSP | developed action plan with allocated | the | |
| implementation in | budget to support the implementation | implementation | |
| ministry/ institution | of the NDSP. | of NDSP is yet | |
| | • 20 provincial DAC were established | standardized. | |

| | Achieved Indicator Targets | Reasons for Variance with Planned | Source of Verification |
|---|---|---|--|
| | and received the sensitization workshops on role and responsibility of DAC at sub national level by DAC-SG. DAWGs and provincial DAC have | Target (if any) They line ministries used their own practices. | |
| | improved their knowledge on disability by engaged every activity related to benefits of persons with disabilities. | | |
| Indicator 2.1.3: Regular NDSP review meetings held with participation of line Ministries, DPOs and civil society Output 2.2: In-depth ana | This activity will be shifted to Q1 of 2017. Alysis of existing disability-related data source. | Due to internal staff restructuring within MoSVY and DAC, the NDSP review has been shifted. The Special Rapporteur on disability will visit Cambodia in 2017 which is great opportunity for Cambodia to invite the SP to join the workshop as well. | DAC annual report recommendations for |
| improvement of comprehe Indicator 2.2.1: Extent to which recommendations for improvement of disability data adopted by relevant ministries/institutions | It is progressing very well due to government through the MoP considered to include WG questionnaires into the upcoming census 2018 Some of the surveys conducted by National Institution of Statistic (NIS) | The census will be conducted in 2019 due to conflicted date of national election in 2018 | provided joint advocacy minute |
| 1 0 | has included WG questionnaires for instance the CDHS, CSES and CIP. nder CRPD is completed on time following a | T | |
| Indicator 2.3.1: Ministries /institutions and other stakeholders, including persons with disabilities and women, | • Around 150 participants from government, UN agencies, DPs, DPOs and persons with disabilities, attended the consultative workshop on reviewing the draft initial report on | Achieved as planned | Consultative workshop reportTraining reportAnnual DAC report |

| | Achieved Indicator Targets | Reasons for | Source of |
|---|--|--------------------------|--------------------------|
| | | Variance with | <u>Verification</u> |
| | | <u>Planned</u> | |
| | THICKE | Target (if any) | |
| participate in | UNCRPD. | | |
| consultative workshop | DAC in collaboration with | | |
| to finalise CRPD report | UNOHCHR provided training on | | |
| | UNCRPD to provincial DAC in | | |
| | Kampot. The training aimed to increase the knowledge of provincial | | |
| | DAC members on UNCRPD and how | | |
| | they improve their | | |
| | programmes/services for persons with | | |
| | disabilities at the sub national level. | | |
| Indicator 2.3.2: | DAC has requested to delay for | DAC-SG tried | |
| Cambodian CRPD | submission the initial report until mid- | to finalize some | |
| report submitted on | next year. | policies and | |
| time | | guidelines | |
| | | related to | |
| | | disability so | |
| | | that those | |
| | | achievements | |
| | | will be recorded | |
| | | in the initial | |
| | | report. DAC- | |
| | | SG had | |
| | | commitment to | |
| | | make those | |
| | | policies adopted by RGC. | |
| Component 2: Support | ing Disabled People's Organisations to rai | • | ratest the rights of all |
| persons with disabilities | | se the voice and p | Totect the rights of an |
| Outcome 1: Increased | • 13 out of 25 provincial DPOs have | | CDPO annual report |
| capacity of | improved their capacities to fulfill | | Joint field monitoring |
| CDPO/DPOs to fulfil | their mandates in terms of | | report |
| their mandates | organizational management, leadership | | • |
| Indicator : Extent to | and disability rights advocacy. The rest | | |
| which CDPO & DPOs | are being learnt and mentored by | | |
| fulfil their mandates | technical support group of CDPO. | | |
| Baseline: Inception of | | | |
| program | | | |
| Planned Target: 70% | | | |
| Satisfaction by 2018 Output 1 1: CDPO and I | DPOs canacitated to not as affactive channel. | for raising the voice | e of all persons with |
| disabilities | OPOs capacitated to act as effective channel | 101 Taising the voic | te of an persons with |
| Indicator 1.1.1: | CDPO was involved two sub- | Achieved as | CDPO annual report |
| CDPO/DPOs actively | committees facilitated by DAC-SG – | planned | 221 5 umaan topoit |
| participate in meetings | one is UNCRPD reporting and another | Pamilio | |
| of DAC or DAC | one is legislation sub-committee | | |
| committees/ working | • CDPO and DPOs were invited to | | |
| groups | participate in every | | |
| | , <u>, , , , , , , , , , , , , , , , , , </u> | <u> </u> | <u> </u> |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of <u>Verification</u> |
|--|---|---|----------------------------------|
| | meetings/workshops/events, organized by DAC-SG, as a representative for DPOs in Cambodia. CDPO actively participated in the key working groups facilitated by DAC, for instance the working group for organizing the IDPD, deaf day, autism day. | | |
| Indicator 1.1.2: CDPO/ DPOs regularly consult with ministries/ institutions to promote NDSP implementation | Through the active involvement of CDPO, the draft law on access to information has included disability into most articles. The draft law will be submitted to Council of Minister in early 2017. CDPO advocated with NEC to ensure persons with disabilities access to voter registration. 12,652 persons with disabilities have registered for the upcoming commune/sangkat election in 2017. CDPO offered their expertise to support NCDM to ensure persons with disabilities are involved and consulted on preparing the disaster risk management plan. CDPO also engaged disaster risk reduction program with Oxfam. Ongoing discussion between MoLVT and CDPO regarding the involvement of CDPO within the working group of National Employment Agency (NEA) to ensure persons with disabilities enable to access the job employment. | Achieved as planned | Annual CDPO report |
| Indicator 1.1.3: Extent to which outputs of DRIC-funded activities in CDPO work plan achieved | Radio programme broadcasted at 3 provinces – Svay Rieng, Siem Reap and Kampong Som. 19 radio programs were live and rebroadcasted every day from 6:00am to 10:00pm within 1,765times. It was about 80% of 4,725 callers (669 women with disabilities, 629 men with disabilities) impressed with the VPD program since they learnt a lot about the disability and development 13 disability awareness trainings | Achieved as planned | CDPO annual report |

| Achieved Indicator Targets | Reasons for | Source of |
|--|-----------------------|---------------------|
| | Variance with Planned | <u>Verification</u> |
| | Target (if any) | |
| provided to public and private | | |
| organizations to increase the | | |
| knowledge on disability among these | | |
| groups to ensure disability are included into their organizations. As | | |
| resulted, the participants understood | | |
| the definition of disability and | | |
| impairment and commitment to | | |
| promote the rights of persons with | | |
| disabilities within their workplaces. | | |
| Sale Management Policy (SMP) has | | |
| been developed by the resource | | |
| mobilization working group to mobilize both financial and non- | | |
| financial resources for VPD program | | |
| and other CDPO's programs. The SMP | | |
| was already adopted by CDPO | | |
| governing board. | | |
| • Internal M&E tool has been developed | | |
| and tested through the field monitoring | | |
| and desk review by the M&E and | | |
| Reporting Manager. However, the external evaluation is still needed in | | |
| terms of independent transparency and | | |
| accountability. | | |
| • The capacity of DPOs/WWDFs' | | |
| leaders have improved ability to | | |
| advocate with local authorities, | | |
| NGOs/CSOs and other stakeholders by | | |
| face to face, phone call, facebook | | |
| messenger and formal letters in terms of promoting the disability inclusion. | | |
| In addition to the communication for | | |
| advocacy, DPOs/WWDFs have | | |
| capacity to: | | |
| Review the Self-Help Group | | |
| guideline/policy and developed | | |
| DPO's Saving Fund Policy to | | |
| support the members and | | |
| organizations. o 19 DPOs placed the donation | | |
| boxes at pagodas, restaurants and | | |
| hotels to mobilize some funds to | | |
| support the SHGs and DPOs | | |
| activities as well as for | | |
| emergency support to members | | |
| for example medical treatment | | |

| | Achieved Indicator Targets | Reasons for | Source of |
|--------------------------|---|--------------------|--|
| | | Variance with | Verification |
| | | <u>Planned</u> | |
| | 1.6 | Target (if any) | |
| | and funeral events. | | |
| | o 232 persons with disabilities have | | |
| | already received the pension | | |
| | cards while 415 persons with | | |
| | disabilities have been registered | | |
| | in Pailin province. The pension | | |
| | fund committee led by Secretary | | |
| | of State of MoSVY confirmed the | | |
| | good collaboration with CDPO/DPOs to involve in the | | |
| | | | |
| | selection process which would help the committee to have better | | |
| | number of poor persons with | | |
| | disabilities. | | |
| | o 9 ramps with handrail had been | | |
| | built at health departments and | | |
| | commune's offices. | | |
| | Provide input to the commune | | |
| | councils regarding the disability | | |
| | issues/needs into the commune | | |
| | investment plans. | | |
| | CDPO organized DPOs network | | |
| | meetings regularly to provide space for | | |
| | learning and exchange knowledge and | | |
| | experience to promote the rights of | | |
| | persons with disabilities | | |
| | CDPO organized a national | | |
| | employment forum for diverse youth | | |
| | with disabilities to create a space for | | |
| | young persons with disabilities to | | |
| | share their concerns and learnt from | | |
| | other professional young persons with | | |
| | disabilities regarding job opportunities. | | |
| | In addition to learning from | | |
| | professional groups, the national | | |
| | employment agency (NEA) of MoLVT | | |
| | provided a tip for job applications and | | |
| | guidance for job interview. | | |
| | | | |
| | ds and priorities of women and children with | _ | _ |
| | ial disabilities & other excluded groups are in | ncluded and addres | ssed in CDPO/DPO plans |
| and activities | | | |
| Indicator 1.2.1: | CDPO applied gender, disability and | | CDPO annual report |
| Percentage of activities | child protection policies. 42 % of | | and gender policy |
| specifically targeting | DPO members are women with | | |
| women, girls, boys & | disabilities. However, following to | | |
| men with different | the gender policy, CDPO and DPOs | | |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|--|---|--|
| types of disabilities in CDPO's work plans | are committed to achieve the gender balance by 50%. 52 % of total callers are female and raised their voices up through the radio program. | | |
| Indicator 1.2.2: Percentage of women in governing body of CDPO, DPOs, Federations & SHGs increases by 10% | 22 % of CDPO governing board are women with disabilities 45 % of CDPO governing board functioned and actively provide strategy direction to CDPO. 33 % of CDPO staff are women with disabilities and played important role within the programme management. About 20% of CDPO member organisations led by female, and 40% of DPOs' governing board members are female. | | CDPO annual report |
| Indicator 1.2.3: CDPO's membership of DPOs representing women, girls, boys & men with different types of disabilities at national & sub-national level increases by 20% | 4 DPOs and 7 SHGs were established - 42% of members are women including women with disabilities | | CDPO annual report CDPO membership database |
| Output 1.3: CDPO and I practices | OPOs are actively involved in regional netwo | orks, exchange of e | experiences and good |
| Indicator 1.3.1: CDPO/ DPOs participate in regional events | CDPO and DPOs attended the regional conferences/meetings as follows: One CDPO staff attended training on disability and disaster risk reduction in Bangkok. Disability and SDGs organized by Disabled People International (DPI) International and UNDP in New Delhi, India Regional Dialogue on disability mainstreaming of the rights of persons with disabilities in the ASEAN community in Chiang Mai, Thailand organized by ASEAN Intergovernmental Commission on Human Rights (AICHR) | | CDPO annual report |

| | Achieved Indicator Targets | Reasons for Variance with Planned | Source of Verification |
|---|---|---|--|
| | | Target (if any) | |
| | DPI Asia Pacific Regional Assembly Sodality organized by DPI Japan, Tokyo. 2 representatives from DPOs had attended international meeting in Bangkok. It provided opportunity for DPOs to share their experiences/knowledge and learning from other countries. One CDPO staff attended the ASEAN Disability Forum meeting in Timor Leste to share good practices on UNCRPD and disability movement. One CDPO staff attended the regional meeting on rehabilitation in South Korea to learn the linkage of assistive devices and high tashpalage. | Target (if any) | |
| Indicator 1.3.2: Reports and other documents disseminated with lessons learned, exchange of knowledge, and good practices | high technology. Research report on "Disability Inclusion in the Voter Registration Processes". The challenges, lessons learned and good practices: A Pathway of Disability Inclusion in Political Rights DPO guideline Research on Disability and Employment Study on the Disability Inclusion within the Health sector – advocacy strategy for health | | CDPO annual report Final documents produced |
| Outcome 2: Effective inc | Light clusion and representation of diverse groups | of persons with dis | sahilities |
| | Os strengthened and new DPOs established | | |
| Indicator 2.1.1: # of new DPOs to represent women & children with disabilities & persons with diverse disabilities | 4 DPOs established in Svay Rieng, Tbang Khmum and Kandal provinces with collaboration with civil society organizations. 42% are women including women with disabilities | | CDPO annual report CDPO membership database |
| Indicator 2.1.2: # of capacity building activities for existing & new DPOs | 6 refresher trainings and one training on resource mobilization were provided to existing and new DPOs related to project management, disability inclusion and saving policy. | | CDPO annual report |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|--|---|--|
| | Provided 12 coaching on organization management and leadership to 25 DPOs | | |
| Component 03: Suppor | ting rehabilitation systems strengthening | | |
| Outcome 1: Strengthened rehabilitation sector leadership, planning and coordination Indicator: Rehabilitation sector coordination mechanism functioning efficiently & effectively Baseline: Inception of program Planned Target: 80% satisfaction by 2018 | The Options and recommendations proposed by the Rehabilitation Transition analysis report were agreed by the MoSVY, PWDF and the four rehabilitation INGOs, CDPO and other project counterparts following the consultation meeting on 31st May 2016. This report was adopted by MoSVY's Minister in September 2016, including the establishment of a national Rehabilitation Transition Committee to support the establishment of the next 5 years rehabilitation transition plan. Term of Reference of this committee (ToR) has been drafted and inputs from INGOs, government and DFAT consolidated. The establishment of this committee is expected by May 2017 following the approval letter from MoSVY's Minister. | The planned target is being revised to 2017 instead due to no funding for 2018. | Rehabilitation Transition Analysis Report Minutes of meeting with project counterparts on 31st May 2016 Support letter from MoSVY's Minister on September 2016 Draft ToR |
| Output 1.1: Government | nt capacity to lead, regulate and plan the r | rehabilitation serv | vice sector |
| Indicator 1.1.1: Quality information available on rehabilitation sector status, including finances, workforce and service provision for informed decision making enhanced service provision Baseline: Inception of program Planned Target: Capacity Needs Assessment; Disability analysis within CDHS and Rehabilitation Financing and workforce reports | The secondary analysis of the 2014 Cambodia Demographic Health Survey (CDHS) on healthcare utilization of persons with disabilities was finalized, and a dissemination workshop is planned on 14th February 2017 in collaboration with the National Institute of Statistics (NIS). The report on health and rehabilitation services for people with spinal cord injury in Cambodia has been drafted and circulated to key project counterparts for their final inputs. This final report is expected by early March 2017. The ToR for the rehabilitation financing study is finalized and it is anticipated that the Final report will | | The 2014 Cambodia Demographic Health Survey (CDHS) on healthcare utilization of persons with disabilities final report Health and rehabilitation services for people with spinal cord injury in Cambodia draft report The ToR for the rehabilitation financing study |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|--|---|---|--|
| | be completed by early 2nd quarter 2017. | | |
| Output 1.2: Establishm | ent of a rehabilitation sector leadership a | nd coordination m | nechanism |
| Indicator 1.2.1: Physical rehabilitation sector leadership and coordination mechanism established and functioning Baseline: Inception of program Planned Target: By 2016 5 entities represented; DPO member; At least 2 managerial meetings per year | The ToR for the establishment of Rehabilitation Transition Committee was consolidated and functioning of this committee is expected by May 2017 following the approval latter by MoSVY's Minister. 12-15 members are expected, including MoEF, MoH and CDPO. The main objective of this committee is to oversee the development and adoption of a five-year Physical Rehabilitation Sector Transition Plan In addition, two meetings were organized between PWDF. INGOs and WHO and several meetings were organized on the handover of the Orthopedic Components Factory from ICRC to PWDF. Main results were achieved including development of prices list for the orthopedic components for local and imported, costing for PRC services for the contract with National Social Security Fund (NSSF), a joint procurement committee between PWDF-INGOs to improve the procurement of supplies for the sector and to document lessons learned to support the handover process. | Target of this indicator has been proposed for revision | ToR of the Rehabilitation transition committee Minutes of the meetings ToR of a joint procurement committee |
| | nt of MoH's role in rehabilitation sector s | trengthening & se | ervice provision |
| Indicator 1.3.1: MoH participates in rehabilitation sector leadership mechanism Baseline: Inception of program Planned Target: At least 2 times per year | As confirmed by the Director of PWDF, a representative of MoH has been considered as a member of the PWDF's governing board Two representatives from the Provincial Health Department of the Kampong Cham and Tbong Khmum provinces were participated at the provincial coordination committee as part of the Provincial Rehabilitation Demonstration Project (PRDP) The revision of the joint national | | Revised sub-decree of PWDF's governing board PRDP report ToR for the revision of national Physiotherapy standards Rehabilitation guidelines for Stroke and Trainings report Rehabilitation |

| | Achieved Indicator Targets | Reasons for | Source of |
|---|--|---|--|
| | | Variance with | <u>Verification</u> |
| | | Planned Target (if any) | |
| | considered by MoH and MoSVY. ToR finalized and establishment of technical committee will be ready by early March 2017 Rehabilitation Guidelines for Stroke was adopted by MoH and a launching event and two separate three day training workshops for over 50 health and rehabilitation workforces were organized | Target (if any) | guidelines (in Khmer) |
| | Basic rehabilitation intervention of some selected health conditions are now included in the new Minimum Package of Activities (MPA) at health center level | | |
| Indicator 1.3.2: Disability and rehabilitation trainings for hospital, health centre & village volunteers through PRDP Baseline: Inception of program Planned Target: # of trainings by end of 2016; # of Civil Servants trained Indicator 1.3.3: Good practice & lessons learned from Provincial Development Rehabilitation Project (PRDP) implemented in other provinces Baseline: Inception of program Planned Target: 2 provinces by 2017 | A total of USD 19,665 was provided to Handicap International (HI) for the period of Jan 2016-Jun 2017 to contribute to the implementation of PRDP in two provinces of Kampong Cham and Tbong Khmum. There were 500 new patients who accessed PRC services in Kampong Cham which represented an increase of 29% compared to 2014 (without support). • This PRDP is covered 4 Operational Districts/Referral Hospitals and 20 Health Centers. • 500 posters on referral pathways for clients with a Spinal Cord Injury (SCI) and 12,000 leaflets on the referral pathway for clients with Torticollis, Fracture, and Hemiplegia distributed to 20 HC and 457 Village Health Support Groups (VHSGs). • 513 (20 Civil servant of HCs, 457 VHSG and 36 Service user) were trained on identification and referral and over 80% of participants have | The documentation of good practice and lesson learnt is expected by July 2017 | PRDP Annual Report 2016 Training report on the rehabilitation guidelines for Stroke |
| | improved their knowledge. There were 63 (90% civil servant) health and rehabilitation workers from hospitals, PRC, University of Health Sciences (UHS) and Cambodia School of Prostheses Orthoses (CSPO) attended two separate three day trainings and | | |

| | Achieved Inc | dicator Targets | Reasons for Variance with | Source of Verification |
|--|--|--|---|--|
| | | | Planned Target (if any) | vermeation |
| | launching workshop Guidelines for Stro | ps on Rehabilitation ke | | |
| Output 1.4: Developmen | nt of a national visio | on for rehabilitation | and support service | es provision |
| Indicator 1.4.1: Working group established & functional to develop national rehabilitation strategy Baseline: Inception of program Planned Target: By end of 2017; # of entities represented in working groups; Quarterly meetings | of Rehabilitatio committee was of this committee | drafted. The members ee will include rom MoH, MoEF, | | Draft ToR of the Rehabilitation transition committee |
| Indicator 1.4.2: National rehabilitation strategy developed and adopted Baseline: Inception of program Planned Target: By 2018 | Not yet applicable | | The development of National Rehabilitation Strategy will start in June and final document is expected to be ready by the end of 2017. | |
| Outcome 2: Increased a | ccess to quality reh | abilitation services | ond of 2017. | <u> </u> |
| Indicator 2.1: Increase in # of people accessing all PRC services Baseline: 27,225 people (2013) Planned Target: Total # of clients; # of Women, # of Girls; # of Boys; # of landmine/ERW survivors; # of new/replacement prostheses; # of repairs | Number of all b services from th | peneficiaries received ne 11 PRCs was ed by 3% from 27,225 | The main reasons contributed to this decrease were: • Absence of clear handover plan from INGOs to PWDF • Decreased quantity of orthopedic components delivery to PRCs due to the handover of | PRSS Reports from partners 11 PRCs Statistics |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) National Orthopedic Components Factory (OCF) from ICRC to | Source of Verification |
|--|--|---|---|
| Indicator 2.2: Increase | Number of all clients received | PWDF at the beginning of 2016 Delayed in procurement process under the government system This increase | PRSS Annual report The PMDE |
| in people accessing services at Takeo and Siem Reap PRC Baseline: 2383 people (2013) Planned Target: Total # of clients; # of Women, # of Girls; # of Boys; # of landmine/ERW survivors; # of new/replacement prostheses; # of repairs | services from Takeo and Siem Reap PRCs was increased by 18% from 2,383 in 2013 to 2,813 in 2016 Detail Data Number 2016 Total # of 2,813 (16 % clients Female, 14% <18y, 3% landmine/ERW New 488 (11 % placement of Prostheses 2013) and Orthoses # of Repairs 1,460 (15 % increased vs 2013) | was contributed by Siem Reap PRC (32 %) especially link to the mobile workshop project introduced in 2016 in collaboration with ICRC. | from PWDF • 11 PRCs Statistics |
| Indicator 2.3: # of people accessing rehabilitation services through PRSS Baseline: Inception of program Planned Target: Total # of clients; # of Women, # of Girls; # of Boys; # of landmine/ERW survivors | A total of USD 240,000 was provided to PWDF and INGOs (Exceed, HI and VIC) to support the transition process to 9 of the 11 PRCs and one OCF Number of all clients received services from these 9 PRCs was decreased by 10% from 16,662 in 2013 to 15,078 in 2016 Detail Data Number 2016 Total # of 15,078 (32 % clients Female, 41% <18y, 13 % | The same reasons as indicated in Indicator 2.1 PRCs under Exceed managemen t were the most affected (-29 % of the total client | PRSS Annual reports 11 PRCs Statistics |

| | Achieved Indicator Targets | Reasons for Variance with | <u>Source of</u> Verification |
|---|--|--|--|
| | | Planned Target (if any) | |
| | landmine/ERW New placement of prostheses and Orthoses # of Repairs 5,280 (1% decreased vs 2013) In addition, there were 13,379 orthopedic components produced and | 4,421 in 2016 vs 6,238 in 2013 followed by PRCs under VIC (-6 % of the total clients 5,585 in 2016 vs | |
| | delivered free of charge to 11 PRCs. | 5,923 in 2013) | |
| Indicator 2.4: % of users reporting satisfaction with quality of PRC services Baseline: TBD Planned Target: 75% user satisfaction | There were 80 clients of Siem Reap PRC assessed and 90% completely satisfied and 10% moderately satisfied with the general services. There were 236 clients of Kampong Cham PRC assessed and 98% were highly satisfied with the general service. There were 60 clients of Exceed's PRCs assessed and 62% completely satisfied and 38% satisfied with the | The Client Satisfaction Survey's questionnaire was drafted and the final product will be included in the new Standard Working Procedure | PRSS Reports from HI, PWDF and Exceed Exceed and Client's Satisfaction Survey |
| _ | quality of services. pacity of MoSVY and PWDF to effectivel | | nanage Physical |
| Indicator 2.1.1: # of PRCs implementing PRC management system Baseline: Standard Working Procedures (SWP) Planned Target: New SWPs by 2016; New SWPs implemented in 11 PRCs from 2016 | As indicated in indicators 1.3.1, the revision of joint national Physiotherapy standards between MoH and MoSVY were agreed. In addition, the Client Satisfaction Survey questionnaire was developed and the PRC data collection was introduced to PRCs and national PRC statistics report is being consolidated and final report is expected by early March 2017. | In addition to these tools we'll collaborate with PWDF and INGOs to review other relevant tools related to financial management, procurement and administration that are part of the SWP. The full revision of SWP is expected by June 2017. | Concept Note for the revision of the joint national Physiotherapy Standards and minutes of meetings Client Satisfaction Survey questionnaire National PRC statistics |
| Indicator 2.1.2 : Tools | As mentioned above, the Client | As proposed | Client Satisfaction |

| | Achieved Indicator Targets | Reasons for Variance with | Source of Verification |
|---|---|--|---|
| 11. 6 | | Planned Target (if any) | 9 |
| to measure quality of services & satisfaction of users developed & operationalized Baseline: No standard tools available Planned Target: Standardized tools available by 2016; 11 PRCs using standardized tools from 2016 | Satisfaction Survey questionnaire was developed in consultation with PWDF and 4INGOs representatives and national PRC statistics report is being consolidated. | under the revised M&E Framework this timeframe has been proposed to extend to 2017. | • National PRC statistics |
| Indicator 2.1.3: Sustainable service models developed & adopted Baseline: Inception of program Planned Target: Cost calculation tools available by 2016 | Price lists for local and imported orthopedic components of the Orthopedic Component Factory were developed. Costing of PRC services was introduced for the provision of services to garments workers who covered by the National Social Security Fund (NSSF) The calculation tool was piloted at the Kampong Cham PRC. This tool was discussed with PWDF, ICRC, Exceed, VIC on 23rd February 2016. | The final report of HI's cost calculation tool will be available during first semester of 2017. | Minutes meeting Price lists of OCF and PRC's services PRSS Reports from HI |
| Indicator 2.1.4: % of civil servants working in PRCs Baseline: 36% of total workers Planned Target: At least 60% of total workers by 2018 | • The number of civil servants slightly decreased from 36% of 339 staff in 2013 to 35% of 317 staff in 2016. However, if we include the government contractual staff it's reached to 79% in 2016 vs 78% in 2013 | This indicator is being requested for revision by including number of government contractual staff This line with WVI | List of PRC staff O CRD Critishings |
| | Based Rehabilitation (CBR) implemente | | |
| Indicator 2.2.1: Capacities to implement CBR in line with WHO CBR Guideline principles & approaches enhanced Baseline: Inception of program Planned Target: Biannual Rehabilitation and CBR forum; | The ToR of National CBR Coordination Committee finalized following the consultation with MoSVY, CBR operators and Disabled People Organization (DPO). The rehabilitation sector study tour on leadership and CBR in Malaysia was organized in March 2016 and eight people at policy and operation levels from MoH, MoSVY, Disability | The national CBR coordination committee will be ready by 2 nd quarter 2017 after the approval from MoSVY's Minister | ToR of the National CBR Coordination Committee Minutes of meeting Rehabilitation sector study tour report |
| and Colt Iolum, | | | 0 of 51 |

| | Achieved Indicator Targets | Reasons for | Source of |
|--|---|------------------------------|---------------------|
| | | Variance with | <u>Verification</u> |
| | | Planned Target (if any) | |
| MoSVY & MoH participate in Asia | Action Council (DAC) and DPO were participated. | raiget (ii any) | |
| Pacific CBR forum; MoSVY & MoH | The Secretary of State and the Director of welfares department for | | |
| participate in global CBR forum | persons with disabilities of MoSVY were supported to attend the 2 nd | | |
| | World CBR Congress in Malaysia in September 2016. In addition, two persons from the Disabled People | | |
| | Organizations were full sponsored by the 2 nd world congress through WHO | | |
| Indicator 2.2.2: | Not yet applicable | The above | |
| National CBR Guideline reflects the | | mentioned CBR committee will | |
| WHO CBR Guideline | | be responsible | |
| principles and | | to oversight the | |
| approaches | | revision of the | |
| Baseline: 2010 | | national CBR | |
| National CBR | | which is | |
| Guideline | | planned by 3 rd | |
| Planned Target: | | quarter 2017 | |
| Revised CBR Guideline | | | |
| adopted by 2017 | | | |
| Output 2.3: Increased g | overnment financial investment in rehabi | litation services d | elivery |
| Indicator 2.3.1: RGC | A total of USD 2,852,804 was planned | The figures of | PRSS and PRC |
| investment in physical | for 2016 (except for the Kien Khlang, | real | summary data |
| rehabilitation increased | Kratie and Prey Veng were based on the | expenditures | |
| against baseline | same data from 2013 of the amount | are not yet | |
| Baseline: 27% of total | contributed from PWDF/MoSVY) with | available. | |
| expenditure of 11 PRCs | 33% contributed from PWDF/MoSVY, | Hopefully, this | |
| and Component Factory | 61% from INGOs and 6% from WHO. | information will | |
| Planed Target: At | | be available | |
| least 50% of total | | through the | |
| expenditure by 2018 | | Rehabilitation | |
| | | refinancing report that is | |
| | | planned by 2 nd | |
| | | quarter 2017. | |
| Component 04: Inclusiv | e governance and inclusive community de | | |
| Outcome 1 Persons with disabilities have | | | |
| access to community- | | | |
| based services through | | | |
| the Cambodia | | | |
| Disability Inclusive | | | |
| Development Fund | | | |

| | Achieved Indicator Targets | Reasons for | Source of |
|-------------------------------|-----------------------------|-----------------|---------------------|
| | | Variance with | Verification |
| | | <u>Planned</u> | |
| (CDIDE) 1 | | Target (if any) | |
| (CDIDF) and support | | | |
| from their local | | | |
| decision-makers in | | | |
| reducing barriers to | | | |
| participation | | | |
| Indicator: | | | |
| Baseline: Inception of | | | |
| CDIDF | | | |
| Planned Target: | | | |
| Output 1.1 Persons | | | |
| with disabilities have | | | |
| increased opportunities | | | |
| to participate and | | | |
| contribute to | | | |
| community life in | | | |
| CDIDF-funded | | | |
| program areas | | | |
| Indicator 1.1.1 Persons | 463 PwDs (F: 175, CwDs: 66) | | CDIDF partner |
| with disabilities are | | | reports |
| represented in | | | • UNICEF |
| Commune Council, | | | monitoring |
| WCCC and/or CCWC | | | reports |
| to contribute to | | | |
| decision-making | | | |
| processes | | | |
| Baseline: Inception of | | | |
| CDIDF | | | |
| CDIDI | | | |
| Planned Target: 12 | | | |
| Commune Councils, 5 | | | |
| WCCC, 12 CCWC, 20 | | | |
| PWDs, 12 women | | | |
| Indicator 1.1.2 | 403 communes | | CDIDF partner |
| Number of commune | | | reports |
| interventions carried | | | • UNICEF |
| out to remove barriers | | | monitoring |
| to participation for | | | reports |
| persons with disabilities | | | |
| Baseline: Inception of | | | |
| CDIDF | | | |
| CDIDI | | | |
| Planned Target: 24 | | | |
| communes, 24 | | | |
| activities | | | |
| | | 1 | |

| | Achieved Indicator Targets | Reasons for Variance with Planned | Source of Verification |
|--|---|---|--|
| Indicator 1.1.3 Persons with disabilities enjoy increased participation and inclusion in community life Baseline: Inception of CDIDF | 168 SHG with 2, 348 members (F: 983 and PwDs: 1,218) Direct intervention to 13,922 PwDs (F: 6,344, including CwDs: 6,797 of which 2,872 girls) | Target (if any) | CDIDF partner reports UNICEF monitoring reports |
| Planned Target: 12 SHGs supported, # of members, # of PWDs, # of women | | | |
| Output 1.2 Improved access to services for persons with disabilities at the community level in CDIDF-project areas | | | |
| Indicator 1.2.1 Civil society organisations (CSO) supported to deliver services to persons with disabilities and track service provision | 15 grant partners agreements with UNICEF and to achieve planned results and implement the corresponding activities. | | CDIDF partner reports UNICEF training reports Satisfaction survey tool |
| Baseline: Inception of CDIDF | | | |
| Planned Target: 15 CSOs receiving CDIDF grants, 6 capacity building activities for CDIDF partners, 75% CSO satisfaction | | | |
| Indicator 1.2.2 Persons with disabilities have access to community-based services through CDIDF projects | A total of 360,054 beneficiaries (with and without disabilities) directly and indirectly benefited from disability-inclusive and specific support services in the 14 targeted provinces including Phnom Penh Capital. | | CDIDF partner reports UNICEF monitoring mission reports |
| Baseline: Inception of CDIDF Planned Target: 12 provinces, 12 districts, 24 communes, 12 new | In total, 13,922 persons with disabilities directly benefitted from the CDIDF initiatives, of which 6,797 (2,872 girls) were children with disabilities, representing 50% of total direct | | |

| | Achieved Indicator Targets | Reasons for | Source of |
|--|--|---|-------------------------|
| | | Variance with | <u>Verification</u> |
| | | Planned Target (if any) | |
| services, # of PWDs: # | beneficiaries. | (====================================== | |
| of women, # of girls, # | | | |
| of boys, # of mine/ | | | |
| ERW survivors | 2670011111111111111111111111111111111111 | | |
| Indicator 1.2.3 | 36,790 indirect beneficiaries (persons | | • CDIDF partner |
| Families indirectly benefit from CDIDF | with disabilities) were reported in 2016 | | annual reports |
| projects | | | |
| projects | | | |
| Baseline: Inception of | | | |
| CDIDF | | | |
| | | | |
| <u>Planned Target:</u> # of | | | |
| families, # of people | | | |
| Indicator 1.2.4 | 108 ramps; | | CDIDF partner |
| Accessibility of public | 53 accessible toilets built in schools and | | reports |
| spaces in CDIDF | Health Centres; | | • UNICEF |
| project areas improved | 1 renovated house | | monitoring |
| Baseline: Inception of | | | reports |
| CDIDF | | | |
| | | | |
| Planned Target: # of | | | |
| new ramps, # of new/ | | | |
| adapted spaces | | | |
| Output 1.3 On-going | | | |
| documentation | | | |
| /dissemination of | | | |
| experiences of the | | | |
| CDIDF to influence | | | |
| policy dialogue Indicator 1 3 1 | Progress reports from 15 CDIDF partners | | • CDIDE partner |
| Indicator 1.3.1 Reports and human | available. | | • CDIDF partner reports |
| interest stories | 4.414010. | | UNICEF monitoring |
| produced and | 5 blogs produced on CDIDF partner | | reports |
| disseminated on | work. | | Topotto |
| CDIDF-funded projects | | | |
| | 2 capacity development workshop report | | |
| Baseline: Inception of | | | |
| CDIDF | | | |
| Dlanned Towarts 6 | | | |
| Planned Target: 6 | | | |
| reports or human interest stories | | | |
| Outcome 2 Increased | | | |
| capacity of subnational | | | |
| decision-makers in | | | |
| decision makers in | | <u> </u> | |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|---|---|--|
| selected provinces, districts and communes to achieve the rights of persons with disabilities | | Target (II any) | |
| Indicator: Baseline: Planned Target: | | | |
| Output 2.1 Government officials in selected provinces, districts and communes have greater knowledge and skills resources to improve the lives of persons with disabilities | | | |
| Indicator 2.1.1 Situation analysis identifies barriers to the participation of persons with disabilities and solutions for removal Baseline: None – no up | Target achieved; activity completed. Report available in English and Khmer. | | Situation analysis report Situation analysis summary presentation |
| to date sitan available. Planned Target: June 2014 | | | |
| Indicator 2.1.2 Selected provinces, districts and communes for implementation of activities Baseline: 9 provinces, 11 districts, 101 communes | Target areas identified and agreed upon with MoI for 2014 and 2015. | In 2016, new target areas were identified and agreed upon between MoI and UNICEF to align with UNICEF's new Country | Situation analysis MoI/NCDD report DRIC report |
| Planned Target: 9 provinces, 11 districts, 50 communes | | Programme and geographic focus areas of work. Realignment with UNICEF's programming areas is to converge with | |

| Variance with Planned Target (if any) Other UNICEF interventions and maximize the reduced funds in a more concentrated manner. The capacity development work, training as rolled out in 1 district of Ratanakiri, 1 district o | | Achieved Indicator Targets | Reasons for | Source of |
|--|-------------------------|---|-----------------|-------------------|
| Training of Trainers package was developed as part of consultancy which rating developed for subnational decision-makers Baseline: Inception of programme Planned Target: By third quarter 2015 Indicator 2.1.4 To To no disability inclusion conducted for subnational decision-makers Baseline: Inception of programme Planned Target: ToTs, 10 attoinal trainers, 45 sub-national trainers, 46 sub-national trainers, 47 sub-national trainers, 47 sub-national trainers, 48 sub-national trainers, 48 sub-national trainers, 49 pWDs Indicator 2.1.5 Indicator 2.1.5 Indicator 2.1.5 Indicator 2.1.6 To To consultancy which rating the reduced finnds in a more concentrated manner. The capacity work, training as rolled out in 1 district of Rattambang. Indicator 2.1.3 Training of Trainers package was development work, training as rolled out in 1 district of Rattambang. Indicator 2.1.3 Training of Trainers package was development work, training as rolled out in 1 district of Rattambang. Indicator 2.1.3 Training of Trainers package was development work, training arcilled in the reduced finnds in a more concentrated work, training arcilled in the reduced finnds in a more concentrated work, training arcilled in the reduced finnds in a more concentrated work, training arcilled work, training arcilled work, training arcilled work, training arcilled until district of Rattamakir, 1 district of Rattamakir, 1 district of Rattamakir, 1 district o | | | | |
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| Indicator 2.1.3 Training of Trainers package was developed as part of consultancy which ran from Q2-Q4 of 2015. This included training materials and ToT course outline with disabilities developed for subnational decision-makers Baseline: Inception of programme Planned Target: By third quarter 2015 Baseline: Inception of programme Planned Target: ToTs. 10 national trainers, 45 sub-national trainers, 26 (2) from CDPO/DPO. Indicator 2.1.5 | | | Target (if any) | |
| and maximize the reduced funds in a more concentrated manner. The capacity development work, training as rolled out in 1 district of Rattanakiri, 1 district | | | other UNICEF | |
| the reduced funds in a more concentrated manner. The capacity development work, training as rolled out in 1 district of Ratamakiri, 1 district of Ratamakiri, 1 district of Battambang. Training of trainers (ToT) course on inclusion of persons with disabilities developed for subnational decision-makers Baseline: Inception of programme Planned Target: By third quarter 2015 Baseline: Inception of programme Planned Target: ToTs, 10 national trainers, 45 sub-national trainers, 45 sub-national trainers, 45 sub-national trainers, 45 sub-national trainers, 26 (2) from CDPO/DPO. Indicator 2.1.5 In | | | interventions | |
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| ran from Q2-Q4 of 2015. This included training materials and ToT course outline in English and that was draft translated into Khmer. Planned Target: By third quarter 2015 Indicator 2.1.4 ToT on disability inclusion conducted for subnational trainers Passeline: Inception of programme | | | | <u> </u> |
| training materials and ToT course outline in English and that was draft translated into Khmer. Completed | _ | | | |
| with disabilities developed for subnational decision-makers Baseline: Inception of programme Planned Target: By third quarter 2015 | | | - | • |
| developed for subnational decision- makers Description of programme | 1 | 1 | | report |
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| programme (DDC Deputy Directors (3), DDC technical staff (3), Deputy Governors (2), Planned Target: ToTs, 10 national trainers, 45 Capacity building Advisors – provincial level (2) and 11 [Program coordinator (1), Program Managers/officers (4), PWDs (2) from CDPO/DPO. Indicator 2.1.5 10 sub-national trainings • MoI/NCDD reports | D 11 7 2 | | | |
| technical staff (3), Deputy Governors (2), NCDD Capacity building Advisors (2), Capacity Building Advisors – provincial sub-national trainers, 30% women, 2% PWDs Technical Staff (4) and DPO Directors (2) from CDPO/DPO. Indicator 2.1.5 10 sub-national trainings technical staff (3), Deputy Governors (2), NCDD Capacity building Advisors (2), Capacity Building Advisors – provincial level (2) and 11 [Program coordinator (1), Program Managers/officers (4), Technical Staff (4) and DPO Directors (2) from CDPO/DPO. Indicator 2.1.5 10 sub-national trainings • MoI/NCDD reports | | <u>-</u> · | | |
| Planned Target:ToTs, 10 national trainers, 45 sub-national trainers, 30% women, 2%NCDD Capacity building Advisors (2), Capacity Building Advisors – provincial level (2) and 11 [Program coordinator (1), Program Managers/officers (4), Technical Staff (4) and DPO Directors (2) from CDPO/DPO.MoI/NCDD reportsIndicator 2.1.510 sub-national trainings• MoI/NCDD reports | programme | 1 ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` | | |
| 10 national trainers, 45 sub-national trainers, 30% women, 2% PWDs Indicator 2.1.5 Capacity Building Advisors – provincial level (2) and 11 [Program coordinator (1), Program Managers/officers (4), Technical Staff (4) and DPO Directors (2) from CDPO/DPO. Indicator 2.1.5 10 sub-national trainings • MoI/NCDD reports | | 1 | | |
| sub-national trainers, 30% women, 2% PWDs Indicator 2.1.5 I o sub-national trainings level (2) and 11 [Program coordinator (1), Program Managers/officers (4), Technical Staff (4) and DPO Directors (2) from CDPO/DPO. Indicator 2.1.5 I o sub-national trainings • MoI/NCDD reports | ' | | | |
| 30% women, 2% PWDs (1), Program Managers/officers (4), Technical Staff (4) and DPO Directors (2) from CDPO/DPO. Indicator 2.1.5 10 sub-national trainings • MoI/NCDD reports | · · | | | |
| PWDs Technical Staff (4) and DPO Directors (2) from CDPO/DPO. Indicator 2.1.5 10 sub-national trainings • MoI/NCDD reports | ŕ | | | |
| (2) from CDPO/DPO. Indicator 2.1.5 10 sub-national trainings • MoI/NCDD reports | * | | | |
| Indicator 2.1.5 10 sub-national trainings • MoI/NCDD reports | PWDs | ` ′ | | |
| T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | (2) from CDPO/DPO. | | |
| Trainings on disability 357 (73 females [20%]) participants • ToT reports | | 10 sub-national trainings | | MoI/NCDD reports |
| - 1011cp01tb | Trainings on disability | 357 (73 females [20%]) participants | | ToT reports |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|---|---|---|
| inclusion conducted for sub-national decision- makers | 3 provinces; 3 districts (1 district in each province); 21 communes | | UNICEF monitoring |
| Baseline: Inception of programme | | | |
| Planned Target: 5 trainings, 50 communes, 150 participants, 30% women, 2% PWDs | | | |
| Indicator 2.1.6 Sensitisation workshops conducted to raise awareness on disability issues at provincial level | Target achieved in 2014; 2 provincial workshops were held in 2014 with 211 participants, 50 women, 8 PwD. | Completed. | Workshop reports |
| Baseline: Inception of programme | | | |
| Planned Target: 2 workshops, 200 participants: 30% women, 2% PWDs | | | |
| Indicator 2.1.7 Sensitisation workshops conducted to raise awareness on disability issues at district level | Target achieved. 4 district workshops completed with 216 participants, 59 women, 8 PwD. | Completed. | Workshop reports |
| Baseline: Inception of programme | | | |
| Planned Target: 3 workshops, 200 participants: 30% women, 2% PWDs | | | |
| Indicator 2.1.8 Knowledge, attitudes and practices of local decision-makers to promote inclusive local | Level of knowledge: 3% outstanding, 35% good and 49% basic Improved attitudes: 93% Only anecdotal evidence of improvement | | Questionnaire distributed at workshops Assessment survey conducted by MoI in |
| governance and | in practices identified (see above | | 2016 |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|--|--|--|--|
| community development improved Baseline: TBD Planned Target: 50% improvement in knowledge, 50% improvement in attitudes, 50% | narrative) | Target (if any) | |
| improvement in practices Indicator 2.1.8 Directory of accessible services for persons with disabilities developed and disseminated Baseline: Draft directory Planned Target: Online database, 2,000 directories printed, 2,000 directories disseminated | Draft directory produced as part of sitan. Revision of online service directory, hosted by DAC, in collaboration with GIZ and HI. | This activity will no longer be pursued. DAC commitment and understanding of the directory is unclear and GIZ continues to provide assistance so UNICEF financial inputs no longer | Directory of services DRIC report |
| Indicator 2.1.10 MoI/NCDD engaged to promote inclusive governance and community development in target areas Baseline: Inception of the programme Planned Target: Six weekly meetings with UNICEF, agreed work plan, ToT endorsed by MoI Output 2.2 Persons | On track. UNICEF regularly meets with MoI and communicates via telephone and e-mail. Annual Work Plan 2016 has been fully and successfully implemented. The 2017 work plan has | required. | MoI/NCDD report, UNICEF meeting notes, MoI/NCDD work plan |
| with disabilities have increased opportunities | | | |

| | Achieved Indicator Targets | Reasons for Variance with Planned Target (if any) | Source of Verification |
|---|---|---|---|
| to contribute to decision-making processes in target areas | | | |
| Indicator 2.2.1 Persons with disabilities included in commune planning processes in target communes Baseline: 85 % of 41 surveyed communes | Baseline established in 2014. 86% of surveyed communes in 2016 report including persons with disabilities in planning processes. | | UNICEF area reports UNICEF monitoring reports Survey tool |
| Planned Target: 100% of surveyed target communes, # of communes surveyed | | | |
| Output 2.3 On-going documentation /dissemination of experiences to influence policy dialogue | | | |
| Indicator 2.3.1 Reports and human interest stories produced and disseminated Baseline: Inception of | 3 activity reports on the sub-national training. | | UNICEF monitoring missions Reports/document s produced. |
| Planned Target: 4 reports or human interest stories | | | |

Annex 2

Success stories

DRIC Impact story

Cambodian women with disabilities experience multiple disadvantages resulting from the interplay between gender, disability and poverty. They lack equal access to education, healthcare services, social and economic social justice and political participation. They also experience almost five times higher rates of emotional, physical and sexual violence by household members (other than partners) and are often considered less valuable and more burdensome within the household.

One of the main objectives of the DRIC is to create more opportunities for the participation of women with disabilities in the politico-economic as well as socio-cultural life. Since the program has begun, significant changes can be seen in representation of women with disabilities within Cambodian Disabled People's Organization (CDPO) and its members in the form of Disabled People Organizations, including Women with Disabilities Forum. Around 50 % of CDPO staff are women and 42 % of the members of DPO's governing boards are women with disabilities. In 2016, out of 463 Commune Council members in target areas 175 were women with disabilities contributing to more inclusive, participatory and accessible provincial governance. Out of 13,922 persons with disabilities who received services, 6,344 were women with disabilities and 6 612 women accessed physical rehabilitation services. The excerpt below illustrates one example of how DRIC has contributed to the realization of rights of women with disabilities.



Sokchan (middle) with training colleagues. Credit: CDPO

"Ms. Sokchan, a 34 year old mother of two, is living in Battambang province. In 1993, Ms. Sokchan suffered an accident that left her paralyzed for life. After she was released from hospital, Ms. Sokchan received a wheelchair, counselling and other services from the physical rehabilitation centre (PRC) in Battambang. She was also reffered to vocational training in sewing and opened a small tailor shop in Battambang town. Currently she is running a successful business and collaborates with different souvenirs shops in Battambang to sell her products and also sells her products in some restaurants and shops in Phnom Penh.

Ms. Sokchan's business is doing well and with the earnings she was able to expand and employ more women with disabilities. Ms. Sokchan has also joined Disabled People's Organisation in Battambang (BDPO) and was elected as Director of Women with Disabilities Forum (WWDF). In this role she advocates and raises awareness about the rights of women with disabilities at the community level. She also leads a basketball team for women with disabilities and provides sewing training to other women with disabilities to increase their income generation opportunities.

In the future, she wishes to expand her handicraft business and mobilise financial and non-financial resources from the private sector and development partners to have a proper location with fully equipped sewing machines to meet increasing customer demand."

Additional success stories are accessible via the following links:

https://unicefcambodia.blogspot.com/2016/11/volleyball-for-all.html
https://unicefcambodia.blogspot.com/2016/11/cambodian-teenager-defies-disability.html
https://unicefcambodia.blogspot.com/2016/10/deaf-students-reaping-rewards-from.html
https://unicefcambodia.blogspot.com/2016/08/bridging-gap-creating-equal-life-and.html
https://unicefcambodia.blogspot.com/2016/02/the-birth-of-cambodias-first-accessible.html