

# PARTNERSHIP EVALUATION

Prepared for the Australian  
Department of Foreign Affairs  
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Health

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# Clear Horizon

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## Disclaimer

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## Acronyms

Acronyms	Description
<b>AAF</b>	Australia Awards Fellowship
<b>ADB</b>	Asian Development Bank
<b>ANCP</b>	Australian NGO Cooperation Program
<b>APMCDRR</b>	Asia-Pacific Ministerial Conference on Disaster Risk Reduction
<b>ASEAN</b>	Association of Southeast Asian Nations
<b>CBID</b>	Community Based Inclusive Development
<b>CBR</b>	Community Based Rehabilitation
<b>COSP</b>	Conference of State Parties
<b>COVID-19</b>	Coronavirus disease (2019)
<b>DFAT</b>	Australia's Department of Foreign Affairs and Trade
<b>DID</b>	Disability Inclusive Development
<b>DIS</b>	Disability Equity and Rights Section
<b>DPP</b>	Development Partnership Plan
<b>GEB</b>	Gender Equality, Disability and Social Inclusion Branch, DFAT
<b>GEDSI</b>	Gender Equality, Disability and Social Inclusion
<b>GLAD</b>	Global Action on Disability
<b>IAG</b>	CBM Australia's Inclusion Advisory Group
<b>IDEARS</b>	International Disability Equity and Rights Strategy
<b>IMR</b>	Investment Monitoring Report
<b>IDD</b>	Investment Design Document
<b>LGBTIQA+</b>	Lesbian, gay, bisexual, transgender, intersex, queer/questioning, asexual
<b>MEL</b>	Monitoring, evaluation and learning
<b>MELF</b>	Monitoring, evaluation and learning framework
<b>PDF</b>	Pacific Disability Forum
<b>ODE</b>	Office for Development Effectiveness
<b>OPD</b>	Organisation of Persons with Disabilities
<b>SAPDA</b>	Sentra Advokasi Perempuan, Difabel dan Anak (Indonesian OPD)
<b>SURGE</b>	DFAT Support Unit for Gender Equality
<b>TA</b>	Technical assistance
<b>UNCRPD</b>	United Nations Convention on the Rights of Persons with Disabilities
<b>UNPRPD</b>	United Nations Partnership on the Rights of Persons with Disabilities
<b>WFP</b>	World Food Programme

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# EXECUTIVE SUMMARY

## Introduction

In line with the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), disability equity is a core issue for action in Australia's International Development Policy, which includes a commitment to develop a new international strategy for disability equity and rights. In support of this agenda, the Department of Foreign Affairs and Trade (DFAT) has a Disability Inclusion Technical Assistance Partnership agreement (\$11.19m) with the Inclusion Advisory Group (IAG) of CBM Australia, and Nossal Institute for Global Health as subcontractor. The Partnership's intermediate outcomes aim to:

1. Improve disability-inclusive development awareness, capacity, policy and practice in DFAT and its implementing partners.
2. Support regional and national OPDs to engage in and influence development processes.
3. Collect, disseminate and apply evidence of good practices.
4. Demonstrate Australia's global and regional leadership in disability-inclusive development (see Appendix C: Partnership Theory of Change).

The primary objectives for this review were to (i) determine the extent to which the outcomes of the Partnership are on track, (ii) Identify opportunities and recommend strategies to improve the Partnership's performance in the remaining period until June 2025, and (iii) inform the design of integrated advisory and other enabling services to support the delivery of the new disability, gender and lesbian, gay, bisexual, intersex, queer/questioning, asexual (LGBTQIA+) and human rights engagement strategies. Key findings and recommendations are summarised below, framed by the key review questions (KRQs).



### KRQ1. To what extent is the partnership achieving its four strategic outcomes?

#### **Strategic Outcome 1: Disability-inclusive development awareness, capacity, policy and practice is improved in DFAT and its implementing partners**

While there is broad evidence of the Partnership influencing improved awareness and commitment of DFAT staff to disability inclusive development (DID), as well as important changes in policy and practice, this is also an ongoing agenda. Several key Partnership interventions have influenced these changes:

- The DID4All helpdesk has played a key role and is highly valued by users. There is also room to better tailor its advice to country context and 'real-world' constraints. Given limitations of its demand-driven and discrete approach to advice, it is important to see the helpdesk as a complement to other services available within and outside the Partnership.
- Post visits have improved shared understanding and commitment of DID among relevant staff and strengthened relationships between DFAT and in-country OPDs. There is scope to extend their influence on practice change, for example by engaging more with implementing partners. More fundamentally, greater impact on programming practice may require more continuous and

intensive support to a selection of country programs, rather than one-off visits (see recommendation 10).

- Other efforts to build capability and capacity within DFAT have been inconsistent and hampered by staff turnover (in both DFAT staff and IAG remote secondees to DFAT) and time constraints, plus the absence of an effective Capacity Development Plan to improve institutional capacity for disability inclusive development across DFAT. The Partnership has used several other strategic entry points to proactively influence DFAT decisions, such as appraisals of investment designs and monitoring reports, and strategic engagements with key portfolios, such as the Australian NGO Cooperation Program (ANCP).

The complementary strengths of each partner have contributed significantly to progress. Broader enablers include key DFAT champions at various organisational levels, and policy commitments of partner governments and Australia. In terms of hindering factors, there has been a tendency to prioritise responsive over proactive engagements, and there has been limited direct work with DFAT's implementing partners.

In summary, the Partnership's contributions to disability-inclusive development awareness, capacity, policy and practice in the Australian Development Program have been considerable. However, a clearer sense of strategic priorities, reflected in more intentional resource allocation across Partnership components, may have resulted in stronger evidence of sustained practice change (see KRQ 2).

**Recommendation 1.** The Partnership should continue to invest in strengthening the internal expertise and capabilities of DFAT, including more explicit capacity development responsibilities for the remote secondees.

## **Strategic Outcome 2: Targeted regional and national OPDs are supported and enabled to engage in and influence development processes**

The Partnership continues to demonstrate effective partnerships with OPDs, and their contributions to broader disability inclusive practice. Framed by the UNCRPD, IAG's role has been to act as a facilitator and critical enabler between rights holders (people with disabilities) and duty-bearer (DFAT). This has involved assisting OPDs to strengthen their capacity and capability in line with their own priorities, strengthening DFAT's capability to engage effectively with OPDs e.g. accessibility, and connecting OPDs with decision-making forums. This role is highly valued, especially by OPDs.

Evidently, the Partnership's engagement with OPDs has influenced changes in DFAT policy and practice. For example, PDF's conceptual framing of 'preconditions for inclusion' and 'disability equity' has been clearly reflected within DFAT's policy agenda and enriched the sector's understanding.

**Recommendation 2.** IAG to work with PDF during the remainder of this Partnership agreement to identify how the Partnership can best support it during the organisation's leadership transition and through the next strategy development cycle.

**Recommendation 3.** The new design should consider how best to ensure that these OPD partnerships can be supported by IAG or an equivalent organisation with strong legitimacy in the disability movement.



### Strategic Outcome 3: Evidence of good practice disability inclusive development is collected, disseminated, and used.

The Partnership's efforts to document good practice have addressed knowledge gaps and there is some evidence that they have contributed to understanding, awareness and practice change. Over the course of this Partnership period, 244 knowledge resources were uploaded to DID4All by September 2023, covering a wide range of country/regional contexts, sectors/themes, program cycle stages, modalities, etc. There is significant room for improvement in disseminating these resources effectively within DFAT, to better promote their use.

**Recommendation 4.** Informed by consultation with target audiences, DFAT (supported by IAG as needed) should identify practical ways that i) just-in-time access by DFAT staff to existing knowledge products could be improved ii) upcoming knowledge products can be more effectively disseminated upon completion. These measures could be trialled over the remainder of the Partnership, to inform the new design.

### Strategic Outcome 4: Australia demonstrates global and regional leadership in disability inclusive development.

From the perspective of stakeholders outside the Partnership, Australia continues to be seen as a leader on DID in various multilateral, regional, and bilateral forums. An especially important example of this is DFAT's work with IAG and Nossal Institute to promote a strong voice for OPDs in development of the International Disability Equity and Rights Strategy (IDEARS), by facilitating broad and inclusive OPD consultation and synthesising existing documentation of regional disability movement priorities. Despite this, a few stakeholders outside the Partnership observed that Australia's leadership on disability inclusion had lost momentum, leading to less influence in global forums. The launch of IDEARS will be an opportunity to address this perception.

#### *To what extent has the partnership articulated and measured the change it is trying to achieve? How is monitoring data and reporting being used?*

The theory of change is an adequate summary of the Partnership's intent, although it is not well socialised among all key stakeholders to the Partnership. This has contributed to disconnect in how the Partnership is managed across its components.

In addition, the Partnership has not undertaken a department-wide analysis or stocktake with regards to DFAT's technical support and capacity building needs and lacks an up-to-date capacity building plan to guide its work although such plans have existed in the past.

Partnership monitoring and reporting tend to focus on activities and outputs, rather than outcomes. More could also be done to 'close the loop' between MEL and strategic decision making, as well as improve linkages across the outcome areas.

**Recommendation 5.** IAG and DFAT to update the capacity building plan to reflect key priorities for the remainder of the Partnership, informed by the upcoming IDEARS.

**Recommendation 6.** DFAT to explore with Nossal Institute opportunities to support DIS and other relevant DFAT staff engage in accredited DID capability development.

**Recommendation 7.** In the remainder of this Partnership, IAG and DFAT to collaborate on the development of outcome-focused case studies that examine key examples of outcome achievement and their contributing factors. For example, these could be focused on a variety of key Posts (e.g. by size) where improvements in DID practice seem to be more evident. These should be timed to inform the upcoming design.

**Recommendation 8.** The Partnership should synthesise design/IMR review and DID4All Helpdesk data to identify key priorities for future DID support e.g. key topics for future research or guidance; geographical or thematic areas requiring greater assistance etc.

***To what extent have efforts to engage diverse OPDs, mainstream gender equality and other intersectional considerations (e.g. LGBTQIA+ / Indigenous foreign policy) across the partnerships four outcomes been effective?***

IAG has made a range of efforts to engage diverse OPDs and takes an intersectional approach. There is evidence of increasing cooperation between the Partnership and gender equality mainstreaming and capacity development efforts, aligning to recent DFAT changes in organisational structure, and through collaboration with DFAT's Support Unit for Gender Equality (SURGE). There is less evidence of mainstreaming intersectional considerations such as LGBTQIA+ and/or First Nations indigenous foreign policy across the Partnership outcomes.



## **KRQ2. How well does the current partnership model support implementation and progress towards outcomes?**

### **What are the strengths and weaknesses of the current model and its implementation, including governance and management arrangements?**

Various data sources show that the Partnership model is highly valued, that working relationships are strong, and that partnership ways of working are well applied in practice. An anonymous survey of senior and working level partnership staff at DFAT, IAG, and Nossal Institute, asking about various elements of the partnership's effectiveness (e.g., outcome/output-focused, strong communication) found that, for 11 out of 13 of these desired elements, over 90% of respondents agreed or strongly agreed that they were evident in practice.

In terms of strengths, there is unique combination of value – in terms of its ways of working, OPD relationships, and technical expertise - brought by IAG to the Partnership. This is complemented and extended by the value and expertise brought by Nossal Institute and DFAT, as described under KRQ1. The model also demonstrated good people-with-disability-led practice; and the cost-free availability of technical assistance through DID4All is a valued resource, particularly by Posts with little resourcing to access technical assistance through contracting.

On the other hand, partners recognise that operational priorities and staff turnover have at times limited space for strategic dialogue and joint strategic planning. Reflecting this, the Partnership lacks clear strategic priorities to drive work across all its components. In addition, there is scope to improve the efficiency of approval processes within the Partnership. Lastly, in relation to DID4All, several interviewees identified that Post-level buy-in and the scale of Partnership influence are constrained by the fact that it is not possible for country programs to co-invest in the Partnership, and the Partnership



does not deploy long-term disability inclusion advisors. These will be important design considerations for DFAT's proposed integrated GEDSI advisory service.

**Recommendation 9.** DFAT, IAG, and Nossal to prioritise shared strategic work planning for the remainder of the Partnership to ensure collective understanding of priorities, roles and responsibilities.

**Recommendation 10.** Informed by lessons from the Partnership, DFAT's design of the new integrated GEDSI advisory service should be clearer about which 'levers of change' the service should prioritise in its efforts to improve policy and practice in DFAT. This should involve more explicit trade-offs between deep vs. broad and responsive vs. proactive engagements. As noted under KRQ1, one option is to provide more intensive, multi-faceted and continuous support to selected country/regional programs, guided by multi-year capacity improvement strategies.

**Recommendation 11.** Over the remainder of the Partnership, IAG and DFAT should identify areas in which DFAT approval responsibilities could be elevated to a more strategic level, to improve efficiency.



### **KRQ3. How well has the partnership been able to adapt to meet DFAT's evolving needs and policy contexts over the life of the partnership?**

**How well does the support provided by / the activities of the Partnership match DFAT's current disability equity and rights technical support and capacity building needs?**

There is strong evidence to demonstrate that the Partnership has adapted well to evolving DFAT needs and approaches, such as its pivot during the COVID-19 pandemic and response to ensure continued DID support and engagement through new ways of working. On the other hand, as noted under KRQ1, there is also a desire among DFAT users for greater tailoring of DID4All advice to country context and 'real-world' constraints. Looking forward, a few respondents noted that there may be a need for the Partnership to engage beyond the Development Program to remain relevant to DFAT.

**What can be learned from the current partnership to inform DFAT's future integrated approach to the provision of gender equality, disability equity and social inclusion advisory and other services? What are the risks of an integrated approach that should be considered in design?**

The rationale for an integrated GEDSI advisory service was affirmed by DFAT staff interviewees – their bandwidth to perform development program management responsibilities continues to narrow, and they would value the efficiencies of a more joined up approach to GEDSI advice. An integrated advisory service may also deliver economies of scale in terms of overhead costs.

The Partnership's recent collaboration with SURGE is providing lessons that could usefully inform DFAT's design of this integrated GEDSI advisory service. Coordination in relation to the recent GEDSI Analysis Good Practice Note, DPP and IMR processes show the potential for mutual benefit through greater collaboration. However, it is also clear that further codification is needed in relation to when it is

or isn't appropriate for the provision of DID technical advice to be 'delegated' from IAG to a relevant 'GEDSI specialist'. Another key lesson is that further clarity is needed on the specific qualifications, experience, and capabilities required of disability equity and inclusion advisors (as well as gender equality and GEDSI advisors).

More fundamentally, a key lesson from the Partnership is that a multi-pronged and sustained approach to capacity development is essential. Demand-driven advisory services alone are unlikely to lead to institutional change. Related to this point, it is also clear that a more intentional approach is needed to capability investment in DIS staff as well as other DFAT staff playing disability advisory roles, particularly in anticipation of increased demand for disability inclusion emphasis and awareness following the launch of IDEARS, combined with the end of this Partnership in 2025.

In terms of risks, there is concern that the shift to integrated GEDSI advisory services may dilute DFAT's focus on disability inclusion, equity, and rights. A related practical concern noted by some respondents was that disability equity and inclusion recommendations can sometimes have relatively greater costs attached to their implementation. This puts them at risk of not being adopted, particularly when packaged within a broader set of GEDSI recommendations. Lastly, there is a risk that a core strength of the current partnership model may be lost – namely that IAG's grant-based and strong partnership with DFAT enables direct dialogue on important and sometimes difficult issues.

**Recommendation 12.** During the remainder of the Partnership, IAG, SURGE and DFAT should conduct one or more reflection workshops to capture emerging lessons in relation to the application of a more integrated approach to the provision of GEDSI technical advice. This should include consideration of thresholds with regards to when disability specialist technical assistance is needed vs. when GEDSI technical assistance is 'good enough'.

**Recommendation 13.** During the remainder of the Partnership period, IAG should develop a definition inclusive of experience, credentials and capabilities for a disability equity and inclusion advisor, and work with SURGE and other key stakeholders to develop gender equality and GEDSI advisor definitions that can contribute to the design process for the next phase.

**Recommendation 14.** During the design of the next phase, DFAT and the design team should examine opportunities to maintain a multi-pronged approach to capacity development, rather than relying on advisory support alone. As noted under recommendation 10, this should be underpinned by a clearer set of overarching strategic priorities and more explicit trade-offs e.g. breadth vs. depth. A more intentional approach to investment in capability of DIS and other staff advising on DID should also be a key feature, informed by a clear-eyed assessment of relevant operational constraints.

## **What learning has emerged from the partnership (in particular, the support to the Pacific Disability Forum under Outcome 2) which could inform engagement with other OPDs and a future OPD partnership approach?**

For the foreseeable future, there will be a continued need for DFAT to provide core funding to OPDs, including resources for capacity and capability building. Effective OPD partnerships will continue to require i) opportunities for the OPD and its support partner (in this instance, CBM Australia) to work together and develop trust and context understanding, ii) adequate resourcing for OPD engagement and iii) and ongoing funded opportunities for OPDs to work with DFAT, facilitating their role.

Strengthening OPD capacity is essential for their meaningful participation, aligning with the "Nothing about us without us" principle. That said, there is also a risk that DFAT's core investments in OPD

capacity strengthening are overwhelmed by broader and unrealistic demands across DFAT for OPD consultation on all investments. Success for DFAT investments in terms of disability equity and inclusion needs to be broader than consultation with an OPD; if every investment were to consult with an OPD this would be unsustainable. Ultimately, decision making about when, how and on what issues to engage should be in the hands of OPDs. A related issue is that challenges in DFAT-OPD engagement have arisen where DFAT staff lack understanding of OPDs' representational roles, leading to mismatched expectations for OPD engagement in program design and implementation.

The need to apply these lessons is heightened by the fact that calls on OPD advice are likely to grow in the coming years as efforts to enhance disability equity and inclusion in the Australian Development Program become more ambitious.

**Recommendation 15.** During the remainder of this Partnership, DFAT and IAG to propose a model for how Posts could establish and maintain strategic engagement with OPDs at a whole-of-Post level, with a goal of developing long term partnerships, offering core flexible funding and codifying lessons learned to be shared across portfolio investments. DFAT and IAG should also review current IMR criteria relating to engaging with OPDs, to mitigate the risk of non-strategic or inefficient OPD engagement.

**Recommendation 16.** DIS to map DFAT support to OPDs to ensure a shared understanding of what engagement is happening and contribute to strategic discussions about harmonisation across engagement activities.

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# INTRODUCTION

Ensuring equity and inclusion for people with disabilities is a fundamental human rights issue. Article 32 of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) calls for international cooperation and inclusion of persons with disabilities in development programs, reflecting the vital need to uphold rights and access for the world's 1 billion people with disabilities facing marginalisation. Critically, the UNCRPD emphasises active involvement of people with disabilities in decision-making about policies concerning them. Improved outcomes require close collaboration with representative organisations to ensure lived experiences and priorities drive positive change. An equity-focused, rights-based, participatory approach is essential for "leaving no one behind."

The Australian Government, through the Department of Foreign Affairs and Trade (DFAT), has made strong commitments in support of this agenda, collaborating with Inclusion Advisory Group (IAG) of CBM Australia on disability-inclusive development since 2009, with a formal partnership first established in 2011-2015 to support DFAT's 2015-20 Development for All strategy. This strategy articulates disability inclusion as a cross-cutting priority aligned with Australia's UNCRPD obligations, pursuing twin-track mainstreaming and disability-specific initiatives embedded into policies and performance frameworks. Disability equity is also a core issue for action in Australia's International Development Policy, which includes a commitment to develop a new international strategy for disability equity and rights.

## DFAT's Disability Inclusion Technical Assistance Partnership

DFAT has a partnership with the IAG of CBM Australia, who works with the Nossal Institute for Global Health as an implementing member of the Partnership (henceforth, the Partnership). The Partnership works towards shared objectives to improve the quality of life for people with disabilities through the international development program and inclusive humanitarian action. This current partnership agreement builds on two previous agreements starting in 2011 (see *Appendix B Partnership History Overview*). The current agreement value is \$11.19 million. The Partnership includes activities in support of Disability Inclusive Development (DID) capability development for DFAT staff, partnerships with Organisations of Persons with Disability (OPDs), undertaking, curating and disseminating relevant and timely DID research, and supporting Australia's leadership on DID.

The purpose of the Partnership is to contribute to the Australian development program's efforts to improve lives for people with disabilities. The expected long-term outcomes align with DFAT's Development for All 2015-2020 Strategy, seeking to enhance participation and empowerment of people with disabilities as contributors, leaders and decision-makers, reduce poverty, and improve equality in all areas of public life. The Partnership's intermediate outcomes aim to:

1. Improve disability-inclusive development awareness, capacity, policy and practice in DFAT and partners.
2. Support regional and national OPDs to engage in and influence development processes.
3. Collect, disseminate and apply evidence of good practices.
4. Demonstrate Australia's global and regional leadership in disability-inclusive development (see *Appendix C: Partnership Theory of Change*).

## This Review

The primary objectives for this review were to (i) determine the extent to which the outcomes of the Partnership are on track (ii) identify opportunities and recommend strategies to improve the Partnership's

performance in the remaining period until June 2025 and (iii) inform the design of integrated advisory and other enabling services to support the delivery of the new disability, gender and lesbian, gay, bisexual, intersex, queer/questioning, asexual (LGBTQIA+) and human rights engagement strategies. To note, the scope of this review does not include impact assessment; four evaluations including focus on impact have been undertaken over the course of the Partnership, including from earlier periods.<sup>1</sup>

The review findings will be used by DFAT's Disability Equity and Rights Section (DIS) and Gender Equality, Disability and Social Inclusion Branch (GEB) to inform the design of the new integrated technical advisory and other services model, and by IAG, Nossal Institute and DIS to make strategic decisions about the remainder of the Partnership. The Pacific Disability Forum (PDF), as a member of the Partnership Steering Committee will use the review for learning and improvement purposes. For a more detailed description of review methods and limitations, see *Appendix A: Review methodology*.

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<sup>1</sup> DFAT-CBM Partnership Evaluation 2011-14; DFAT-CBM Australia Partnership Review Report 2015-18; ODE Evaluation of "Development for All; Evaluation of progress made in strengthening disability inclusion in Australian Aid 2018; IAG-A Impact Evaluation 2022.

# KRQ1. TO WHAT EXTENT IS THE PARTNERSHIP ACHIEVING ITS FOUR STRATEGIC OUTCOMES?



## Strategic Outcome 1: Disability-inclusive development awareness, capacity, policy and practice is improved in DFAT and its implementing partners

**Scope:** The Partnership aimed to strengthen disability inclusion efforts through a technical advice helpdesk (DID4All) and by proactively providing expert guidance to DFAT staff and partners, building their capacity in disability inclusive development. It also sought to provide support for DFAT staff and implementing partners through designing and managing tailored visits to DFAT posts overseas, delivering training, advice, and public awareness events focused on advancing DFAT's work on disability issues and improving DID capabilities.

### Key Achievements

**The evaluation found broad evidence of improvements in awareness and commitment of DFAT staff to DID, noting that this is an ongoing agenda.** Significant examples of changes in DFAT policy and practice were also identified. Partnership monitoring data and interviews with end-users, focal points and OPDs showed that the vast majority of those who received technical advice and support through the Partnership increased their knowledge and awareness of disability inclusion, including for both DFAT staff and implementing partners. These changes in knowledge and awareness were attributed to DID4All helpdesk support<sup>2</sup> (representing 4,565 days of advisory support provided so far over the Partnership period), as well as Post visits, trainings, panels including organisations of persons with disabilities (OPD), evidence products and focal point network communications. Increasing sophistication (i.e. increasing size, depth and complexity) of requests coming through the DID4All helpdesk was also evident in the helpdesk data and interview data, providing a further indication of the Partnership's contribution to improved knowledge and awareness.<sup>i</sup> Additionally, feedback from Post visits demonstrate that the practical and tailored advice increased the likelihood of uptake of DID practice by participants who reported commitments to improved practice.<sup>ii</sup>

*"What has been changing in DFAT is incremental, no revolution but an evolution... when I think back to engagement on disability inclusion 5-10 years ago it's now much better and more embedded in mainstream thinking around development policy but also more broadly as a result of partnership" – DFAT staff member*

**Examples of significant changes in policy and practice** include that the technical advice provided through the Partnership has resulted in the Hanoi Post separately contracting an embedded disability inclusion advisor, representing an institutional change and a sign of continued prioritisation. Note that this is a unique case thus far but has the potential for broader replication by other Posts. Significant institutional change with regards to prioritising and resourcing disability inclusion is also evident in the work undertaken with multilaterals, discussed further below. DFAT also mobilised IAG to support Development Partnership Plan (DPP) processes, which was seen as a crucial opportunity to support bilateral and regional programs commit to progressing disability equity and rights<sup>3</sup>. The Partnership contributed to improving the awareness of DFAT staff on the gender equality, disability and social

<sup>2</sup> DID4All provides a selection of technical resources to promote DID and to assist a range of stakeholders, particularly donors who design, implement, monitor and evaluate programs in a way that is inclusive of people with disability. Through a secure login, it also supports DFAT staff with a rapid and reliable helpdesk facility, providing high quality technical advice and advisory support on disability inclusive development to assist with informed policy and decision-making.

<sup>3</sup> Note that the evaluation was not able to assess the extent to which final DPPs incorporated CBM advice.



inclusion (GEDSI) High-Level Brief process and the available disability inclusion technical support for their work. IAG advisors worked with DFAT to provide disability inclusion inputs for specific DPPs and GEDSI High-Level Brief processes. Overall, this significantly enhanced disability inclusion inputs to the DPP process.<sup>iii</sup>

*There was “a feasibility study commissioned through WHO in collaboration with Nossal and CBM, on Assistive Technology in the Pacific. No one wanted a bar of it or felt the importance. Four and a half years later DFAT is putting money where their mouth is, and humanitarian packages are including AT. So what was previously seen as obscure and niche is now recognised as fundamental human right.” – DFAT staff member*

**Most recently the Partnership has contributed significantly to the shaping of the new International Disability Equity and Rights Strategy (IDEARS), due to be launched in 2024.** The Partnership enabled DFAT to meaningfully engage with diverse in-country OPDs, via in-country and online consultation processes. IAG technical and logistical support, including organising accessibility and reasonable accommodation for participants, enabled DFAT officers to engage efficiently and effectively with international stakeholders. This further showcased DFAT’s commitment to disability equity and rights, ensuring future priorities are informed by the perspectives of stakeholders with lived experience of disability.<sup>iv</sup>

## Helpdesk

**The DID4All helpdesk is highly valued by users, especially DID champions in DFAT, with approximately 43% of requests being from repeat users, and those who lack other mechanisms for accessing DID expertise elsewhere, as reflected in interviews with smaller Posts. The helpdesk model has since been adapted in other settings both within and external to DFAT.** Awareness of the DID4All helpdesk remains variable across DFAT. However, the majority of those interviewed reflected that the technical advice and support they received was valued. They praised the DID4All helpdesk and advisory support provided through the partnership for its quality, contextual relevance, and collaborative approach. As self-reported by users, the advice has tangibly shifted how DFAT staff approach issues like data, language, and working with OPDs and has strengthened disability inclusion in documentation, implementation and monitoring. The DID4all model has influenced the design and implementation of other helpdesk models, including serving as the model for SURGE and the World Food Programme’s helpdesk, noting some differences (e.g. user pays vs. free advice models, and different approaches to in-built quality assurance mechanisms). It also informed the design of the DFAT Climate Change helpdesk. Between January 2018 and June 2023, 462 helpdesk tasks have been actioned, representing 4,565 days of advisory support. Over time, there has been a notable deepening of requests for advice, encompassing specific technicalities across various sectors, such as economic growth and trade, indicating increasing awareness and understanding among users. There has also been more recent coordination with SURGE so that users can receive integrated technical gender and disability inclusion advice.

**However, several respondents who had accessed DID4All called for greater tailoring of advice to country context and ‘real-world’ constraints.** As noted, the nature of disability inclusion support requested through the Helpdesk has increased in size, depth and complexity over time. Evidence indicates that the advice provided by the Partnership has adapted to meet this need in many cases. However, several DFAT end user respondents noted that DID4All’s advice would be more feasible if it was informed by a deeper understanding of the relevant investment’s operating context, such as constraints relating to the partner country’s policy environment. This suggests that a key enabling factor for appropriately tailored and sophisticated advice includes a longer engagement working with a particular Post, branch, section or division, to develop deeper contextual knowledge; in other words, layering the more discrete nature of most DID4All advice with multiple Post visits and other forms of

engagement. A key related limiting factor during this Partnership period has been COVID-19-related travel restrictions, making it difficult for IAG staff (especially new technical advisors) to deepen or update their contextual knowledge.

**While the helpdesk has been the Partnership's most visible and significant component, it is essential to see it as a complement to other services available to users within and outside the Partnership.** Within the Partnership, the demand-driven DID4All helpdesk support is complemented by proactive efforts like evidence building, awareness raising through post visits<sup>4</sup>, policy leadership from DFAT, and nurturing long-term relationships with key stakeholders like OPDs. This layered and mutually reinforcing model appears to be a unique feature of the Partnership, compared to other DFAT advisory service contracts. Institutional change requires this multilayered approach combining policy guidance, funding, and technical assistance working in tandem. For example, a helpdesk task (#1393) raised by Jakarta Post translated into a two-day training for MAMPU partners<sup>5</sup> including co-facilitation with representatives of local OPDs, and follow-up support of technical advice to the MAMPU team. A number of action plans in thematic areas were developed at the end of the training during technical meetings.

## Post visits

**Post visits have improved shared understanding and commitment of DID among relevant staff and strengthened relationships between DFAT and in-country OPDs. DFAT staff reported valuing the tailoring of training and advice to country context.** 13 Post trips were undertaken, some involving both IAG and DIS staff, throughout the Partnership period up until May 2024, to Bangladesh in November 2018; Tonga in May 2019; Cambodia in May 2019; Kenya in August 2019; Fiji in August 2019, Vietnam in September 2019; Philippines in December 2019; Timor-Leste in October 2022; Vietnam in November 2022; Solomon Islands in June 2023; Cambodia in August 2023; Indonesia in October 2023; and Laos in May 2024. Trip length varied based on scoping, and the content was tailored to the Posts context and needs. Due to COVID-19, no post visits were conducted in 2020 and only one post visit was conducted in 2021 (virtual and with Jakarta Post). Visits built the knowledge, awareness, relationships and commitment of Post and implementing partners on disability inclusion, and provided Posts a foundation and catalyst to enhance its disability-inclusive practice.<sup>v</sup> From the perspective of one OPD interviewed, these Post visits are important because they expand awareness and sensitisation about disability equity and inclusion to investment stakeholders who don't typically think in these terms, and establish the basis of relationship between OPDs and Posts that can be taken forward independently, for example in the case of Ra'es Hadomi Timor Oan (RHTO) in Timor.

**There are various ways that in-person and virtual Post visits could be improved based on participant feedback.** Practical suggestions from a few respondents included longer preparation lead times for Posts to ensure sessions are better targeted, shorter online sessions, and more engagement with DFAT implementing partners and counterparts. More fundamentally, the impact of Post visits during this phase of the Partnership has been limited because they are point-in-time interventions. As noted in the 2018 ODE evaluation, strong disability inclusion in country programs requires more sustained and continuous support.<sup>vi</sup> There are some promising examples of the Partnership providing this type of support, such as where Post visits are followed by increased uptake of the DID4All helpdesk, leading to more ongoing strategic support over time (e.g. with Indonesia Post, Nepal Post and Mongolia Post). There is also a positive example of more continuous 'technical accompaniment' provided by the recent embedded advisory support to Hanoi Post, which was recommended and pursued by IAG. Building on these examples, an option for DFAT's future GEDSI integrated advisory service is to take a more strategic approach to its engagement with country/regional programs, guided by multi-year DID capacity

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<sup>4</sup> For example, partnership activity monitoring data also shows that user feedback on the need for more specialised/specific advice often follows a recent increase in CBM's engagement with the relevant Post e.g. ASEAN Mission. It also shows that tailoring to context increases over time as IAG engages more i.e. through prolonged technical assistance via the helpdesk and/or by layering support with other components of the Partnership such as Post visits.

<sup>5</sup> Co-financed by MAMPU.

improvement strategies for selected programs and featuring multi-faceted support to both DFAT staff and implementing partners. In addition to more continuous engagement at the investment level, this would also open opportunities for impactful assistance at the country program level, such as by facilitating the development of country disability inclusion plans. These could then guide decisions about where to focus the Partnership's training, advisory, and other support. Of course, there is a trade-off between more in-depth engagements like these and the Partnership's overall breadth of reach. This is explored further under KRQ 2.

*In 2022 a Disability Inclusion Advisor was mobilised to work with the design team for Aus4Growth. The Advisor facilitated an inclusive design process, including consultation with disability stakeholders such as OPDs, and identified feasible ways for disability inclusion to be embedded across the investment theory of change. The success of this approach is reflected in the IDD design appraisal, which achieved a score of '6 – Very Good' for Disability.*

## Nepal Post

*"For the design of our flagship sub-national governance program in Nepal we took a proactive approach by involving CBM in the design process. While we were designing, we had meetings with them, introduction to our team, sought advice regarding design in response to people with disabilities. They were proactive...we got a lot of buy in from Canberra.*

*Our program then won the international development award for best design; one good characteristic was that we effectively addressed gender and disability inclusion. We were also just moderated for our governance program this year and the panel increased our rating from 4 to 5 for disability.*

*We are now in the second year for the governance program. It's a big achievement because usually governance programs don't do well on disability inclusion. So, I think that because we won the award, and we received a high moderation score, this is the outcome of making sure that we were able to access these technical advisory services." – DFAT staff member*

## DFAT staff capacity and capability development

**The Partnership's efforts to build capability and capacity within DIS, and foster networks of both working-level focal points and senior champions have been inconsistent and hampered by staff turnover and time constraints, plus the absence of an effective Capacity Development plan.** While efforts have been made throughout this Partnership period to document, refine and update capacity development plans for DFAT staff, these efforts were hindered due to staff turnover and resourcing constraints. Efforts to improve the capabilities of DIS staff have included offering participation in the Nossal Short Course, sharing reading packs and disability inclusion concept guides to new staff, and buddying with staff to foster mutual on-the-job learning exchange. Capacity of DFAT has also been supplemented through the remote secondment model, whereby a IAG disability inclusion advisor is outposted for 6-12 months to supplement the human resources of DIS and extend its expertise and reach (as with DFAT personnel, there was also turnover in this role).<sup>vii</sup> Additionally, support to the Focal Point network<sup>6</sup> has involved building their understanding of disability inclusion, supporting colleagues, and engaging with local disability stakeholders, noting that the level of engagement has fluctuated throughout the Partnership.<sup>viii</sup> IAG reports that optimal effectiveness is observed when these roles are filled by locally engaged staff with a genuine interest in disability issues and strong support from their A-

<sup>6</sup> The disability Focal Point network is made up of staff across DFAT who are appointed as the 'disability focal point' within a Post or thematic area.

Based manager.<sup>ix</sup> However this engagement has fluctuated over time due to DFAT staff turnover and operating constraints.

**Recommendation 1.** The Partnership should continue to invest in strengthening the internal expertise and capabilities of DFAT, including more explicit capacity development responsibilities for the remote secondee.

## Other strategic entry points

The Partnership has used several strategic entry points to proactively influence DFAT institutional processes, such as appraisals of investment designs and monitoring reports. There are also examples of strategic (and well-received) engagement by the Partnership with certain 'portfolios', such as the Australian NGO Cooperation Program (ANCP), and key multilateral partnerships e.g. Asian Development Bank (ADB). The Partnership has strategically engaged at critical junctures to drive systemic improvements in DID integration. Supporting investment designs from the earliest stages, along with involvement in annual investment performance reporting, has allowed for assessment and strengthening of disability inclusion across DFAT's portfolio. The majority of those interviewed agreed that involvement at the investment concept and design stage was likely to have the most significant impact for embedding disability equity and inclusion. Likewise, influencing the DPP process has created crucial opportunities to entrench commitments to disability equity and rights within bilateral and regional programs. This upstream engagement ensures DID considerations are embedded from the outset, rather than treated as an afterthought.

Annual engagement in the Investment Performance Reporting cycle allows the Partnership to improve the rigour of disability inclusion assessment, provide recommendations for improvement, and track progress across DFAT's portfolio. This engagement promotes ongoing refinement and enhancement of disability inclusion practices throughout investment implementation. Since 2018, IAG has reviewed 533 Investment Monitoring Reports (IMR) (including humanitarian and some final IMRS) through these Helpdesk tasks.<sup>x</sup> Of these, 113 IMRs were reviewed in the year June 2022 – July 2023.<sup>xi</sup> IAG's review of draft IMRs includes advice on how the narrative evidence against the two disability inclusion assessment questions can be strengthened (or ratings lowered if no further evidence is available), and suggestions on how to improve greater disability inclusion within the program.<sup>xii</sup>

Moreover, the Partnership has adopted a capability-building approach that works across multiple levels. By supporting disability focal points at Posts and providing technical assistance to multilaterals like ADB and the World Food Programme (WFP) and collaborating with UN Partnership on the Rights of Persons with Disabilities (UNPRPD), the Partnership has catalysed knowledge sharing and skill development across a wide range of stakeholders. Notably, the strengths-based approach employed with Australian NGO Cooperation Program partners has empowered them to identify areas of progress and areas for improvement within their contexts, and the Partnership has provided long-term strategic support to the Humanitarian Partnerships Division, Education Section, Social Protection Section and Global Health Division. For example, establishing a 'standing' DID4All Helpdesk task (#1539) to enable IAG to respond quickly to the higher volume of ad hoc requests from the Social Protection Section as well as spend time proactively developing targeted technical materials and guidance documents. This support has been positively received by the Section. Through these multi-pronged efforts, the Partnership has worked across diverse programming contexts to assist DFAT and implementing partners improve disability inclusion.

## Enabling factors

Interviews showed a high degree of mutual appreciation among the three partners of their complementary strengths and contributions. DIS has served as an "internal navigator," providing



political analysis and identifying strategic opportunity windows for DID integration. This insider perspective has helped to align efforts with DFAT priorities and processes.

In addition to technical expertise, IAG has brought its deep understanding of the DFAT Development Program processes and ways of working to the table, built over long-term engagement, combined with a trusted relationship with DFAT. Its team-based approach, including quality assurance mechanisms, has enabled the provision of expert advice suited to DFAT's organisational context. IAG's linkages with the disability movement have further enriched its contributions, evidenced by feedback from OPDs about the nature and alignment of CBM's work with the disability movement's priorities, ensuring that diverse perspectives inform the Partnership's work. Notably, IAG has also invested in building the capacity of local advisers (outside the Partnership), aligning with the localisation agenda and mitigating overreliance on OPDs for expertise beyond their priorities and capabilities.

The Nossal Institute has contributed evidence-based insights and technical assistance through the DID4All platform, equating to about 5-7% of requests raised annually. Its research and analysis have directly informed responses to DID4All requests, ensuring that recommendations are grounded in robust evidence and are informed by the priorities of the disability movement. Additionally, Nossal Institute's broader contributions to the sector's evidence base have less directly strengthened the Partnership's work by equipping IAG and Nossal Institute staff with up-to-date knowledge that can be included in technical assistance provided through DID4All.<sup>7</sup>

**Broader enablers identified by members of the Partnership and a range of DFAT interviewees include key DFAT champions at working and senior levels, and policy commitments within both partner governments and Australia.** The presence of committed individuals, including program managers and leaders at Posts and in Canberra, has been a critical enabling factor, driving progress in disability inclusion efforts within country/regional programs. Additionally, the Partnership's work has been facilitated by the recent reinvigoration of policy focus on disability-inclusive development under the current Australian Government and its new International Development Policy. Partner governments that are receptive to and prioritising disability equity and inclusion have also notably strengthened the enabling environment for DID practice in these Posts.

## Hindering factors

**Members of the Partnership noted that it has had a tendency, influenced by a range of factors, to prioritise more responsive engagement.** The Partnership is continually aiming to find the right balance between meeting reactive demand (given the importance of providing disability inclusion advice at the time it is needed in order to capture opportunities) and proactive efforts. It is noted by key stakeholders to the Partnership that the resources required to resource the reactive DID4All helpdesk represents an 'opportunity cost' that must be considered and makes it difficult for the Partnership to resource more continuous and longer-term impactful engagements – such as, for example, multi-year capacity improvement strategies for selected country programs (see 'Post visits' above and KRQ2 below).

**Another key constraint on the Partnership's impact on practice is its limited direct engagement with implementing partners, relative to DFAT staff.** Many interviewees highlighted that changes in implementing partner knowledge, attitudes, and practices are fundamental to ensuring disability equity and inclusion in the Development Program. However, Partnership reporting shows that the Partnership's direct engagement with implementing partners has been limited. Strategically, the primary focus of the Partnership is on enhancing DFAT capabilities and capacities. Where DFAT staff request direct engagement with relevant implementing partners, the Partnership has responded accordingly – in some

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<sup>7</sup> Before 2019, Nossal Institute also connected DIS staff to its unique and longest-running disability-focused short course within the University of Melbourne's Master of Public Health program, exemplifying the higher-level training opportunities available through an academic partnership. This opportunity is now being made available again.

cases, resulting in significant examples of changes in implementing partner policies and practices (see above). However, these examples are not widespread.<sup>8</sup>

**In summary, the Partnership's contributions to disability-inclusive development awareness, capacity, policy and practice in the Australian Development Program have been considerable. However, a clearer sense of strategic priorities, reflected in more intentional resource allocation across Partnership components, may have resulted in stronger evidence of sustained practice change (see KRQ2 below).**

## **Strategic Outcome 2: Targeted regional and national OPDs are supported and enabled to engage in and influence development processes**

**Scope:** The Partnership aimed to empower OPDs in two ways: First, to support 3-5 targeted regional and national OPDs to engage in international development processes, programs, and advocacy efforts that aligned with both the OPDs' and DFAT's priorities. Second, to enable national and sub-national OPDs to co-facilitate or contribute to in-country training and advisory work related to disability inclusion.

**The Partnership continues to demonstrate effective partnerships with OPDs<sup>9</sup>, and their contributions to broader disability inclusive practice, which is a human rights imperative.** OPDs play multifaceted roles, from raising awareness of disability rights to representing people with disabilities to stakeholders and advocating for policies aligned with the UNCRPD. Over the course of this Partnership period, 9 OPDs and 130 representatives from OPDs received varying levels of support. Additionally, of the 55 trainings delivered by the Partnership between 2018 and October 2023, 146 OPD members were included across 41 of the trainings (75%) either as co-facilitators or panellists.<sup>xiii</sup>

**Table 1: Significantly supported OPDs under the Partnership** <sup>lxvi</sup>

<b>Name</b>	<b>Location</b>
Pacific Disability Forum (PDF)	Fiji
PNG Assembly of Disabled Persons	PNG
Transforming Communities for Inclusion (TCI)	India
Deaf-community	Timor-Leste
Vanuatu Disability Promotion and Advocacy (VDPA)	Vanuatu
RHTO	Timor-Leste
TCI-Asia	Asia

**In its engagement with OPDs under the Partnership, IAG acts as a facilitator and critical enabler between the rights holders under the UNCRPD (people with disabilities) and the duty-bearer (the Australian Government as a signatory to the UNCRPD, duty arising to aid recipients with disabilities under Art 32).** This approach has three important features:

1. Firstly, it means working closely with OPDs, meeting them where they are at, to complement their capabilities and strengthen their organisational capacity to further their own priorities as rights holders (Partnership Intermediate Outcome 2 – See *Appendix C: Partnership Theory of Change*).

<sup>8</sup> Noting that any increase in direct engagement with implementing partners should supplement rather than displace their own contractual responsibilities to recruit appropriate disability inclusion expertise.

<sup>9</sup> To note, within this Partnership period, but outside the Partnership, DFAT has also partnered with the International Disability Alliance (IDA), Disability Rights Advocacy Fund (DRAF) and PDF to support capacity development work with OPDs. An intended activity during the Partnership period was to map existing OPD capacity development initiatives funded by DFAT, particularly in the Pacific. There is an ongoing need to complete this work – see recommendation 16.



2. Secondly, IAG will at times identify where there is an opportunity to strengthen DFAT's capacity as a duty bearer in their relationship with OPDs, and offers to assist with this (e.g. ensuring OPD consultations are accessible). This work is a blend of partnership brokering, equipping DFAT, and supporting OPDs. This is usually performed responsively and is currently captured under Outcome 2 but would be equally relevant under Outcome 1.
3. Thirdly, it means identifying opportunities to connect OPDs and the voice of the disability movement with DFAT and in other regional and global forums, so that the priorities of people with disabilities can inform initiatives that seek to realise their rights. This blends partnership brokering with ensuring that the technical advice and capacity development provided to DFAT under Outcome 1 is informed by lived experience. It also contributes to Outcome 4.

The PDF partnership is an example of this approach; support is driven by PDF's needs and priorities. There are four discrete areas of work: (i) facilitating communications as an intermediary between PDF and other stakeholders as required by PDF (ii) technical advice with a strong emphasis on identifying and providing complementary skills offering aligned with a localisation approach, using the PDF strategic plan as the guide (iii) Surge capacity support if PDF require additional capacity to match the demands on their time (iv) organisational support in terms of holding space for and working alongside PDF's leadership.<sup>10</sup>

**Recommendation 2.** DFAT and IAG to work with PDF during the remainder of this Partnership agreement to identify how the Partnership can best support it during the organisation's leadership transition and through the next strategy development cycle.

**IAG's partnership approach is deeply valued by all OPDs interviewed for this review, for supporting their strategies while facilitating influential OPD engagement with DFAT's programming, strategy, and policy processes. IAG helps OPDs understand DFAT's environment and aids DFAT in understanding the role and context of OPDs and how to ensure accessible and meaningful engagement with them.** For example, in response to a recent request from Port Moresby Post, IAG prepared a concise summary of lessons learned and recommendations of good practice engagement with OPDs, drawing from the experiences of DFAT and other donors, particularly in the Melanesian and Pacific context. This will inform Post's efforts to take a long-term strategic approach to support and expand the capacity of OPDs in PNG.<sup>xiv</sup> This collaborative, principled approach builds trust and buy-in from OPDs. Leveraging its convening power, the Partnership facilitates multi-stakeholder engagement to amplify OPD voices and ensure their perspectives inform national dialogues, DFAT initiatives, and priorities. For example, funding from DFAT enabled staff from several OPDs to participate in the Transform Communities International (TCI) Asia-Pacific Plenary Workshop in Bali in August, and a CBM advisor also attended. Supported participants were from Timor-Leste (ADTL and RHTO), Tonga (NATA) and the Pacific (PDF). Participants from the Fiji Psychiatric Survivors Association (Fiji) were funded through the Disability Rights Fund but were supported by CBM whilst in Bali. The workshop resulted in the development of the Bali Declaration, which reflects TCI Asia-Pacific's core philosophy, aspirations and work on promoting the right of people with psychosocial disability to make decisions about their lives. This inclusive model raises disability inclusion awareness among DFAT staff and partners while providing tailored OPD support.

*"The support we've had from CBM has been immensely fruitful, empowering... CBM has been a great supporter, it's a role model of a partnership... we are usually engaged in a very tokenistic way – just grab someone with a psychosocial disability – but with CBM it has been a dignified collaboration" - OPD*

<sup>10</sup> Note that in addition to the DFAT funding provided to PDF through CBM, it also provides direct grant funding to PDF.

**Recommendation 3.** The new design should consider how best to ensure that these OPD partnerships can be supported by IAG or an equivalent organisation with strong legitimacy in the disability movement.

**There are also significant examples of the Partnership's engagement with OPDs influencing changes in DFAT policy and practice.** For example, adoption and integration of PDF's conceptual framing of 'preconditions for inclusion'<sup>11</sup> and 'disability equity'<sup>12</sup> into DFAT's agenda reflects OPD priorities gained through the collaborative approach. Preconditions is now a foundational framing and concept used by DFAT that has enriched the sector's understanding of the needs of people with disabilities and how to approach these. Similarly, in assisting PDF to prepare conference submissions, IAG helped PDF to confirm and clarify its call for a greater focus on 'disability equity'.<sup>xv</sup>

**The Partnership has worked hard to mitigate risks with regards to unequal power dynamics and ensuring meaningful and mutually beneficial engagement with OPDs.** For example, as noted by all OPDs interviewed, CBM's approach is 'empowering' rather than 'extractive' as experienced by OPDs with other development partners. This requires ongoing monitoring and reflection.

### **Strategic Outcome 3: Evidence of good practice disability inclusive development is collected, disseminated, and used.**

**Scope:** The Partnership aimed to collect and analyse evidence of proven effective practices in disability inclusive development, providing insights relevant to DFAT's work.

**The Partnership's efforts to document good practice have addressed knowledge gaps and there is some evidence that they have contributed to understanding, awareness and practice change.** Clearly, the Partnership has made broad investments in collecting and documenting evidence of good practice. Over the course of this Partnership period, 244 knowledge resources were curated and uploaded to DID4All by September 2023, covering a wide range of country/regional contexts, sectors/themes, program cycle stages, modalities, etc. Around 20% were focused on accessible infrastructure and communications, 16% focused on COVID-19 and about 11% were focused on humanitarian action. The least reflected sectors were: ageing; CBID; sexual and reproductive health; social protection; and violence against women with Disabilities – all about 1% or less each. Formats are also diverse, including videos, training packages, case studies, guidance notes, and talking points. Between January 2018 and June 2023, resources links on DID4All were accessed 142,631 times.

*'The fact sheets, as a tool, did increase my capacity to brief ministers, so the access to information is the main benefit that I've had.'* – DFAT staff member

The *Washington Group questions study* informed discussions between DFAT and the Washington Group, including a briefing report for DFAT's attendance at the 19th Annual Washington Group Meeting. Linked with this work, Nossal Institute also hosted a drop-in data clinic in 2019 providing tailored advice to interested organisations on disability data. Over the three days, 24 participants from 16 organisations took up the offer, including representatives from the Australian Government, UN agencies, disabled people's organisations and non-government organisations from Australia, Asia, the Pacific and as far

<sup>11</sup> There are six different themes which are pre-conditions for inclusion. These are accessibility, assistive device, support services, social protection, community based inclusive development (CBID) and non-discrimination. These measures/actions need to be in place first before inclusion for persons with disabilities can be achieved.

<sup>12</sup> As articulated by PDF, equity goes beyond mere inclusion for people with disabilities. It necessitates examining whether resources are available, appropriate, and sufficient to achieve justice; ensuring adequate coverage reaches those facing multiple layers of exclusion; meeting the unique needs of different individuals, including those with under-represented impairment types or high support needs; scrutiny of data beyond quantitative outputs of inclusion to assess if meaningful outcomes of equity and access to rights are being achieved for all; and it involves identifying and addressing underlying systemic drivers of exclusion that may require broader, systemic changes rather than siloed efforts for inclusion.

away as the United Kingdom. The *Early Childhood Development study* in Fiji provided recommendations that were incorporated into Fiji's new National Early Childhood Development Policy and forthcoming National Policy for Persons with Disabilities. Furthermore, capacity-building efforts on research and digital storytelling with 4 Indonesian OPDs under the Partnership continued with a follow up Australia Awards Fellowship (AAF). The AAF continued and expanded training in evidence-based digital storytelling techniques for disability inclusion advocacy. As a result, SAPDA<sup>13</sup> (Indonesian OPD) have recently been awarded funding by DFAT's KONEKSI<sup>14</sup> program in Indonesia to continue and further roll out related training and networking on research with OPDs in Indonesia. This is significant because while advocacy lies at the core of OPD work, they often lack sufficient resources and capacity to effectively collect, apply, and communicate research evidence to substantiate their advocacy work, limiting potential reach, uptake and influence of their advocacy efforts.

DIS staff have also indicated that resources developed by CBM continue to be foundational to briefings provided to Australian Government representatives attending high-level meetings, and advisory products created by the Partnership have been picked up and used by other development actors around the world. For example, the Partnership worked to create a COVID-19 Vaccination Fact Sheet to support OPDs communicate information about COVID-19 vaccination with their members and constituencies. The fact sheet was translated into Arabic and Kurdish by IOM Iraq, as team members there found the documents in the public DID4All resource library and identified they would be useful for their context.

**While the Partnership has made significant strides in generating products and guidance to inform disability-inclusive development practices, there is room for improvement in disseminating these resources effectively within DFAT so that they are used.** The Partnership has shared and promoted knowledge products in various external forums, through peer reviewed publications and conference presentations. On the other hand, DFAT focal points and 'end-users' often lack awareness or face challenges in accessing the available evidence products developed in response to DID4All requests or developed proactively by IAG and Nossal Institute. This suggests that the Partnership's current communications approach and website is not leveraging the most effective channels to share evidence within DFAT. Moving forward, the Partnership should explore innovative strategies to ensure that the knowledge and evidence generated is widely disseminated and readily accessible to those who can benefit from it. A periodic GEDSI-focused newsletter for DFAT staff that 'spotlights' available products under a selected theme, may be one practical way forward. Better and more efficient dissemination planning is also needed.

**Recommendation 4.** Informed by consultation with target audiences, DFAT (supported by IAG as needed) should identify practical ways that i) just-in-time access by DFAT staff to existing knowledge products could be improved ii) upcoming knowledge products can be more effectively disseminated upon completion. These measures could be trialled over the remainder of the Partnership, to inform the new design.

## **Strategic Outcome 4: Australia demonstrates global and regional leadership in disability inclusive development.**

**Scope:** The Partnership aimed to connect DFAT with key influential figures and organisations in the disability space, identifying opportunities for DFAT to engage internationally on disability issues while providing technical support to prepare for major forums and events.

<sup>13</sup> Sentra Advokasi Perempuan, Difabel dan Anak

<sup>14</sup> KONEKSI is a collaborative initiative in the knowledge and innovation sector that supports partnerships between Australian and Indonesian organisations for inclusive and sustainable policy and technology.

**From the perspective of many interviewees including independent consultants and OPDs, Australia continues to be seen as a leader on DID in various multilateral, regional, and bilateral forums.** The Partnership provides support to this leadership through its connection to the disability movement. Through CBM and Nossal's relationship with the disability movement, the Partnership can mobilise and support engagement of OPDs in global fora, especially drawing in OPDs which DFAT does not have direct relationships with. The Partnership additionally provides practical 'behind-the-scenes' support to DFAT's engagements in various policy events and forums, such as the Conference of State Parties (COSP), and the Global Disability Summit by developing informed talking points, drawing together examples of programmatic applications and case studies to share with others, providing context with regards to OPD operating environment and highlighting key discussion topics.

Between 2018 and October 2023, the Partnership facilitated key activities that strengthened Australia's leadership, including attendance and presentations at prominent events such as the Global Action on Disability (GLAD), COSP, Global Disability Summit, 3rd Pacific Community Based Rehabilitation (CBR) Forum, and International Day of People with Disabilities. Furthermore, the Partnership enabled Australia's endorsement of the Joint Statement: Towards Inclusive Social Protection Systems, and notably, during the Australian Government's co-hosting of the Asia-Pacific Ministerial Conference on Disaster Risk Reduction (APMCDRR) in Brisbane, the Partnership ensured the active and central involvement of people with disabilities across all aspects of the Conference, resulting in their high visibility and meaningful participation.

**Most recently, DFAT worked with IAG and Nossal Institute to promote a strong voice for OPDs in development of IDEARS, by facilitating broad and inclusive OPD consultation and synthesising existing documentation of regional disability movement priorities.** This collaborative approach was also implemented by DFAT with other OPD engagement support networks and organisations that DFAT supports (such as the Disability Rights Advocacy Fund). With the in-country and online consultation process, this ensured that the perspectives and priorities of OPDs informed the strategy. Additionally, DFAT tasked IAG/Nossal Institute to undertake secondary data analysis to identify, collate, and analyse already documented regional disability movement priorities. This work will serve as a critical input to DFAT's next steps on disability equity and rights.

*"So much of the work over the last 6 months has been about IDEARS and that's been incredible. The support provided [through the Partnership] and what we've undertaken is an incredibly inclusive consultative process, very inclusive of OPDs and people with disability in the region and Australia. It's a great example of our international leadership." – DFAT staff member*

Another example is the Partnership's support in the lead up to and during the 2018 Global Action on Disability Network (GLAD), held in Helsinki. Senator Fierravanti-Wells delivered the keynote address alongside her Finnish counterpart and chaired a 3-hour session of GLAD state members looking at strategic issues for GLAD. The Senator's engagement was supported by the Partnership through the development of resources capturing lessons learned about OPD engagement. Support was also provided to national OPDs from Indonesia and Vanuatu to share recommendations on OPD engagement in programs to a large range of global donors and stakeholders. A further example is the Partnership's support to the Australian Government's co-hosting of the Asia-Pacific Ministerial Conference on Disaster Risk Reduction (APMCDRR), in Brisbane 2022. The Partnership was able to support the active and central role of people with disabilities in all aspects of the Conference. This resulted in people with disabilities being highly visible at APMCDRR, including in Spotlight events on the main stage, in a range of partner events, and at the 'Pacific Pavilion' and Ignite Stage etc.

**In contrast, a few stakeholders outside the Partnership observed that Australia's leadership on disability inclusion had lost momentum, leading to less influence in global forums.** They cited difficulties setting clear priorities for Australia's policy engagement in this area, variability across the



development program with regards to disability equity and inclusion practice, and the need for an updated external-facing disability strategy. The launch of IDEARS will obviously be an opportunity to address this perception.<sup>15</sup>

## To what extent has the partnership articulated and measured the change it is trying to achieve? How is monitoring data and reporting being used?

The Partnership's Monitoring, Evaluation and Learning Framework (MELF) was updated in 2018 as part of the 171218 DFAT-CBM Partnership Agreement. This version of the MELF emphasises learning, and states that it focuses on the *quality* of the Partnership and the *nature and extent* of the contribution that the Partnership makes to the achievement of higher-level objectives.

**The theory of change is an adequate summary of the Partnership's intent, although it is not well socialised among all key stakeholders to the Partnership, contributing to disconnects in how the Partnership is managed.** At a broad level, the theory of change is considered an adequate and relevant articulation of what the partnership is trying to achieve, even though it is rarely referred to in partnership discussions. However, an understanding of the Partnership's theory of change is not deeply held by all partners, nor do all partners share visibility across all four outcome areas. There is a need to see the activities of the Partnership in concert and as critical enablers of each other – so that opportunities to deepen the Partnership's impact by exploiting linkages across outcomes areas can be more easily identified. This could be promoted by clearer articulation of a set of strategic priorities that cut across all components of the Partnership – discussed further under KRQ2 below.

**The Partnership has not undertaken a department-wide analysis or stocktake with regards to DFAT's technical support and capacity building needs, and lacks an up-to-date capacity building plan to guide its work although such plans have existed in the past.** This continues a need identified in the 2018 ODE evaluation which recommended that DFAT should have '*a systematic capacity development strategy that has targeted specific training opportunities, integrated disability into existing learning and development programs, incorporated work to improved and monitored disability inclusion in job descriptions, identified and build the capacity of disability focal points.*' Numerous efforts to develop and refresh capacity development plans have occurred during the Partnership period; these attempts have been hindered by human resource constraints and staff turnover.

**Recommendation 5.** IAG and DFAT to update the capacity building plan to reflect key priorities for the remainder of the Partnership, informed by the upcoming International Disability Equity and Rights Strategy.

**Recommendation 6.** DFAT to explore with Nossal Institute opportunities to support DIS and other relevant DFAT staff engage in accredited DID capability development.

**Partnership monitoring and reporting tend to focus on activities and outputs, rather than outcomes.** The MELF and reporting are mainly focused on outputs delivered and participant/user satisfaction with these outputs. The MELF lacked measurable targets or progress markers in relation to expected outcomes. There is some capture of progress towards outcomes in Partnership reports, but this is mainly anecdotal. The MELF largely defers responsibilities for outcome data collection to external evaluation, rather than resourcing the collection of this data more regularly throughout implementation<sup>16</sup>. Consequently, and echoing sentiments from the 2017 evaluation,<sup>xvi</sup> the aggregate influence of the Partnership across the Australian development program remains difficult to assess.

<sup>15</sup> To note, IDEARS is anticipated for launch in 2024

<sup>16</sup> Noting that in the MELF, this review was initially planned to focus on impact of the Partnership, however this scope was revised in drafting the review's terms of reference.

**More could be done to ‘close the loop’ between MEL and strategic decision-making, as well as improve linkages across the outcome areas.** There is an opportunity to further utilise monitoring data to inform program decision-making at the activity and strategic level and identify linkages across the outcome areas, as currently MEL does not routinely nor explicitly feed into strategic decision making in the Partnership.

**Recommendation 7.** In the remainder of this Partnership, IAG and DFAT to collaborate on the development of outcome-focused (i.e. ‘down-stream impact’) case studies that examine key examples of outcome achievement and their contributing factors. For example, these could be focused on a variety of key Posts (e.g. by size) where improvements in DID practice seem to be more evident. These should be timed to inform the upcoming design.

**Recommendation 8.** The Partnership should synthesise design/IMR review and DID4All Helpdesk data to identify key priorities for future DID support e.g. key topics for future research or guidance; geographical or thematic areas requiring greater assistance etc.

### **To what extent have efforts to engage diverse OPDs, mainstream gender equality and other intersectional considerations (e.g. LGBTQIA+ / First Nations approach to foreign policy) across the partnerships four outcomes been effective?**

**IAG has made efforts to engage diverse OPDs and takes an intersectional approach.** IAG has been supporting DFAT in relation to intersectionality for several years including the development of a background brief on disability inclusion within intersectionality in 2021, and in late 2023 IAG participated in the DFAT led first combined GEDSI capacity building mission occurred at Indonesia Post.<sup>xvii</sup> In addition, IAG takes a proactive approach to seeking out diverse representation among OPDs and individuals, including diversity of impairments and characteristics.

**There is evidence of increasing cooperation between the Partnership and gender equality mainstreaming and capacity development efforts, aligning to recent DFAT changes in organisational structure, and through collaboration with DFAT’s Support Unit for Gender Equality (SURGE).**<sup>17</sup> The Partnership has increased its integration with gender equality support, particularly through collaboration with SURGE. At the start of the Partnership, technical support for gender equality and disability inclusion were separate. With gender and disability inclusion sections coming together in the same Branch, there has been more focus on GEDSI integration within DFAT.<sup>xviii</sup> Of the 33 tasks raised between July-Dec 2023, nine (27%) involved some level of coordination with SURGE.<sup>xix</sup>

**There is less evidence of mainstreaming intersectional considerations such as LGBTQIA+ and/or indigenous foreign policy across the Partnership outcomes.** It is important to note that these are newer DFAT policy priorities. The Partnership has worked to engage with stakeholders to add to the intersectional evidence base with regards to disability and LGBTQIA+, and a disability learning brief has been developed with Edge Effect, an advisory partner to DFAT.<sup>18</sup>

<sup>17</sup> The Support Unit for Gender Equality (SURGE) provides gender technical advisory services for DFAT to have access to timely, high-quality advice and resources to strengthen its global, regional, and bilateral development portfolio and policy engagement efforts related to gender equality and women’s and girls’ empowerment.

<sup>18</sup> Edge Effect assists humanitarian and development organisations to work in genuine partnerships with sexual and gender minorities (aka people with diverse sexual orientation, gender identity/expression, and sexual characteristics (SOGIESC), or LGBTQIA+ people).



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## KRQ2. HOW WELL DOES THE CURRENT PARTNERSHIP MODEL SUPPORT IMPLEMENTATION AND PROGRESS TOWARDS OUTCOMES?



### What are the strengths and weaknesses of the current model and its implementation, including governance and management arrangements?

DIS is responsible for the overall management of the Partnership. The governance structure includes a Partnership Steering Committee comprising senior representatives from DFAT, CBM Australia, PDF and the Nossal Institute, which meets biannually to provide strategic oversight and risk management. A Partnership Working Group with manager-level representatives from the partners develops and monitors the Work Plan, meeting frequently between Steering Committee meetings. While a Partnership Reference Group involving OPDs was intended to provide input, it was not established. Instead, six-monthly Partnership Health Checks involving the Steering Committee and Working Group assess communications, trust, changes, and decision-making processes, identifying areas for strengthening through agreed actions over the next six months. This multi-layered governance approach aims to ensure effective management and continuous improvement of the Partnership.

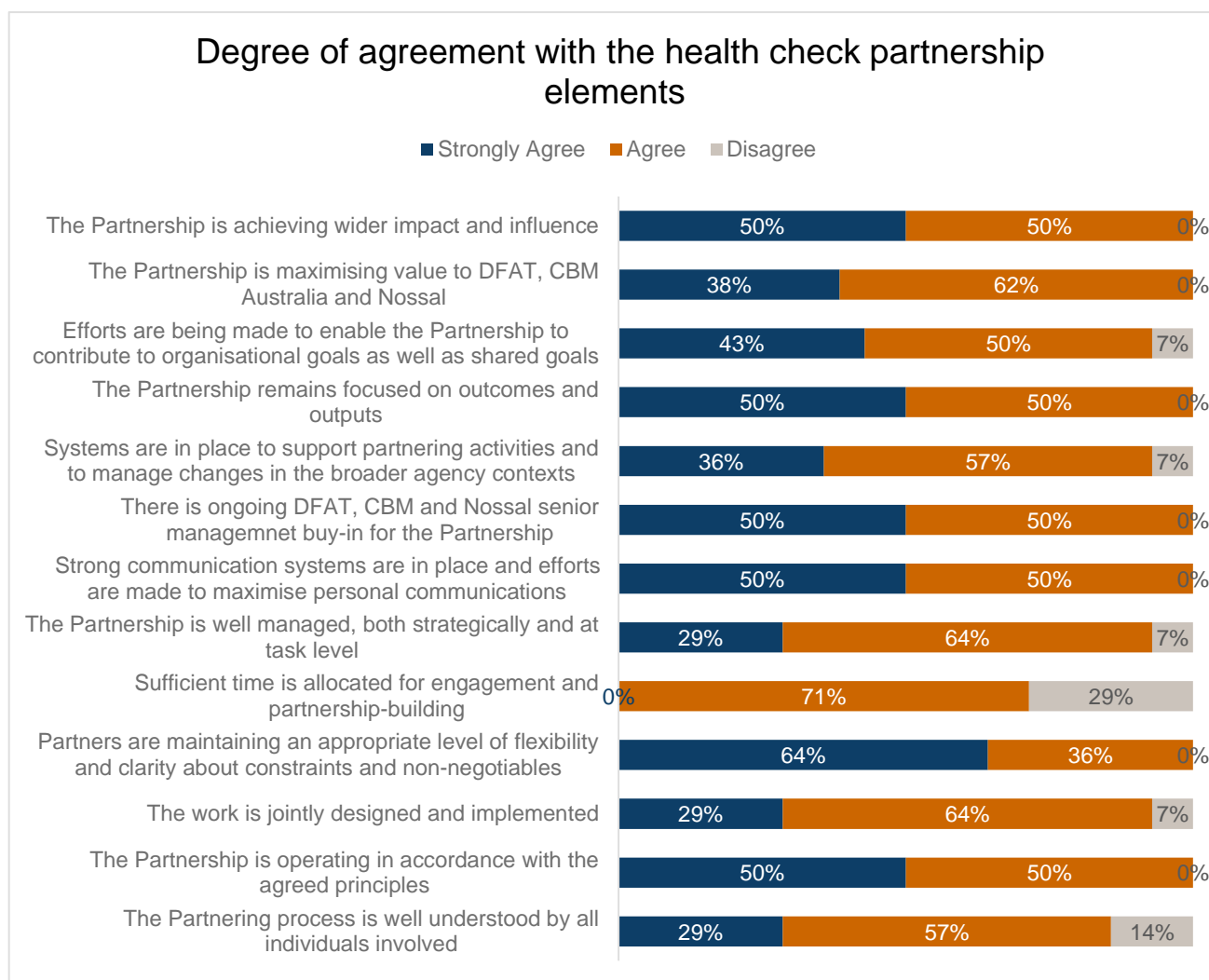
### Strengths

**Various data sources show that the Partnership model is highly valued, that working relationships are strong, and that partnership ways of working are well applied in practice.**

Reflections from key stakeholders – provided in partnership health checks, interviews, and surveys – consistently highlight the partnership's strengths. Notably, the principles and ways of working underpinning the partnership are strongly evident in practice; fostering a collaborative environment built on trust, open communication, and well-established operational processes. Staff from each organisation expressed their appreciation for the partnership's flexibility, responsiveness, and adaptability in addressing evolving contexts and incorporating lessons learned. The robust working relationship between partners, founded on mutual trust and open communication channels, has emerged as a cornerstone of the partnership's effectiveness. Overall, the Partnership is clearly a model that continues to deliver value.

In support of these findings, Figure 1 below shows results from an anonymous survey of senior and working level partnership staff at DFAT, IAG, and Nossal Institute, asking about various elements of the partnership's effectiveness e.g., outcome/output-focused, strong communication. On 11 out of 13 of these elements, over 90% of respondents agreed or strongly agreed that the desired partnership features were evident in practice.

**Figure 1 Degree of agreement among key Partnership staff with the health check partnership elements**



**There is unique combination of value – in terms of its ways of working, OPD relationships, and technical expertise - brought by IAG to the Partnership.** This is complemented and extended by the value and expertise brought by Nossal and DFAT (See KRQ1, ‘Enabling factors’). The close and collaborative model between the partners has ensured that despite fluctuations in the enabling environment, the core work of the Partnership has continued to a high standard.

**The model is distinctive in that it is framed as a grant partnership, engages directly with a not-for-profit for strategic collaboration and demonstrates good people-with-disability-led practice.** The model is unique in the support provided to PDF and OPDs, through involvement of PDF in governance arrangements, through the methodology underpinning the IDEARS consultation as well as in the coordination of OPD panels and the research and evidence work which engages closely with OPDs. It also extends and complements the offering of a technical advice helpdesk with the other components of the Partnership, for example through Post visits and evidence product generation and dissemination.

*“We provide input; we can raise areas with key decision makers, in terms of strategic advocacy, direction or focus of the broader partnership” – PDF staff member*

**In relation to DID4All, the cost-free availability of technical assistance is a deeply valued resource,** particularly by Posts with little resourcing to access technical assistance through contracting.

## Weaknesses

**Throughout the Partnership period, there have been fluctuations in the enabling conditions for joint strategic planning.** The partners are currently working to prioritise more strategic conversations now that there is more stability in key partnership personnel. They are also trying to create space for more joint planning and role clarification; as well as to better link strategic- and operational-level Partnership dialogue. These efforts should also help to address the fact that close to 30% of survey respondents, as shown in Figure 1 above, felt more time was needed for engagement and partnership-building.

**Recommendation 9.** DFAT, IAG, and Nossal Institute to prioritise shared strategic work planning for the remainder of the Partnership to ensure collective understanding of priorities, roles and responsibilities.

**The Partnership lacks clear strategic priorities to drive work across all its components.**

Prioritisation across the four outcome areas has shifted over time, in part reflecting changes in DFAT's policy environment. For example, the strategic priorities do not reflect Australia's new International Development Policy, Performance and Delivery framework. There is an opportunity to improve a common understanding between all parties regarding how the different outcome areas are interconnected and prioritised. Within the Partnership's support to DFAT, there is also a need to more clearly agree which 'levers for change' the Partnership will prioritise, including the necessary trade-offs involved.

**Recommendation 10.** Informed by lessons from the Partnership, DFAT's design of the new integrated GEDSI advisory service should be clearer about which 'levers of change' the service should prioritise in its efforts to improve policy and practice in DFAT. This should involve more explicit trade-offs between deep vs. broad and responsive vs. proactive engagements. As noted under KRQ1, one option is to provide more intensive, multi-faceted and continuous support to selected country/regional programs, guided by multi-year capacity improvement strategies.

**There is scope to improve the efficiency of approval processes within the Partnership.** There are various examples of activity implementation being slowed by DFAT approval timeframes for example for review and approval of new evidence products. One way to address this may be to elevate these approval points to a more strategic level, delegating to IAG or Nossal Institute the responsibility to make operational decisions in line with a well-defined strategic mandate from DFAT.

**Recommendation 11.** Over the remainder of the Partnership, IAG and DFAT should identify areas in which DFAT approval responsibilities could be elevated to a more strategic level, to improve efficiency.

**In relation to DID4All, several interviewees identified two key constraints to both Post-level buy-in and the scale of Partnership influence.** First, it is not possible for country programs to co-invest in Partnership activities e.g. Post- or investment-level support. Second, the Partnership does not deploy long-term disability inclusion advisors. These will be important design considerations for DFAT's proposed integrated GEDSI advisory service.

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## KRQ3. HOW WELL HAS THE PARTNERSHIP BEEN ABLE TO ADAPT TO MEET DFAT'S EVOLVING NEEDS AND POLICY CONTEXTS OVER THE LIFE OF THE PARTNERSHIP?



**How well does the support provided by / the activities of the Partnership match DFAT's current disability equity and rights technical support and capacity building needs?**

**There is strong evidence that the Partnership has adapted well to evolving DFAT needs and approaches.** As such, it continues to serve an important and valued function in strengthening the capabilities and capacity of DFAT to fulfil Australia's commitment as a signatory to the UNCRPD in realising rights for people with disabilities, as well as delivering on Australia's priorities. From the perspective of those interviewed, and documents reviewed, the relevance and value of the Partnership's contribution has included: tailoring of knowledge resources to priority sectors or modalities (e.g. guidance note on DID and budget support, reflecting DFAT's recent increase in use of this modality); pivot during COVID-19 to ensure continued DID support and engagement through new ways of working; engagement with the recent DPP process; and the substantial pivot to support with the IDEARS process at short notice. On the other hand, as noted under KRQ1 (Strategic Outcome 1), there is also a desire among DFAT users for greater tailoring of DID4All advice to country context and 'real-world' constraints.

**Looking forward, a few respondents noted that there may be a need for the Partnership to engage beyond the Development Program to remain relevant to DFAT.** Some efforts have been made already, for example to engage on aid-for-trade, and in support of Australia's leadership with regards to DID.

**What can be learned from the current partnership to inform DFAT's future integrated approach to the provision of gender equality, disability equity and social inclusion advisory and other services? What are the risks of an integrated approach that should be considered in design?**

From July 2025, GEB will take an integrated approach to providing gender equality, disability equity and social inclusion advisory and other services in response to DFAT staff requests for more integrated and streamlined support. This approach will seek to strengthen the complementarities between the three sub-sectors and streamline the process of accessing integrated advice for DFAT end-users, while ensuring advice meets the needs and addresses the specific barriers people with disabilities, women and girls, and/or LGBTQIA+ persons face, as well as barriers resulting from multiple and overlapping forms of these identity factors.

**The rationale for an integrated GEDSI advisory service was affirmed by DFAT staff interviewees.** A consistent theme in interviews with DFAT staff was that a more integrated approach to the provision of GEDSI technical advice would be appreciated by DFAT staff, whose bandwidth to perform their development program management responsibilities continues to narrow.<sup>xx</sup> From an efficiency perspective, an integrated advisory service may also deliver economies of scale in terms of overhead costs.

## Lessons

**The Partnership's recent collaboration with SURGE is providing lessons that could usefully inform DFAT's design of this integrated GEDSI advisory service.** Coordination in relation to the recent GEDSI Analysis Good Practice Note, DPP and IMR processes show the potential for mutual benefit through greater collaboration. One aspect of this collaborative work that would benefit from further codification is deciding in which cases the provision of technical advice can be 'delegated' from IAG to a relevant 'GEDSI specialist' versus when direct provision of this advice by a disability specialist is needed.

**Recommendation 12.** During the remainder of the Partnership, IAG, SURGE and DFAT should conduct one or more reflection workshops to capture emerging lessons in relation to the application of a more integrated approach to the provision of GEDSI technical advice. This should include consideration of thresholds with regards to when disability specialist technical assistance is needed vs. when GEDSI technical assistance is 'good enough'.

**Another key lesson is that further clarity is needed on the specific qualifications, experience, and capabilities required of disability equity and inclusion advisors, as well as gender equality and GEDSI advisors.** The absence of clear competencies for these roles has sometimes led to a mismatch between the expertise required and the actual expertise provided, hindering effectiveness and potentially causing unintended harm. One OPD reported an example where some GEDSI "experts" provided advice that did not align with the UNCRPD yet were positioned as trusted sources over OPDs themselves. For OPDs it is critical that a partner and/or disability equity and inclusion advisor can demonstrate knowledge and understanding of the UNCRPD policy and have experience in providing advice in line with the UNCRPD across sectors and policies. Furthermore, they must be connected with and accountable to the disability movement.

Members of the Partnership are well aware of this concern and are actively trying to manage it. As a next step, further delineation is needed on the various components of "GEDSI expertise", including which components are essential or desirable in different contexts/domains. Once clarified, these should inform DFAT's design of the new integrated GEDSI advisory service, including position terms of references and service delivery standards. Without this clarity, there is a risk that recruitment for GEDSI advisors may lack required disability technical capabilities.

**Recommendation 13.** During the remainder of the Partnership period, IAG, in conjunction with GEB, should develop a definition inclusive of experience, credentials and capabilities for a disability equity and inclusion advisor, and work with SURGE and other key stakeholders to develop gender equality and GEDSI advisor definitions that can contribute to the design process for the next phase.

**Related to the above, there has been a resurgence of word "inclusion" as substitute for spelling out disability inclusion, gender equality, indigenous sovereignty, etc.** Even the term "GEDSI" leaves out equity and rights in relation to disability and social inclusion. The inevitable limitations of these 'catch all' phrases is reaffirming the need for DFAT investments to be supported to specify the particular group/s they are targeting in each context.

**More fundamentally, a key lesson from the Partnership is that a multi-pronged and sustained approach to capacity development is essential.** Demand-driven advisory services alone are unlikely to lead to institutional change. A key strength of the Partnership has been its multi-pronged nature, covering dedicated partnerships, disability-specific research, evidence, advisory support to DFAT, and capacity development for OPDs.

A capacity development lesson that has emerged is that a more intentional approach is needed to capability investment in DIS staff as well as other DFAT staff playing disability advisory roles, particularly in anticipation of increased demand for disability inclusion emphasis and awareness following the launch of IDEARS and noting the end of this Partnership in 2025.<sup>xxi</sup> Previous evaluations by ODE<sup>xxii</sup> and reports from IAG have highlighted capacity gaps and constraints within DIS. As DFAT and other agencies work towards greater disability inclusion, the demand for technical assistance will rise, increasing the need to train, recruit, or retain skilled staff with the capabilities to provide appropriate DID technical assistance and support. While the Partnership aimed to strengthen technical capacity of DIS and other staff advising on DID, competing priorities and operational constraints hindered realisation of this ambition.

**Recommendation 14.** During the design of the next phase, DFAT and the design team should examine opportunities to maintain a multi-pronged approach to capacity development (underpinned by links to the OPD movement), rather than relying on advisory support alone. As noted under recommendation 10, this should be underpinned by a clearer set of overarching strategic priorities and more explicit trade-offs e.g. breadth vs. depth. A more intentional approach to investment in capability of DIS and other staff advising on DID should also be a key feature, informed by a clear-eyed assessment of relevant operational constraints.

## Risks

**However, a key risk of the shift to integrated GEDSI advisory services is a dilution of focus on disability inclusion, equity, and rights.** Combining gender, disability, and social inclusion under "GEDSI" may oversimplify and dilute the complexities of each issue (as well as the depth of consultation with each group), potentially hindering efforts to address specific challenges faced by different groups, particularly those most marginalised such as those with psychosocial or intellectual disabilities.

*"The concern about GEDSI is that it is watering down exactly when we need increases in technical and specialised advice" – Independent consultant*

Translating conceptual frameworks into practical, fit-for-purpose advice that reflects the needs of the most marginalised groups poses significant challenges. There are apprehensions that a broader GEDSI focus may blunt the effectiveness of disability-specific efforts, impeding the substantive change needed for equity and rights realisation. Additionally, tokenistic inclusion in processes like consultations risks developing programs that fail to address real needs, raising reputational concerns. These potential pitfalls underscore the importance of nuanced and tailored approaches that prioritise meaningful engagement and accurately represent the diversity of perspectives within marginalised communities that come under the GEDSI umbrella.

**Furthermore, there is a risk that strengths of the current partnership model will be lost.** IAG, Nossal Institute and OPD direct partnerships with DFAT are highly valued aspects of the current model, leading to trusting relationships that benefit from at times difficult and challenging conversations. As discussed earlier, IAG also plays a central role in facilitating (but not mediating) some elements of DFAT-OPD relationships. If a new integrated GEDSI advisory service is contracted to a managing contractor (MC) or MC-led consortium, there is a risk that the benefits of these partnerships may be weakened if they are mediated through a contractual relationship between DFAT and the MC. This risk can be mitigated but will require special attention during the design.

**Finally, there is a risk regarding cost implications and prioritisation.** Disability equity and inclusion recommendations can often have greater costs attached to their implementation, which puts them at risk of not being adopted, particularly when packaged within a broader set of GEDSI recommendations. This could reduce the overall influence of disability advisory support on DFAT programming.



## What learning has emerged from the partnership (in particular the support to the Pacific Disability Forum under Outcome 2) which could inform engagement with other OPDs and a future OPD partnership approach?

The Partnership has generated several key lessons relating to its relationships with OPDs, especially PDF. These are summarised below, based primarily on interviews with OPD, IAG staff and IAG contracted advisors.

**For the foreseeable future, there will be a continued need for DFAT to provide core funding to OPDs, including resources for capacity and capability building.** As reported by many key informants, including numerous interviewed OPDs, OPDs are often expected to consult on a wide range of sector and policy issues despite their primary role being advocacy for their constituents.<sup>19</sup> Additionally, many staff of OPDs have limited formal education due to marginalisation and discrimination based on their disability. Consequently, providing appropriate remuneration and capability development support in line with OPD needs is crucial to ensure they can bring informed perspectives to consultations.

*“Sometimes assumption is that an OPD can implement a program but [this] doesn’t account for core funding. OPDs are not climate change experts, [there is an] expectation that they have knowledge on this rather than capacity support for them to learn about climate change and then engage regarding their lived experience with regards to climate change... OPDs are expected to know all” – OPD staff member*

**Certain enabling conditions need to be in place to ensure that partnerships with OPDs function well as learned through CBM’s partnerships with PDF and RHTO**, which may have broader applicability. These include opportunities for the OPD and its support partner (in this instance, IAG) to work together and develop trust and context understanding, ensuring OPDs are adequately resourced (as engagement is naturally limited when led by volunteers with other jobs), and ongoing funded opportunities for OPDs to work with DFAT, facilitating their role.

**Strengthening OPD capacity is essential for their meaningful participation, aligning with the "Nothing about us without us" principle.** Capacity assessments should adopt a strengths-based approach and prioritise authentic engagement and nurturing partnerships to accurately understand OPD perspectives and meet their needs. On this note, donors must ensure their funding models, expectations, and compliance measures align with the needs, capabilities, and cultural contexts of OPDs – reinforcing the need for capacity strengthening of donors to meet these expectations. Improved donor-OPD connectivity is crucial for identifying specific requirements and enabling tailored, supportive engagement. Beyond the conceptual, this also includes practical elements such as holding accessible meetings and managing reasonable accommodations.

*“There’s always been the perception that OPDs have low capacity... but flip it around... DFAT has low capacity to meet OPDs where they are at and be adaptable to meet OPDs in terms of their needs in terms of funding, flexibility, inviting OPDs to a meeting. You can see it as a deficit of what an OPD does, or flip it – OPDs are highly skilled in their core areas” – Independent consultant*

**There is a risk that DFAT’s core investments in OPD capacity strengthening are overwhelmed by broader and unrealistic demands across DFAT for OPD consultation on all investments.** This requires careful management by DFAT through the existing Partnership and the next phase of integrated advisory support. There is a need to consider a systemic approach to OPD engagement, potentially at the whole-of-Post level. Success for DFAT investments in terms of disability equity and inclusion needs

<sup>19</sup> It is worth noting that this flows from the expectation (reflected in DFAT’s IMR criteria) that all investments consult meaningfully with OPDs throughout the program cycle.

to be broader than consultation with an OPD; if every investment were to consult with an OPD this would be unsustainable. A systems response is required to ensure that investment measures of success (e.g. DFAT IMR ratings) are not solely determined by engagement with an OPD, and that where OPDs are engaged, they are consulted in meaningful, mutually beneficial and sustainable ways. When OPDs are consulted by different DFAT teams or implementing partners, there needs to be better coordination of this engagement, particularly at the Post/country level, and an intentional sharing of that input across DFAT to avoid siloing of information, and to avoid repeat engagement on the same topic with the same OPD. There also needs to be resourcing and budgeting allocated towards OPD contribution of technical expertise to DFAT programming. Ultimately, **decision making about when, how and on what issues to engage should be in the hands of OPDs.**

**A related issue is that challenges in DFAT-OPD engagement have arisen where DFAT staff lack understanding of OPDs' representational roles, leading to mismatched expectations for OPD engagement in program design and implementation.** The core function of OPDs is to represent the disability constituency, not act as de facto delivery partners. This issue has raised for the Partnership an important lesson that the onus remains on the duty bearer (e.g. DFAT) to understand disability issues and mainstream inclusion, rather than placing this responsibility on OPDs - a misunderstanding that sometimes occurs within programs. Clarifying for DFAT staff the distinctive advisory and advocacy roles of OPDs vis-a-vis duty bearer obligations will be a continuing challenge for the existing Partnership and the upcoming integrated GEDSI advisory service.

**Recommendation 15.** During the remainder of this Partnership, DFAT and IAG to propose a model for how Posts could establish and maintain strategic engagement with OPDs at a whole-of-Post level, with a goal of developing long term partnerships, offering core flexible funding and codifying lessons learned to be shared across portfolio investments. DFAT and IAG should also review current IMR criteria relating to engaging with OPDs, to mitigate the risk of non-strategic or inefficient OPD engagement.

**Anticipate and plan for increased demands on OPDs.** As efforts to enhance disability equity and inclusion become more ambitious, the responsibilities placed on OPDs will increase. Therefore, providing sustained core funding, capability and capacity development in line with OPD needs and fostering collaborative partnerships with OPDs are essential components of effective development strategies. Donor expectations and support need to be strengths- and partnership-based, and tailored to OPD capacity, capability, and cultural context. This may require a degree of flexibility in relation to compliance measures. Moving forward DFAT will need to consider how to systematise engagement with OPDs across the whole department to improve coordination of engagement and actively share lessons learned.

**Recommendation 16.** DIS to map DFAT support to OPDs to ensure a shared understanding of what engagement is happening and contribute to strategic discussions about harmonisation across engagement activities.

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# APPENDIX A REVIEW METHODOLOGY

## *Review purpose*

The purpose of this work is to conduct a strategic review of the Partnership. The primary objectives of the review are to:

- i. Determine the extent to which the outcomes of the partnership are on track for being achieved.
- ii. Identify opportunities and recommend strategies to improve the partnership performance in the remaining period (to June 2025).
- iii. Inform the design of integrated advisory and other enabling services to support the delivery of the new disability, gender and LGBTQIA+ strategies

Secondary objectives of the review include:

- iv. Inform the International Disability Equity and Rights Strategy, currently under development and due for release in 2024.
- v. Inform the evaluation and design of other disability equity and rights partnership supporting organisations of persons with disabilities (OPDs).

The review will assess progress against the four strategic outcomes of the partnership (both separately and globally) and identify key elements contributing to the achievement of outcomes, as well as any unintended positive or negative outcomes. Key deliverables will adhere to DFAT's MEL Standards and Ethical Research and Evaluation Guidance and will include a review plan, aide memoire, draft report, and final report.

## **Review purpose and scope**

This review scope will be bounded by:

**Focus:** Activities undertaken – and their resultant impact - under the partnership agreement between DFAT DIS and CBM Australia's IAG, as well as activities undertaken by Nossal Institute as contracted by CBM Australia under the partnership agreement. Activities undertaken in parallel between any partners and beneficiaries of the partnership that fall outside the partnership agreement are out of scope for this review.

**Time period:** Activities under the current partnership period, which commenced implementation from 1 January 2018 and it expected to end in 30 June 2025. The review will focus on activities, which have been undertaken between 1 January 2018, and end of April 2024 will be of focus (end of data collection activities for this review).

To note, the current Partnership was originally planned as a three-year agreement with an original end date of 31 December 2020. The partnership has been extended multiple times (a 12-months to extend the end date to 31 December 2021; a subsequent 12-months to 31 December 2022; a subsequent 10-months to 31 October 2023; and a final 20-month extension to 30 June 2025.)

**Stakeholders:** Those directly involved in the partnership's work with DFAT, CBM Australia and Nossal Institute, actual and 'would-be' or end-users of the technical advice and capacity building support provided by the partnership, and OPDs engaged and supported by the partnership. In-depth assessment of wider impacts on the lives of people with disabilities to which this partnership may have contributed is beyond the scope of this review.

## Key review questions

The review was guided by the following three key review questions (KRQs). A series of priority sub-questions were also developed to further guide the review process. KRQs and sub-KRQs can be found in Table X below.

Table 1. KRQs and Sub-KRQs

KRQ	Sub-KRQ
<b>1. To what extent is the Partnership achieving its four strategic outcomes?</b>	1.1 What is going well and why (enabling/contributing factors)?
	1.2 What factors have hindered progress?
	1.3 To what extent has the Partnership articulated and measured the change it is trying to achieve? How is monitoring data and reporting being used?
	1.4 To what extent have efforts to engage diverse OPDs, mainstream gender equality and other intersectional considerations across the Partnerships' four outcomes been effective?
	1.5 What priority actions/adaptations/changes could improve performance within the current Partnership period?
<b>2. How well does the current Partnership model support implementation and progress towards outcomes?</b>	2.1 What are the strengths of the current model and its implementation, including governance and management arrangements?
	2.2 What are the weaknesses of the current model and its implementation, including governance and management arrangements?
<b>3. How well has the Partnership been able to adapt to meet DFAT's evolving needs and policy contexts over the life of the Partnership?</b>	3.1 How well does the support provided by / the activities of the Partnership match DFAT's current disability equity and rights technical support and capacity building needs?
	3.2 What can be learned from the current Partnership to inform DFAT's future integrated approach to the provision of gender equality, disability equity and social inclusion advisory and other services? What are the risks of an integrated approach that should be considered in the design?
	3.3 What learning has emerged from the Partnership (in particular the support to the Pacific Disability Forum under Outcome 2) which could inform engagement with other OPDs and a future OPD partnership approach?

To note, answers to Sub-KRQ 1.5 (What priority actions/adaptations/changes could improve performance within the current partnership period?) have been distributed throughout the review as recommendations.

## Review methodology

The methodology for the review was developed in consultation with DIS, CBM and Nossal, including through an inception meeting in which the review's scope and key methods were discussed. This meeting then informed a review plan which was endorsed by DIS, CBM and Nossal.

The review took a mixed-methods approach to data collection, drawing on existing data where possible and collecting new data where required.

The primary evaluation audiences for this review are the members of the partnership: DFAT DIS, CBM Australia IAG and Nossal Institute for Global Health. DFAT DIS will be using the review for accountability and learning purposes. CBM Australia IAG and Nossal Institute will be using the review primarily for implementation learning and improvement purposes. PDF, as a member of the Partnership Steering Committee will use the review for learning and improvement purposes. Secondary audiences include:

thematic areas in DFAT considering models to provide technical advisory services, DFAT staff broadly in considering lessons for disability inclusion and equity within programming and other development actors looking to partner with OPDs.

## How was data sampled and collected?

Clear Horizon managed data collection, with support through documents and contacts provided by DFAT DIS and CBM Australia. The data collection tools drew on the perspectives of a range of stakeholders, please see Table 2. Data sources and descriptions below for more information about the data collection sources. Interviews were not recorded, with detailed notes taken. Interview data was de-identified – both in the analysis and reporting. Quotes have not been used where these identify individuals.

**Table 2. Data sources and descriptions**

Data source	Description
<b>Documents</b>	<b>A document review</b> was conducted including selected grey literature, and 'foundational' partnership documents: past evaluations, progress reports, partnership health checks, and other relevant partnership documents. It also included review of select written advice provided to DFAT, and select knowledge products. All documentation was reviewed and coded against KRQs, sub questions and emergent themes.
<b>Survey</b>	<b>An online survey of 14 participants was conducted</b> , involving key partnership stakeholders from DFAT, CBM Australia and Nossal Institute to gain insight the strengths and weaknesses of the partnership model, and opportunities to strengthen the partnership.
<b>Key informants</b>	<p><b>Virtual interviews were conducted with 50 key informants including:</b></p> <ul style="list-style-type: none"> <li>• 17 people directly involved in Partnership operations from either DIS, CBM or Nossal</li> <li>• 10 representatives from 4 OPDs</li> <li>• 8 DFAT Disability Focal Points with knowledge of the Partnership</li> <li>• 10 DFAT 'End Users' of the DID4All Helpdesk</li> <li>• 5 independent consultants engaged with CBM to provide TA under the Partnership</li> <li>• The interviews also included representatives from 6 DFAT Posts, and from 8 DFAT Branches/Sections</li> </ul> <p>These consultations were undertaken on a rolling basis with key stakeholders from the partnership, OPDs, DFAT focal points, consultants and end-users. These consultations provided opportunities to explore KRQs and sub-questions in more depth, and triangulate data obtained through document review.</p>

## Data analysis, synthesis and reporting

Following data collection, Clear Horizon conducted the preliminary analysis of each data source and assigned evidence to the KRQs. Qualitative data was analysed using thematic analysis against the KRQs. Descriptive statistics was used to summarise outputs delivered by the partnership, survey data, and document appraisal data where relevant. All quantitative data was analysed using Microsoft Excel. Results from all data sources was synthesised in evidence against the KRQs. A summary document presented all data collected against the KRQs and allowed for triangulation and comparison of results from different data sources.

A Sensemaking workshop was then held in early May 2024 with DFAT, CBM, and Nossal. Unfortunately PDF were unable to join due to a prior commitment but were able to submit written and verbal input pre and post the workshop. Summarised evidence against the KRQs was provided to participants for pre-reading and the workshop itself focused on validating draft findings, and collectively identifying the implications of the findings. This led to collective judgements about the findings and the co-development

of lessons learned and recommendations. The purpose of the technique is to ensure that judgements made in the evaluation process are based on values of the stakeholders as well as the evaluators.

## Limitations

- The review team will not be able to assess the technical quality of CBM Australia outputs from a disability inclusion perspective.
- Some OPDs hold relationships and/or funding agreements with DFAT and CBM Australia beyond the scope of partnership activities. It may therefore be difficult for those OPDs to clearly distinguish support provided under the mandate of this partnership vis-a-vis activities with the same partners that occur outside the mandate of this partnership.
- There are challenges involved in terms of assessing the reach and use of knowledge products by end-users.
- A large number of DFAT staff have accessed the DID4All Helpdesk. It will not be practical to collect data from all or even a statistically representative sample of these end-users.
- This review has not included interviews with any of DFAT's implementing partners

These limitations were taken into account in the design of the review. Consequently, the review team does not anticipate that these limitations have adversely impacted the ability of the review team to adequately answer the KRQs.



## APPENDIX B PARTNERSHIP HISTORY OVERVIEW

The current Partnership agreement builds upon a long-term collaborative journey between DFAT and CBM Australia. DFAT sought out partnership with CBM Australia in recognition of the need for specialist expertise and increased capacity on disability-inclusive development over a sustained period across the entire organisation.<sup>xxiii</sup> This partnership, which commenced implementation from 1 January 2018, was planned as a three-year agreement with an original end date of 31 December 2020. The partnership has been extended multiple times (12-month extension to 31 December 2021; a subsequent 12-months extension to 31 December 2022; a subsequent 10-month extension to 31 October 2023 and a final extension to 30 June 2025).

The first partnership agreement provided technical advice and built DFAT's understanding and technical capacity for disability-inclusive development, with additional benefits such as networking and leveraging resources. The shared objectives and joint work of DFAT and CBM were found to be more effective than work undertaken by either partner alone.

The first partnership informed the second partnership agreement, with the value increasing to \$2.01 million for 2.5 years starting in 2015–16 and then to about \$0.8 million per year up to 2020–21. As captured through the ODE Evaluation in 2018, the second partnership is valued by both DFAT and CBM as it has supported DFAT to be a global and regional leader in disability-inclusive development, improved DID awareness and capacity within DFAT, provided critical technical expertise, sector knowledge and networks, delivered high-quality services required by Canberra, Posts and DFAT partners, supported regional and national DPOs to provide technical assistance, and facilitated sharing and using evidence of good practice.<sup>xxiv</sup>

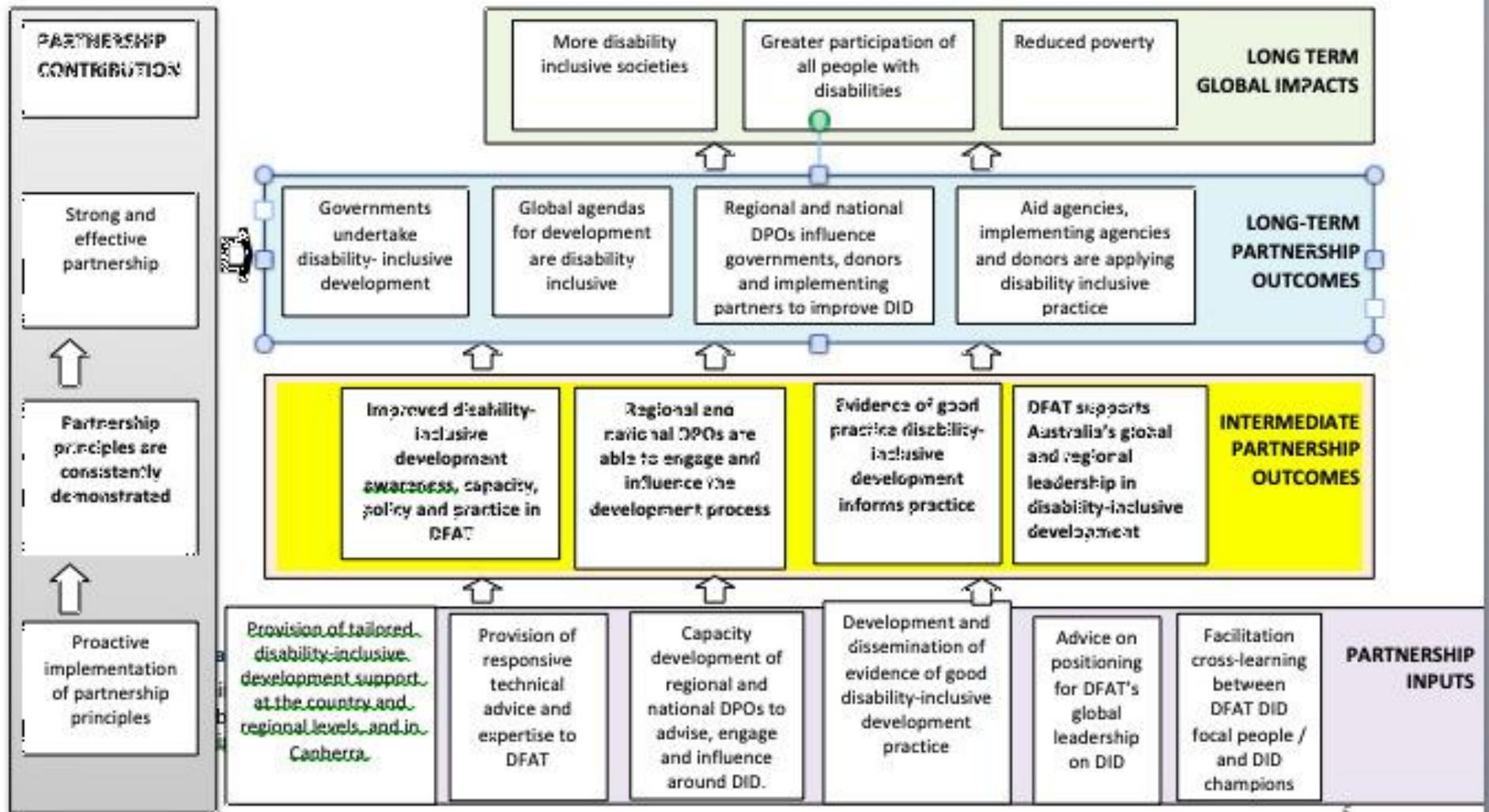
Table 3. Partnership Timeline

Year	Description
2009	<ul style="list-style-type: none"> <li>CBM Australia provided support to DFAT from 2009 through standard service agreements</li> <li>CBM Australia has managed a disability technical advice Help Desk service for DFAT since 2009.<sup>xxv</sup></li> </ul>
2011 - 2015	<ul style="list-style-type: none"> <li>DFAT and CBM Australia establish a formal partnership to collaborate on disability-inclusive development projects (July 2011 – July 2015). This partnership was independently evaluated in 2014.</li> </ul>
2015 - 2017	<ul style="list-style-type: none"> <li>The DFAT-CBM Australia Partnership (2015-2017) is entitled “<i>Improving the quality of lives for people with disabilities: Building understanding and technical capacity for disability-inclusive development.</i>”</li> <li>The Partnership was designed to support the Australian Government's second strategy on disability-inclusive development: <i>Development for All 2015-2020: Strategy for strengthening disability-inclusive development in Australia's aid program</i>. This strategy builds on the Australian Government's first <i>Development for All</i> strategy, developed in 2008, and the subsequent years of experience, lessons and leadership by the Australian aid program in disability-inclusive development.</li> </ul>
2018	<ul style="list-style-type: none"> <li>Current phase Partnership Agreement Commencement: 1 January 2020 (3 years, until 31<sup>st</sup> December 2020). The purpose of the Partnership is to contribute to the Australian aid program's efforts to improve the quality of lives for people with disabilities in developing countries.</li> </ul>
2020	<ul style="list-style-type: none"> <li>Partnership contract extension (12 months, until 31<sup>st</sup> December 2021)</li> </ul>

Year	Description
2021	<ul style="list-style-type: none"> <li>Partnership contract extension (12 months, until 31<sup>st</sup> December 2022)</li> </ul>
2022	<ul style="list-style-type: none"> <li>Partnership contract extension (10 months, until 31<sup>st</sup> October 2023)</li> </ul>
2023	<ul style="list-style-type: none"> <li>Partnership contract extension (20 months, until 30<sup>th</sup> June 2025)</li> </ul>
2025	<ul style="list-style-type: none"> <li>Expected end-date of current contract</li> </ul>

## APPENDIX C PARTNERSHIP THEORY OF CHANGE

Figure 1: DFAT-COM/Hossein Partnership Theory of Change for the Provision of Technical Advice and Services (revised March 2016)



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## APPENDIX D LIST OF RECOMMENDATIONS

**Recommendation 1.** The Partnership should continue to invest in strengthening the internal expertise and capabilities of DFAT, including more explicit capacity development responsibilities for the remote secondees.

**Recommendation 2.** IAG to work with PDF during the remainder of this Partnership agreement to identify how the Partnership can best support it during the organisation's leadership transition and through the next strategy development cycle.

**Recommendation 3.** The new design should consider how best to ensure that these OPD partnerships can be supported by IAG or an equivalent organisation with strong legitimacy in the disability movement.

**Recommendation 4.** Informed by consultation with target audiences, DFAT (supported by IAG as needed) should identify practical ways that i) just-in-time access by DFAT staff to existing knowledge products could be improved ii) upcoming knowledge products can be more effectively disseminated upon completion. These measures could be trialled over the remainder of the Partnership, to inform the new design.

**Recommendation 5.** IAG and DFAT to update the capacity building plan to reflect key priorities for the remainder of the Partnership, informed by the upcoming IDEARS.

**Recommendation 6.** DFAT to explore with Nossal Institute opportunities to support DIS and other relevant DFAT staff engage in accredited DID capability development.

**Recommendation 7.** In the remainder of this Partnership, IAG and DFAT to collaborate on the development of outcome-focused case studies that examine key examples of outcome achievement and their contributing factors. For example, these could be focused on a variety of key Posts (e.g. by size) where improvements in DID practice seem to be more evident. These should be timed to inform the upcoming design.

**Recommendation 8.** The Partnership should synthesise design/IMR review and DID4All Helpdesk data to identify key priorities for future DID support e.g. key topics for future research or guidance; geographical or thematic areas requiring greater assistance etc.

**Recommendation 9.** DFAT, IAG, and Nossal to prioritise shared strategic work planning for the remainder of the Partnership to ensure collective understanding of priorities, roles and responsibilities.

**Recommendation 10.** Informed by lessons from the Partnership, DFAT's design of the new integrated GEDSI advisory service should be clearer about which 'levers of change' the service should prioritise in its efforts to improve policy and practice in DFAT. This should involve more explicit trade-offs between deep vs. broad and responsive vs. proactive engagements. As noted under KRQ1, one option is to provide more intensive, multi-faceted and continuous support to selected country/regional programs, guided by multi-year capacity improvement strategies.

**Recommendation 11.** Over the remainder of the Partnership, IAG and DFAT should identify areas in which DFAT approval responsibilities could be elevated to a more strategic level, to improve efficiency.

**Recommendation 12.** During the remainder of the Partnership, IAG, SURGE and DFAT should conduct one or more reflection workshops to capture emerging lessons in relation to the application of a more integrated approach to the provision of GEDSI technical advice. This should include consideration of thresholds with regards to when disability specialist technical assistance is needed vs. when GEDSI technical assistance is 'good enough'.

**Recommendation 13.** During the remainder of the Partnership period, IAG should develop a definition inclusive of experience, credentials and capabilities for a disability equity and inclusion advisor, and work with SURGE and other key stakeholders to develop gender equality and GEDSI advisor definitions that can contribute to the design process for the next phase.

**Recommendation 14.** During the design of the next phase, DFAT and the design team should examine opportunities to maintain a multi-pronged approach to capacity development, rather than relying on advisory support alone. As noted under recommendation 10, this should be underpinned by a clearer set of overarching strategic priorities and more explicit trade-offs e.g. breadth vs. depth. A more intentional approach to investment in capability of DIS and other staff advising on DID should also be a key feature, informed by a clear-eyed assessment of relevant operational constraints.

**Recommendation 15.** During the remainder of this Partnership, DFAT and IAG to propose a model for how Posts could establish and maintain strategic engagement with OPDs at a whole-of-Post level, with a goal of developing long term partnerships, offering core flexible funding and codifying lessons learned to be shared across portfolio investments. DFAT and IAG should also review current IMR criteria relating to engaging with OPDs, to mitigate the risk of non-strategic or inefficient OPD engagement.

**Recommendation 16.** DIS to map DFAT support to OPDs to ensure a shared understanding of what engagement is happening and contribute to strategic discussions about harmonisation across engagement activities.



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## APPENDIX E ENDNOTES

- <sup>i</sup> Partnership Steering Committee Meeting Minutes 230911
- <sup>ii</sup> CBM Stocktake: 2023 DFAT\_Summary of Official Post Visits conducted 2018-2023
- <sup>iii</sup> DFAT CBM Partnership Report July-Dec 2023
- <sup>iv</sup> DFAT-CBM Partnership Report July-Dec 2023
- <sup>v</sup> DFAT/CBM (2021), *Disability Inclusion: DFAT's Capacity Development Plan*, P8
- <sup>vi</sup> ODE (Office of Development Effectiveness), (2018), *Development for All: Evaluation of progress made in strengthening disability inclusion in Australian aid*, P57.
- <sup>vii</sup> CBM, (2023), *DFAT-CBM Partnership Report for the Provision of Disability Technical Advice and Services (July 2022 – June 2023)* P4.
- <sup>viii</sup> CBM, (2023), *DFAT-CBM Partnership Report for the Provision of Disability Technical Advice and Services (July 2022 – June 2023)* P7.
- <sup>ix</sup> CBM, (2023), *DFAT-CBM Partnership Report for the Provision of Disability Technical Advice and Services (July 2022 – June 2023)* P7.
- <sup>x</sup> CBM 2023 DFAT\_Significant Areas of Focus
- <sup>xi</sup> CBM, (2023), *DFAT-CBM Partnership Report for the Provision of Disability Technical Advice and Services (July 2022 – June 2023)* P4.
- <sup>xii</sup> CBM, (2023), *DFAT-CBM Partnership Report for the Provision of Disability Technical Advice and Services (July 2022 – June 2023)* P16-17.
- <sup>xiii</sup> CBM Stocktake: f5 2023 DFAT\_Trainings conducted 2018-2023
- <sup>xiv</sup> DFAT CBM Partnership Report July-Dec 2023
- <sup>xv</sup> CBM: Types of support we give PDF
- <sup>xvi</sup> Clear Horizon, (2017), *Review of the DFAT-CBM Australia Partnership (2015-2017)*, P16.
- <sup>xvii</sup> DFAT CBM Partnership Report July-Dec 2023
- <sup>xviii</sup> DFAT CBM Partnership Report July-Dec 2023
- <sup>xix</sup> DFAT-CBM Partnership Report July-Dec 2023
- <sup>xx</sup> Partnership Steering Committee Meeting Minutes 230911
- <sup>xxi</sup> ODE (Office of Development Effectiveness), (2018), *Development for All: Evaluation of progress made in strengthening disability inclusion in Australian aid*, P17.
- <sup>xxii</sup> ODE (Office of Development Effectiveness), (2018), *Development for All: Evaluation of progress made in strengthening disability inclusion in Australian aid*, P17.
- <sup>xxiii</sup> Clear Horizon, (2017), *Review of the DFAT-CBM Australia Partnership (2015-2017)*, P8.
- <sup>xxiv</sup> ODE (Office of Development Effectiveness), (2018), *Development for All: Evaluation of progress made in strengthening disability inclusion in Australian aid*, P18.
- <sup>xxv</sup> DFAT (Department of Foreign Affairs and Trade), (2018), *DFAT-CBM Partnership Agreement*