

**DFAT Management Response
ACCESS Independent Evaluation**

RELEVANCE

Key Findings	Response	Explanation	Action Plan	Timeline
1. The review found that “ACCESS was found to be highly relevant and aligned with the development policy and thematic priorities of the RGC and Australia on support to survivors of GBV and people with disabilities. The program has played a formative role in the refinement and updating of policies and national standards as one of the single largest donor-contributors to the implementation of RGC commitments in these sectors.”	Agree	DFAT agrees that the program has made a significant impact in strengthening Cambodia’s policies and national standards related to GBV and support for people with disabilities.	The strength of the ACCESS program will be built upon in the successor program design.	December 2022-March 2023
2. The review found “where relevance is less strong in terms of the ACCESS delivery modality... Overall, the ACCESS delivery modality has not proven to be an efficient implementation approach... The CIM is contrary to the very coordination of partners that is needed for GBV and disability service delivery. Rather than promoting coordination of IPs’ GBV and disability activities, the CIM created a competitive environment where IPs were vying for resources.”	Agree	DFAT agrees that the CIM has not facilitated sectoral coordination and collaboration and will engage other delivery modalities in the successor program.	To be addressed in the successor program design.	December 2022-March 2023

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3. “The program should have had more focus on clients, and supporting actual service utilisation and demand. The voice of both service users or organisations representing them was marginal in the program, when this is often key to progress on social inclusion.”	Partially agree	DFAT notes that building government policies and procedures related to GBV and disability services was a major focus of the ACCESS program. With significant progress made on policy and procedural reform, DFAT acknowledges the successor program should shift to a greater focus on supporting clients directly, with actual service utilisation and demand.	The successor program design will shift to a greater focus on actual service utilisation and demand.	December 2022-March 2023
4. “A balanced approach to engagement at the national and sub-national level, and in strengthening the capacity of service providers to then support service delivery is required if changes in the services are to be realised.”	Partially agree	DFAT notes that a significant focus of the ACCESS program was supporting national level reforms. ACCESS’ purpose was to support implementation of existing standards/guidelines developed under its predecessor programs at service delivery levels rather than developing new ones. However, DFAT also notes the program worked in three target provinces where key subnational level interventions were developed and piloted, including the development of GBV response working groups at provincial and district level, capacity building targeting of frontline service providers, and subnational disability coordination among others.	The successor program design will include a greater focus at the subnational level.	December 2022-March 2023
5. “The limited engagement of Ministry of Health (MoH) poses constraints for service delivery, staffing and functioning referral systems for both people with disabilities and survivors of violence.”	Agree	DFAT agrees that greater coordination with the Ministry of Health would be beneficial for program outcomes.	Opportunities for greater engagement will be explored in the successor program design, particularly related to the management of physical rehabilitation centres.	December 2022-March 2023

EFFECTIVENESS

Key Findings	Response	Explanation	Action Plan	Timeline
7. “Multiple changes to the ACCESS Theory of Change (ToC) mean it is not straightforward to measure effectiveness”	Partially agree	DFAT clarifies that all changes made to the program Theory of Change were made in close consultation with, and approval of, DFAT, in response to the evolving political economy of the program context, foreclosing some of the opportunities identified in the initial program design. However, DFAT also recognizes that changes at the EOPO level make a linear assessment of program performance from program start to finish challenging.	DFAT will ensure the successor program design includes EOPOs that enable the future program to pursue consistent goals throughout the lifetime of the program, whilst also enabling significant flexibility in the program approach.	December 2022-March 2023
8. “Australia should continually re-assess its engagement in mediation services as mediation is not survivor centred, does not treat violence as a criminal offense and it is inconsistent with international guidance.”	Agree	DFAT agrees with this finding and will not be supporting mediation services in Cambodia going forward.	The successor program design will not include ongoing support for mediation services.	December 2022-ongoing
9. “On the original PFM-related EOPO, despite efforts, ACCESS was ultimately not effective. On the best available evidence, ACCESS made only minor progress against the original PFM EOPO.”	Agree	DFAT agrees with the reviewers that the original assumptions included in the ACCESS design regarding the progress that could be made on PFM through the program were unrealistic.	The successor program design will consider whether a PFM component/strategy should be included.	December 2022-March 2023

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10. "On the EOPO relating to services, ACCESS was effective in improving the coverage and quality of services... [ACCESS] led and facilitated partner input into the development of sectoral and facility-based guidelines and standards, such as for PRC management and for GBV essential service standards – thus making a major contribution to quality. The combination of ACCESS's technical assistance to the RGC on the enabling environment, complemented by IP work on subnational service delivery has been an effective strategy for advancing the coverage and quality."	Agree	DFAT agrees that ACCESS has been effective in this area.	DFAT will ensure the success of the ACCESS program in improving the coverage and quality of services is continued and built upon in the successor program design.	December 2022-March 2023
11. "Inclusiveness in service delivery was mostly confined to the work of CARE Cambodia with Indigenous populations in Ratanakiri province. Inclusiveness in terms of gender responsiveness and disability inclusiveness, and attention to diversity in disabilities has been more limited, albeit increasing over time ...More on inclusiveness could have been done earlier in the program, but this was somewhat hampered by a lack of specialist resourcing...GESI staffing (national and international advisers) was only appointed in Year 4 of the program."	Partially agree.	DFAT agrees that inclusiveness should be addressed in future programming in a more purposive way, however, it also acknowledges that ACCESS has deliberately taken a phased/selective approach to pursuing reforms and that this was appropriate given its finite resources. DFAT agrees that recruiting additional GESI staffing at an earlier stage in the program would have strengthened the inclusivity of the program.	DFAT will ensure the successor program design includes a greater focus on inclusivity and attention to diversity. DFAT will also work with the Implementing Partner of the successor program to ensure in-country GESI expertise and resourcing is sufficient.	December 2022-ongoing

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12. "ACCESS has been effective in forging linkages with the RGC. ACCESS's high profile as an inclusion program and DFAT's strong engagement has supported relationships to be built with RGC counterparts."	Agree	DFAT agrees with this assessment and commends the ACCESS team for their success in this area.	DFAT will work with the IP of the successor program to maintain existing RGC linkages and to broaden engagement with other relevant RGC counterparts.	July 2023--ongoing
13. "DFAT was highly engaged and made efforts to be present and support as many ACCESS events, as possible. However, with the high volume of ACCESS activities, this was time-consuming and DFAT engagement would be best concentrated on policy and RGC level dialogue in future."	Agree	DFAT agrees with this assessment.	DFAT will also explore ways to reduce DFAT staff time in regular program representation in favour of more strategic high level involvement in program decision making and maintaining critical relationships.	July 2023--ongoing

SUSTAINABILITY

Key Findings	Response	Explanation	Action Plan	Timeline
15. "Financial sustainability– particularly on service delivery –has not been achieved."	Agree	DFAT agrees with this finding but notes that achieving financial sustainability is a long-term process requiring long term support.	DFAT will seek to ensure that strategies to increase the program's financial sustainability beyond the period of donor funding are embedded in the successor program design.	December 2022--ongoing
16. Sustainability of system strengthening efforts: "This includes guidelines, standards and revision to laws and plans, a number of which	Agree	DFAT agrees that ACCESS has effectively strengthened the RGC systems in place to provide improved services to survivors of GBV and people with disabilities.	DFAT will work to ensure that relevant existing ACCESS products continue	July 2023—ongoing

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have been endorsed by line ministry entities and submitted for RGC approval and adoption. This official uptake of ACCESS products is likely to be sustainable and paves the way for their ongoing impact.”			to be utilised in the successor program.	
17. Sustainability of human resources and organisational capacity: “ACCESS’s achievements – such as quality standards for managing PRCs – will be undermined by the lack of a public sector workforce or cadre of physiotherapists, prosthetic and orthotic specialists, and social workers to maintain these services... The way of working with partners through the CIM meant that a focus on their enduring role on the demand side of services was under-emphasised.”	Partially agree	<p>DFAT acknowledges that future programming support should include targeted support on strengthening the public sector workforce, but as noted above, recognises that ACCESS has appropriately pursued specific reforms in a targeted/selected manner given the limitations of finite resources.</p> <p>DFAT also acknowledges that the CIM delivery modality was not effective.</p>	<p>Support for the public sector workforce to be explored in the successor program design.</p> <p>DFAT will not engage the CIM delivery modality in the successor program.</p>	December 2022--ongoing