

Cambodia Initiative for Disability Inclusion

(formerly known as Landmine Survivors Assistance Program)

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Abbreviations

ARC	Australian Red Cross
AusAID	Australian Agency for International Development
CBMAP	Community Based Mine Action Program
CDPO	Cambodian Disabled People's Organisation
CIDI	Cambodia Initiative for Disability Inclusion
CMVIS	Cambodian Mine Victim Information Service
CRC	Cambodian Red Cross
CRDP	Convention on the Rights of Persons with Disabilities
DAC	Disability Action Council
DIAF	Disability Inclusion Assistance Fund
ERW	Explosive remnants of war
GHD	Good Humanitarian Donor
HI-B	Handicap International - Belgium
ICRC	International Committee of the Red Cross
IFRC	International Federation of the Red Cross Red Crescent Movement
INGO	International Non-Governmental Organization
LSAF	Landmine Survivor Assistance Fund
LSAP	Landmine Survivor Assistance Program
LVASC	Landmine Victim Assistance Steering Committee
MDG	Millennium Development Goals
MoSVY	Ministry of Social Affairs, Veteran and Youth Rehabilitation
MRER	Mine Risk Education/Reduction project
MRR	Mine Risk Reduction
NCDP	National Centre for Disabled Persons
NDCC	National Disability Coordination Committee
NGO	Non-governmental organization
NPA-PWD	National Plan of Action for Persons with Disabilities, including Landmine/Explosive Remnants of War Survivors
PRC	Physical Rehabilitation Centre
PWD	People with Disabilities
RCV	Red Cross Volunteer
RGOC	Royal Government of Cambodia
UN	United Nations
UXO	Unexploded Ordnance

EXECUTIVE SUMMARY

The Cambodia Initiative for Disability Inclusion (CIDI) is an extension of the Australian Red Cross (ARC) Landmine Survivors Assistance Program (LSAP), which was funded by the Australian Government and managed by ARC for three years since mid-2007, as one of the programs under the Australian engagement in the mine action sector in Cambodia. The LSAP supports improved quality of life for Cambodian people living with disabilities, including landmine survivors and their families. The revisions contained in this program design document (Proposal) describe an extension to this program referencing clear links to the current disability, mine action and draft Cambodia country strategies of the Australian Government. The Proposal also demonstrates consistency with current International Red Cross Movement strategies relating to weapon contamination and mandate to work with the most vulnerable.

This Proposal does not repeat the in-depth analysis contained in the original LSAP design document. Rather, this Proposal is intended to be cross-referenced with the original program design, and will highlight changes and revisions from the original design document.

This Proposal builds on the program implementation experience gained over three years of ARC management, and responds to various reviews and evaluations, as well as emerging trends and needs which have incrementally reshaped the program. Accordingly, as the focus of the program has increasingly embraced a more integrated approach to disabilities, which includes landmine survivors, there is a need to appropriately reflect this through the name of the program. The proposed new program name is the “Cambodia Initiative for Disability Inclusion” (CIDI).

The small grants funds for non-government organisations (NGOs), the Landmine Survivor Assistance Fund (LSAF), would also be aligned through a new fund name, the “Disability Inclusion Assistance Fund” (DIAF). There would be a transition period where the revised fund name would be used in conjunction with the former name to retain the association by NGOs with these funding mechanisms.

The CIDI has been designed using a ‘people-centred program logic’ approach. Through in-depth analysis during the program design revision process the goals, outcomes and strategies of the CIDI were developed. The revised design builds on the strengths of the previous LSAP while broadening the scope from landmine survivors to people with disabilities (PWD) more generally.

The overall goal of the CIDI is to ***“improve the quality of life of people with disabilities in Cambodia by supporting national efforts towards addressing the risks, causes and consequences of disability”***.

The CIDI program will directly contribute to this goal through achievement of the following three program outcomes:

1. A supportive policy context which recognizes, respects and promotes the rights of people with disabilities; and
2. An inclusive and effective response to the needs and rights of people with disabilities
3. An improved response to those at risk of disability or death due to weapon contamination

These direct program outcomes will in turn and over time contribute to the following three high level outcomes:

- ❖ People with disabilities have increased self-confidence and respect and are able to more fully participate in society
- ❖ People with disabilities have improved livelihoods through sustainable income generation activities

- ❖ Communities have the necessary knowledge and skills to reduce their risk of impairment (which leads to disability) or death from weapon contamination related incidents.

The CIDI will be implemented over two years from July 2010-June 2012 and will be managed by ARC. The requested additional funding support from AusAID is AUD 2,650,000 for the proposed CIDI two year extension program.

1. INTRODUCTION

Over the past three years, Australian Red Cross has been responsible for managing the Landmine Survivor Assistance Program (LSAP). This Proposal describes a further two year extension of ARC management of this program, re-titled the Cambodia Initiative for Disability Inclusion (CIDI), and will make reference to the original LSAP program design and add updated information where appropriate.

The Proposal continues to support the Australian aid program's overarching objectives of poverty reduction and sustainable development and contribute to achieving the Millennium Development Goals. It will also support the achievement of *Australia's disability-inclusive development strategy for the aid program (Development for All) 2009-14*, *Mine Action Strategy for the Australian aid program (2010-2014)* and *Australia-Cambodia Country Program Strategy*. It also aligns with the International Red Cross/Red Crescent Movement *Weapon Contamination Strategy and Strategy 2020*, which focus on land mine and UXO eradication, working with the most vulnerable in society and capacity strengthening of Red Cross national societies.

The independent LSAP Mid Term Review, commissioned by AusAID in late 2008, strongly endorsed ARC's management of the LSAP. Some of the key achievements of the program outlined in the LSAP Mid Term Review included:

- The production of a final draft of the National Plan of Action for Persons with Disabilities, including Landmine/ERW Survivors (NPA-PWD).
- Mine Risk Education and Reduction activities covering six of the most mine-affected areas in Cambodia and providing an innovative approach to reducing risk and preventing disability through the provision of micro-loans.
- A strategy and training plan in place for the handover of the CMVIS project from joint Cambodian Red Cross (CRC)/Handicap International Belgium (HIB) management to full CRC management by 2009.
- The introduction of a new activity under the CRC component, focusing on health and hygiene for persons with disabilities (PWD).
- A range of high-quality and innovative rehabilitation and reintegration assistance being provided for landmine survivors and PWD by NGOs in ten provinces and three municipalities.
- Establishment of ARC Program Management office and the development and implementation of finance, reporting and monitoring systems. Capacity building and negotiation support provided to program partners.
- The incorporation of broader disabilities into the LSAP implementation framework in line with international best practice.

ARC is committed to quality and to strengthening the capacities of the different actors within the overall program, with a focus on reflection and learning. Key recommendations from the LSAP Mid Term Review addressed by the LSAP to date include:

- Continuing to transition the LSAP and the LSAF to encompass broader disabilities

- Continuing good relationships between ARC and stakeholders and strengthening relationships between stakeholders supported by LSAP
- Funding duration of the LSAF extended up to three years to support longer term planning and reduce administration burden on organisations and ARC
- Forum organised for all civil society organisations funded under LSAF to share learning's, disseminate findings and recommendations from LSAP Mid Term Review and LSAF evaluations.
- Capacity needs analysis questionnaire completed by LSAF organisations to understand their self-identified priorities and to help plan appropriate capacity strengthening support
- New civil society support position for LSAF created to address targeted organisational mentoring and capacity strengthening support
- CMVIS handover strategy developed and handover completed
- Red Cross micro loan guidelines and eligibility criteria reviewed to improve access to, and targeting of, the most vulnerable populations in mine affected areas
- Red Cross mine risk education reduction project reviewed and recommendations being addressed to strengthen capacity of branch network

The proposed CIDI will continue to respond to emerging needs and incorporate the Mid Term Review recommendations. During the extension period the CIDI will focus in particular on:

- Formally integrating program and civil society small grants fund into a broader disabilities program supporting the Royal Government of Cambodia's (RGOC's) national efforts towards disability inclusive development and, in particular, to support the RGOC National Plan of Action for Persons with Disabilities, including Landmine Survivors (NPA-PWD). The CIDI is also linked to AusAID disability inclusion, mine action and draft Cambodia country strategies
- Consolidating links between various stakeholders and components supported under the program
- Continuing coordination support to RGOC in implementation of NPA-PWD, including a Disability Advisor position
- Providing support to civil society organisations and Red Cross to strengthen indicators and methods for measuring impact in their work
- Improving coordination of Red Cross service provision for people with disabilities (i.e. mine risk education, micro loans, water and sanitation infrastructure and health and hygiene promotion)
- Strengthening the inclusion of people with disability in all aspects of the CIDI including design, implementation, monitoring, evaluation and governance processes
- Developing an exit strategy to ensure sustainability in the key policy and service areas before the end of the program with all key partners

1.1 Approaches and Principles which informed the design

The CIDI program design document builds on the existing LSAP. Red Cross has incorporated learning's from the various reviews and evaluations of the LSAP. The LSAP has been considered to be a success and Red Cross is building on that by incorporating the lessons learned and recommendations from key review documents¹, rather than designing an entirely new program.

Given that this is a two year program extension, and will be used as a transition from the previous LSAP to a more inclusive disability program, the majority of the program activities will remain


¹ Mid Term Review of LSAP; Evaluation of LSAF, Evaluation of MRER

unchanged from the previous three years. However the overall goal and outcomes of the program have been refined and tightened to reflect the expanded focus on disability services more broadly and initiatives such as the DIAF will reflect these broader outcomes.

1.1.1 Theory of Change

Theory of change, also known as program logic, is the rationale behind a program – what are understood to be the cause and effect relationships between program activities, outputs, intermediate outcomes, and ultimate outcomes. Represented as a diagram or matrix, program logic shows a series of expected consequences, not just a sequence of events. The espoused theory of change represents how the program expects to achieve change and ultimately contribute to the overall goal. In order to clarify and tighten the goal and outcomes the theory of change for the CIDI was articulated and critiqued to ensure clear pathways of causation (see Annex 1: Program Logic Outcomes Hierarchy)

Table 1: Logic Outcomes Hierarchy or Theory of change ²

Outcome Hierarchy	Definition of level
Broader goals	Broader goals that the program outcomes are expected to contribute towards along with other initiatives (usually refer to social, economic or environmental consequences).
Ultimate outcomes (indirect)	These often relate to the ultimate purpose of the program and the expected changes desired for targeted beneficiaries
	
Program outcomes	The desired final result of the program (may be some years after the program has finished). The program should be able to demonstrate how it has directly contributed to this level of outcome.
Intermediate outcomes of direct targets	Medium term outcomes that occur as a result of the activities and that contribute to the achievement of program outcomes – generally includes changes in attitudes, knowledge, skills, confidence, new opportunities created and practice and policy change among those identified as our direct targets through whom we hope to bring about lasting change for our beneficiaries
Influence strategies	These are the program activities/strategies mostly done to bring about the change (or disseminate findings) for those identified as our direct targets
Foundational activities	These are the preliminary activities that occur before any activities associated with changing or influencing the external environment. Can include planning, research, collecting baseline data and forming partnerships.

1.1.2 People-Centred logic

² Clear Horizon (2009) People-Centred Program Logic Workshop notes prepared for Australian Red Cross pp10.

During the development of the theory of change a people centred approach was used. Typical matrices such as the logical framework do not specifically make reference to *who* (individual, group or body) the program is targeting. It is important to distinguish between who is ultimately benefitting from the program and who the program is directly targeting. Often the 'path to change' is complex and might involve civil society organizations, community groups or even government, who in turn work with or impact on the lives of others. So while the overall goal of many programs is associated with the improving socio-economic or health outcomes (e.g. reduction in poverty, reduction in rates of HIV) of specific groups this is achieved through the work of others to whom our role is to provide training, support and influence.

The reviews of the LSAP program highlighted the importance of effective collaboration and individual and institutional capacity strengthening. The existing relationships between ARC, CRC and other government and NGO actors in the disability sector have been critical to the success of the program so far. ARC has recognized the need to further invest in these relationships. Refer to Annex 7: Stakeholder Consultations, for a list of stakeholders consulted and involved in the program to date.

The direct stakeholders for change (or influence) have therefore been identified as:

- Royal government of Cambodia
- Civil Society
- Disabled People's Organisations
- Cambodian Red Cross

While the ultimate beneficiaries of the program are identified as:

- People with disabilities
- Communities at risk of disability or death from weapon contamination

The role and contribution to the ultimate success of the program of each of these stakeholders is summarized in the table below:

Stakeholders for change	Roles in the Program	How they contribute to the success of the Program
Royal Government of Cambodia (RGOC) at all levels	RGOC is responsible for implementing and enforcing disability policy and laws, and collecting relevant disability and sex disaggregated data to support the monitoring and reporting against the NPA-PWD	RGOC establishes, maintains and appropriately resources the implementation and enforcement of disability laws and policies Improved education for all children through the adoption of inclusive educational practices The continuation of quality physical rehabilitation services and support to PWD through government physical rehabilitation centres
Civil Society (including disabled people's organizations)	Civil Society has an important role in delivery of physical rehabilitation and economic and psycho-social support services for PWD. Civil society are also strong advocates and educators in their communities for	Civil society provides appropriate types, quality and quantity of services to meet the rights and needs of PWD Civil society can represent and/or support the perspectives, needs and rights of PWD and their carers

Stakeholders for change	Roles in the Program	How they contribute to the success of the Program
	the rights of people with disabilities	
Red Cross	<p>Red Cross has a legally mandated role as humanitarian auxiliary to public authorities, and its national network of branches and Red Cross volunteers in every village is an important link between PWD, communities and government (including emergency response, community care and health service referrals for PWD including survivors of weapon contamination incidents).</p> <p>Red Cross work is guided by the needs of the most vulnerable populations. Red Cross has an important role as educators of communities regarding preventable risks of disability or death, as well as service delivery, community care and support for PWD.</p>	<p>Timely, appropriate emergency response, community based health and care for survivors of weapon contamination incidents and their families (including referrals to health systems).</p> <p>Preventative education and alternative livelihoods support for PWD, including survivors of weapon contamination incidents to reduce the risks of disability or death.</p> <p>Advocacy for the rights of PWD, including survivors of weapon contamination as part of dissemination of Red Cross fundamental principles, international humanitarian law and international humanitarian conventions, including disability and weapon contamination</p>

The ultimate beneficiaries of the CIDI are outlined in the following table:

Beneficiaries	Roles in the Program	How they contribute to the success of the Program
People With Disability	<p>People with Disabilities have an active role as participants in the program, and as advocates and educators in their community.</p> <p>Incorporating the lived experiences of PWD and understanding the different needs of PWD (eg. women, men, children, type of disability) is important to be able to design, develop and monitor appropriate services and support to PWD</p>	<p>Ensuring the quality and relevance of the program, especially service provision, in meeting the rights and needs of PWD</p> <p>Actively contributing to all aspects of the program cycle, including design, management, implementing and monitoring</p>
Communities	<p>Communities are important as PWD are part of communities and therefore their understanding of the situation of PWD, barriers to participation and contributions to be made by PWD living in their communities will have a significant impact on the program outcomes.</p>	<p>Increased community understanding and acceptance of diversity.</p> <p>Recognition of the rights and entitlements of people with disabilities,</p> <p>Increased household and community productivity as people with disabilities</p>

are involved in household and community activities

1.1.2 Culturally appropriate capacity strengthening

“Managed by the Australian Red Cross (ARC), the LSAP is quite a complex program comprising several components working at different levels and with a broad range of stakeholders. Despite a slightly delayed start to program implementation and significant challenges encountered, the program progress has been remarkable and ARC in-country has clearly established good working relationships with program stakeholders.”³

Capacity building or strengthening is an important but largely unrecognised component of the LSAP program. The CIDI program design recognises this and emphasises capacity strengthening as an intermediate outcome of the program.

The on-going sustainability of the CIDI is dependant on the RGOC, Red Cross, civil society and disabled people’s organisations actors taking ownership of a broad range of disability issues and being able to effectively respond to, promote the rights and support the needs of, people with a disability. PWD and organisations representing PWD (including the Disability Action Council) have been extensively involved in program design and ongoing implementation of the program. Ongoing sustainability is highly dependent on actors not only being able to respond to and support the needs of people with disability but also dependent on actors actively including, consulting and maintaining open dialogue with people with disability, including survivors of weapon contamination incidents (and their representative organisations).

As this program is funded as a two year program extension it is not feasible or realistic to propose a significant shift in the core program activities, however it does offer a number of opportunities to improve disability inclusive development practices and approaches within existing activities, and put a stronger emphasis on capacity strengthening within the government, Red Cross and civil society spheres. Through the management of the program, ARC will support approaches that include people with disability in all stages of program planning, implementation, monitoring and evaluation, including in governance and selection arrangements of the DIAF.

ARC recognises and adopts a culturally appropriate, relationship centred and values based approach to capacity building in personnel, program design and the behaviours and tasks of its personnel. This is increasingly recognised as a successful approach, in that it acknowledges cultural values reflects the way the world is perceived, and also the way people are expected to behave, which varies widely among countries. Organisations and stakeholders in the CIDI have the capacity to work within their cultural context and approaches to capacity strengthening are based on an appreciation and understanding of cultural values and their impact on development processes and change. Perceptions about leadership, change, behaviour, task and relationships are all strongly influenced by cultural values. The success of the LSAP to date provides a sound basis for this approach through the development of relationships with key stakeholders upon which the CIDI will continue to build.

1.2 Strategic Context

A milestone achievement for the LSAP has been the development and adoption by the RGOC of the National Plan of Action for Persons with Disabilities, including landmine/ERW survivors (NPA-PWD). This is a key document in promoting greater inter-government collaboration and leadership for

³ AusAID Mid term Review, 2008

government ministries and other organizations in a bid to address the rights and needs of persons with disabilities in Cambodia⁴. The NPA-PWD will assist Cambodia to meet its victim assistance obligations under the Mine Ban Convention as well as demonstrating national level disability inclusion. Responsibility for implementing the NPA-PWD rests with the newly formed National Disability Coordination Committee, in consultation with key actors in the disability sector, survivors of weapon contamination incidents and other persons with disability. The NPA-PWD advocates for actively involving persons with disabilities, including landmine/ERW survivors, in decisions that affect their lives, and in national and international forums is recognised as essential for both good policy and empowerment of persons with disabilities.

The CIDI continues to provide a comprehensive platform to support the RGOC's national efforts towards disability inclusive development by: working with national governments to create an enabling policy environment; strengthening Red Cross and civil society service delivery for, and representation of, people with disabilities; and working directly with at risk populations to prevent impairments wherever possible.

The CIDI maintains strong links to several key strategic plans and policies of the Australian Government and the International Red Cross/Red Crescent Movement. Cambodia is a focus country of the Australian Government's *Development for All* strategy and as such Australia has committed to supporting RGOC's efforts in disability inclusive development. Cambodia is also recognised for good practice in mine action and is a leading country in terms of actioning recommendations in the sector in terms of victim assistance being incorporated into broader disability policy. Cambodia is a signatory to various legal instruments relating to cluster munitions, landmines and disabilities and has included a ninth country MDG in relation to Mine Action⁵. Cambodia recently received a two year extension on its mine clearing obligations outlined in the Mine Ban Convention and therefore remains a focus for Australian Government support to ensure Cambodia maintains its commitment and momentum in disabilities and mine action, and adequately resources and plans for the fulfilment of its obligations.

The CIDI also aligns with the draft Australia Cambodia Program Strategy. One of the major objectives is to increase food and livelihood security for the rural poor and the strategy as a whole includes a focus on disability, land mine and UXO eradication and victim assistance⁶. The CIDI contributes to the reduction of disabilities and deaths from weapon contamination and strengthening community resilience through the improvement of food and livelihood security for people with disabilities and their families, who are the most vulnerable to external shocks.

The AusAID *Development for All: Towards a Disability-Inclusive Australia Aid Program 2009-2014* strategy provides a comprehensive framework on how to meet the rights, needs and priorities of people with disability. The CIDI appropriately responds to the three *Development for All* outcomes as outlined in the following section:

Outcome 1: Improved quality of life for people with disability

Enabling PWD, including survivors of weapon contamination incidents to become self-reliant, productive and valued members of society is the ultimate goal of the CIDI. A holistic approach is adopted by the CIDI which recognises that in order to improve the lives of people with disability there requires a coordinated national effort by all stakeholders in the disability sector, particularly RGOC, Red Cross, civil society, disabled people's organisations, and people with disabilities. The CIDI theory of change articulates these causal links between desired changes in people, practices, institutions and

⁴ Royal Government of Cambodia, National Plan of Action for Persons with Disabilities, including Landmine/ERW Survivors

⁵ Goal 9: De-mining, UXO and victim assistance

⁶ AusAID *Australia-Cambodia Country Program Strategy 2009-2015*

policy environments which will be systematically targeted or influenced as stakeholders for change to contribute to the achievement of this ultimate goal.

Outcome 2: Reduced preventable impairments

The CIDI incorporates this as one of the high level outcomes of the program, in recognition of the severe impact of preventable weapon contamination incidents on individuals, families and communities. Key strategies adopted by the CIDI are Red Cross delivery of mine risk education to affected communities, early health and care support in communities, and alternative livelihoods support to survivors of weapon contamination and those at high risk of disability, death or further harm.

Outcome 3: Effective leadership on disability and development

The CIDI will provide leadership support and opportunities to RGOC, PWD and disabled people's organisations through the DIAF (directly or indirectly through DIAF-supported organisations). Leadership in disability and development will be strengthened in part by building the capacity of people with disability and their organisations. People with disability are proven advocates for advancing the issues that affect them.

The *Development for All* strategy is also defined by six guiding principles. The CIDI approaches and strategies are also aligned with these principles.

Principle 1: Active central role by people with disability

The CIDI actively and meaningfully engages with PWD in the program design, implementation and monitoring of program activities. In particular, the CIDI builds on strong relationships formed through discussions and consultations with people with disabilities and their representative organisations throughout the NPA-PWD development process. Understanding the lived experience of PWD and enabling the active participation of, and participation in decision making by, PWD is essential to the development of any policies, laws, services and support which will ultimately affect the lives of PWD. CIDI will continue to look for and increase opportunities for the active and central role of people with disability throughout the program, including empowerment of people with disability through capacity building.

Principle 2: Recognise and respect rights

The CIDI respects and recognises that every person is born with dignity and with rights. The NPA-PWD and Convention on the Rights of persons with Disabilities are key documents which articulate the rights of PWD and how the RGOC, key stakeholders and PWD will recognise the contributions of PWD in national development efforts. The CIDI will promote the appropriate dissemination of the NPA-PWD, and support RGOC and disability sector to incorporate the NPA-PWD in all policy and program planning. Civil society, Red Cross and PWD (including disabled people's organisations) are recognised as important educators and advocates of the rights of PWD in communities, public and private spheres and will continue to be supported and encouraged in these activities through the CIDI.

Principle 3: Respect and understand diversity

Civil society and Red Cross projects supported by the Program are informed by the experiences of, and needs identified by, PWD including survivors of weapon contamination incidents. Evaluations of various components of the program will continue to include capturing the varied and diverse perspectives and experiences of PWD. Australian Red Cross embraces diversity and recruited a person with disability for the LSAF Assistant Grants Manager position (2008-09).

Principle 4: Take into account the interaction of gender and disability

Data on weapon contamination incidents and disabilities disaggregates men and women wherever possible. Red Cross and civil society projects supported by the program are required to consider the specific experiences and needs of men and women and in relation to their disabilities, as well as family and community members who provide support to PWD.

Principle 5: Focus on children

Data on weapon contamination incidents and disabilities disaggregates children wherever possible. All organisations funded through DIAF are required to have child protection policies and take steps to disseminate to beneficiaries. Activities supported through DIAF includes establishment of parents groups to represent and advocate for children with disabilities, and reintegration to schools of children with disability.

Principle 6: Support people-people links and promote partnerships

The CIDI deliberately adopts a people centred approach to reflect the importance of placing people, and especially people with disabilities, at the centre of the program. The complex web of interactions and dependencies revolves around people – as agents of change, and ultimate beneficiaries of change. By focusing on the “who” (people), and desired changes, there is a more meaningful focus on outcomes rather than only on the “what” (outputs or activities). This is evidenced by the key influencing strategies that ARC adopts for the CIDI, which is all about brokering relationships, enabling and supporting linkages and coordination between stakeholders in the CIDI, and capacity strengthening these same organisations to support the program outcomes.

In line with the original goal of the LSAP, the goal of the *Mine Action Strategy for the Australian aid program (2010-2014)* is to reduce the threat and socioeconomic impact of landmines, cluster munitions and other explosive remnants of war.

Red Cross has identified weapon contamination as having both immediate and long-term impacts. In the short-term it impedes the delivery of aid to people affected by conflict and in the longer term prevents the repair and reconstruction of infrastructure. These factors inhibit the ability of individuals to lead safe, healthy lives. Red Cross has therefore recently strengthened its mandate and commitment to working in disability inclusion and weapon contamination. The International Red Cross/Red Crescent Movement adopted its Weapon Contamination Strategy in November 2009⁷.

The CIDI continues to respond to the four outcomes of the *Mine Action Strategy*:

Outcome 1: Improved quality of life for victims and their affected families and communities

As per response to Outcome 1: *Development for All* strategy.

Outcome 2: Reduced number of deaths and injuries

As per response to Outcome 2: *Development for All* strategy.

Outcome 3: Enhanced capacity of countries to manage their mine action programs

The NPA-PWD will assist Cambodia to meet its victim assistance obligations under the Mine Ban Convention as well as demonstrating national level disability inclusion.

Outcome 4: Effective leadership and advocacy by Australia on mine action

As per response to Outcome 3: *Development for All* strategy.

The CIDI also responds to the relevant guiding principles of the *Mine Action Strategy*:

⁷ ICRC Weapon Contamination Policy

Principle 1: A state's commitment to the international mine action conventions and the Convention on the Rights of Persons with Disabilities will be a factor in deciding whether Australia will provide mine action assistance, with allowances made for exceptional circumstances, humanitarian need and progress towards ratification and implementation.

The CIDI continues to advocate and support the RGOC commitment to the international mine action conventions including obligations relating to PWD.

ARC's approach to CIDI design, implementation, monitoring and evaluation will be consistent with the principles of - and support Australia's obligations under - the Convention on the Rights of Persons with Disabilities (CRPD)⁸ including ensuring the active and central role of people with disability through all aspects of the CIDI.

RGOC is a signatory to the CRPD and its Optional Protocol. The CIDI will support RGOC efforts as appropriate and in line with the NPA-PWD, toward ratification of those instruments, including supporting the Disability Advisor co-located within RGOC whose role is to support RGOC efforts to implement the NPA-PWD.

Principle 2: We will demonstrate and promote gender equality in our mine action assistance, with reference to the United Nations Gender Guidelines for Mine Action and the United Nations Security Council Resolution 1325 on women, peace and security,¹⁹ and in accordance with the gender policies of the Australian aid program.

As per response to Principle 4: *Development for All* strategy.

Principle 3: We will seek to ensure that mine action is socially and economically inclusive and meets the needs of the most vulnerable people and communities. Our work will recognise, respect and promote rights and build understanding of diversity as a basis for inclusive and stable societies.

As per response to Principle 3: *Development for All* strategy.

Principle 4: We will promote and enable the active participation of victims and people with disability in mine action policy development, programming, implementation, and monitoring and evaluation.

As per response to Principle 1: *Development for All* strategy.

Principle 5: We will deliver Australia's mine action assistance in line with the principles of Good Humanitarian Donorship, as outlined in our policy on humanitarian assistance.

Principle 6: We will work with our implementing partners to ensure that the 'do no harm' approach is adopted in line with our policy on peace, conflict and development.

Principle 7: We will work in partnership with mine action stakeholders, where possible aligning our support with existing partner government policies, priorities and systems and also harmonising our efforts with other donors, in line with the Paris Declaration on Aid Effectiveness and the Accra Agenda for Action.

The CIDI supports government efforts and building capacity of government systems, country ownership of disability law and NPA-PWD, and efforts towards harmonising donor efforts. This approach aligns with the various humanitarian charters and principles, including the Paris Declaration on Aid Effectiveness, the Accra Agenda for Action, the principles of Good Humanitarian Donorship, Red Cross fundamental principles and International Red Cross Movement Code for Good Partnership (2009).

⁸ Noting that Australia is a party to the CRPD and its Optional Protocol and that RGOC signed the CRPD and its Optional Protocol on 1 October 2007.

1.3 Development Philosophy – International Red Cross/Red Crescent Movement

Australian and Cambodian Red Cross are part of the International Red Cross/Red Crescent Movement, which is the world's largest humanitarian organisation, with an estimated volunteer base of 100 million volunteers. The Red Cross Movement is a unique provider of services that complements the work of other international organisations, but has a distinct role, based on its humanitarian principles. The Red Cross Movement is recognised by AusAID⁹ as one of the three pillars of the international humanitarian system, alongside the UN and NGO community.

The Red Cross Movement's approach to development is derived from the humanitarian ideals reflected in the Red Cross fundamental principles and values¹⁰. This development approach is informed by local needs and vulnerability assessments, but also guided by the rights and freedoms to which all humans are entitled. For the Red Cross Movement, the definition of development is:

“supporting people to achieve their full potential, and lead productive and creative lives with dignity, according to their needs and choices, whilst fulfilling their obligations and realizing their rights.”¹¹

The Red Cross approach to development¹² is grounded in a humanitarian imperative rather than a specifically articulated “rights based” approach. However, the humanitarian approach, with its focus on promoting the “dignity of the individual according to their needs and choices” also promotes development that is based on social inclusion, and aims to put “vulnerable groups” at the centre of the development process. This development philosophy also encourages action on the underlying social and environmental factors that determine good health, such as influencing public policies and social mobilisation. This includes promoting respect for the specific human rights conventions relating to people with disabilities.

In Cambodia, as part of the Red Cross Movement, the Cambodian Red Cross has a distinctive mandate and structure: it is a national organization closely linked to local communities via its extensive branch and volunteer networks across all 24 provinces, but is also recognised as being “auxiliary to the public authorities”¹³. In the health sector, this means Cambodian Red Cross supports community based activities aimed at promoting community resilience and ownership, whilst also supporting government health systems to better address the needs of vulnerable groups. It therefore has a special and distinctive relationship to the public authorities in the health and disability sectors from which it is able to address and promote the principles and outputs of the CIDI program.

In this way, both the Red Cross mandate and development practice directly supports one of the key principles of the *Development for All* policy; promoting an active and central role of people with disability, and *Mine Action Strategy* key principles of social and economic inclusion and active participation of people with disability, including victims. Through the management of the program, ARC supports approaches that include people with disability in all stages of program planning and implementation.

⁹ AusAID is committed to the Good Humanitarian Donor (GHD) principles, which recognise the unique role of the UN, the Red Cross Movement (Red Cross Movement) and Non Government Organisations (NGOs).

¹⁰ The work of the Red Cross Movement is underpinned by seven Fundamental Principles: Humanity, Impartiality, Neutrality, Independence, Voluntary Service, Unity and Universality.

¹¹ IFRC, *Strategy 2020*

¹² IFRC, *Strategy 2020* and *Code for Good Partnership of the International Red Cross and Red Crescent Movement*

¹³ In order to be recognised as part of the Movement, a National Society must be legally recognised by its government as auxiliary to public authorities of their own countries in the humanitarian field, mandated to work across its national territory, and must be able to provide a range of services including disaster relief, health and social programs.

2. GENERAL PROGRAM INFORMATION

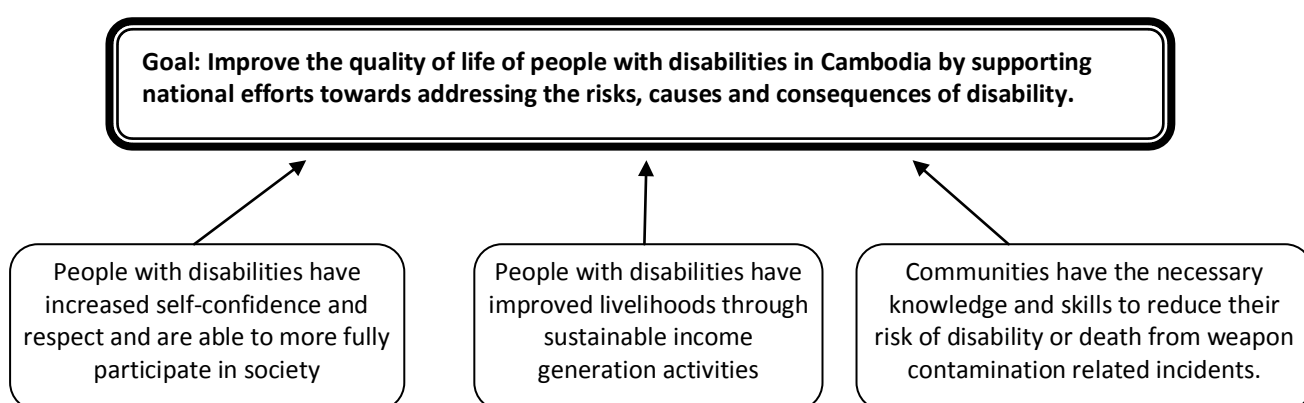
Program Name	Cambodia Initiative for Disability Inclusion
Agency details	Australian Red Cross
Location	Cambodia, nationwide.
Thematic area	Disability, Mine Action
Program period	July 2010 – June 2012
Funds requested	2010/11: AUD 1,325,000 2011/12: AUD 1,325,000
DAC codes	150 –Government and Civil Society 160 – Other Social and Infrastructure Services 400 – Multisector Cross Cutting 920 – Support to local or regional NGOs

3. PROGRAM DESCRIPTION

3.1 Goals and High level Outcomes

The overall program goal and outcomes have been amended to reflect the broadened scope of the CIDI program as an extension of the LSAP. The CIDI provides a transition from the landmine survivor focused LSAP to the broader disability focus of the CIDI program under the AusAID *Development for All* and Mine Action strategies.

The goal and high level outcomes of the CIDI program are:



This goal encompasses prevention of avoidable impairments by addressing the risks and causes of disability or death associated with weapon contamination, as well as addressing the consequences of disabilities and recognizes that in order to improve the quality of life of people with disabilities, social, psychological and economic factors need to be addressed.

The theory of change underpinning these high-level outcomes has been developed and the pathways to change via are a series of intermediate outcomes and influencing strategies mapped. This theory builds on a range of foundational activities that have been completed during the previous three year LSAP implementation (please see below, Annex 1 & 2 for further explanation and documentation of the outcomes hierarchy for this program).

3.2 Program Outcomes

This section describes the pathways to change to achieving our direct program outcomes and discusses in more detail the intermediate outcomes. Intermediate outcomes are the ways in which program activities lead to longer-term changes associated with broader goals. These “intermediate outcomes” are stepping stones towards the achievement of program outcomes and goals. Intermediate outcomes generally are medium term. In people-centred program logic, some changes in attitudes or practices of the targets institutions at the intermediate outcome level are expected within the lifetime of the program. Annex 2: M&E Framework describes what levels of outcomes will be monitored throughout the life of the program, and which levels can only be evaluated after the program has been completed.

3.2.1 A supportive policy context which recognises, respects and promotes the rights of people with disabilities

Ownership and implementation of a legal disability inclusion framework

One of the key achievements of the current LSAP has been the development of a National Plan of Action for Persons with Disabilities, including Landmine Survivors (NPA-PWD). Australian Red Cross NPA-PWD Coordinator supported the coordination and consultation process for the development of the NPA-PWD, which included significant contributions, consultations, discussions and active involvement from PWD and disabled people’s organisations and the Disability Action Council during needs assessments, development and review of the NPA-PWD.

Notwithstanding these successes, as signalled in the LSAP Year 3 Annual Plan, there remain significant challenges with reference to the implementation of the NPA-PWD. There are ongoing challenges with funding and support for the Disability Action Council (DAC) and with capacity of the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) which impacts on the progress in implementation of the NPA-PWD.

The proposed CIDI will continue to encourage and support the RGOC and stakeholders in the implementation and monitoring of the NPA-PWD. A specific support resource, the Australian Red Cross Disability Advisor (previously contracted under AusAID), will continue to be located within the RGOC Ministry for Social Affairs, Veterans and Youth Rehabilitation, and will provide targeted mentoring, capacity strengthening support to the RGOC leadership in disability inclusion, including supporting regular meetings of the national Disability Coordination Committee, developing resource mobilisation strategies and reporting systems that include documenting lessons learned, challenges, and solutions in implementation and monitoring the NPA-PWD.

The NPA-PWD Coordinator roles and responsibilities will be subsumed by the Disability Advisor position outlined above, and a new role for the position holder has been created (Organisational Support Coordinator). This newly created role will build on the knowledge of, and relationships with the broader disability sector in Cambodia and provide capacity strengthening support to civil society organisations to improve coordination and effectiveness.

3.2.2 An inclusive and effective response to the needs and rights of people with disabilities

Strengthened civil society capacity to provide rehabilitation and support services to PWD

A major plank of the LSAP has been the Landmine Survivor Assistance Fund (LSAF) which has offered ongoing support to People with Disabilities (PWD) including landmine survivors, delivered by a range of non-government organisations (NGOs). In line with the overall program change the fund will be renamed as the Disability Inclusion Assistance Fund (DIAF). The extension proposal continues the LSAF evaluation recommendation to include a greater focus required on monitoring and support for organisations.

This Proposal will also support increased collaboration with government authorities, DIAF stakeholders and other key actors, as well as provide support for greater understanding and inclusion of gender mainstreaming. In support of the recommendation for long term funding, three year applications will be continued along with a mixture of short and medium term funding for targeted projects where appropriate and there will be at least one call for proposals in each of the two extension years.

A key recommendation of previous reviews and evaluations has been the need for increased support to organisations in their measurement of impact, to share and learn from progress in the overall Program and to deal with specific design suggestions.

The people-centred program logic approach of the CIDI program design, and a newly created position responsible for Outcome 2, the CIDI Organisational Support Coordinator, will play key roles in responding to this recommendation by focusing on outcomes and impacts, and strengthening the capacity of organisations to measure these in their activities and programs. The position holder is the previous NPA-PWD Coordinator and, as such, she has strong capacity and solid understanding of the Cambodian disability sector and has developed strong relationships with a broad range of stakeholders in the disability sector through her support to the development of the NPA-PWD and related monitoring and evaluation framework. With the support of the CIDI Coordinator, this position is also anticipated to strengthen the linkages between organisations supported by the program, as well as between outcomes.

Within the new Proposal, in line with the *Development for All* strategy, and the draft Australia Cambodia country strategy, the DIAF will incorporate education and infrastructure project support to complement the other sectoral initiatives. The DIAF will continue support to organisations improving food and livelihood security of persons with disabilities and their families. Cambodian Red Cross ongoing provision of water and sanitation infrastructure and health and hygiene education programs for people with disabilities will complement other DIAF-supported activities in this area, and build capacity and understanding of relevant authorities and stakeholders in disability inclusive health programs.

3.2.3 An improved response to those at risk of disability or death due to weapon contamination

Strengthened capacity of Cambodian Red Cross to provide improved community based mine risk reduction programs

There has continued to be a significant drop in casualties related to weapon contamination in Cambodia over the first years of the LSAP. Over half of the casualties are not related to landmines but

to other explosive remnants of war (ERW). Although casualty rates drop, prevalence continues and survivors of weapon contamination accidents require lifelong support, as prosthetics need to be changed regularly and the risk of other injuries and disabilities increases. The CIDI maintains its support to CRC's community based mine action program, which has unique reach and representation, as the mandated humanitarian auxiliary to the public authorities in Cambodia. CRC is the only organisation that has a national network of staff and volunteers that extends to the furthest reaches of villages and communities across the country.

Whilst Mine Risk Education and Risk Reduction (MRER) in some cases has been ineffective in preventing individuals from continuing to practice high-risk behaviours such as collecting wood and food in forested areas, it remains an important tool when combined with livelihood support and direct assistance. CRC's community based mine action program integrates all of these elements to more effectively respond to the risks and needs of communities at risk due to weapon contamination and, through the CIDI, will continue to implement improvements, especially in disability inclusive development practices.

4. PROGRAM IMPLEMENTATION

4.1 Approach to Program Implementation

The program design provides a program logic outcome hierarchy diagram (Annex 1), monitoring framework (Annex 2), two year budget and commentary (Annexes 3 and 4), annual activity plan (Annex 5) and risk matrix (Annex 6).

The principles for implementation of the CIDI are outlined in the development approach of the International Red Cross/Red Crescent Movement and also within the Strategic Context sections which cross-reference the relevant AusAID Mine Action and Disability outcomes and principles.

The following section is based on the CIDI people-centred program logic diagram and monitoring and evaluation framework at Annex 1 and 2.

The program will continue to deliver the core activities of the previous LSAP program while increasing the emphasis placed on capacity strengthening and outcomes focused reporting.

4.1.1 Core Strategy 1: Influencing Policy Context

This program outcome aims to address the needs of persons with disabilities including landmine/ERW survivors by enabling the RGoC, with support from a National Disability Coordination Committee (NDCC) and key stakeholders, to implement the National Plan of Action for Persons with Disabilities including Landmine/ERW Survivors 2009-2011 and beyond.

The NPA-PWD was finalised in the second year of the LSAP, and the focus in the third year of the LSAP has been on the adoption of the NPA-PWD by the Royal Government of Cambodia (RGoC), establishing a replacement committee for the Landmine Victim Assistance Steering Committee (LVA-SC) which is responsible for the oversight of the implementation of the NPA-PWD (the National

Disability Coordination Committee), and supporting MoSVY and other key ministries in determining their roles and responsibilities in implementation.

The ARC NPA-PWD Coordinator, who was co-located with DAC, has been instrumental in supporting the RGoC, in consultation with key stakeholders, to develop the NPA-PWD and the implementation framework. With the subsequent adoption of the NPA-PWD, and commencement of the Disability Advisor, co-located with MoSVY, a full-time NPA-PWD project coordinator is no longer required. As all the foundations for implementation have been devised, responsibilities for implementation and dissemination will lie with MoSVY and DAC but will be supported by the disability advisor in his roles of advising and capacity building. Linkages with other program stakeholders and components, especially in supporting effective dissemination of the NPA-PWD remain a high priority in the Proposal.

The situation of DAC including its funding support will be monitored closely to determine how best to support them. The status of the Convention on the Rights of Persons with Disabilities and its optional protocol (CRPD) and the Cambodian Disability Law will be monitored closely in order to align these key disability documents and support sector collaboration.

4.1.2: Core Strategy 2: Brokering and Coordinating

This strategy addresses the recommendations of increased collaboration with government authorities and among LSAF stakeholders and other key actors, and support for greater understanding and inclusion of gender mainstreaming will also be implemented. The timeframe for projects has also been increased with NGOs able to submit proposals for up to 3 years funding.

4.1.3: Core Strategy 3: Institutional Capacity Strengthening

CIVIL SOCIETY

Disability Inclusion Assistance Fund (DIAF)

Through the Disability Inclusion Assistance Fund (DIAF), financial support and capacity building will be provided to I/NGOs providing rehabilitation and reintegration assistance to persons with disabilities (PWD) including landmine survivors. Calls for new proposals will privilege AusAID's *Development for All* strategy' specific focus areas of education and infrastructure although other sectoral areas will continue to be supported, particularly organisations which focus on improvement of food security and livelihoods. The need for monitoring and organisational support for implementing agencies previously identified in the LSAF evaluations will be continued.

Calls for proposals will be done annually with the first year of the extensions including a mix of short, medium and long term projects, where appropriate, to ensure opportunities for inclusion for the broadest range of organisations, diversity of projects and regular proposal calls.

The currently funded LSAF organisations will complete year 2 of their multiyear funding proposals in March 2011 and pending satisfactory reports and financial acquittals will commence the final year of their projects in April 2011 with a completion date of March 2012. New beneficiary organisations for the shorter and medium term projects will be identified and commence projects by the end of 2010 thereby commencing a continuous cycle of short, medium and long, term projects running concurrently.

PWD or their representative organisations will be included in decision-making regarding DIAF funding support as part of the selection panel, together with representatives from AusAID, ARC and the RGOC.

CAMBODIAN RED CROSS

Targeted water and sanitation assistance for people with disabilities, including survivors of weapon contamination incidents

Since Year 2 of the LSAP, the CRC has responded to specific water and sanitation infrastructure needs identified through monitoring visits to PWD, including landmine survivors. RCVs reflect the diversity of the communities they live in and support and include PWDs, including survivors of weapon contamination incidents, their carers and families.

In the CIDI, in areas where CRC Community Based Mine Action Program is already working, CRC will assess the specific hygiene and health needs of PWD, including survivors of weapon contamination incidents, and address gaps in the following ways:

- Identification and training of Red Cross Volunteers (RCVs), including PWD, to construct latrines and provide education and support to PWD in their communities
- Community support groups of and/or including PWD and other vulnerable people established
- Health and hygiene education provided to PWD, including safe water practices
- RCVs conduct consultations with PWD and their carers and families to determine their water and sanitation needs
- Depending on need a range of assistance solutions can be provided, including:
 - o Distribution of ceramic water purifiers and water jars
 - o Construction of rain water catchment units
 - o Construction of hand-dug wells
 - o Construction of disability specific latrines (designed by PWD)
 - o Information on cleaning environment in community

These activities may also include individuals or families who are assessed to be extremely vulnerable and/or at high risk due to weapon contamination.

Water and sanitation assistance will be coordinated with CRC's mine risk education and microloan activities in Battambang and Preah Vihear provinces, with technical support provided by ARC, ICRC and other Red Cross partners. CRC will work with local authorities and other relevant organisations or groups providing support to PWD; and establish an emergency assistance and referral network in communities for essential health services.

The MRER project adopts a community-based focus in preventative mine action work aimed at reducing the impact of mines and other explosive remnants of war (ERW) on individuals and communities. The project comprises landmine/ ERW awareness; behaviour change and education activities; and the provision of small loan schemes for income generation activities such as tailoring (sewing/dressmaking), motor bike repair, hairdressing, livestock raising and vegetable growing. These initiatives encourage risk reduction and behavioral change among at-risk groups; an approach which provides communities with alternative means to income and resource generation.

The MRER project also provides immediate aid and assistance to landmine survivors and their families in the form of material and health support; providing referrals for survivors to relevant services (specifically hospitals and prosthetic providers); and longer term support through its small loan scheme. The MRER project operates in the six provinces with the highest mine incident casualty rates throughout Cambodia. These are Banteay Meanchey, Pailin, Pursat, Battambang, Preah Vihear and Oddar Meanchey.

In Year 4 the MRER component will place greater focus on identifying the high risk target groups as well as improving the quality of services and messages in line with recommendations from monitoring and evaluation activities over the past 2 years. Implemented by the CRC, this is planned to reach direct beneficiaries of micro loan recipients, and indirect beneficiaries of at least 29,000 through the community education activities.

4.2 Program Management and Coordination

ARC has reviewed its Program Management Structure over the past three years, and made necessary adjustments to respond to changing needs and requirements of the program and to continue to improve support to the implementing partners. ARC program management approach aims to continue its commitment to adaptive management, quality assurance through inclusive reflection and learning, strengthening of counterpart organisations, and coordination of partners and stakeholders through ARC management of the CIDI with continuation of program structures and management systems which deliver efficient program management and coordination.

The core in-country coordination and financial management staff positions for this Proposal will continue as for the LSAP – the CIDI Program Coordinator and the Finance and Administration Officer. Aside from taking on overall responsibility for the coordination of the different outcomes of the CIDI and human resource management, the CIDI Program Coordinator will directly manage Outcomes 1 and 3. The Assistant Grants Manager position has been redefined and will be retitled CIDI Organisational Support Coordinator. The scope of this role has broadened, and will take responsibility for overall coordination and capacity strengthening related to Outcome 2, with support from the CIDI Coordinator.

Overall financial and program management oversight, and support will continue to be provided by the ARC Cambodia Program Coordinator, Asia Manager and Finance Officer, based in Australia.

4.3 Program budget

The main changes to the budget include the additional Disability Advisor position and increases in salary levels for two local staff positions – the Finance and Administration Officer and the CIDI Organisational Support Coordinator. See Annexes 3 and 4 for more details and commentary.

4.3 Implementation Plan

A work plan has been developed for the CIDI program and can be found at Annex 5. This contains detailed activity implementation timeframes.

4.4 Monitoring, evaluation and reporting

The two-year extension to the CIDI program will provide the opportunity for ARC and CRC to strengthen their monitoring and evaluation capacities. A more people centred approach in monitoring and reporting will be incorporated incrementally over the next two years. As part of this, we will

develop greater skills in collecting and analysing data to report on *outcomes*, rather than program inputs and activities.

Please see Annex 2: M&E Framework for detailed outcomes, indicators and means of verification for the CIDI whilst also sharing the specific strategies which Australian Red Cross will undertake to contribute to the achievement of the outcomes. The monitoring and evaluation plan also identifies which agency is responsible for data collection and reporting against the specific activities and intermediate outcomes.

The monitoring and evaluation framework is based on the espoused theory of change which articulates how the program expects to achieve change and ultimately contribute to the overall goal. In order to clarify and tighten the goal and outcomes the theory of change for the CIDI was articulated and critiqued to ensure clear pathways of causation (see Annex 1: Program Logic Outcomes Hierarchy). Draft key evaluation questions in the evaluation section of the monitoring and evaluation framework (see Annex 2: M&E Framework) have been developed in order to evaluate the **overall impact** of the program by demonstrating contribution to the stated goal and high level outcomes.

Ongoing reporting will be completed against activities and intermediate outcomes as per the monitoring section of the monitoring and evaluation framework. Monitoring focuses on the progress against activities and intermediate outcomes. These intermediate outcomes are our key to showing **progress towards** achieving change at the goal level (impact), but can be measured during the life the program.

Training and support will be provided in-country regarding the operationalising of this monitoring and evaluation plan, and will include PWD.

4.5 Risk Management

Please see Annex 6 for further detail.