Enhancing Disability Inclusion, Equity and Rights in Cambodia: a resource for action

October 2024

Contents

Acronyms and abbreviations

ACCESS 2	Phase Two of the Australia-Cambodia Cooperation for Equitable Sustainable Services
CBID	Community Based Inclusive Development
CBM	Christian Blind Mission
CCWC	Commune/Sangkat Committee for Women and Children
CDHS	Cambodia Demographic and Health Survey
CDP	Commune/Sangkat Development Plan
CDPO	Cambodian Disabled People's Organization
CIP	Commune/Sangkat Investment Program
CRPD	Convention on the Rights of Persons with Disabilities
CSDGs	Cambodian Sustainable Development Goals Framework 2016-2030
CSL	Cambodian Sign Language
C/SWG	Commune/Sangkat Working Groups for the Identification of Poor Households and Vulnerable People
DAC	Disability Action Council
DAC-SG	Disability Action Council Secretariat General
DAWG	Disability Action Working Group
DDAC	District Disability Action Council
DFAT	Australia's Department of Foreign Affairs and Trade
DIDRR	Disability Inclusive Disaster Risk Reduction
Disability ID	Disability Identification
DMIS	Disability Management Information System
DRR	Disaster Risk Reduction
EMIS	Education Management Information System
GBV	Gender Based Violence
GPCC	General Population Census of Cambodia
HEF	Health Equity Fund
HMIS	Health Management Information System
ICRC	International Committee of the Red Cross
IDPoor	Identification of Poor Households program
IEC	Information, Education and Communication
IO	International Organisation
M&E	Monitoring and Evaluation
MEF	Ministry of Economy and Finance
MoEYS	Ministry of Education, Youth and Sport
MoH	Ministry of Health
MoInf	Ministry of Information
MoI	Ministry of Interior
MoLMUPC	Ministry of Land Management, Urban Planning and Construction
MoLVT	Ministry of Labour and Vocational Training
MoP	Ministry of Planning
MoSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation

MoWA	Ministry of Women's Affairs
NAP-DRR	National Action Plan for Disaster Risk Reduction 2024-2028
NAPVAW	National Action Plan to Prevent Violence Against Women
NCDM	National Committee for Disaster Management
NDSP	National Disability Strategic Plan
NDSP2	National Disability Strategic Plan 2019-2023
NDSP3	National Disability Strategic Plan 2024-2028
NGO	Non-Governmental Organisation
NSAF	National Social Assistance Fund
NSPC	National Social Protection Council
NSPPF	National Social Protection Policy Framework
OPD	Organisation of Persons with Disabilities
OSSU	One-Stop Service Unit
OWSO	One Window Service Office
PAfID	People's Action for Inclusive Development
PDAC	Provincial/Municipal Disability Action Council
PoSVY	Provincial Office of Social Affairs, Veterans and Youth Rehabilitation
PRC	Physical Rehabilitation Centre
PWDF	Persons With Disabilities Foundation
RGC	Royal Government of Cambodia
SDGs	Sustainable Development Goals
SNA	Subnational Administration
SRHR	Sexual and Reproductive Health and Rights
SPOT	Social Protection Online Toolbox
TPO	Transcultural Psychosocial Organization
TVET	Technical and Vocational Education and Training
UHC	Universal Health Coverage
UN	United Nations
UNDP	United Nations Development Programme
UNESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNOHCHR	United Nations Office of the High Commissioner for Human Rights
UNWOMEN	United Nations Entity for Gender Equality and the Empowerment of Women
VTC	Vocational Training Centre
VWG	Village Working Group
WASH	Water, sanitation and hygiene
WHO	World Health Organization
WWDF	Women with Disabilities Forum

Summary

Over more than two decades, the Royal Government of Cambodia (RGC) has taken significant steps to promote the rights, inclusion and wellbeing of adults and children with disabilities, and their equitable access to services and opportunities. Although progress is being made, persons with disabilities continue to face many barriers in accessing the services and opportunities that would promote their wellbeing and ability to participate fully in their communities. This limits their ability to contribute to the economy or to benefit from Cambodia's economic growth.

Under the first phase of Australia's Department of Foreign Affairs and Trade (DFAT)-funded Australia-Cambodia Cooperation for Equitable Sustainable Services (ACCESS) program, resoruces were developed and numerous trainings conducted to raise awareness on issues such as the 2009 Disability Law, the National Disability Strategic Plan (NDSP), Accessibility, and Social Protection. A detailed training manual was also developed, in collaboration with Light for the World, the Disability Action Council (DAC) and UNDP, to promote disability inclusion.[1]

Phase 2 of the ACCESS program (ACCESS 2) recognised that as of mid-2024, there was no single resource that brought together all the guidance and information available to build capacities at national and subnational levels to enhance disability inclusion, equity and rights. A comprehensive resource was needed to increase understanding among a broad range of actors and contribute to progress in achieving the vision and mission of the *National Disability Strategic Plan 2024-2028* (NDSP3) and the RGC's goal of leaving no one behind. Such a resource would ensure when staff of subnational authorities, members of committees, or service providers change, key concepts and knowledge on good practice on disability inclusion, equity and rights will not be lost.

Enhancing Disability Inclusion, Equity and Rights in Cambodia brings together decades of research, guidance, best practice and strategy to provide a comprehensive resource that aims to increase understanding among a broad range of actors of key disability inclusion issues and available resources. *Enhancing Disability Inclusion, Equity and Rights in Cambodia* is presented in five parts:

1. Introduction and context
2. Enhancing understanding on disability inclusion, equity and rights
3. Priorities for action to enhance disability inclusion, equity and rights in Cambodia
4. Pathways to enhanced disability inclusion, equity and rights at the subnational level
5. Concluding remarks and way forward

Part 2 on enhancing understanding on disability inclusion, equity and rights aims to enhance understanding on issues such as: definition of disability; from charity to human rights; what is disability inclusion; principles of effective disability inclusion; barriers to effective disability inclusion; and, achieving effective disability inclusion.

The barriers explored include: stigma and discrimination based on negative perceptions about disability; physical, communication, financial and attitudinal barriers limiting the accessibility of services; limited understanding of what disability inclusion means, or how to achieve meaningful inclusion and equitable access to services in work plans; lack of understanding on a rights-based approach; discrimination within the families of persons with disabilities, their communities, and from service providers and local authorities; lack of national budget allocations to implement disability

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[1] *Disability Inclusion Trainer's Manual: A guide for supporting training capacity for disability inclusion*, Light for the World, DAC and UNDP, [Hereinafter Trainer's Manual]

inclusive and equitable services; and, persons with disabilities not understanding their rights, or how to claim their rights.

Key issues identified to achieve effective disability inclusion, equity and rights include: inclusive legislative and policy frameworks; twin track approach; social and behaviour change; inclusive language; inclusive planning, decision-making and budgeting; data collection and M&E; and, disability inclusive development.

Part 3 presents the priorities for action to enhance disability inclusion. The seven (7) Strategic Directions outlined in the NDSP3 provide a framework for action through mainstreaming in broader policies and programs. These Strategic Directions are: employment and economic security; health, rehabilitation and wellbeing; education and lifelong learning; social protection and adequate standard of living; inclusive and accessible communities; safety, rights and justice; and, situations of risk and climate change. An overview, including relevant policies and plans and available guidance on the issues, is provided for each Strategic Direction. The focus is on mainstreaming disability in broader programs, rather than on disability specific interventions, and is intended to complement or support implementation of the Strategies listed under each Goal of the NDSP3's Strategic Directions.

Part 4 provides an overview of pathways to enhancing disability inclusion at the subnational level through eight (8) key mechanisms: Provincial/Municipal Disability Action Councils (PDAC); Commune/Sangkat Councils; Disability Identification process; Identification of Poor Households program (IDPoor); Commune/Sangkat Investment Program (CIP); Commune Committees for Women and Children; One Window Service Offices; and One-Stop Service Units.

Part 5 presents concluding remarks and the way forward. Everyone, especially line-Ministries have a responsibility to enhance the inclusion of persons with disabilities in all aspects of the daily life of their communities. Actions will require a multi-faceted and systematic approach, at the national and subnational levels, to overcome the barriers. *Enhancing Disability Inclusion, Equity and Rights in Cambodia* outlines the frameworks and guidance available to ministries and other stakeholders to take action on, and implement, the NDSP3's Strategic Directions. This resource also recommends additional actions are undertaken which focus on building the capacities of stakeholders, at all levels, to achieve effective disability inclusion, equity and rights. Six recommendations are proposed:

- **Recommendation 1:** Develop face-to-face and online training resources on disability inclusion for members of Disability Action Working Groups, Provincial Disability Action Councils, and District Disability Action Councils.

- **Recommendation 2:** Develop training resources for Commune/Sangkat Councils, local committees and other Subnational Administrations.

- **Recommendation 3:** Develop an online disability awareness training resource for civil servants, contract staff and service providers.

- **Recommendation 4**: Continue to build the capacities and empower organisations of persons with disabilities (OPD) at the subnational level through appropriate training, mentoring/coaching and the provision of advocacy materials.

- **Recommendation 5:** Strengthen mechanisms to increase the meaningful participation of OPDs/persons with disabilities in all subnational committees and working groups.

- **Recommendation 6:** Increase public awareness on the rights and contributions of persons with disabilities to an inclusive society.

1.1   Introduction and context

Over more than two decades, the Royal Government of Cambodia (RGC) has taken significant steps to promote the rights, inclusion and wellbeing of Cambodians with disabilities, including by ratifying the 2006 Convention on the Rights of Persons with Disabilities (CRPD), drafting a new Law on the Protection of the Rights of Persons with Disabilities[2] (Disability Law), and developing three (3) National Disability Strategic Plans (NDSP) since 2014[3]. There is also a wide range of other legislative and policy frameworks relevant to promoting the rights, inclusion and wellbeing of adults and children with disabilities, and their equitable access to services and opportunities.

While progress has been made, persons with disabilities continue to face discrimination and limited inclusion in services and opportunities, on an equal basis with others in their community. This limits their ability to contribute to increasing productivity in the economy or to benefit from Cambodia's economic growth. The COVID-19 pandemic also had a significant impact on the wellbeing of persons with disabilities and their access to services.[4]

There are three main sources of disability data available in Cambodia: prevalence data in the General Population Census of Cambodia (GPCC) and the *Cambodia Demographic and Health Survey* (CDHS); and, administrative data in the Ministry of Social Affairs, Veterans and Youth Rehabilitation's (MoSVY) Disability Management Information System (DMIS).

The 2019 GPCC identified 4.9 percent of Cambodians (689,532 people) five years-of-age and over with some "difficulty" in functioning. Females recorded a higher prevalence of disability than males. The disability rate is higher in rural areas (5.3 percent) as compared to urban areas (4.2 percent). The GPCC Disability Thematic Report noted that the GPCC underestimates the disability prevalence, particularly for moderate and severe cases, due to challenges in measuring disability prevalence rates.[5] The CDHS for 2021-2022 found that 24.4 percent of household members aged five years-of-age and above have some level of difficulty in at least one functional domain; 4.1 percent reported a severe disability.[6]

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[2]   The new Disability Law will replace the 2009 *Law on the Protection and Promotion of the Rights of Persons with Disabilities*
[3]   The National Disability Strategic Plan 2023-2028 (NDSP3) will be launched on 3 December 2024
[4]   For more information, see *National situational analysis and assessment of the impact of the COVID-19 crisis on the rights and wellbeing of persons with disabilities and their access to services and supports*, February 2021
[5]   National Institute of Statistics, *Thematic Report on Disability in Cambodia*, General Population Census of Cambodia 2019, Ministry of Planning, Third Draft 25 August 2021, 42 [Thematic Report]
[6]   Persons with Disabilities in Cambodia: Findings from the Cambodia Demographic and Health Survey, 2014 & 2021-22, September 2023, 9

As of 27 September 2024, MoSVY's DMIS[7] had identified 351,121 persons with disabilities across 25 provinces, including 171,971 females; 250,730 Disability ID cards have been issued.[8]

Cambodians with disabilities reflect the diversity of the population. This diversity is reflected in the different types of disability experienced, such as: physical disability; vision impairment; hearing impairment; intellectual impairment; psychosocial impairment; autism; acquired brain injury; neurological disability; spinal cord injury; and, invisible disabilities. The diversity of persons with disabilities needs to be understood, acknowledged and celebrated, including an understanding of the concept of 'intersectionality'. Intersectionality recognises that people who belong to two or more marginalised groups experience discrimination differently from each other and also differently from those who belong to only one marginalised group. Intersectionality acknowledges identity markers, such as 'woman', 'indigenous' or 'disabled', do not exist independently. Each informs the other and can have overlapping and compounding effects.

It is recognised that not all persons with disabilities are vulnerable or equally disadvantaged, however, persons with disabilities, particularly those in rural and remote areas and marginalised groups, face many challenges in their daily lives, including: poverty and unsustainable livelihoods; discrimination and negative attitudes from all levels of society; limited access to appropriate services, information and opportunities; inaccessibility of physical infrastructure; lack of accessible information on available services and opportunities; lack of knowledge on the rights of persons with disabilities among local authorities and service providers; and, limited inclusion in mainstream services and opportunities.

The Vision of the new *National Disability Strategic Plan 2024-2028* (NDSP3) is that "persons with disabilities of all ages and types of disabilities, and their families, live in good quality in all aspects of life, and participate fully and equally in a society that respects their rights, dignity and diversity, with inclusion in all sectors and development". In addition, the NDSP3's stated Mission is "to achieve disability inclusion in the work and budgets of ministries and institutions, development partners, the private sector, international organisations, non-governmental organisations and other stakeholders at the national and subnational levels".

1.2　Purpose of this resource

Enhancing Disability Inclusion, Equity and Rights in Cambodia is intended to create a good level of understanding and awareness of key issues, and available guidance, among all stakeholders. It is intended to serve as a useful resource for a range of actors, including both duty bearers and rights holders: RGC ministries and entities at national and subnational levels, such as Provincial Disability Action Councils (PDAC) and Disability Action Working Groups (DAWG); local authorities, such as Commune Councils and subnational committees; service providers; development partners; and, persons with disabilities and their representative organisations who may not fully understand their rights, or how to access available services and opportunities on an equal basis with other members of

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[7]　The DMIS was established under Sub-Decree No. 202 On Disability Identification based on social model and rights-based approach, dated 19 July 2023 (unofficial translation)

[8]　Summary of speech by H.E. Sorn Sophal, Director General of General Department of Rehabilitation of MoSVY at National Workshop on Dissemination of Disability Identity Data Report on Social Model and Basic Rights to relevant Ministries, Institutions and Departments. Capital, and province, Tonle Bassac II Restaurant, Phnom Penh, 30 September 2024

their community.[9]

This resource was developed through desk research of available legislation, policies, plans, other relevant documents, and websites, in both Khmer and English. Valuable inputs were also provided by the ACCESS 2 Team, the Cambodian Disabled People's Organization (CDPO), and other stakeholders working with and for persons with disabilities, through consultations, a focus group discussion, and written feedback.[10]

Enhancing Disability Inclusion, Equity and Rights in Cambodia is presented in five (5) parts: (1) introduction and context; (2) enhancing understanding on disability inclusion, equity and rights; (3) priorities for action to enhance disability inclusion, equity and rights in Cambodia; (4) pathways to enhanced disability inclusion, equity and rights at the subnational level; and, (5) concluding remarks and way forward. Part 3 reflects the Strategic Directions of the NDSP3 and provides an overview, including relevant policies and plans, and available guidance on the issues, including: employment and economic security; health, rehabilitation and wellbeing; education and lifelong learning; social protection and adequate standard of living; inclusive and accessible communities; safety, rights and justice; and, situations of risk and climate change. The focus of Part 3 is on mainstreaming disability in broader programs, rather than on disability specific interventions, and is intended to complement or support implementation of the Strategies listed under each Goal of the Strategic Directions.

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[9] See Annex 2 for an overview of the main stakeholders with a role in promoting disability inclusion
[10] Other stakeholders providing inputs and advice include: PAfID, UNICEF, UNDP, UNFPA, UNOHCHR, ICRC, CARE Cambodia, Exceed Worldwide, Humanity & Inclusion, CHAI, and representatives of the Embassy of Australia in Phnom Penh

To achieve the NDSP3's Vision and Mission, a whole-of-government and multi-sectoral approach, including the meaningful participation of persons with disabilities, will be necessary. Enhancing disability inclusion should be grounded in equity, recognising the full range of barriers that prevent persons with disabilities participating on an equal basis with others.

This section aims to enhance understanding on issues such as: definition of disability; from charity to human rights; what is disability inclusion; principles of effective disability inclusion; barriers to effective disability inclusion; and, achieving effective disability inclusion.

2.1   Definition of disability

The CRPD does not include detailed definitions of 'disability' or 'persons with disabilities' in its definition section. However, Article 1 states that "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." This definition is reflected in the NDSP3 and draft new Disability Law. The NDSP3 encourages actions to address the rights and diversity of adults, youth, children and older persons experiencing different types of disability, regardless of the cause of disability.

2.2   From charity to human rights

Over time, four main approaches to disability have evolved: charity model; medical model; social model; and the rights-based model. The charity model focused on the individual and tended to view persons with disabilities as victims, or objects of pity, identified by their impairment. The medical model also focused on the disability of the individual and saw the impairment as a problem, or health condition, needing assistance or to be cured. The social model focuses on reforming society, removing barriers to participation, raising awareness and changing attitudes, practice and policies.

The rights-based model focuses on equity and rights and looks to include all people equally within society. It is based on the principle that human rights for everyone are an inalienable right and that all rights are applicable and indivisible. This approach calls on duty bearers at all levels to meet their responsibilities, and sees persons with disabilities as central actors in their own lives as decision makers, citizens and rights holders.[11]

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[11] For more information on the different approaches to disability, see *Disability-Inclusive Development Toolkit*, CBM, January 2017, 21-22 [Hereinafter CBM DID Toolkit]

The adoption of the CRPD brought about a "paradigm shift" in approaches and thinking about disability. Persons with disabilities are no longer viewed simply as objects of medical treatment, charity and needing protection. While access to appropriate medical care and rehabilitation may serve as a pre-condition to support independence and contribute to full participation, the CRPD promotes an approach where persons with disabilities are subjects of human rights, active in the decisions that affect their lives and empowered to claim their rights. The new Disability Law and NDSP3 reflect the rights-based model.

2.3   What is disability inclusion?

Inclusion aims to ensure that everyone can actively participate in all aspects of life in their communities, regardless of sex, age, gender identity, disability, religion, state of health, ethnic origin, sexual orientation, or any other characteristic. Specifically, disability inclusion aims to ensure that persons with disabilities have equal reasonable access to the same basic services that are available to people without disability. Inclusion is a human right. Persons with disabilities have the same rights as people without disability to be included in any available activities. Including persons with disabilities in broader (mainstream) government policies, programs and services, means that they can participate as equal members of society.[12]

It is important to understand the difference between 'inclusion', 'integration', 'segregation' and 'exclusion'. Inclusion refers to the process of changing society, and its systems and structures, to include everyone, regardless of their status. Integration is the process of making a person adapt to fit into society. Segregation occurs when the same service is provided to persons with disabilities in a separate environment to people without disability. Exclusion occurs when persons with disabilities are directly or indirectly denied access to services and opportunities on an equal basis to people without disability. For persons with disabilities, inclusion has positive connotations whereas integration may have negative connotations.[13]

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[12] Trainer's Manual, 92
[13] *Disability-Inclusive Language Guidelines*, United Nations Office at Geneva, 2021

2.4 Principles of effective disability inclusion

The principles of effective disability inclusion promote equity, access, opportunity and the rights of people of all ages and types of disability, without discrimination. Efforts to enhance inclusion should be based on the understanding that:

- Persons with disabilities have the right to access opportunities and engage in full and meaningful participation on an equal basis with others.
- Persons with disabilities are a diverse group, and this diversity must be respected and considered in the planning of policies, programs and projects.
- Persons with disabilities should be empowered to contribute and take an active and central role in decision making.

The principles outlined in Article 3 of the CRPD are also relevant to effective disability inclusion:

- Respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons
- Non-discrimination
- Full and effective participation and inclusion in society
- Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity
- Equality of opportunity
- Accessibility
- Equality between men and women
- Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

2.5 Barriers to effective disability inclusion

Persons with disabilities in Cambodia, as in many countries, are often among the most marginalised, excluded and vulnerable members of the population. Persons with disabilities face many barriers in accessing the services and opportunities that would promote their wellbeing and ability to participate fully in society. Meaningful participation, and heeding the call for **'nothing about us without us'**, continues to be a challenge for governmental and non-governmental stakeholders, and for the private sector. Barriers to effective disability inclusion include: stigma and discrimination; accessibility of services and opportunities; limited understanding of meaningful inclusion; a lack of awareness of rights and available services and opportunities; and, inadequate budget allocations.

Stigma and discrimination

Persons with disabilities often face stigma and discrimination based on negative perceptions about disability, or the misconceptions linked to cultural and religious beliefs. These attitudes and beliefs reflect a value system that discriminates against persons with disabilities based on the idea that certain ways of appearance, functioning and behaviour are essential for living a life of value. They are sometimes considered to be in need of 'fixing', less able to contribute and participate, less worthy of attention, and of less value to their family and community.[14]

Stigma can lead to discrimination and exclusion, affecting various aspects of the daily life of persons with disabilities, including their social interactions, and access to opportunities for employment, education, and health care. Stigma causes not only visualised barriers but also can be internalised by persons with disabilities leading to isolation and low self-esteem.

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[14] *Reducing stigma and discrimination against children with disabilities*, UNICEF

Discrimination occurs when persons with disabilities are treated less favourably, or not given the same opportunities as other people because of their disability. This treatment can sometimes be unintentional due to misconceptions, and a lack of understanding of disability as a part of life and of human diversity.

In addition, it should be acknowledged that the families or caregivers of children and adults with disabilities, particularly those with intellectual impairment or severe disability, may also face stigma and discrimination within the community, and experience social exclusion and limited access to services and opportunities.

Accessibility of services and opportunities

Although progress is being made to strengthen legislation and policies to ensure people of all ages and types of disability have the right to access services and opportunities, many continue to face barriers in the accessibility of these services and opportunities. These accessibility barriers may be:

- **Physical** – the premises of the service are not accessible or are far from where person lives
- **Communication** – information about the service/opportunity is not available in accessible formats or service providers cannot communicate appropriately with the person
- **Financial** – people do not have the financial resources to pay for the service or the cost of transport to the service
- **Attitudes** – families, communities and service providers may have negative attitudes towards persons with disabilities shaped by religious beliefs, ignorance and pre-conceived ideas which can lead to stigma, stereotyping, discrimination and prejudice.

Limited understanding of meaningful inclusion

A review of implementation of the *National Disability Strategic Plan 2019-2023* (NDSP2) found that there was limited understanding, particularly at the subnational level, of what disability inclusion means, or how to achieve meaningful inclusion and equitable access to services and opportunities in broader work plans, budgets, activities, and trainings. Several factors contribute to these barriers to inclusion, such as: high turnover of government officials and staff delegated to work on disability-related issues; and, a need to change mindsets to eliminate stigma and discrimination, and from seeing disability as a stand-alone issue. There is also a lack of understanding of disability, and the meaning of a rights-based approach and disability inclusion, within the families of persons with disabilities, their communities, service providers, and local authorities.

Lack of awareness of rights and available services and opportunities

Many persons with disabilities may not have a good understanding of their rights, or how to claim their rights. They may not have knowledge on how to register for a Disability ID or Equity Card or the benefits that having a Disability ID[15] or Equity card would bring them, such as: access to free healthcare, income support under social protection programs, vocational training, and other opportunities for eligible persons with disabilities and families. A network of representative Organisations of Persons with Disabilities (OPD), including Women with Disabilities Forums (WWDF), have been set up around the country. However, many lack the capacity and financial resources to raise awareness among persons with disabilities, or effectively advocate for their rights in target areas.

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[15] See Part 4 for more information on the Disability ID card and process to obtain a card and benefits provided to holders

Inadequate budget allocations

A significant barrier to the effective mainstreaming of disability in broader programs, services and opportunities, and in the provision of disability specific interventions, is the inadequate allocation of budgets to implement activities, or to build the capacities of service providers to work with persons with disabilities.

2.6 Achieving effective disability inclusion

The effective inclusion of persons with disabilities in all aspects of the social, cultural, religious, economic and political life of their communities requires a multi-faceted and systematic approach, at all levels, to overcome the barriers to inclusion. Achieving effective disability inclusion and equitable access to services and opportunities will require focused attention on issues such as: an inclusive legislative and policy framework; the twin track approach; social and behavioural change; inclusive language; inclusive planning, decision making and budgeting; data collection/monitoring and evaluation (M&E); and, disability-inclusive development.

Inclusive legislative and policy frameworks

Cambodia has a legislative and policy framework with the potential to achieve effective disability inclusion. Overarching legal and policy instruments include: the Constitution; the Pentagonal Strategy and Political Platform of the RGC 2023-2028; the *Roadmap Towards Universal Health Coverage 2024-2035;* the *Cambodian Sustainable Development Goals Framework* (CSDGs); the draft *Law on the Protection of the Rights of Persons with Disabilities*; the *National Disability Strategic Plan 2024-2028*; the CRPD; and, the Incheon Strategy.[16]

In addition, a key mechanism with the potential to enhance disability inclusion are the Disability Action Working Groups (DAWG). DAWGs have been established in all government ministries and institutions as called for in the 2013 Sub-Decree No. 216 ANKr.BK on Organisation and Functioning of the Disability Action Council (DAC).[17] Subsequently, a 2014 DAC Prakas outlined the composition and roles and responsibilities of the DAWGs, specifying that the DAWG is the coordination and advisory mechanism on disability issues at each Ministry/Institution.[18] DAWGs have a key role to play promoting the mainstreaming of disability in broader policies and programs of their ministry or institution.

Although these frameworks and mechanisms have the potential to enhance disability inclusion, to overcome barriers to inclusion, a process of systemic reform involving changes and modifications in approaches, structures, strategies and attitudes is needed.

Twin-track approach

Effective disability inclusion can only be achieved by mainstreaming disability in broader policies and programs, and by providing disability specific interventions, when required; the so-called twin-track approach. The twin-track approach to enhancing disability inclusion involves the implementation of

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[16] Relevant policy frameworks are presented in Part 3 on priorities for action; for more information on the overarching legal and policy frameworks see Annex 3; see also Annex 4 for brief information on other relevant legislative and policy frameworks

[17] For more information, see Article 14 of Sub-Decree No. 216 ANKr.BK on Organisation and Functioning of the Disability Action Council, adopted on 2 May 2013

[18] For more information, see DAC Prakas No. 001 DAC.BrK, dated 9 May 2014, On the Organisation and Functioning of Disability Action Working Groups in Ministries/Institutions

two parallel processes: disability mainstreaming, and disability-specific interventions.[19]

- **Disability mainstreaming**: the process of removing barriers to facilitate the participation of persons with disabilities in all programs, activities and opportunities, on an equal basis as people without disability.

- **Disability specific interventions**: the provision of services and activities to address specific requirements, such as physical rehabilitation, assistive technology, mobility aids, communication support, sign language interpretation, and the empowerment of persons with disabilities to participate on an equal basis with all members of their community. The provision of appropriate assistive technology can contribute to reducing the barriers to effective inclusion.

Successful outcomes for persons with disabilities through the twin-track approach can only be achieved if an equal emphasis is put on both tracks. In the Cambodian context, to date, the emphasis has been on the provision of disability specific interventions.

Social and behavioural change

Adults and children with disabilities face stigma and discrimination based on deeply rooted negative perceptions about disability. A study commissioned by UNICEF found that efforts to reduce stigma and discrimination that addressed multiple levels of influence, targeted multiple audiences, and combined communications, advocacy and programming were more effective than standalone initiatives. The study also found that achieving systemic social and behaviour change requires time, investment and integrated communications, programs and advocacy interventions.[20] The final report presents information on promising practices in social and behavioural change interventions and approaches to promote the inclusion and empowerment of children and adolescents with disabilities, including their access to and use of services. It also highlights principles, strategies and methods to address attitudinal, informational, environmental and institutional barriers.[21]

Changing attitudes towards persons with disabilities also has the potential of reducing the social exclusion of their families or caregivers.

Social and behavioural change to promote disability inclusive attitudes and behaviours is the responsibility of everyone, including community leaders, local authorities and service providers. Raising awareness among, and changing behaviours of, government officials, service providers, members of the community and families, is central to enhancing disability inclusion to achieve the full and effective participation of persons with disabilities.

Despite resource restraints, CDPO plays an important role as an educator on the rights of persons with disabilities and implements activities to raise awareness and build capacities at all levels. Disability advocacy also supports persons with disabilities to defend their rights, experience equality and overcome barriers that can affect their ability to participate in the community. OPDs, including WWDFs, have a crucial role to play in raising awareness and building the capacities of their members to participate in services and opportunities on an equal basis with others in their communities.

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[19] CBM DID Toolkit, 55; see also Trainer's Manual, 92
[20] _Reducing stigma and discrimination against children with disabilities_, UNICEF, 2021
[21] _Social and Behavioural Change Interventions to Strengthen Disability-Inclusive Programming: A synthesis of the evidence_, UNICEF, November 2020

Inclusive language

The use of inappropriate language when speaking to, or about, persons with disabilities can be hurtful, spread prejudice and discrimination, and limit the potential for inclusion. Families, members of the community, the media, service providers, and government authorities sometimes do not know the words they use are inappropriate because of a lack of awareness and learned prejudices. Persons with disabilities must be treated with dignity and respect, and recognised as individuals with the same rights as other members of the community. For example, it is not appropriate, or respectful, to refer to persons with disabilities as a PWDs, or handicapped, or to call them by their disability.

Four (4) general principles should be considered to facilitate the use of appropriate language:
- Use people first language – emphasise the person not the disability (person with disability/ person with intellectual impairment not disabled person)
- Avoid labels and stereotypes – avoid terms that portray a person with disability as 'brave', or having 'overcome' their disability, or as 'vulnerable'
- Do not use condescending euphemisms – avoid terms such as 'differently abled' or 'special'
- Do not refer to disability as an illness or a problem – avoid terms such as 'suffers from' or 'afflicted with' and words that depict persons with disabilities as objects needing charity or pity.[22]

Annex 5 presents examples of inclusive language and language to be avoided. Using appropriate language when talking to, or about, persons with disabilities has the potential to enhance inclusion in all aspects of daily life.

Inclusive planning, decision-making and budgeting

Persons with disabilities, and their representative organisations, are members of decision-making bodies such as the Disability Action Council (DAC) and Provincial Disability Action Councils (PDAC), and have been actively involved in the development of National Disability Strategic Plans. However, persons with disabilities are often excluded from or have poor experiences when taking part in broader mainstream processes for the development and implementation of policies, programs and services.

Persons with disabilities and their families know best what services and opportunities would contribute the most to improving their wellbeing. The clear message of the disability movement, "Nothing About Us Without Us", relies on the principle of participation and inclusion in all aspects of daily life. Effective disability inclusion can only be achieved through the full and meaningful participation of persons with disabilities and their representative organisations in planning and decision-making processes.

Sometimes authorities may be reluctant to work with persons with disabilities due to pre-conceived ideas about disability, or how to communicate with persons with disabilities. Good practice guidelines are available to inform the development of inclusive, accessible, and meaningful consultation and engagement processes with persons with disabilities for government, business and NGOs.[23]

It is also essential that during planning and budgeting processes funds are allocated to remove barriers that may prevent the meaningful participation of persons with disabilities, and to promote

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[22] *Disability-Inclusive Language Guidelines*
[23] For more information, see *Good Practice Guidelines for Engaging with People with Disability*, Commonwealth of Australia (Department of Social Services), 2023

their inclusion. This may include disability awareness training for, or upgrading the skills of, service providers. Disability inclusive budgets in mainstream programs and plans should also take into account the costs for issues such as improving physical accessibility, providing reasonable accommodations, and providing information and communications in accessible formats.

UNICEF describes disability inclusive budgeting as an approach where governments combine disability specific and mainstreaming strategies, ensuring strong alignment with the CRPD in the way public resources are mobilised, allocated, utilised and accounted for to achieve disability inclusion. This approach requires policy and budget makers to take into consideration the unique requirements of persons with disabilities throughout the budget cycle, but also within the framework of other development initiatives. It also ensures that human rights and economic considerations are taken into account and reconciled to create an enabling environment for sustainable, efficient and equitable public investments in persons with disabilities.[24]

UNICEF guidance is available with the aim to: clarify the meaning of disability-inclusive budgeting through a child rights lens; and, to outline key entry points or pathways of change for UNICEF and partners to influence decisions with the aim of making fiscal policies and budgets disability inclusive. Although specifically focused on making budgets work for children with disabilities, insights and guidance are also relevant to adults with disabilities.[25]

As part of planning and budgeting processes, attention should be given to strengthening referral pathways and other mechanisms to specifically raise awareness among service providers on the right of persons with disabilities to access services and opportunities, and to refer persons with disabilities to available mainstream services, as well as to disability specific services.

An important element of inclusive planning and decision making is ensuring that meetings, conferences and other events are accessible to people with all types of disabilities. Consideration is not only needed to the physical accessibility of venues but also to the accessibility of communication and information. Guidance is available to support the planning and implementation of inclusive meetings, conferences and other events. CBM's *Accessible meetings and events: a toolkit* provides guidance on organising accessible and inclusive meetings and events in the planning, delivery and follow-up stages.[26] A Checklist for planning accessible and inclusive meetings is provided in Annex 6.

Data collection/Monitoring & Evaluation

Persons with disabilities often face significant barriers in accessing mainstream services and opportunities. However, these barriers are not always identified and the impact of programs on persons with disabilities is not measured as monitoring processes are not designed to collect disability data. Disability data is essential to be able to develop evidenced-based policies and programs, and to measure progress in achieving effective disability inclusion, as well as to identify barriers that remain unresolved. However, persons with disabilities are often not included in data collection, monitoring and evaluation (M&E) processes, or in the development of M&E processes and mechanisms; their meaningful participation is crucial.

Cambodia has made significant progress in the collection of data on persons with disabilities, including for the GPCC and the CDHS, using the Washington Group Short Set Questions.

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[24] *Disability Inclusive Budgeting from a Child Rights Perspective: Pathways of Change for UNICEF and Partners*, UNICEF Eastern and Southern Africa Regional Office, Social Policy and Disability Inclusion, Technical Note, March 2024, 7

[25] For more information, see *Disability Inclusive Budgeting from a Child Rights Perspective: Pathways of Change for UNICEF and Partners*

[26] *Accessible meetings and events: a toolkit*, CBM, May 2021

On 29 July 2023, former Prime Minister Hun Sen signed Sub-Decree No. 202 On Disability Identification through Social and Rights-Based Models. The sub-decree categorises five types of disability: physical disability; sensory disability; intellectual impairment; psychosocial impairment; and, other disabilities. Each type of disability is further divided into three levels: Level 1 (severe); Level 2 (moderate); and, Level 3 (mild).[27] MoSVY's DMIS has detailed data on persons with disabilities in all provinces.

The Disability Action Council Secretariat General (DAC-SG) has developed a M&E system to measure progress in implementation of the NDSP3, which will also measure progress in disability inclusion in mainstream programs. Nevertheless, not all Ministries, institutions and other service providers have a functional mechanism to collect data on persons with disabilities accessing their programs, including on people with recently acquired impairments, or a mechanism to share data and other research findings with the DAC-SG and other service providers.

Guidance is available to strengthen disability data collection to support M&E. *Collecting and using data on disability to inform inclusive development* provides practical guidance on data collection approaches. It sets out: a brief overview of disability inclusive development practice and the need for data to support this; some key issues and principles to consider when collecting disability inclusive data; how such information can be used to strengthen disability inclusion at all stages of the project and program cycle; and, methods and tools that can be used to gather data with both adults and children with disabilities.[28]

In addition, UNICEF has developed guidance to support the development of disability inclusive data collection, monitoring and reporting on water, sanitation and hygiene (WASH) programs which could be adapted for use with other types of programs. The guidance contains approaches and tips to collect disability data that can identify persons with disabilities and define their barriers to accessing programs, and monitor and report the results and impact of programs for persons with disabilities.[29]

Disability-Inclusive Development

To be effective in reducing poverty, development must actively include and benefit persons with disabilities. Disability-inclusive development provides opportunities for persons with disabilities to participate on an equal basis with others and realise their full potential to be productive contributors to the economic growth of their communities and the country. A disability-inclusive approach to development seeks to identify and address barriers that prevent persons with disabilities from participating in and benefiting from development.

The *Political Platform of the RGC* reiterates that preparation of the *National Strategic Development Plan 2024-2028* (NSDP) should "ensure that no one shall be left out of the development process".[30] The CSDGs are also inclusive of persons with disabilities. In addition, Cambodia is a signatory to the *Incheon Strategy*; the first set of regionally agreed disability-inclusive development goals.

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[27] Sub-Decree No. 202 On Disability Identification based on social model and rights-based approach, dated 19 July 2023 (unofficial translation). The Sub-Decree outlines two purposes: develop and manage a disability identification database as a basis for improving livelihoods, and access to social services and social assistance programs; and, provide ID cards for persons with disabilities

[28] *Practice note: Collecting and using data on disability to inform inclusive development*, Plan International Australia and CBM Australia-Nossal Institute Partnership for Disability Inclusive Development, July 2015

[29] *MAKE IT COUNT: Guidance on disability inclusive WASH programme data collection, monitoring and reporting*, UNICEF, 2021

[30] *Political Platform of the Royal Government of Cambodia of the Seventh Legislature of the National Assembly for Nation Building and Defense 2023-2028*, 2

Community Based Inclusive Development (CBID) is another approach that works at the local level to address the barriers to inclusion faced by persons with disabilities. It has the potential to ensure that persons with disabilities are respected and included in their communities, on an equal basis, in all areas of daily life. CBID addresses barriers experienced by persons with disabilities, their families and communities in practical ways. CBID programs can include health, education, livelihood, social and empowerment activities, working closely with local partners, local governments and OPDs. CBID can make a valuable contribution to the RGC's goal of leaving no one behind in development processes.[31]

Guidance available to support disability-inclusive development includes:

- The *Disability-Inclusive Development Toolkit* covers issues such as: what is disability; models of disability; language and communication; introduction to disability inclusive development; and, the key elements of disability inclusive development.[32]

Overcoming barriers requires an inclusive approach which addresses every aspect; partial solutions are not enough.
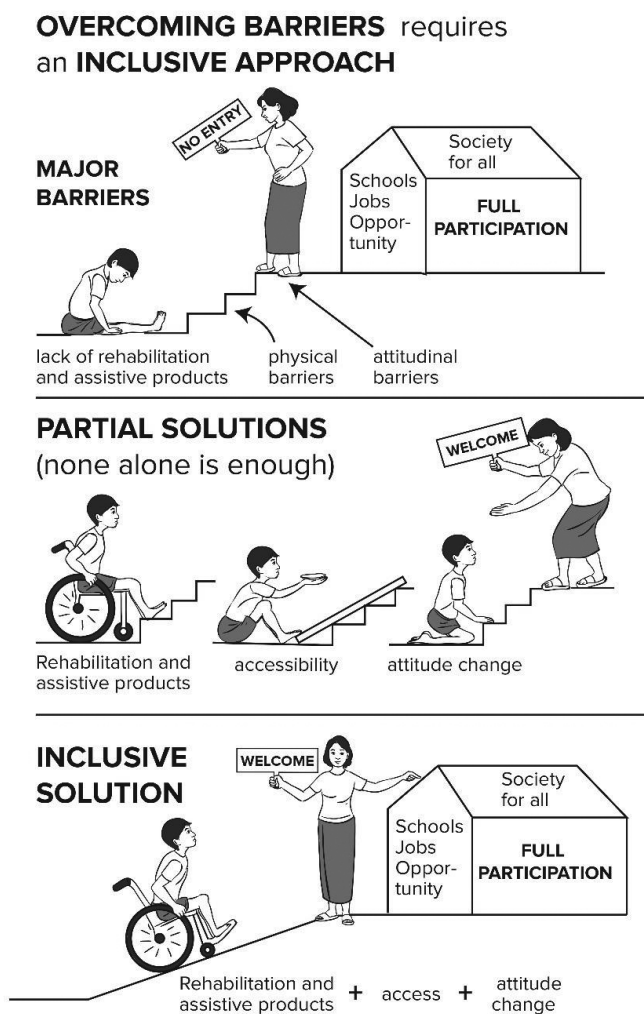
Source: adapted from Making PRSP Inclusive, HI and CBM, January 2006, Munich, Germany, 58

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[31] More information on CBID and CBID in Cambodia is available at: https://cbid5.dac.gov.kh/background/
[32] *Disability-Inclusive Development Toolkit*, Christian Blind Mission (CBM), January 2017

PART ③ PRIORITIES FOR ACTION TO ENHANCE DISABILITY INCLUSION

Cambodia has relatively complex governmental structures at the national and subnational levels focused on issues relevant to enhancing disability inclusion. These include: Ministries and agencies; inter-Ministerial, multi-stakeholder coordination bodies; and, numerous committees, sub-committees, and working groups.[33] The understanding that efforts to address the rights and inclusion of persons of all ages and types of disabilities requires a whole-of-government and multi-sectoral approach is growing. Nevertheless, meaningful disability inclusion in policies, programs and projects at the national, provincial, district and commune levels remains a challenge.

For persons with disabilities, a range of services and opportunities may be required at different times over their lifetimes. A holistic approach and the continuity of access to services and opportunities is essential to promote wellbeing. In the past, the focus of key stakeholders has been on the provision of disability specific interventions such as through Physical Rehabilitation Centres (PRC), vocational training projects, schools established to respond to children with specific disabilities, Cambodian Sign Language (CSL) Interpretation, and Braille printing.

To achieve the vision and mission of the NDSP3, a whole-of-government approach, involving all stakeholders at the national and subnational level, will be necessary. This will require not only the effective mainstreaming of disability in broader programs and opportunities, but a change of mindsets that see disability as a stand-alone issue that is the responsibility of a single ministry or of disability-specific organisations.

The seven (7) strategic directions outlined in the NDSP3 provide a framework for action to enhance disability inclusion, equity and rights through mainstreaming in broader policies and programs: (1) employment and economic security; (2) health, rehabilitation and wellbeing; (3) education and lifelong learning; (4) social protection and adequate standard of living; (5) inclusive and accessible communities; (6) safety, rights and justice; and, (7) situations of risk and climate change.

3.1 Employment and economic security

Overview of issue

Persons with disabilities have a right to access decent employment and livelihood opportunities that is fairly compensated based on their qualifications, to promote their independent living and economic security, on an equal basis with others. With access to opportunities, persons with disabilities can be productive contributors to their family and community. The Political Platform of the RGC includes provisions for the development of jobs and employment, and to improve access to job-seeking services and vocational training.[34] However, many persons with disabilities face barriers to meaningful employment and economic security, such as: stigma, discrimination and pre-conceived

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[33] For more information on stakeholders, see Annex 2

[34] *Political Platform of the Royal Government of Cambodia of the Seventh Legislature of the National Assembly for Nation Building and Defense 2023-2028*, 21-22

ideas about the capacities of persons with disabilities among employers, work colleagues, teachers and financial service providers; lack of accessible infrastructure, training materials and teaching methods at Vocational Training Centres (VTC); and, lack of awareness among persons with disabilities on available opportunities and how to advocate for their right to employment and economic security.

A recent study on inclusive employment in the garment, footwear, and travel goods sector, Cambodia's largest employer and leading export sector, identified several key barriers faced by persons with disabilities in the sector. These barriers are likely reflected in other sectors and will require focused attention if the right of persons with disabilities to access decent employment and livelihood opportunities is to be realised: limited transportation options for persons with disabilities; inaccessible working environments that limit mobility and pose safety risks; low levels of awareness among employers of disability rights and obligations, and the advantages of hiring persons with disabilities; lack of transparency and accountability in government inspections, as well as a lack of understanding about various impairments and the reasonable accommodations necessary to provide decent work for persons with disabilities; limited job matching opportunities; limited access to education and vocational training for persons with disabilities; discriminatory societal norms and attitudes that perpetuate discrimination; and, insufficient data and examples of successful inclusion, as well as a lack of comprehensive data on the barriers and issues faced by persons with disabilities.[35]

Legislation and plans have been developed that have the potential to improve employment and economic security outcomes for persons with disabilities and to enhance effective inclusion and participation.

In 2010, Sub-Decree 108 ANKr.BK established a quota for employment of persons with disabilities. For Ministries and other State entities employing more than 50 civil servants, two percent of civil servants employed must be persons with disabilities. For other legal entities employing more than 100 people, one percent of people employed must be persons with disabilities. All entities are required to report annually on their employment of persons with disabilities. If an entity does not meet the employment quota, it must make a contribution to the government.[36]

It is widely recognised that employing persons with disabilities may require adaptions to the work environment. Some employers reportedly choose to make the contribution rather than incur the costs of adaptions. In 2012, Inter-Ministerial (MoSVY and MoLVT) Circular No. 005 MoSVY.SRNN provided guidance to ensure reasonable accommodations in the employment of persons with disabilities with the required qualifications and competence to carry out the duties of a particular position, without discrimination. Reasonable accommodations may require adjustment and modification of facilities and the work environment to ensure accessibility so that employees with all types of disability can carry out their jobs, such as the installation of ramps, wide doors, accessible toilets, lifts with Braille buttons and signs, computers with assistive technology, or modifying working hours.[37]

MoSVY's Department of Welfare for Persons with Disabilities maintains AOKAS to register persons with disabilities seeking employment. The AOKAS is linked to the National Employment Agency to facilitate more opportunities for persons with disabilities to access paid employment.

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[35] For more information, see *Promoting the Inclusion of Persons with Disabilities in the GFT Sector: Sustainability Recommendations Paper*, GIZ-FABRIC, July 2024
[36] For more information, see Sub-Decree 108 ANKr.BK, dated 30 August 2010, on Employment Quota for Persons with Disabilities
[37] For more information, see Inter-Ministerial (MoSVY and MoLVT) Circular No. 005 MoSVY.SRNN, dated 20 September 2012, on Reasonable Accommodation on Employment of Persons with Disabilities

The Ministry of Labour and Vocational Training (MoLVT) is implementing plans and programs with the potential to improve the livelihoods and economic security of persons with disabilities, through equitable access to opportunities for employment and technical vocational education and training (TVET). The MoLVT's *Strategic Plan for Employment Development, Social Security and Vocational Training 2024-2028* includes aims to contribute to the creation, maintenance and increase of jobs, and to develop human capital with knowledge and skills. The Strategic Plan provides opportunities for people from vulnerable families.

The MoLVT's *Cambodia Skills Development Roadmap 2023-2035* is disability inclusive and includes the provision of lifelong learning opportunities to ensure that every citizen has at least one vocational skill. Key areas of the roadmap include the promotion of vocational training and ensuring that persons with disabilities have access to opportunities.[38]

There are more than 30 VTCs across the country. However, not all VTCs are physically accessible to persons with disabilities, training materials are not available in accessible formats, and the courses offered do not meet market demands. In addition, persons with disabilities may not have the resources to cover food and accommodation while accessing training. To improve accessibility, in 2023 training for staff at several VTCs was conducted using the newly developed *Guide on Inclusive Technical and Vocational Education and Training (TVET) for People with Disabilities*.[39]
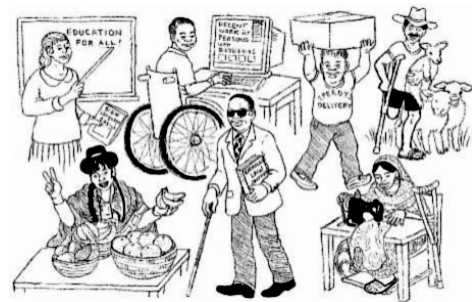
To make the most of TVET and other livelihood opportunities and to achieve economic security, persons with disabilities have the same needs for financial services, such as loans and savings accounts, as people without disabilities. However, they are often excluded from financial services due to stigma and discriminatory attitudes, they may lack collateral such as land to secure the loan, or simply because they lack accessible information about available programs or the assistance offered to support the application process. Development initiatives including microcredit, microfinance and savings, grants, and self-help groups can economically empower persons with disabilities to participate in economic and other activities. In particular, access to the financial system can enable persons with disabilities to be productive contributors to economic and social development in their communities. More focus is needed on improving access to financial services for persons with disabilities.

Guidance to enhance disability inclusion
To improve access to employment and TVET opportunities, and inclusive financial services, guidance includes:
- ***Reasonable accommodation at work – Guidelines and good practices*** provides information, practical examples and references to help employers meet the requirements of reasonable accommodation. The guidelines serve as a valuable resource for adjusting workplace

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[38] For more information, see *Cambodia Skills Development Roadmap 2023-2035*
[39] *Guide on Inclusive Technical and Vocational Education and Training (TVET) for People with Disabilities, People in Need and Agile*, 2023

practices to better support the general workforce, and to create a more inclusive and accommodating work environment for all employees, irrespective of their abilities.[40]

- The **Guide on Inclusive Technical and Vocational Education and Training (TVET) for People with Disabilities** aims to provide practical and evidence-based guidance for TVET institutions and stakeholders to promote and implement inclusive TVET policies and practices. It reflects the commitment of the RGC to ensure that everyone, including persons with disabilities, have equal access to quality education and training opportunities that enable them to develop their skills and competencies for decent work and social inclusion. The Guide emphasises the need to create a supportive environment for persons with disabilities to fully participate in training and employment that will contribute to the Cambodian economy.[41]

- **Finance for All: A Practical Guide to Disability Inclusion for Financial Services Providers in Cambodia** provides guidance for financial services providers to make their products and services accessible for all clients, including those with disabilities. While it provides some information specific to Cambodia, it is designed to be relevant to financial services providers in any country, at any stage on their disability inclusion journey. The manual initially outlines the case for financial inclusion of persons with disabilities, the barriers they face to access financial services, and the importance of an ecosystem approach to overcome these. It then provides specific guidance for implementation by financial services providers, including a three-step process for disability inclusion; considerations for inclusion at each stage of the customer lifecycle; and toolkits for physical accessibility, digital accessibility, inclusive communication and accessible information.[42]

3.2   Health, rehabilitation and wellbeing

Overview of issue

People of all ages and types of disabilities will require access to health services throughout their lifetimes. Nevertheless, many adults and children with disabilities face barriers in accessing the healthcare, rehabilitation and other services they need to improve their wellbeing due to issues such as: stigma and discrimination; health facilities are not physically accessible; the cost of transport to services and out-of-pocket expenses; healthcare providers may not have the skills to work appropriately with persons with disabilities; and, the lack of information in accessible formats.

In addition, many women and girls with disabilities have limited access to appropriate information on their rights and services relating to sexual and reproductive health due to stigma, preconceived ideas, and a lack of recognition that they have the same rights and needs as women and girls without disabilities. In addition, women and girls with disabilities are at high risk of gender-based violence (GBV), complicating their ability to seek help and access health services. These factors contribute to a reluctance to discuss topics related to sexuality and reproductive health, further discouraging open conversations and access to essential information and services.

The *Global Report on Health Equity for Persons with Disabilities* found that investing in equitable access to health services for persons with disabilities resulted in high economic and societal

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[40] *Reasonable accommodation at work – Guidelines and good practices*, Directorate-General for Employment, Social Affairs and Inclusion, European Commission, March 2024

[41] *Guide on Inclusive Technical and Vocational Education and Training (TVET) for People with Disabilities, People in Need and Agile*, 2023

[42] For more information, see *Finance for All: A Practical Guide to Disability Inclusion for Financial Services Providers in Cambodia*, Good Return and Chamroeun Microfinance, March 2023

dividends. For example, there could be nearly a US$10 return per US$1 spent on implementing disability inclusive prevention and care for non-communicable diseases.[43]

The Ministry of Health (MoH) is mandated to provide healthcare services for all the population, including people of all ages and types of disability. The public health system in Cambodia is organised in three levels:

- National level (central) – MoH departments, training institutions, national centres, and national hospitals
- Provincial level – Provincial Health Departments, regional training centres, and Provincial Referral Hospitals
- District level – operational district offices, Referral Hospitals, Health Centres, Health Posts

MoH policies and plans are inclusive of persons with disabilities, including: *Health Strategic Plans*; the *Mental Health Strategic Plan 2023-2032*; the *Minimum Package of Activity for Health Centres* (MPA); and, the *Complementary Package of Activity for Referral Hospitals* (CPA). However, the Health Management Information System (HMIS) does not collect data specifically on persons with disabilities as clients accessing services are identified by diagnostic condition/pathology, such as: stroke; weakness; traumatic brain injury; landmine injury; road traffic injury, etc. Consequently, there is a lack of quantitative data to measure achievements in disability inclusion across all strategies.

The *Roadmap Towards Universal Health Coverage 2024-2035* prioritises the expansion of essential health services that are of good quality and responsive to the population's needs, particularly primary healthcare services based on the person-centred integrated care approach.[44] The Health Equity Fund (HEF), a social health protection scheme, was established to provide healthcare coverage to individuals from poor households, including households with persons with disabilities, with the Equity Card so that they could receive both medical benefits at public health facilities and non-medical benefits that include travel allowance, food allowance for caregivers and funeral allowance. As of December 2023, the HEF covered about 706,280 households with the Equity Card, which is equivalent to about 3 million people. Access to healthcare services under the HEF has also been expanded to other population groups.[45] However, it would appear that access to free-of-charge healthcare services is not always available for eligible persons with disabilities.

Rehabilitation is one of the essential health services of Universal Health Coverage (UHC) for individuals with health conditions, and with or without disability, throughout their life course, and across the continuum of care. Rehabilitation is effective in shortening recovery time, preventing complications related to acute and chronic conditions, and improving physical and mental functioning and wellbeing. The provision of appropriate assistive technology can contribute to reducing the

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[43] *Global report on health equity for persons with disabilities*, World Health Organization, Geneva, 2022, 15

[44] For more information, see *Roadmap Towards Universal Health Coverage 2024-2035*, prepared by the National Social Protection Council, April 2024 [hereinafter *Roadmap Towards UHC*]

[45] For more information, see Roadmap Towards UHC, 7

barriers to effective inclusion in all aspects of daily life. While rehabilitation services are provided to varying degrees in hospitals, services for persons with disabilities are also provided in Physical Rehabilitation Centres (PRC).

A key focus of the ACCESS 2 program's Rehabilitation Workstream is supporting the MoH to strengthen rehabilitation in the health system. As part of the program, *Strengthening Rehabilitation in Cambodia: priorities and opportunities* was developed as a resource to contribute to the work of MoH and MoSVY in strengthening rehabilitation services. The resource creates a vision for stronger inclusion of rehabilitation services within UHC and Primary Health Care, while also enhancing the holistic wellbeing of Cambodians with health conditions or who experience injury and illness, including persons with disabilities, through access to social and economic inclusion opportunities. The ACCESS 2 program's focus is in line with the World Health Organization's (WHO) *Rehabilitation 2030 Initiative*, and to capture data on persons with newly acquired impairments.[46]

To enhance the health and wellbeing of persons with disabilities, four considerations are essential: accessibility; availability; acceptability; and, good quality.[47]

ACCESSIBILITY	Health facilities, goods and services must be accessible physically as well as financially and on the basis of non-discrimination. Accessibility also implies the right to seek, receive and impart health-related information in an accessible format for all, including persons with disabilities, but does not impair the right to have personal health data treated confidentially.
AVAILABILITY	Functioning public health and health-care facilities, goods and services must be available in sufficient quantity in a timely manner within a country
ACCESSIBILITY	The facilities, goods and services should also be medically and culturally acceptable
GOOD QUALITY	Health facilities, goods and services must be scientifically and medically appropriate and of good quality. This requires, among other things, trained health professionals, scientifically approved and unexpired drugs and hospital equipment, adequate sanitation and safe drinking water.

Guidance to enhance disability inclusion

The WHO has developed several tools to enhance disability inclusion in health services and to provide guidance on how health facilities can address the physical, attitudinal, informational and other barriers to healthcare faced by persons with disabilities, including:

- The **Disability-Inclusive Health Services Toolkit** is a resource for health facilities to support the rights of persons with disabilities to have the same access to health services as people without disabilities. The Toolkit provides practical guidance to managers and staff of healthcare facilities and services, health policy-makers, and NGOs on identifying and addressing barriers to health information and services. It includes key facts and figures about disability, practical guidance and good practice examples for addressing different barriers to

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[46] For more information, see World Health Organization, *Rehabilitation 2030 Initiative*; see also *Strengthening Rehabilitation in Cambodia: priorities and opportunities*, ACCESS 2 program, May 2024

[47] *Towards Universal Health Coverage, the role of disability inclusive social protection – a review*, Background Paper #4, United Nations Partnership on the Rights of Persons with Disabilities (UNPRPD), January 2023, 6

inclusion, as well as checklists with which to assess the disability-inclusiveness of a health facility. The Toolkit supports the achievement of UHC by ensuring everyone can access health information and can benefit equally from health services.[48]

- The *Disability-Inclusive Health Services Training Package* is a companion to the Toolkit. It can be used as a self-guided course by either individual healthcare workers or by a group of healthcare workers in a study group. The purpose of the Training Package is to support the achievement of UHC by healthcare service providers through ensuring access to health information and services, best-quality outcomes, and improved quality of life for all persons with disabilities. The Package has been developed based on current best practices in disability inclusion.[49]

- *Health equity for persons with disabilities: a guide for action* is a strategic planning tool to support the MoH to plan appropriate actions to strengthen disability inclusion across the health sector and to meet commitments on the highest attainable standard of health for all people, as outlined in the Sustainable Development Goals (SDGs) and CRPD. The Guide outlines a cycle of four overlapping and continuous phases that can be implemented at the national and subnational levels:

  o Phase 1 – *Prepare*: confirm roles, responsibilities and resources; convene consultative meetings to brief stakeholders; establish a Disability Guide for action working groups

  o Phase 2 – **Assess**: collect data and information; assess status of disability inclusion in health sector; document and validate findings

  o Phase 3 – *Design*: prioritise entry points and actions with costing; develop a monitoring and evaluation framework; validate, finalise and endorse the plan

  o Phase 4 – *Implement*: implement action plan; facilitate inter-sectoral coordination and shared learning; analyse and report on the results to contribute to future strategic planning.[50]
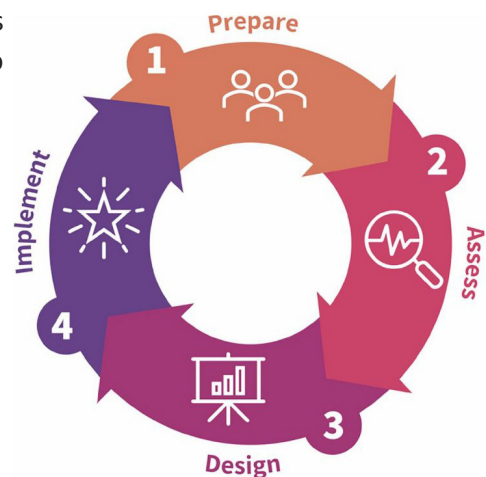
  The Guide is due to be finalised in 2024.

- The *Package of interventions for rehabilitation* outlines the most essential rehabilitation interventions for 20 health conditions that have high prevalence and high levels of associated disability. It also includes information on the workforce needs, and the assistive products, equipment and consumables required to deliver these interventions. The Package includes eight modules and presents an indispensable resource when planning for and budgeting the integration of rehabilitation services into the health systems.[51]

- The *Basic Package of Interventions for Rehabilitation: A Toolkit for Primary Care Professionals* includes a list of interventions with a clinical resource, training materials and an

48 *Disability-Inclusive Health Services Toolkit: A Resource for Health Facilities in the Western Pacific Region,* WHO Regional Office for the Western Pacific, Manila, Philippines, 2020

49 *Disability-Inclusive Health Services Training Package: A Companion to the Disability-Inclusive Health Services Toolkit,* WHO Regional Office for the Western Pacific, Manila, Philippines, 2022

50 *Health equity for persons with disabilities: a guide for action*, WHO Information sheet, 26 January 2024.

51 Package of interventions for rehabilitation, WHO

implementation guide. It outlines a limited set of prioritised interventions for rehabilitation that can be delivered in primary care. It does this by providing information on low-cost, high-impact and evidence-based interventions for rehabilitation that can be easily, safely and effectively delivered by the existing workforce in primary care settings. The provision of a limited set of prioritised rehabilitation interventions, that can be delivered by the existing primary care workforce, can support the goal of UHC. The package is due to be released by the WHO in 2025.[52]

Other guidance relevant to health, rehabilitation and wellbeing include:

- ***Women and Young Persons with Disabilities: Guidelines for Providing Rights-Based and Gender-Responsive Services to Address Gender-Based Violence and Sexual and Reproductive Health and Rights*** provides practical and concrete guidance on the provision of inclusive and accessible services related to GBV and sexual and reproductive health and rights (SRHR) for women and young persons with disabilities. Guidelines for action, specifically related to SRHR, are provided under the four considerations: accessibility; availability; acceptability; and, good quality. While the primary audience is GBV- and SRHR-related service providers, the guidelines are a valuable resource for all stakeholders including those in government, IOs, and NGOs involved in designing, developing, implementing or advocating for GBV or SRHR services for women and young persons with disabilities.[53]

3.3 Education and lifelong learning

Overview of issue

The right of adults, youth and children with disabilities to receive quality education at all levels, as well as equitable access to lifelong learning opportunities, has been established under existing legislative and policy frameworks. Goal 4 of the SDGs and CSDGs aims to ensure inclusive and equitable quality education and promote lifelong learning opportunities for all. Nevertheless, for students with disabilities, access to school and the possibility of staying in school is lower than for students without disabilities.

Lifelong learning refers to all purposeful learning activities undertaken on an ongoing basis throughout a person's life, with the aim of improving knowledge, skills and competencies. Lifelong learning opportunities should include access to life skills and social development skills that would enable people of all ages and types of disabilities to participate in community activities fully and equitably and limit social exclusion. These opportunities may include literacy and numeracy training, or sign language training for people with hearing impairment, and members of their family and community, to facilitate communication.[54]

Barriers to access, particularly in rural areas, include: entrenched negative attitudes; limited pre-service training for teachers to effectively work with students with disabilities; limited appropriate teaching methodologies and aids; large class sizes

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[52] For more information, see *Basic Package of Interventions for Rehabilitation: A Toolkit for Primary Care Professionals*, *Information Sheet*, WHO, 22 August 2024

[53] *Women and Young Persons with Disabilities: Guidelines for Providing Rights-Based and Gender-Responsive Services to Address Gender-Based Violence and Sexual and Reproductive Health and Rights*, UNFPA, November 2018

[54] For more information on lifelong learning see, *What you need to know on lifelong learning*, UNESCO, 30 August 2024

(usually about 50 children) leading to limited time available to provide additional supports when needed; classrooms and toilets are not physically accessible; schools are often a long distance from the student's home with no transport available; parents are sometimes reluctant to send their child with disability to school, or keep them in school, as they may not understand the value of education, or the child's ability to be educated; parents and caregivers of children with severe disabilities often feel no hope for their child's future job prospects or their ability to make independent decisions; limited financial resources to continue education; and, limited opportunities for lifelong learning. The COVID-19 pandemic had a significant impact on the number of students with disabilities participating in education opportunities, including online learning.

The Ministry of Education, Youth and Sport (MoEYS) has a mandate to provide education and lifelong learning opportunities for the population. The MoEYS has made meaningful progress, with the support of UNICEF and other partners, to improve access to education for students with disabilities, through opportunities for inclusive education, integrated education, special education, and to support them to stay in school.

The MoEYS' Education Management Information System (EMIS) includes data on students with disabilities accessing all types and levels of education.

To promote inclusion, the MoEYS has established institutions responsible for special and inclusive education, such as the Special Education Department and the National Institute of Special Education (NISE) which was established in 2017 to upskill teachers in inclusive education. Nevertheless, according to UNICEF, over 57 percent of Cambodian children with disabilities do not have access to education, compared to just seven (7) percent of their peers without disabilities.[55]

The MoEYS' *Inclusive Education Action Plan 2024-2028* aims to ensure that every child, including children with disabilities, has access to quality education to foster a more inclusive and equitable society. The Plan aims to achieve three main goals: changing societal attitudes to promote inclusiveness and prevent stigma and discrimination; provide necessary tools and support by ensuring access to assistive technology and services; and, collaboration across different areas of government, NGOs, UN organisations and development partners to create a comprehensive, inclusive, and supportive environment for children with disabilities.

In addition, the MoLVT's *Cambodia Skills Development Roadmap 2023-2035* includes the provision of lifelong learning opportunities to ensure that every citizen has at least one vocational skill. Key areas of the roadmap include the promotion of inclusive education, and ensuring that persons with disabilities have access to opportunities.[56]

Other relevant MoEYS' policies include the 2018 *Policy on Inclusive Education*, the *National Policy on Early Childhood Care and Development*, and *Cambodia's Education Roadmap 2030*. In addition, the MoEYS' *Teacher Policy Action Plan 2024-2030* includes actions to include inclusive education in the teacher training curriculum, and upskill teachers to work with students with different types of disability.

The MoEYS operates six special education high schools. Five of these schools – at Phnom Penh Thmey Special Education High School, and in Chbar Ampov, Kampong Cham, Siem Reap, and Battambang – focus on students who are deaf or blind, while Takhmao Special Education High School specialises in supporting students with autism and intellectual disabilities. According to MoEYS EMIS data for 2024,

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[55] *Inclusive Education in Cambodia: Successes and Challenges*, UNICEF, 12 March 2024
[56] For more information, see *Cambodia Skills Development Roadmap 2023-2035*

the distribution of students in special education schools by types of impairment reveals 199 students with visual impairments, 184 with intellectual disabilities, and 635 with hearing impairments.[57]

An annual National Forum on Inclusive Education brings together MoEYS, NGOs, UNICEF and other stakeholders working in the sector to learn from experts and share experiences.

Guidance to enhance disability inclusion

Guidance available to enhance inclusion in education and lifelong learning, include:

- ***A guide for ensuring inclusion and equity in education*** is intended to support countries in embedding inclusion and equity in educational policy. The ultimate objective is to create system-wide change for overcoming barriers to quality educational access, participation, learning processes and outcomes, and to ensure that all learners are valued and engaged equally.[58]

- ***Changing Perceptions – Empowering teachers: Interpersonal communication and community engagement to support inclusive education*** is a training package for teachers and educators. It addresses teaching staff self-efficacy, attitudes, beliefs, and norms and seeks to promote and support inclusion of every child, regardless of their social, religious, cultural, economic, geographical, ethnic background, and disability. The training will help teachers develop the abilities, skills, and confidence to become culturally competent educators who use inclusive practices, work collaboratively with their diverse communities and act as champions of inclusion in their educational and social communities.[59]

- ***Inclusive Education – Including children with disabilities in quality learning: what needs to be done?*** provides guidance on what Governments can do to create inclusive education systems.[60]

- ***Making lifelong learning a reality: a handbook*** aims to build capacities to develop lifelong learning policies, strategies and implementation plans in national and local settings. It provides evidence from diverse initiatives and describes some of the contemporary issues lifelong learning responds to; including how it shapes the SDGs.[61]

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57 *Inclusive Education in Cambodia: Successes and Challenges*, UNICEF, 12 March 2024
58 *A guide for ensuring inclusion and equity in education*, Education 2030, UNESCO, 2017
59 *Changing Perceptions – Empowering teachers: Interpersonal communication and community engagement to support inclusive education*, UNICEF Europe and Central Asia Region, January 2023
60 *Inclusive Education – Including children with disabilities in quality learning: what needs to be done?* UNICEF, September 2017
61 *Making lifelong learning a reality: a handbook*, Education 2030, UNESCO, 2022 [accessed 4 September 2024]

3.4 Social protection and adequate standard of living

Overview of issue

Persons with disabilities are disproportionately represented amongst the poorest members of Cambodia's population. In 2021, the national poverty rate for persons without disabilities was 17.5 percent as compared to 21.1 percent among persons with disabilities.[62] In addition, the 2019-20 Cambodia Socio-Economic Survey found that 26 percent of persons with disabilities are in the poorest quintile of the population.[63]

The right of persons with disabilities to social protection and an adequate standard of living is protected under the *Pentagonal Strategy-Phase 1* and *Political Platform of the RGC 2023-2028*. The Pentagonal Strategy and Political Platform provides a roadmap to achieve the RGC's goal to become an upper-middle-income economy by 2030 and a high-income economy by 2050. One of the aims of the *Pentagonal Strategy-Phase 1* is that "Cambodian people live in dignity and happiness, and enjoy equal access, equal rights, and equal opportunities in social protection". The Political Platform includes provisions for the development of social protection system.[64]

Nevertheless, many persons with disabilities face barriers in equitable access to the social protection system and an adequate standard of living. These barriers include: stigma and negatives attitudes towards persons with disabilities; lack of awareness on the rights of persons with disabilities to access services and opportunities among program implementers and service providers; lack of information in accessible formats on available services and opportunities; and, limited knowledge among persons with disabilities and OPDs on how to access their rights.

Cambodia's social protection system is guided by the National Social Protection Policy Framework 2016-2025 (NSPPF). The NSPPF focuses on two pillars: social assistance and social security. The framework defines social assistance as help for the poor and vulnerable, including persons with disabilities. It provides protection to citizens who live below or near the poverty line.[65] The RGC is drafting a new version of the NSPPF with the aim to extend the effective coverage of social protection, including working toward UHC.

In a significant development, the Family Package, developed under the NSPPF, commenced in April 2024. The Family Package merges many of the existing social assistance programs, including the COVID-19 Cash Transfers program. The Family Package is a permanent, integrated social assistance framework designed to support poor and vulnerable families, including families of adults and children with disabilities, with the aim of leaving no one behind. It is a package of integrated benefits that will comprehensively address risks throughout the life cycle for poor and vulnerable families and children, including by providing monthly cash payments. Eligible persons with disabilities will receive 80,000 Riel per month (approximately US$20). A robust referral system will link cash assistance to services, such as healthcare, education, and other social services.[66]

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[62] *Cambodia Demographic and Health Survey 2021-2022*

[63] *Final Report on Cambodia Socio-Economic Survey 2019-20*, National Institute of Statistics, 2020

[64] *Political Platform of the Royal Government of Cambodia of the Seventh Legislature of the National Assembly for Nation Building and Defense 2023-2028*, 22-23

[65] For more information, see *National Social Protection Policy Framework 2016-2025*, approved by the Council of Minister, 24 March 2017

[66] For more information, see *Guidelines for National Social Assistance Programme Framework for Family Package* (available in Khmer only); see also, *Developing the Family Package in Cambodia: The Realization of Integrated Social Protection*, UNICEF, 2023

The Family Package is being implemented by MoSVY's National Social Assistance Fund (NSAF).[67] The NSAF has established offices in all provinces and has a key role to play in promoting disability inclusion in the Family Package.

To be eligible for the Family Package, vulnerable families must hold an Equity Card. The Ministry of Planning's (MoP) *Identification of the Poor Households program* (IDPoor) is central to the RGC's efforts to promote equity, with a mandate to identify the poor for targeting by health and social programs across multiple sectors. IDPoor is a community-driven proxy means test that is implemented by Commune/Sangkat Working Groups on demand to identify households living below the poverty line and households having problems to sustain their livelihood due to special circumstances. It is mandatory for governmental institutions, NGOs and development partners to use the data for targeted poverty alleviation interventions. In 2022, MoP updated the review procedure and selection criteria, which includes information on disability, for IDPoor.[68]

Holders of Disability ID cards are automatically linked to the social protection services offered by the RGC through the Disability Management Information System (DMIS).

Guidance to enhance disability inclusion

To enhance disability inclusion in social protection mechanisms, guidance is available:

- UNESCAP's **Social Protection Online Toolbox** (SPOT) is a platform to support policymakers in building inclusive social protection systems through the sharing of good practices, resources and primers on social protection. SPOT provides tools to help countries and stakeholders close gaps in social protection coverage by: simulating how social protection boosts consumption and reduces poverty and inequality; deepening skills on how to implement and manage social protection systems through five self-paced online trainings; and, exploring the evidence on what works and what countries are doing.[69]

- **How to Design Disability-Inclusive Social Protection** explains why social protection is important for persons with disabilities and introduces key concepts and schemes that are necessary for disability-inclusive social protection.[70]

Other guidance is currently under development, including: UNDP's *Guidelines for Disability Inclusive Social Protection*; and, ILO and UNICEF's *Towards Inclusive Social Protection Systems Enabling Participation and Inclusion of Persons with Disabilities*.

3.5 Inclusive and accessible communities

Overview of issue

The ultimate aim of effective disability inclusion is that people of all ages, genders and types of disabilities fully participate in the social, cultural, religious, economic and political life of their communities, on an equal basis with others. An inclusive and accessible community is a place that is usable by everyone, and where everyone can participate fully, equally and independently without barriers. If persons with disabilities and other vulnerable populations are not able to access the facilities, services and opportunities available in their community, they will never be fully included.

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[67] For more information, see Sub-Decree on the Establishment of the National Social Assistance Fund as a Public Administrative Establishment; see also a brief summary provided in Annex 2 on the main stakeholders at national and subnational level under MoSVY

[68] For more information on the procedure, see Part 4 on Pathways to enhanced disability inclusion at the subnational level; see also *Manual for the Identification of Poor Households Procedure*, MoP, 2022; and, https://idpoor.gov.kh/en/about/

[69] More information on UNESCAP's work on social protection, and to access the training, is available at: https://www.unescap.org/our-work/social-development/social-protection

[70] *How to Design Disability-Inclusive Social Protection*, UNESCAP, Bangkok, 2021

In most societies, there are many barriers that hinder full participation and inclusion, such as: stigma and discrimination; inaccessible physical infrastructure; lack of information and communication in accessible formats; lack of appropriate or affordable services; lack of consultation and involvement of persons with disabilities in decision-making processes; limited understanding among persons with disabilities of their rights and how to claim their rights; and, limited awareness among local authorities and service providers on the rights of persons with disabilities, and how to work effectively with them. Persons with disability are sometimes confined to their homes as they may lack access to healthcare, assistive devices and other supports that would facilitate greater inclusion in the life of their communities.

The Preamble of the CRPD recognises "the importance of accessibility to the physical, social, economic and cultural environment, to health and education and to information and communication, in enabling persons with disabilities to fully enjoy all human rights and fundamental freedoms". Article 9 focuses on the issue of accessibility. It calls on Cambodia, as a State Party, to "enable persons with disabilities to live independently and participate fully in all aspects of life" by taking "appropriate measures to ensure...access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas" including through "the identification and elimination of obstacles and barriers to accessibility."

Attitudinal barriers

The way adults, youth, children and older people with all types of disabilities are treated by their family, their community, their employer, and service providers, are important factors in achieving or limiting social inclusion. Misconceptions, stereotyping, negative attitudes and beliefs, and a lack of knowledge about disability in the community can affect many aspects of life for persons with disabilities, and their access to services and opportunities. Stigma and discrimination are sometimes normalised or condoned by society. Negative attitudes towards persons with disabilities can also have a psychological impact leading to low self-esteem and a reluctance to participate in activities and opportunities. As in many societies, community attitudes toward inclusion of persons with disabilities, and attitudes among some service providers and local authorities, indicate that stigma and discrimination is still prevalent.

A lack of understanding of the rights and capacities of persons with disabilities by individuals and services across the community often leads to discrimination, exclusion and marginalisation of persons with disabilities. Changing negative attitudes toward persons with disabilities, and challenging stigma and discrimination, has the potential to make a positive contribution toward greater inclusion. Activities such as the 2023 Para Games in Phnom Penh and participation by persons with disabilities in cultural activities make a valuable contribution to changing negative attitudes.

Campaigns that aim to raise awareness and change attitudes and behaviours should be considered over a variety of mediums such television, radio, newspapers and events, focusing on issues such as: enhancing understanding on disability and the rights of people of all ages and types of disability; challenging negative attitudes towards persons with disabilities, and pre-conceived ideas about disability; identifying and addressing barriers to inclusion in projects, services and infrastructure; showcasing achievements of women, girls, boys and men with disabilities; and, building capacities of local authorities and service providers to ensure a right-based approach to planning, service provision and other opportunities.[71]

Physical accessibility

On 28 November 2018, Inter-Ministerial Prakas No. 248 On Introduction of Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities was signed by the Minister of the Ministry of Land Management, Urban Planning, and Construction (MoLMUPC) and the Minister of MoSVY. The Standards relate to construction projects and the modification of public infrastructure buildings that provide public services and public space including road networks, sidewalks, pavements, parks, parking lots, train stations, airports, administrative buildings, schools, educational institutions, hospitals, health centres, infrastructure construction projects, gated communities, residential buildings, hotels, restaurants, markets, factories, and other private buildings used by persons with disabilities with the aim of ensuring safe and unobstructed accessibility.[72]

The ACCESS program supported the production and launch of the *Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities*, prepared in collaboration with the DAC-SG and Humanity & Inclusion (HI).[73] The ACCESS program also supported the rollout of training of trainers on the Technical Standards to national and subnational levels, and the production of five animation clips to raise public awareness of the importance of the physical accessibility standards.

Although some progress has been made, additional focus is needed to ensure that the Standards are applied across all new construction projects, and financial resources are allocated for the modification of existing public infrastructure buildings.

Information and communication in accessible formats

Information in accessible formats relates to the design and supply of information and communication technology products (such as computers and telephones) and services (telephony and television), including web-based and phone-based services, based on the requirements of people with different types of disabilities. Accessible formats may include easy-read language, large print, braille, or sign language interpretation. It also relates to technology, including the sounds, images, and language produced and delivered by technology. Barriers faced in accessing information and communication include: a lack of knowledge among service providers on accessible formats and technology; a lack of sign language interpreters; the cost of appropriate technology to produce accessible formats; the technology itself may be inaccessible; and, the pace of technological change is not taking into account the needs of persons with disabilities in a timely manner.

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[71] For guidance on awareness raising, see *Handbook for Trainers on Incorporating Disabilities into Government in Sub-National Administration*, UNICEF and Ministry of Interior, 2016; see also Trainer's Manual

[72] Inter-Ministerial Prakas No. 248 On the Introduction of Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities, dated 28 November 2018 [unofficial translation]

[73] *Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities*, Disability Action Council Secretariat (DAC-SG), 2018 (unofficial translation)

Cambodia is a signatory to the *Marrakesh Treaty*, an international legal instrument, which aims to make it easier for people who are blind, visually impaired and otherwise print disabled to access works protected by copyright.

UNESCO is working to advance the right of persons with disabilities to access information, and address the barriers, including through undertaking an *Information Needs Assessment for Persons with Disabilities in Cambodia*, released in 2024. UNESCO, in collaboration with CDPO and the Ministry of Information (MoInf), has provided trainings to provincial information department officials from 24 provinces to build their understanding and capacity to better respond to the information needs of persons with disabilities, to provide quality public services and strengthen their inclusive civic participation. The training curriculum has a specific focus on disability inclusive development, access to information, and disability inclusive policies and laws, including the NDSP.[74]

Water, sanitation and hygiene (WASH)

All members of the community require access to water, sanitation and hygiene (WASH) facilities. WASH facilities provide access to safe drinking water, basic toilets and good hygiene. WASH facilities are needed in schools, health facilities, work places, and in or near homes. Equitable access to WASH facilities is essential for the health and wellbeing of persons with disabilities. Nevertheless, they may face barriers to access WASH facilities, such as: poor design as planners often do not include a disability perspective in the design of facilities; facilities are often situated far from the homes of those needing to access the facilities; the physical environment around facilities such as steps or rough ground can hinder access; the attitudes of other members of the community to persons with disabilities may create barriers to accessing facilities; and, there may be a lack of consultation with persons with disabilities about what is needed, and what is appropriate.

Universal design

To enhance accessibility, Article 2 of the CRPD defines the concept of "Universal design" which refers to the design of products, environments, programs and services that are usable by all people, to the greatest extent possible, without the need for adaptation or specialised design. Universal design is not just for persons with disabilities, others will also potentially benefit, such as: elderly people, pregnant women, people using strollers or prams; or, people with luggage or carrying things. The CRPD calls on States Parties to promote universal design in the development of standards and guidelines.
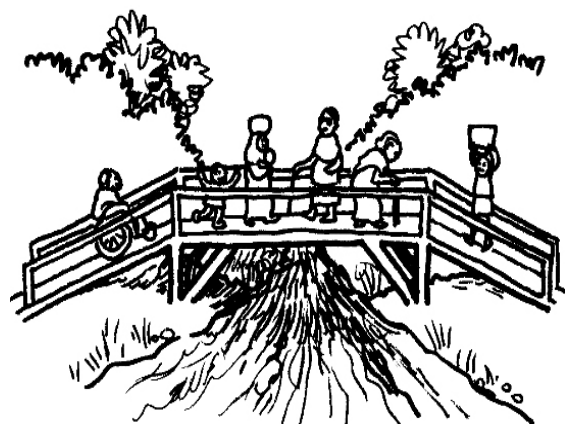
Universal design is based on seven principles:
- Principle 1: Equitable use – design that is useful and marketable to persons with diverse abilities
- Principle 2: Flexibility in use – design that accommodates a wide range of individual preferences and abilities
- Principle 3: Simple and intuitive use – design that is easy to understand, regardless of the user's experience, knowledge, language skills, or concentration level

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[74] *Promoting Disability Inclusion and Information Accessibility in Cambodia*, UNESCO News, 5 April 2024

- Principle 4: Perceptible information – design that communicates necessary information effectively to the user, regardless of ambient conditions or the user's sensory abilities
- Principle 5: Tolerance for error – design that minimises hazards and the adverse consequences of accidental or unintended actions
- Principle 6: Low physical effort – design that can be used efficiently and comfortably and with a minimum of fatigue
- Principle 7: Size and space for approach and use – design that provides appropriate size and space for approach, reach, manipulation, and use regardless of the user's body size, posture, or mobility.[75]

Adopting universal design principles enables everyone, regardless of age or ability, to use buildings, transport, public spaces, and other facilities. Buildings and outdoor spaces that are not accessible exclude persons with disabilities from participation in work, education, and social and cultural life. However, it is important to acknowledge that adopting universal design should not exclude the provision of assistive technology for particular groups of persons with disabilities, where needed.

Guidance to enhance disability inclusion

Overcoming barriers to achieving inclusive and accessible communities will require an integrated approach. Every aspect must be addressed including attitudinal barriers, physical barriers, and barriers to accessible information. The steps to achieve an enabling environment include:
- Considering accessibility early in process of designing or reviewing projects and programs
- Involving persons with disabilities in the design and review of projects and programs
- Addressing all aspects of accessibility
- Educating policy makers and designers
- Sufficient budget allocations to ensure accessibility
- Using Universal Design as a guiding principle.

Guidance to support actions to create inclusive and accessible communities include:
- ***Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities*** provides detailed information for the design of physical infrastructure that is accessible by persons with all types of disabilities. This infrastructure includes entrances and exits, moving up and down, accessible connection paths, gratings, tactile paving surfaces, ramps, paths, safety handrails, stairs, doors and door handles, lifts and lift buttons, escalators, travelators, alarms, internal passages, resting rooms, signs, signal lights, service counters, urban- and rural-style toilets, urinals, hand-washing sinks, water sources, hand pumps, bathrooms, classroom or meeting hall furniture, and other safety equipment.[76]

- ***The Inclusion Imperative: Towards Disability-inclusive and Accessible Urban Development: Key Recommendations for an Inclusive Urban Agenda*** highlights the key physical, social, and institutional factors that act as barriers or facilitators for the full and equal participation of

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[75] *The Inclusion Imperative: Towards Disability-inclusive and Accessible Urban Development: Key Recommendations for an Inclusive Urban Agenda*, CBM and Global Network on Disability Inclusive and Accessible Urban Development, 2016, 16
[76] *Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities*, Disability Action Council Secretariat (DAC-SG), 2018 (unofficial translation)

persons with disabilities. It sheds light on the critical role local and national governments, civil society, academia, philanthropic foundations, and the private sector can play in ensuring that cities of the future are inclusive, accessible, and barrier-free for persons with disabilities.[77]

- **W3C Accessibility Guidelines (WCAG) 2.2** provide a wide range of recommendations for making web content more accessible to users with disabilities. The guidelines address many of the needs of a range of users: users who are blind, or have low vision and other vision impairments; users who are deaf and or have other hearing impairment; users with limited movement and dexterity; users with speech disabilities; users with other sensory impairments; users with cognitive impairment and learning difficulties; or a combination of these. The guidelines address accessibility of web content on all devices and types of web content.[78]

- The Australian Government's **Disability Gateway** provides guidance on creating accessible materials, including print and digital documents, and links to available resources.[79]

- **Taking action to achieve inclusive WASH** is an online training course for WASH practitioners, including national and local governments, water and sanitation utilities, public and private service providers, regulators, NGOs and community organisations. Through this introductory online course, learners will: increase their knowledge and understanding of persons with disabilities and disability-inclusive WASH; understand the barriers that persons with disabilities are facing to access WASH services and products, and how to identify and address these barriers; and, learn how to design, implement, monitor and evaluate disability-inclusive WASH programs in development or humanitarian contexts.[80]

- **Disability Inclusive WASH Practices: Including people with disabilities in UNICEF Water, Sanitation and Hygiene (WASH) Programming** aims to provide a practical tool to strengthen the inclusion and access of children and adults with disabilities in UNICEF WASH interventions. The guidance also provides links to other relevant WASH resources.[81]

3.6 Safety, rights and justice

Overview of issue

Women and girls with disabilities are three times more likely to experience gender-based violence (GBV), including physical, emotional and sexual violence, than those without disabilities owing to the multiple and intersecting forms of discrimination they face. In relation to sexual violence, women and girls with disabilities are up to 10 times more likely to experience violence than women and girls without disabilities. In addition, many persons with disabilities in Cambodia face barriers in accessing justice services and supports. The situation is particularly difficult for people, especially women, who are deaf, blind or have intellectual impairments and psychosocial disabilities. Without access to justice, persons with disabilities are unable to exercise their rights, challenge discrimination, have their voice heard, or hold authorities accountable.

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77 *The Inclusion Imperative: Towards Disability-inclusive and Accessible Urban Development: Key Recommendations for an Inclusive Urban Agenda*, CBM and Global Network on Disability Inclusive and Accessible Urban Development, 2016
78 *W3C Accessibility Guidelines (WCAG) 2.2*
79 *Disability Gateway*
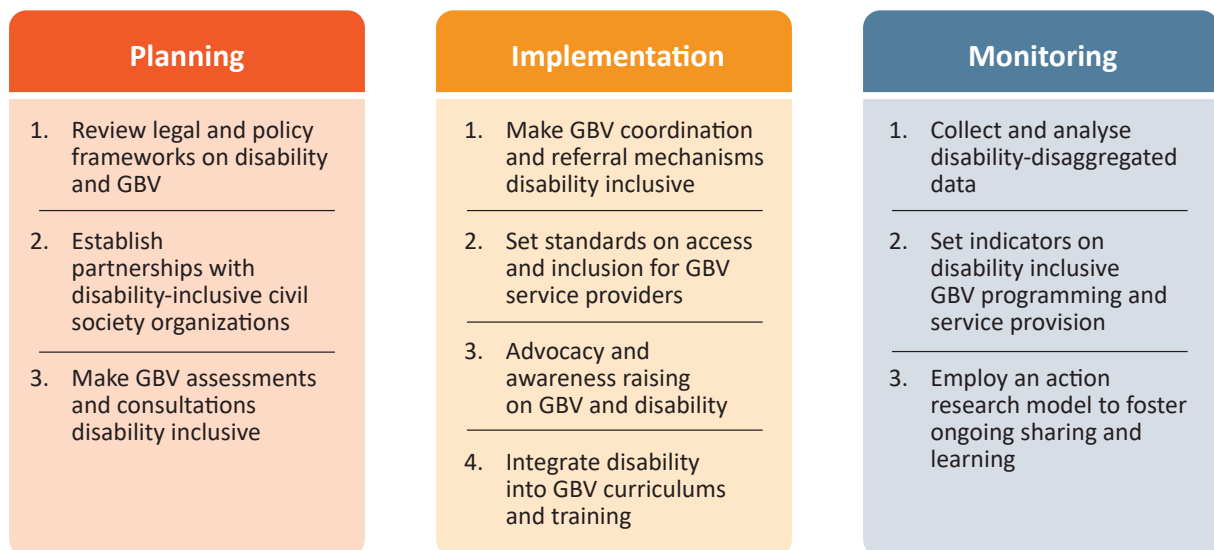80 *Taking action to achieve inclusive WASH*, Global Water and Sanitation Partnership
81 *Disability Inclusive WASH Practices: Including people with disabilities in UNICEF Water, Sanitation and Hygiene (WASH) Programming*, UNICEF

Persons with disabilities, especially women and girls, have a right to be safe from all forms of harassment, violence, abuse and discrimination in the family and community, with their rights respected, promoted and exercised in an equitable manner. Nevertheless, many persons with disabilities face barriers in accessing mainstream GBV and justice programs, including: attitudinal, physical and communication barriers; lack of understanding among persons with disabilities of their rights, and limited accessible information on available services; lack of awareness of the rights of persons with disabilities, and the requirements for reasonable accommodations, among key actors in the GBV and justice sectors.[82]

The Ministry of Women's Affairs' (MoWA) *Five Year Strategic Plan For Strengthening Gender Mainstreaming and Women's Empowerment 2024-2028* (Neary Rattanak VI) aims to promote gender equality and the empowerment of women and girls, including women and girls with disabilities, through gender mainstreaming. Neary Rattanak VI has six priority programs: (1) Women's Economic Empowerment; (2) Social Ethics, Women's and Family's Values; (3) Wellbeing of Women and Girls; (4) Legal Protection for Women and Girls; (5) Women in Leadership and Governance; and, (6) Women and Climate Change.[83] The MoWA's *National Action Plan to Prevent Violence Against Women 2024-2028* (NAPVAW4) is also inclusive of women and girls with disabilities, and aims to prevent all forms of violence against women and girls.[84]

The activities of ACCESS 2's GBV workstream's Strategic Implementing Partners are inclusive of women and girls with disabilities.[85]

Overview of entry points for disability inclusion in GBV Programming[86]

Planning	Implementation	Monitoring
1. Review legal and policy frameworks on disability and GBV	1. Make GBV coordination and referral mechanisms disability inclusive	1. Collect and analyse disability-disaggregated data
2. Establish partnerships with disability-inclusive civil society organizations	2. Set standards on access and inclusion for GBV service providers	2. Set indicators on disability inclusive GBV programming and service provision
3. Make GBV assessments and consultations disability inclusive	3. Advocacy and awareness raising on GBV and disability	3. Employ an action research model to foster ongoing sharing and learning
	4. Integrate disability into GBV curriculums and training	

Article 13 of the CRPD calls on States to ensure effective access to justice for persons with disabilities on an equal basis with others, including through the provision of procedural and age-appropriate accommodations, in order to facilitate their effective role as direct and indirect participants, including

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[82] For more information, see National Situational Analysis, 39-40

[83] For more information, see *Five Year Strategic Plan For Strengthening Gender Mainstreaming and Women's Empowerment 2024-2028* (Neary Rattanak VI)

[84] For more information, see *National Action Plan to Prevent Violence Against Women 2024-2028*

[85] GBV Workstream Strategic Implementing Partners include UNFPA, UNWomen, CDPO, TPO and Legal Aid Cambodia. CARE Cambodia is also implementing inclusive GBV activities through the Disability Inclusion Workstream

[86] *Disability Inclusion in Gender-Based Violence Programming: promising practices and innovative approaches from UNFPA Asia and the Pacific Country Office*, UNFPA, July 2023, 25

as witnesses, in all legal proceedings. Nevertheless, UNDP noted that persons with disabilities face various barriers when accessing justice and legal aid, noting that actors in the justice system do not have an adequate understanding of the rights of persons with disabilities and are not sensitised to

their particular needs. It was further noted that police officers are often reluctant to pursue charges based on statements made by persons with disabilities due to an incorrect perception of credibility that they hold. The structural, procedural, and physical barriers often make the whole system inaccessible to persons with disabilities, whether they are engaging as a civil party or implicated as a person in conflict with the law.[87]

A disability-inclusive *National Policy on Legal Aid* has been drafted by the MoJ with support from the United Nations Office of the High Commissioner for Human Rights (UNOHCHR).

Guidance to enhance disability inclusion

Guidance to enhance disability inclusion in GBV and justice programs, include:

- The *UNFPA's **Disability Inclusion in Gender-Based Violence Programming*** outlines six (6) promising practices and innovative approaches to disability inclusion in GBV programming: adopting a twin-track approach; addressing negative attitudes, beliefs and norms; setting standards for disability inclusion; engaging with OPDs; collecting and analysing disaggregated data; and, strengthening the capacity of GBV practitioners to work with survivors with disabilities. The guidance includes a tip sheet on disability inclusion in GBV programming. The guidance also includes a *GBV and disability inclusion assessment tool* for GBV service providers to use to collect information about how their service is meeting standards on access and inclusion of women and girls with disabilities.[88]

- The principles and guidelines outlined in ***International Principles and Guidelines on Access to Justice for Persons with Disabilities*** are intended to assist States and other actors to design, develop, modify and implement justice systems that provide equal access to justice for all persons with disabilities, regardless of their roles in the process.[89]

- The ***Practical Guideline on Legal Aid for Persons with Disabilities in Criminal Justice***, developed by UNDP and Legal Aid of Cambodia, is a comprehensive resource for persons with disabilities, OPDs, lawyers, as well as service providers and other criminal justice stakeholders. The Guideline explains the basic legal rights of persons with disabilities, the legal process and actors in the system, and the method of accessing legal aid and interacting with lawyers. It also provides a set of eight guidelines for lawyers in providing services that are inclusive of and sensitive towards persons with disabilities, based on good practices and standards.[90]

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[87] *Practical Guideline on Legal Aid for Persons with Disabilities in Criminal Justice*, UNDP, 2020, 4

[88] *Disability Inclusion in Gender-Based Violence Programming: promising practices and innovative approaches from UNFPA Asia and the Pacific Country Office*, UNFPA, July 2023

[89] *International Principles and Guidelines on Access to Justice for Persons with Disabilities*, Special Rapporteur on the rights of persons with disabilities, Committee on the Rights of Persons with Disabilities and Special Envoy of the Secretary-General on Disability and Accessibility, Geneva, 2020

[90] *Practical Guideline on Legal Aid for Persons with Disabilities in Criminal Justice*, UNDP, 2020 [available in English and Khmer]

3.7 Situations of risk and climate change

Overview of issue

Cambodia is vulnerable to a range of natural hazards, including floods and monsoonal rains, and emergencies such as the COVID-19 pandemic. Climate-related and human-induced disasters are also rising, but too often, persons with disabilities are left behind. The 2023 Global Survey Report on Persons with Disabilities and Disasters noted that disasters impact everyone but have a disproportionate impact on persons with disabilities who continue to experience barriers to participation and societal exclusion.[91]
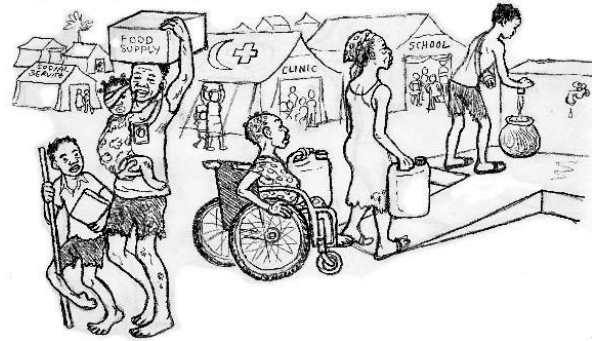
The *Sendai Framework for Disaster Risk Reduction 2015-2030*, adopted by the UN General Assembly, commits to increase the participation of persons with disabilities in disaster risk reduction (DRR) and champions inclusive decision-making in which persons with disabilities are key stakeholders in determining the DRR plans and programs that impact all our lives.[92]

People of all ages, diversity and types of disability should be protected, to the greatest extent possible, from the impact of natural disasters, emergencies and climate change on an equitable basis with other members of their community, without discrimination. Nevertheless, they face barriers to inclusion in DRR planning and implementation processes, such as: authorities and providers responsible for disaster risk prevention, preparedness, response and recovery are not aware of the rights of persons with disabilities or how to ensure meaningful provisions for persons with disabilities in DRR processes; accessibility issues and attitudinal barriers limit the participation of persons with disabilities and OPDs in DRR processes; and, persons with disabilities are not aware of plans or processes due to a lack of accessible information.

The aims of Cambodia's 2015 *Law on Disaster Management* include: prevention, adaptation and mitigation in the pre-disaster period, due to natural or human-made causes; emergency response during the disaster; and, recovery in the post-disaster period. The National Committee for Disaster Management (NCDM) coordinates all disaster management activities together with ministries, institutions, armed forces, the public sector, private sector and civil society in promoting safety and resilience to disasters. The NCDM is tasked with mobilising humanitarian assistance. Among other priorities, Article 18 of the Law states that in the case of any disaster event or incident, competent authorities of the affected areas shall pay high attention to the needs of women, children, elderly, and persons with disabilities.[93]

Cambodia's *National Action Plan for Disaster Risk Reduction 2024-2028* (NAP-DRR), adopted in July 2024, is aligned with the Pentagonal Strategy – Phase 1, the Sendai Framework, and the SDGs and CSDGs. The Plan addresses a range of natural and human-made disasters, including floods, storms, droughts, fires and building collapses, many of which are exacerbated by climate change. The NAP-DRR outlines four strategic goals and 18 priority programs designed to enhance disaster resilience across Cambodia. One of the eight (8) key outcomes of the plan is to enhance stakeholder participation.

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[91] *2023 Global Survey Report on Persons with Disabilities and Disasters*, United Nations Office for Disaster Risk Reduction

[92] *Sendai Framework for Disaster Risk Reduction 2015-2030*, 23; more information see Sendai Framework

[93] For more information, see *Law on Disaster Management*, promulgated by Royal Decree NS/RKM/0715/007

Disasters and other emergencies can severely impact livelihoods, food security, and access to services, pushing vulnerable populations deeper into poverty. The December 2023 *Guidelines for Social Protection Framework for Emergency Response* aim to enhance coordination and expand coverage to support poor and vulnerable families, including persons with disabilities, to improve resilience and contribute to sustainable development. The Guidelines reiterate the crucial role social protection mechanisms play in mitigating the effects of emergencies by providing timely and effective support. Effective social protection responses can complement other government efforts, reduce disaster impacts, and support long-term recovery and poverty reduction. The framework's purpose is to: provide systematic, predictable, and effective support to poor and vulnerable families and individuals during emergencies; use existing databases and delivery mechanisms to offer timely and preventative support; and, coordinate efforts of all stakeholders to fill efficiency gaps.[94]

Guidance to enhance disability inclusion

To achieve Disability Inclusive Disaster Risk Reduction (DIDRR) the involvement of the whole community, including persons with disabilities, is crucial. Several international guidance tools are available to enhance Cambodia's efforts on DIDRR:

- The United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP) has two online courses to enhance understanding on incorporating disability perspectives into all phases of DRR including prevention, preparedness, response, and recovery; ***Disability-Inclusive Disaster Risk Reduction (DIDRR): It Is Our Responsibility*** and ***Disability-Inclusive Disaster Risk Reduction (DIDRR): It Is Our Responsibility – Advanced***. The courses are designed for DRR policy makers and professionals both at the national and local levels.[95]

- The ***Disability inclusive disaster recovery: Guidance note*** provides action-oriented guidance for government officials and decision-makers with responsibility for post-disaster recovery and reconstruction. The guidance will enable the development of disability-inclusive planning and programming across sectors and government.[96]

- ***Mainstreaming Disability Inclusive Disaster Risk Reduction in Community Development: Guidance for Planning and Practice*** outlines twenty (20) action points for practitioners on how community-based initiatives can become more informed about disasters and start mainstreaming for DIDRR. The guidance aims to stimulate reflection at multiple stages, from project planning to implementation and monitoring, to ensure DIDRR becomes an integral part of community-based programs, in an effective, sensitive and responsive way.[97]

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[94] *Guidelines for National Social Assistance Programme Framework for Emergency Response* (available in Khmer only)
[95] *Disability-inclusive Disaster Risk Reduction (DIDRR): It is Our Responsibility* and *Disability-Inclusive Disaster Risk Reduction (DIDRR): It Is Our Responsibility – Advanced,* UNESCAP
[96] *Disability inclusive disaster recovery: Guidance note*, Global Facility for Disaster Reduction and Recovery, 2020
[97] *Mainstreaming Disability Inclusive Disaster Risk Reduction in Community Development: Guidance for Planning and Practice*, CBM, 2023

With the decentralisation of functions to Subnational Administrations (SNA), including Commune/Sangkat Councils, there is a need to ensure that these entities are accountable and inclusive, particularly for vulnerable groups, including persons with disabilities. This section provides an overview of pathways to enhancing disability inclusion through eight (8) key mechanisms: Provincial/Municipal Disability Action Councils (PDAC); Commune/Sangkat Councils; Disability Identification process; Identification of Poor Households program (IDPoor); Commune/Sangkat Investment Program (CIP); Commune Committees for Women and Children; One Window Service Offices; and, One-Stop Service Units.

4.1 Provincial/Municipal Disability Action Council

Article 14 of 2013 Sub-Decree 216 called on the DAC to establish Disability Action Councils in all municipalities/provinces (PDAC). Subsequently, DAC Prakas No. 002 DAC.BrK, dated 9 May 2014, On the Organisation and Functioning of Disability Action Council at Municipal/Provincial Level outlined the composition and roles and responsibilities of the PDACs, specifying that the PDAC is the coordination and advisory mechanism on disability issues at municipal/provincial level. The membership of the PDAC replicates the DAC at the national level with representatives of the Provincial Offices of ministries, and includes representatives from civil society, OPDs, NGOs and individuals with disability. The Governor is the Honorary President with the Deputy Governor as President. The actual members are determined by a Decision of the Municipal/Provincial Hall. Provincial Offices of Social Affairs, Veterans and Youth Rehabilitation (PoSVY) play an important secretariat role within the Municipal/Provincial Hall to support the work of the PDAC. The expenses of the PDAC are included in the Municipal/Provincial Hall budget plan and procured through the national budget. Pilot District DACs (DDAC) have been established in Kampong Cham province with other DDACs to be established in all provinces following amendment to the legislation in 2025.

The main roles and responsibilities of the PDAC include, among others, to: provide technical advisory support on disability issues and rehabilitation; promote the implementation of policies, laws, and other regulations related to disability; and, report on the situation of persons with disabilities in the province/municipality to the DAC.

Through the technical advisory support that PDACs are mandated to provide, it has an important role to play in ensuring that the policies, programs and services implemented by government entities and other stakeholders in the province are inclusive of and accessible to persons with disabilities. Several trainings have been conducted to build the capacities of PDAC members to fulfil their mandate, but a significant challenge is that members change often, sometimes every six months or yearly, which results in the loss of capacity to provide appropriate advice, when needed.

OPDs, including WWDFs, can contribute to enhancing disability inclusion through awareness raising and advocacy activities to ensure that the members of the PDAC understand the rights and situation

of people of all ages and types of disability in the province. After identifying barriers that prevent equitable access to services and opportunities, the OPD can propose solutions and encourage the PDAC to take action to improve accessibility and inclusion.

4.2 Commune/Sangkat Council

Commune/Sangkat Councils were established under the *Law on the Administration and Management of Communes*. The Ministry of Interior (MoI) plays an oversight role, although this responsibility has been largely delegated to the provincial/municipal governors. Commune/Sangkat Councils are a body elected to represent and serve the interests of commune citizens. It is the primary local government body responsible for implementing inclusive policies and programs, overseeing local projects, coordinating with NGOs and OPDs, and ensuring community participation, including the participation of persons with disabilities. There are 1,621 Communes/Sangkats.

The Commune/Sangkat Council's role is to be accountable and responsive to the problems and needs of every citizen, especially the most vulnerable. Some Commune/Sangkat Councils include a person with disability as an elected Councillor.

Persons with disabilities and OPDs have an important role to play in ensuring that the Council is aware and responsive to the rights and situation of persons with disabilities in the Commune.

4.3 Disability identification process

There is potential for persons with disabilities to improve their access to services and opportunities through obtaining a Disability Identification (ID) card, as established by Sub-Decree No. 202 On Disability Identification based on social model and rights-based approach, dated 19 July 2023.

Persons with disabilities who have a Disability ID card are eligible for equitable access to services and social protection support as outlined in the Disability Identification Guidelines. Benefits include: policy benefits based on disability ID criteria and poverty level; job priority based on the quota system; vocational training and employment opportunities; free use of public transportation services; free admission to public schools at all levels; free entry to public places like resorts; health check-ups and rehabilitation services at public health facilities without charge; participation in national and international arts, sports, and cultural activities; tax exemptions as per the law; facilitated travel both within and outside the country; and, access to other services that may be available.[98]

OPDs have an important role to play in ensuring persons with disabilities in their target areas understand the process, the key stakeholders, and the benefits, of obtaining a Disability ID card. The process involves seven (7) steps:

1. **Disability identification data collection planning**: Meetings between Commune/Sangkat chiefs and village chiefs to introduce the process

2. **Preparation of general disability data**: Village chiefs collect or update data on individuals with disabilities

3. **Interviews conducted by Commune/Sangkat focal points**: Data is gathered and entered into a mobile application, using a standard questionnaire

4. **Data validated by Commune/Sangkat Chief and transmitted to Capital/Provincial Department**: Data is reviewed and validated

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[98] For more information, see *Guideline on Social and Rights-Based Disability Identification*, August 2020

5. **Disability identification by MoSVY**: MoSVY processes the data and assesses the level of disability

6. **Issuance of Disability ID cards**: MoSVY prints and distributes ID cards to subnational level

7. **Distribution of Disability ID cards**: ID cards are distributed by the Commune/Sangkat administration

Disability Identification Process
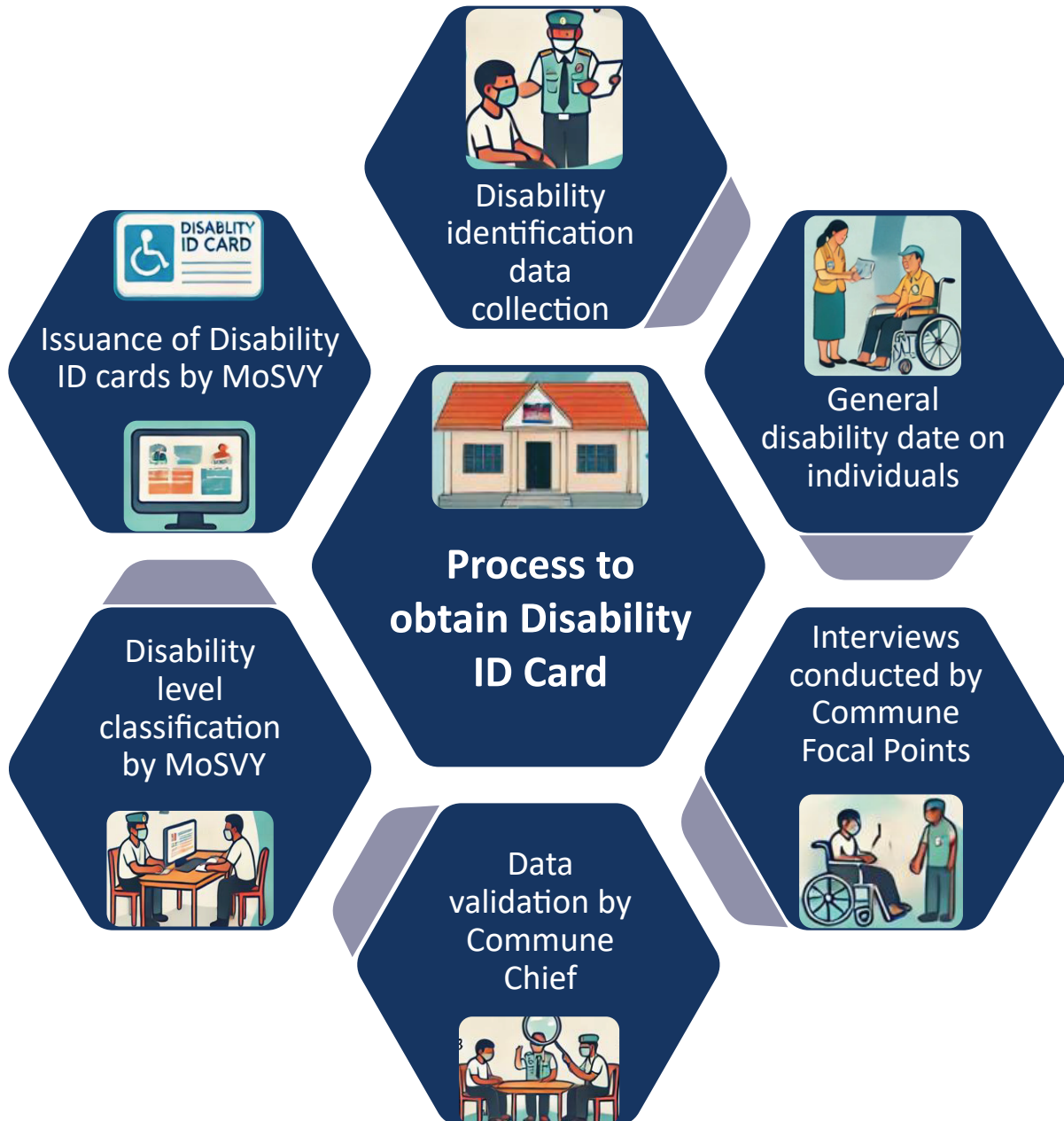
The key stakeholders involved in the disability identification process, include:
- MoSVY which oversees the entire disability identification process and is responsible for the issuance of Disability ID cards
- Inter-Ministerial Technical Working Group, composed of representatives of MoSVY (Chair), MEF, MoI, MoH, MoP, National Social Protection Council (NSPC), and DAC, to provide policy guidance, monitor, and address challenges in disability identification

- Capital/Provincial Administration which coordinates with the Provincial Departments and supports the disability identification process at the local level, and provides technical support to focal points and raises public awareness
- Capital/Provincial Departments of Social Affairs, Veterans and Youth Rehabilitation which assign focal points for the disability identification process, and verifies and approves disability data and manages disability management information system at the provincial level
- Municipal/District/Khan administrations which support the implementation of disability identification at the district level, provides capacity building for Commune/Sangkat focal points, and monitors progress
- Commune/Sangkat Administrations which are responsible for collecting disability data at the village level, and organising data collection, interviewing persons with disabilities, and transmitting data to higher levels
- Village Chiefs who assist in collecting general disability data and facilitating interviews with individuals with disabilities
- Persons with disabilities and their families/guardians who participate in the data collection and identification process to ensure accurate representation.

4.4 Identification of the Poor Households program

The information that the MoP's *Identification of the Poor Households program* (IDPoor) gathers on poor households serves as the main source of data for many social assistance interventions in Cambodia, including the Family Package. The implementation procedures for IDPoor involve: identification of poor households; updating data on poor households by removing households from the List of Poor Households, or amending the information on households holding a valid Equity Card. Mechanisms to implement the program have been established at the provincial, commune/sangkat and village level.[99]

Provincial Committees for the Identification of Poor Households and Vulnerable People have been established to coordinate and support the successful implementation of the identification procedures in their jurisdiction. The Provincial Governor is Chair with Directors of Provincial Offices of Ministries and the Governor of the District/Khan as members. Representatives of development partners and civil society organisations can participate in the work of the Committee on a voluntary basis. Each Committee is supported by a Secretariat.

Commune/Sangkat Working Groups for the Identification of Poor Households and Vulnerable People (C/SWG) are comprised of the Commune/Sangkat Chief and two or three Councillors, depending on the number of villages in the commune/sangkat. C/SWGs are supported by Technical Coordinators. The role of C/SWGs include, among other responsibilities:
- Assist the Commune/Sangkat Council to implement the program in the commune/sangkat
- Process the requests received for interviews, and then decide on which households should be interviewed
- Conduct household interviews on site at their place of residence
- Present the findings of household interviews at Commune/Sangkat Council meetings to review and validate poor-household classifications
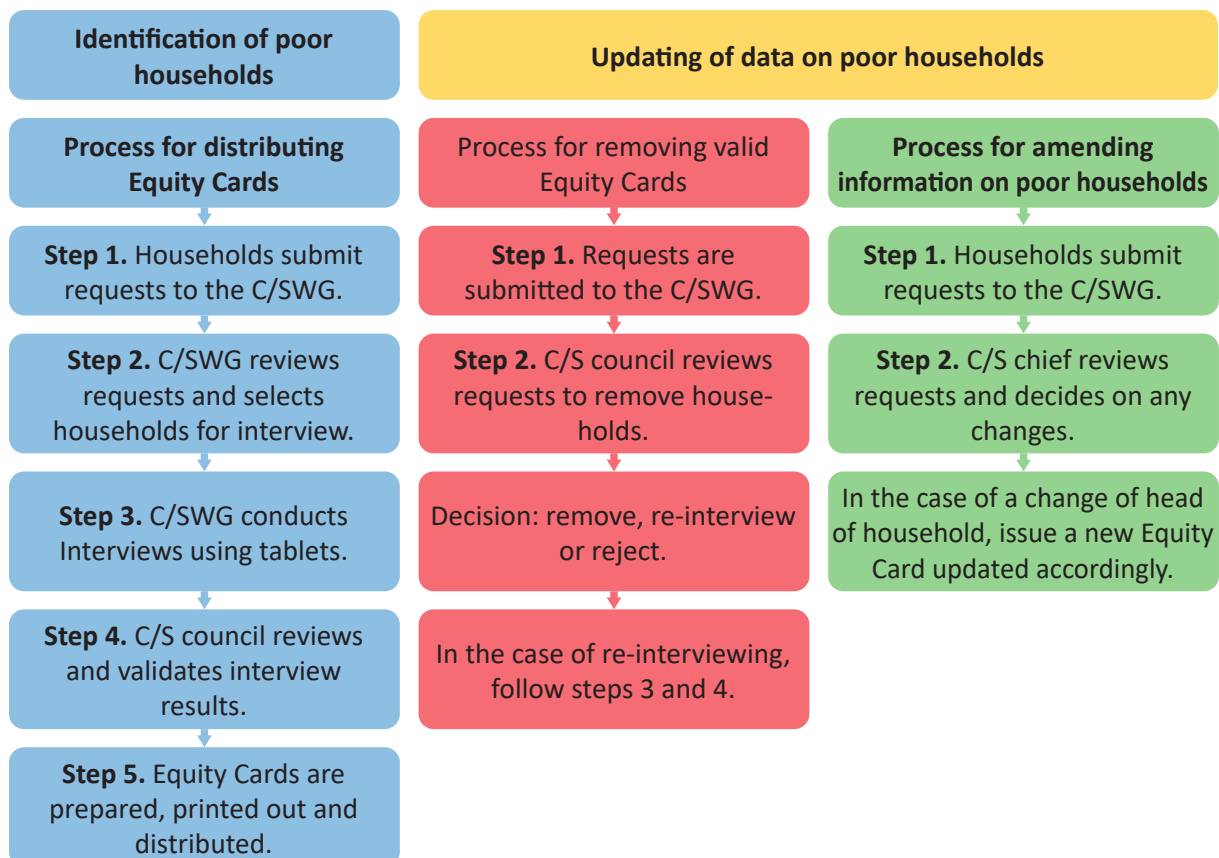- Coordinate with village chiefs on the distribution of Equity Cards.

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[99] For more information, see *Manual for the Identification of Poor Households Procedure*, MoP, 2022; see also, https://idpoor.gov.kh/en/about/

Village Working Groups (VWG), which include the village chief, deputy village chief and village assistant, support the work of the C/SWG. The role of VWGs include, among other responsibilities:

- Raise awareness among the community about the process
- Assist households to complete their requests for interview, then forward requests to C/SWG
- Provide C/SWG with information on households that may be poor but are not on List of Poor Households
- Participate in Commune/Sangkat Council meetings to provide information on living conditions of households that have requested an interview
- Support the C/SWG to set up household interviews in the village
- Advise households on the outcomes of their requests
- Distribute Equity Cards to eligible poor households.

Households who consider themselves to be poor have three options for submitting a request for interview: a direct request to the C/SWG; a direct request to village chiefs or other actors who will submit these requests to the C/SWG; or, submit a request via the IDPoor app. The IDPoor app is a publicly available mobile application that anyone can download and install on their Android devices.

Summary of the implementation procedures for IDPoor[100]

| Identification of poor households	Updating of data on poor households	
Process for distributing Equity Cards	Process for removing valid Equity Cards	**Process for amending information on poor households**
Step 1. Households submit requests to the C/SWG.	**Step 1.** Requests are submitted to the C/SWG.	**Step 1.** Households submit requests to the C/SWG.
Step 2. C/SWG reviews requests and selects households for interview.	**Step 2.** C/S council reviews requests to remove house-holds.	**Step 2.** C/S chief reviews requests and decides on any changes.
Step 3. C/SWG conducts Interviews using tablets.	Decision: remove, re-interview or reject.	In the case of a change of head of household, issue a new Equity Card updated accordingly.
Step 4. C/S council reviews and validates interview results.	In the case of re-interviewing, follow steps 3 and 4.	
Step 5. Equity Cards are prepared, printed out and distributed.		

OPDs have an important role to play in: ensuring that C/SWGs and VWGs are aware of the situation of persons with disabilities and their families, and the right of eligible families to access social assistance; ensuring that eligible persons with disabilities and their families have an Equity Card; raising awareness among their members on the Family Package; and, referring persons with disabilities to the NSAF office to claim their right to social protection.

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[100] *Manual for the Identification of Poor Households Procedure*, 17

4.5 Commune/Sangkat Investment Program

The process of developing the Commune/Sangkat Investment Program (CIP) provides a pathway for enhancing disability inclusion at the subnational level. The RGC allocates a percentage of the national budget to every Commune/Sangkat each year based on the *Law on the Administration and Management of Communes/Sangkats*.[101] The national budget allocation for SNAs including capital cities, provinces/municipalities, khans/districts, and communes/sangkats has seen a steady increase, rising from 13 percent in 2023 to 19 percent in 2024. However, the percentage share of the national budget remains notably low compared to the central government's expenditure, which accounts for 81 percent of expenditure in 2024.[102] Commune/Sangkat expenditure in 2024 represented 3.10 percent of the national budget.

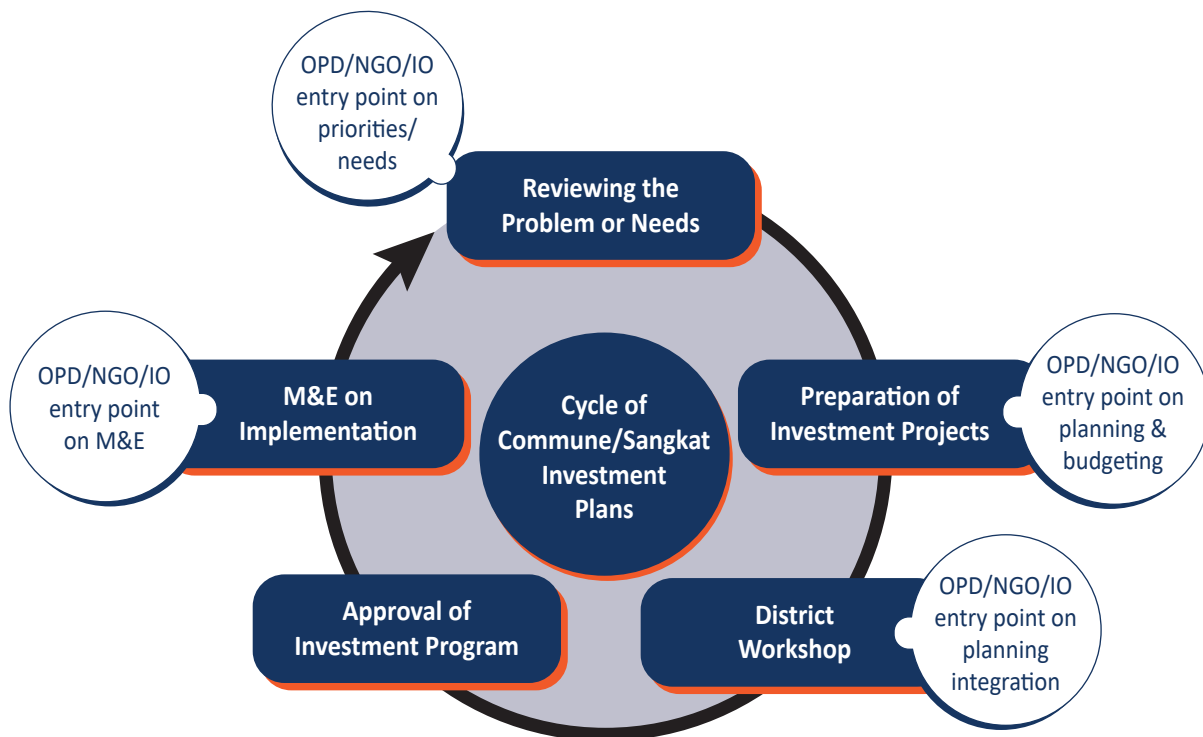% of Expenditure for Provincial, District, and Commune/Sangkat Administration in 2024
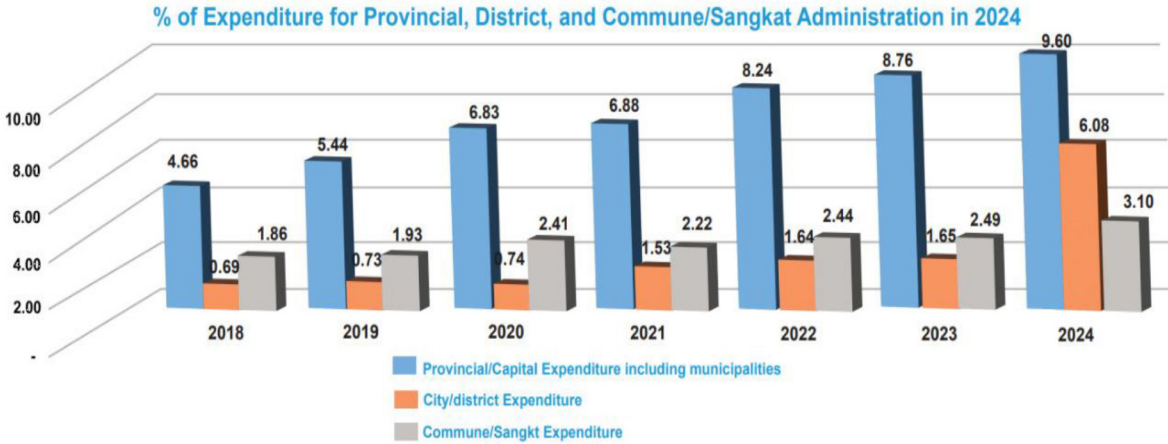
The Commune/Sangkat Fund has two categories to support operations; the Administration Fund and the Development Fund. The Development Fund is used to respond to the three-year rolling CIP. CIP funds average Riel 40,000,000 (approx. US$10,000) per year for each commune. The CIP has four (4) components: Economic; Social; Administration and Security; and, Natural Resource and Environment Management.

The annual process of developing the CIP consists of five (5) main phases: problem/needs identification; project/program formulation; resource mobilisation through district integration workshop; approval and endorsement of CIPs; and, implementation/M&E. The first and second phases – problem/needs identification and project formulation – are the crucial entry point for disability inclusion in the CIP's Social component.

OPDs, WWDFs, NGOs and IOs have a key role to play in identifying disability issues and advocating for Commune/Sangkat resources to support activities to overcome the challenges. If these phases are missed, participation in the district integration workshop provides another opportunity to review and recommend the inclusion of disability issues in the proposed commune priorities.
Many NGO-supported projects use the CIP process as the entry point to incorporate their activities into the local planning and budgeting process. Improving disability inclusion systematically and effectively requires tapping into CIPs as part of a financing portfolio, which in turn means changing the prevailing perceptions and attitudes about disability within the CIP process.

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[101] Law on the Administration and Management of Communes/Sangkats

[102] *Optimizing Financial Management and Budget Planning for the Next Fiscal Year*, Transparency International Cambodia, 2024; see also, https://www.cambodianbudget.org/

Cycle of Commune/Sangkat Investment Plans

- Reviewing the Problem or Needs
  - OPD/NGO/IO entry point on priorities/needs
- Preparation of Investment Projects
  - OPD/NGO/IO entry point on planning & budgeting
- District Workshop
  - OPD/NGO/IO entry point on planning integration
- Approval of Investment Program
- M&E on Implementation
  - OPD/NGO/IO entry point on M&E

An inclusive CIP process will ensure that: existing projects in Commune Development Plan (CDP) and investment programs include persons with disabilities; decision-makers understand the importance of disability inclusion in commune planning; consideration is given to the removal of barriers that prevent inclusion; and, persons with disabilities participate in all stages of development, implementation and monitoring of all Commune/Sangkat projects.

More detailed guidance on disability inclusion in the CIP process is available in the 2016 *Handbook for Trainers on Incorporating Disabilities into Government in Sub-National Administration* which aims to educate Commune/Sangkat Chiefs, Councillors, Clerks, Committees, and Village Chiefs on incorporating disability in local governance.[103] The guidance covers topics such as: disability awareness; respect and dignity; communication; practical steps for creating a barrier-free environment; ensuring the active participation of persons with disabilities; and, incorporating disability in the planning process.

Guidance is also available in the 2020 *Preparation and Development of Commune Development Plans for All* which aims to provide direction to OPDs and Commune/Sangkat Councils on the process of developing CDPs and CIPs in an inclusive and equitable manner.[104] This guidance has the potential to promote good governance and accountability, and provide opportunities for persons with disabilities to participate in the social development process.

4.6 Commune/Sangkat Committee for Women and Children

The Commune/Sangkat Committee for Women and Children (CCWC) is the only formal entity at the commune/sangkat level with responsibility for social services for women and children. CCWCs play a vital role in local governance and operate within the broader framework of Cambodia's

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[103] *Handbook for Trainers on Incorporating Disabilities into Government in Sub-National Administration*, UNICEF and Ministry of Interior, 2016

[104] *Preparation and Development of Commune Development Plans for All*, CDPO and LFTW, December 2020

decentralisation and deconcentration reforms, which aim to empower local authorities to address the specific needs of their community. CCWCs play an important role in advocating for the rights and needs of women and children, and in supporting the implementation of action plans aimed at improving gender equality and support for children.

In September 2020 the MoI issued Prakas #3840 to amend the structure, roles, and responsibilities of CCWCs. This Prakas broadened the mandate of CCWCs by expanding their membership and strengthening their advisory powers, making them accountable for a wide range of social services. The new structure includes representatives with expertise on issues relating to women, children, education, health, nutrition, youth, social protection, disability, and indigenous issues. The Prakas specified that the membership of the CCWC includes a woman with disability.[105]

The CCWC's responsibilities include advocacy and policy implementation, and ensuring that the voices of women and children are integrated into local governance decisions. CCWCs are also responsible for overseeing the implementation of national policies and action plans related to the welfare of women and children at the commune level, covering areas such as health, education, and social protection.[106]

 CCWC members visit families to identify issues/needs faced in the community. CCWCs also focus on capacity building and empowerment, organising training sessions and workshops to enhance the capacity of Commune/ Sangkat Council members, community leaders, and local service providers on issues related to women and children.[107] CCWC members are also actively involved in the planning process of CDPs and CIPs, ensuring that the needs of women and children are prioritised.

Source: Handbook for Commune Committees for Women and Children (CCWC)

CCWCs are a key entry point for WWDFs and other OPDs, and NGOs working with and for persons with disabilities, to collaborate and elevate issues relevant to women and children with disabilities for consideration in the work of the CCWC, the development of CIPs and other platforms, and to enhance disability inclusion.

4.7 One Window Service Office

The One Window Service Office (OWSO) initiative, first introduced in Cambodia in 2003, has since been established in all provinces and is also being trialled at the district and commune level. The OWSO is a decentralised administrative service delivery system designed to bring government services closer to citizens by streamlining bureaucratic processes. The OWSO aims to improve transparency and enhance accessibility by offering standardised services in a user-friendly environment. It provides a single point of contact for various public services that are relevant to persons with disabilities such as facilitation of applications for social benefits and welfare programs, and the issuance of health-related documents.[108]

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[105] For more information, see Ministry of Interior Prakas #3840 prk, Amendment of Structure, Roles, and Responsibilities of CCWC, 22 September 2020

[106] For more information, see *Support for Decentralization and Deconcentration Reforms in Cambodia*, UNDP, 2019

[107] *Capacity Building for Local Governance in Cambodia*, World Bank, 2020

[108] For more information, see https://www.owso.gov.kh/en/ (Khmer only)

To ensure that services are accessible and inclusive, it may be necessary to provide training to staff on the rights of persons with disabilities and to build capacities to work effectively with people with different types of disability.

4.8 One-Stop Service Unit

The MoWA, in collaboration with the MoH, is in the process of setting up and piloting One-Stop Service Units (OSSU) for victims/survivors of GBV, including women and children with disabilities.[109] Pilot OSSUs have been set up in referral hospitals in Battambang, Kampong Cham, Phnom Penh, Preah Vihear, Stung Treng, and Tbong Khmum. The OSSU complements the existing multi-sectoral GBV Response Working Groups in some provinces in order to ensure effective and timely services for victims/survivors of GBV. The Provincial Department of Women's Affairs and other relevant government agencies play crucial roles in facilitating access to the services, as well as the smooth operation of the OSSU. In addition to medical treatment, victims/survivors of GBV are also referred to other essential services including basic counselling, temporary shelter, police and judicial services, if needed.[110]

OSSUs provide an opportunity for WWDFs and other OPDs to raise awareness on the rights of women and girls with disabilities who have experienced GBV, and advocate for their inclusion in the services and referrals available, on an equal basis with others. Effective inclusion may require the provision of training for GBV service providers, including on how to communicate with women and girls with disabilities, to ensure that they are treated with dignity and respect.

Referral services provided at the OSSU, under the coordination of a GBV Case Manager

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[109] One-Stop Service Units were proposed in the NAPVAW for 2019-2023

[110] For more information, see *Guideline on the process of establishing One-Stop Service Center for survivors of gender-based violence*, MoWA, 2022

5.1 Concluding remarks

Although progress is being made, people of all ages and types of disabilities continue to face many barriers in accessing the services and opportunities that would promote their wellbeing and ability to participate fully in their communities. These barriers include:

- persons with disabilities often face stigma and discrimination based on negative perceptions about disability
- physical, communication, financial and attitudinal barriers limit the accessibility of services and opportunities
- limited understanding of what disability inclusion means, or how to achieve meaningful inclusion and equitable access to services and opportunities in broader work plans, budgets and activities
- lack of understanding on the meaning of a rights-based approach and disability inclusion within the families of persons with disabilities, their communities, service providers, and local authorities
- lack of national budget allocations to implement a right-based approach to enhance disability inclusion and equitable access to services and opportunities, and
- many persons with disabilities may not fully understand their rights, or how to claim their rights.

Cambodia has legislative and policy frameworks that when fully implemented have the potential to enhance effective disability inclusion, equity and rights at the national and subnational levels. Several trainings have been conducted at all levels on disability rights and inclusion in collaborations between the DAC-SG, ACCESS program, UN agencies, CDPO and other partners. Some of these trainings have aimed to build the capacities of members of PDACs, DAWGs and other SNAs. However, it remains a challenge that there is a high turnover of designated members and personnel, new people may not have an understanding of disability rights or disability inclusion, and budget allocations to implement activities are limited.

All line-Ministries and agencies have a responsibility to promote the wellbeing of persons with disabilities and their ability to participate fully in their communities. However, actions to enhance the inclusion of persons with disabilities in all aspects of daily life will require a multi-faceted and systematic approach, at the national and subnational levels, to overcome the barriers. *Enhancing Disability Inclusion, Equity and Rights in Cambodia* outlines the frameworks and guidance available to line-ministries and other stakeholders to take action on, and implement, the NDSP3's strategic directions: employment and economic security; health, rehabilitation and wellbeing; education and lifelong learning; social protection and adequate standard of living; inclusive and accessible communities; safety, rights and justice; and, situations of risk and climate change. Key issues to achieve effective disability inclusion through equitable access to services and opportunities and respect for rights have also been presented, together with available guidance. These issues include:

inclusive legislative and policy frameworks; twin-track approach; social and behaviour change; inclusive language; inclusive planning, decision-making and budgeting; data collection and M&E; and, disability inclusive development.

More focus is needed on the twin-track approach, in particular, the mainstreaming of disability in all programs, activities and opportunities, through the removal of barriers to facilitate the equitable participation of persons with disabilities.

5.2 The way forward

With a whole-of-government approach and adequate resources to fully implement the NDSP3, progress can be made in achieving its Vision and Mission: persons with disabilities will participate fully and equally in a society that respects their rights, dignity and diversity; and, disability inclusion in the work and budgets of ministries and institutions at the national and subnational levels will be evident. However, it is proposed that additional actions are undertaken which focus on building the capacities of stakeholders, at all levels, on the issues highlighted to achieve effective disability inclusion, equity and rights in each of the NDSP3's strategic directions. Six recommendations are proposed:

Recommendation 1: *Develop face-to-face and online training resources on disability inclusion for members of Disability Action Working Groups (DAWG), Provincial Disability Action Councils (PDAC) and District Disability Action Councils (DDAC)*

It is proposed that in addition to the face-to-face training that has already been developed, easily accessible online training modules are created on issues such as: disability awareness and disability rights; the legislative and policy framework; and, how to achieve meaningful inclusion and equitable access to services and opportunities in broader work plans, budgets and activities. Specific modules could also be developed for each Ministry or institution. After undertaking the training, members should have the capacity to provide advice at all levels on disability and disability inclusion, equity and rights. Access to online training would also ensure that new members can gain appropriate knowledge to fulfill their role. The training could be available on the DAC website.

Recommendation 2: *Develop training resources for Commune/Sangkat Councils, local committees and other Subnational Administrations (SNA)*

It is proposed that training resources, including easily accessible online training modules, are available on issues such as: disability awareness and disability rights; the legislative and policy framework; disability inclusive budgeting; disability inclusive social protection; and, removing barriers to inclusion and participation. After undertaking the training, members of Commune/ Sangkat Councils, committees and other SNAs should have the capacity to provide advice on disability and disability inclusion, equity and rights, and improve equitable access to services and opportunities for persons with disabilities. Access to online training would also ensure that new members and staff can gain appropriate knowledge to fulfill their role. The training could be available on the DAC or MoI website.

Recommendation 3: *Develop an online disability awareness training resource for civil servants, contract staff and service providers*

It is proposed that a single module is created to enhance the understanding of civil servants, contract staff and services providers on disability and disability rights, with the aim of improving attitudes and behaviours towards persons with disabilities. The online resource could be used as part of the induction process for new staff, and as part of refresher training for existing staff. The training could be available on the Ministry or institutions website, or as a printed handout.

Recommendation 4: *Continue to build the capacities and empower OPDs, including WWDFs, at the subnational level through appropriate training, mentoring/coaching and the provision of advocacy materials*

It is proposed that current activities to build capacities of OPDs and WWDFs are continued and expanded, including through online training, for meaningful engagement with local authorities through the pathways to inclusion at the subnational level presented in Part 4. Increased capacities are also needed on fund raising, and to increase understanding among persons with disabilities in the OPD's target area on their rights and how to claim them. Advocacy materials could include posters, handouts and other resources on key issues that could be shared with members and local authorities.

Recommendation 5: *Strengthen mechanisms to increase the meaningful participation of OPDs/ persons with disabilities in all subnational committees and working groups*

It is proposed that mechanisms are developed or strengthened to increase the meaningful participation of OPDs and persons with disabilities in all existing subnational working groups, committees to enhance disability inclusion, equity and rights.

Recommendation 6: *Increase public awareness on the rights and contributions of persons with disabilities to an inclusive society*

It is proposed that activities are increased to develop and disseminate Information, Education and Communication (IEC) materials to encourage behaviour change using different mediums – such as radio, television, newspapers, social media, posters, or events – to reduce stigma and discrimination against persons with disabilities and showcase the contributions of persons with disabilities to society.

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Annexes

Annex 1: Key definitions to enhance understanding

Assistive devices/technology – external devices that are designed, made, or adapted to assist persons with disabilities to participate actively and productively in community life, including: mobility aids such as wheelchairs, walkers, canes, crutches, prosthetic and orthotic devices; hearing aids to help people hear or hear more clearly; cognitive aids; and, computer software and hardware, such as voice recognition programs, screen readers, and screen enlargement applications, to help people with mobility and sensory impairments use computers and mobile devices

Barriers – factors in a person's environment that, through their absence or presence, limit functioning and create disability, such as inaccessible physical environments, a lack of appropriate assistive devices, and negative attitudes towards disability

Cognitive impairment – a broad range of conditions that include: intellectual impairment; autism spectrum disorders; severe, persistent mental illness; brain injury; stroke; Alzheimer's disease; and other dementias

Community Based Inclusive Development – focuses on the creation of inclusive societies where persons with disabilities have access to social and development benefits on an equal basis with others in their communities

Community Based Rehabilitation – a strategy within general community development for the rehabilitation, equalisation of opportunities and social inclusion of all persons with disabilities – now part of CBID

Disability inclusion – the full participation of persons with disabilities in all aspects of life through the promotion of their rights and respect for their view, in accordance with the CRPD

Disability inclusive development – all stages of development processes are inclusive of and accessible to persons with disabilities with everyone afforded equal access to education, healthcare services, employment, and social protection, among others

Disability organisation – an organisation that provides services or advocates for persons with disabilities but may not be led by a person with disability

Diversity – recognises the full range of human expression and experience, including: national origin; socio-economic status; educational background; ethnicity; gender identity; sexual orientation; religion; disability; and cultural heritage

Duty bearer – all actors, including governmental, non-governmental and international actors, that have the obligation to respect, protect, promote, and fulfil human rights of persons with disabilities (rights holders)

Equality – recognises that everyone has the same value, the same rights, should receive the same level of respect, and have the same access to services and opportunities

Equity – aims to promote justice, fairness and impartiality in the way things are done, and in the distribution of resources, to ensure equal treatment, access, opportunity and advancement for everyone, through identifying and removing barriers that prevent some groups, including persons with disabilities, from fully participating in society

Impairment – any loss or abnormality of psychological, physiological or anatomical structure or function

Inclusive education – the right of every child and young person to be included in general education settings which involves adapting the environment and teaching approaches to ensure genuine and valued full participation of all children and young people

Integrated education – a process in which students with special needs are absorbed into the mainstream education and learn alongside their peers without disabilities

Organisation of persons with disabilities – an association formed and led by persons with disabilities in order to promote and protect the rights, wellbeing and dignity of persons with disabilities; more than 50 percent of the membership are persons with disabilities

Persons with disabilities – those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others

Personal support – relates to assistance with daily personal activities including assistance with, or supervision of, personal tasks of daily life

Reasonable accommodation – refers to the necessary and appropriate modifications and adjustments to ensure that persons with disabilities can enjoy all human rights and fundamental freedoms

Rehabilitation – a set of measures that assist individuals who experience, or are likely to experience, disability to achieve and maintain optimal physical, sensory, intellectual, psychological and social functioning in interaction with their environments

Rights holder – persons with disabilities or their representative groups that have particular entitlements in relation to duty bearers

Self Help Group – a group established at the local level by persons with disabilities for social support, saving money, awareness raising and advocacy, and to share experiences

Social protection – a set of policies and programs aimed at preventing or protecting all people, including persons with disabilities, against poverty, vulnerability, and social exclusion throughout their life

Special education – a system of education that responds to children with particular needs outside mainstream education

Speech therapy – the assessment and treatment of communication problems, speech disorders and swallowing problems

Universal design – the design of products, environments, programs and services that are usable by all people, to the greatest extent possible, without the need for adaptation or specialised design

Universal health coverage – ensures that all people can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship

Vocational training – a type of education that focuses on teaching the skills and knowledge required for a specific job function or trade.

Annex 2: Main stakeholders at national and subnational level

While acknowledging that everyone has a role to play in enhancing disability inclusion, equity and rights, this analysis concentrates on the main stakeholders and structures currently working with and for persons with disabilities at the national and subnational level. The analysis is intended to provide a resource for all stakeholders to identify potential partners to support efforts to enhance disability inclusion in their policies and programs. The analysis is presented in five groups: key ministries, agencies and structures at the national level; subnational authorities and structures; representative organisations of persons with disabilities; NGOs; and, IOs.

Key ministries, agencies and structures at the national level

All ministries, agencies and agencies have a role to play in enhancing disability inclusion, including through, but not limited to, the employment of persons with disabilities and improving accessibility to services and opportunities. Some of the key ministries, agencies and structures with clear roles in enhancing disability inclusion include: Disability Action Council; Disability Action Council Secretariat General; Ministry of Social Affairs, Veterans and Youth Rehabilitation; Ministry of Health; Ministry of Education, Youth and Sport; Ministry of Health; Ministry of Information; Ministry of Interior; Ministry of Labour and Vocational Training; Ministry of Land Management, Urban Planning and Construction; Ministry of Planning; Ministry of Women's Affairs; and, the National Social Protection Council.

Disability Action Council (DAC) – the 2009 Disability Law established the DAC as "the national coordination and advisory mechanism on disability". The organisation and functioning of the DAC is guided by the 2013 Sub-Decree No. 216 ANKr.BK on Organisation and Functioning of the Disability Action Council. The DAC has 58 members. The Prime Minister is Honorary President, with the Minister of MoSVY as President. Secretaries of State of MoSVY, the Council of Ministers, MoH, MoI, Ministry of National Defence (MoND), and an OPD representative, serve as Vice-Presidents. The Under Secretaries of State of all other Ministries serve as members. Other members are: the Deputy Secretary Generals of the Cambodian Mine Action and Victim Assistance Authority (CMAA), the Council for the Development of Cambodia (CDC), and the Council for Agriculture and Rural Development (CARD); a representative of the Cambodian Red Cross; four representatives of OPDs (two female, two male); one representative from an NGO working in the disability sector; one representative from the private sector; Deputy Governors from each province/municipality; and, the Secretary General of the DAC-SG.

The DAC is supported by the **DAC Secretariat General** (DAC-SG), an executive unit located within MoSVY. Roles and responsibilities of the DAC-SG include: providing technical advice on disability and rehabilitation; and, coordinating relevant ministries, institutions and relevant organisation in developing policies, national plans and strategies related to disability and rehabilitation issues. A key role of the DAC-SG's Inclusion of Persons with Disabilities Unit is to cooperate with relevant government ministries and institutions to develop disability inclusive policies and action plans.

Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) – is the lead ministry with responsibility for disability. The current roles and responsibilities of MoSVY are outlined in the 2022 Sub-Decree No. 94 on Organization and Functioning of the Ministry of Social Affairs, Veterans and Youth Rehabilitation.[111] MoSVY entities most relevant to promoting disability inclusion at the national level are: the Department of Welfare for Persons with Disabilities; the Persons with Disabilities

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[111] For more information, see Sub-Decree No. 94 on Organization and Functioning of the Ministry of Social Affairs, Veterans and Youth Rehabilitation, dated 20 May 2022, unofficial translation

Foundation; the National Social Assistance Fund; and, the General Directorate of Social Affairs Policy.

- The roles and responsibilities of the ***Department of Welfare for Persons with Disabilities*** under the General Department of Rehabilitation, include, among others, to: implement policies, strategic plans, legal documents and guidelines related to disability; lead, manage and develop persons with disabilities identification program and manage persons with disabilities data; inspect disability work at ministries, institutions and private sector to implement duties as stated in the Disability Law; cooperate with relevant ministries/institutions to develop and make physical infrastructure, means of transportation, digital communications, and personal assistance accessible; and, cooperate with relevant ministries/institutions to develop arts and sport for persons with disabilities.[112]

- The **Persons with Disabilities Foundation (PWDF)** was established under the 2009 Disability Law. The 2010 Sub-Decree No. 118 ANK.BK on Organisation and Functioning of the Persons with Disabilities Foundation established the PWDF as a public administration institution with technical supervision under MoSVY and financial supervision under the Ministry of Economy and Finance (MEF). Article 3 expanded on the purpose of the PWDF and assigned additional roles and responsibilities, including, among others, to: provide rehabilitation services for persons with disabilities; manage physical rehabilitation centres; integrate persons with disabilities into the community; and, develop policies to support and assist persons with disabilities.

- The **National Social Assistance Fund (NSAF)** was established by Sub-Decree No: 68 ANKr. BK, dated 31 March 2022, and officially launched on 1 January 2023.[113] The NSAF is under the technical supervision of MoSVY and the financial supervision of the MEF. The NSAF was established to consolidate all social assistance programs under one institution, but is under the guidance and policy orientation of the NSPC. The NSAF has a key role to play in promoting disability inclusion in the Family Package.

- The **General Department of Social Affairs Policy (GDSAP)** has responsibilities to lead, manage and coordinate the development of policies and strategic plans related to MoSVY's mandate, which includes disability. In particular, the Department of Policy Development could potentially ensure the inclusion of persons with disabilities in all MoSVY's policies, plans and services.[114]

Ministry of Education, Youth and Sport (MoEYS) – plays an important role in enhancing disability inclusion through the development and implementation of inclusive policies and plans to promote the education of children and adults with disabilities. The MoEYS provides resources and training for teachers to support students with disabilities, and ensures that schools are physically accessible and have the necessary accommodations. The MoEYS has established the Special Education Department and National Institute of Special Education.

Ministry of Health (MoH) – is mandated to provide healthcare services for all the population, including adults and children with all types of disabilities. The MoH has an important role to play in ensuring that public health facilities at all levels are accessible to persons with disabilities, and that healthcare workers are trained on disability-inclusive healthcare practices.

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[112] For more information, see Article 25, Sub-Decree No. 94 on Organization and Functioning of the Ministry of Social Affairs, Veterans and Youth Rehabilitation, dated 20 May 2022, unofficial translation

[113] For more information, see Articles 5 and 6, Chapter 2, Sub-decree on the Establishment of the National Social Assistance Fund as a Public Administrative Establishment

[114] For more information, see Articles 13 and 14, Chapter 5, Sub-Decree No. 94 on Organization and Functioning of the Ministry of Social Affairs, Veterans and Youth Rehabilitation, dated 20 May 2022, unofficial translation

Ministry of Information (MoInf) – is responsible for implementation of the Access to Information Law and plays a crucial role in ensuring that information officers and relevant staff across the RGC have the capacities and means to provide accessible information to persons with disabilities.

Ministry of Interior (MoI) – is in a unique position to influence subnational disability inclusive development and decision-making processes as the Ministry has the mandate from the RGC to lead and coordinate decentralisation reform. The Minister of MoI is chair of the National Committee for Sub-National Democratic Development (NCDD), a high-level inter-ministerial mechanism for promoting democratic development through decentralisation and deconcentration reforms throughout Cambodia.

Ministry of Labour and Vocational Training (MoLVT) – provides employment and vocational training opportunities for all the population and has established more than 30 VTCs to provide job counselling and vocational training. The MoLVT has a key role in ensuring the training and other opportunities are inclusive of and accessible to persons with disabilities. The MoLVT also works with employers to create inclusive workplaces, and implements policies to promote equal employment opportunities.

Ministry of Land Management, Urban Planning and Construction (MoLMUPC) – has a key role in ensuring accessible infrastructure and buildings. Responsibilities include: developing and enforcing building codes and regulations that include accessibility standards; promoting universal design in public buildings and spaces; and, ensuring new construction projects are inclusive and accessible to persons with disabilities. The Ministry also works on projects to retrofit government buildings with ramps and accessible facilities.

Ministry of Planning (MoP) – through its National Institute of Statistics, has the potential to measure progress in enhancing disability inclusion through the collection of disability-related data for surveys such as the population census, CDHS, and other socio-economic surveys.

Ministry of Women's Affairs (MoWA) – promotes the rights of women and children through economic empowerment, access to education, and programs to prevent violence against women and children. All policies and programs are inclusive of women and girls with disabilities.

National Social Protection Council (NSPC) – established in 2017, by Royal Degree NS/RKT/0617/488, is the coordinator of the NSPPF. The NSPC is composed of high-ranking representatives from relevant ministries and institutions. The NSPC has an important role to play in ensuring disability inclusion in social protection policies and programs. The NSAF was established to consolidate all social assistance programs under one institution. It is under the guidance and policy orientation of the NSPC, and provides reports, data and information as requested by the NSPC.[115]

Several other governmental structures at the national level may also be relevant to enhancing disability inclusion, such as: the Cambodian National Council for Children; Cambodian National Council for Women; and, Cambodian Human Rights Committee.

Subnational administrations and structures
With the focus on decentralisation in Cambodia, subnational administrations (SNA) and structures at the provincial, district and commune level have a key role in promoting disability inclusion in mainstream services and development activities, and in building inclusive communities. All ministries

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[115] Article 39, Chapter 5, Sub-Decree on the Establishment of the National Social Assistance Fund as a Public Administrative Establishment (unofficial translation)

have provincial and district offices to oversee the provision and implementation of policies and programs, such as: Provincial/District Offices of Social Affairs, Veterans and Youth Rehabilitation (PoSVY/DoSVY); Provincial/District Departments of Health (PHD/DHD); and, Provincial/District Departments of Education (PDoE/DDoE). Other key structures with a role to play in enhancing disability inclusion such as the PDAC, Commune/Sangkat Council, and the CCWC are presented in Part 4 on pathways to enhanced disability inclusion at the subnational level.

Representative organisations of persons with disabilities

The disability movement in Cambodia is well organised and are consulted on disability-related laws and policies. **Organisations of Persons with Disabilities** (OPD), including **Women with Disabilities Forums** (WWDF), play a crucial role in contributing to the work of Commune/Sangkat Councils, and other SNAs, by bringing the voice of their members to the discussions.[116] OPDs are led by persons with disabilities themselves, serving as a collective voice for their members, working to ensure their rights are respected and upheld. Community mobilisation and networking are integral to the success of OPDs. By engaging communities, they can foster support for disability inclusion and encourage participation in activities that promote the wellbeing of their members.

Cambodian Disabled People's Organization (CDPO) – an ACCESS 2 Disability Inclusion and GBV Partner – was established in 1994. CDPO is a membership-based umbrella organisation for OPDs, run and governed by persons with disabilities. CDPO represents people with all types of disabilities in all provinces in Cambodia through a network of 75 OPDs, including 11 WWDFs, and over 1,000 Self-Help Groups (SHG). CDPO is not a service provider but rather represents OPDs and WWDFs nationally, advocating for their rights and interests, as well as building their capacities to claim their rights, and raising community awareness to promote disability inclusion.

Other OPDs focus on specific types of disability, such as the Association of the Blind in Cambodia and the Spinal Cord Injury Association.

Association of the Blind in Cambodia (ABC) – is a self-help body made up of people who are blind and visually impaired as members. ABC works in partnership with government authorities at all levels, and other stakeholders to promote the inclusion of people who are blind and visually impaired in plans and programs through advocacy, training to increase capacities, and to promote full participation in society.

Spinal Cord Injury Association (SCIA) – established in 2012 in Battambang, works to raise awareness with local and national authorities on the rights and requirements for healthcare and rehabilitation to promote the wellbeing and inclusion of people with spinal cord injury.

Non-Governmental Organisations (NGO)

Numerous NGOs work with and for persons with disabilities at the national and subnational level. The following provides an overview of some of these organisations.

Action on Disability and Development (ADD) – supports the disability movement across Cambodia. ADD is working directly with SHGs in Kampong Cham, Kampong Chhnang, Kampong Speu, Kampot, Kandal, Prey Veng, Pursat and Takeo provinces and in other provinces through local OPDs. ADD also works in partnership with a network of OPDs to advocate for inclusion of adults and children with disabilities in society.

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[116] *Social Inclusion Situation Analysis – Cambodia*, Draft Report, 8 November 2022, 11

Association for Aid and Relief, Japan (AAR Japan) – promotes inclusive education for children with disabilities through the training of teachers and through installing ramps and accessible toilets in schools. AAR Japan also supports The Wheelchair Workshop in Phnom Penh which manufactures and provides free wheelchairs, walkers and other assistive devices to persons with disabilities.

CARE Cambodia – an ACCESS 2 Disability Inclusion Partner – works with women, their communities, leaders, and authorities in Ratanakiri province to ensure socially marginalised and Indigenous women and girls, including women and girls with disabilities, have their rights respected, their identity valued, and have equitable access to livelihoods and other opportunities. CARE also supports the inclusion of persons with disabilities in GBV programs. CARE adopts a twin-track approach to strengthen disability inclusion.

Centre for Child and Adolescent Mental Health (CCAMH) – is a collaborative project with the MoH and Caritas Cambodia to raise awareness of mental health and its importance. CCAMH works closely with children from birth to 18 years who have psychological problems, neurological problems and intellectual impairments. Multidisciplinary teams play an integral role in the services provided with individual health screening and case management.

Deaf Development Program (DDP) – is a project of Maryknoll Cambodia dedicated to working alongside people who are deaf and their families to assist them to participate fully in society; and to achieve independence and equality.

Disability Development Services Program (DDSP) – works in Pursat province to improve the quality of life for adults and children with disabilities through increased access to a wide range of services and opportunities, such as rehabilitation, inclusive and special education, vocational training, and job coaching. DDSP raises awareness among communities on the rights of persons with disabilities and works towards their social inclusion. DDSP also works to build the capacities of other NGOs and government departments to provide opportunities to persons with disabilities to participate equally in the sustainable development of their community.

Epic Arts – works to make the world a more inclusive place by using the power of the arts to change lives, and to build an inclusive society in Cambodia where every person, including those with disabilities, is celebrated for their uniqueness.

Exceed Worldwide – an ACCESS 2 Rehabilitation Partner – formerly known as The Cambodia Trust, provides comprehensive physical rehabilitation services at three PRCs (Kampong Chhnang, Kampong Som, and Phnom Penh) and PO units in some hospitals. Exceed also supports the training of Prosthetists/Orthotists (PO) and PO Technicians in the Faculty of Prosthetics & Orthotics at the National Institute of Social Affairs. Exceed's community development program enables and empowers adults and children with disabilities to access education, get jobs, start new businesses, and build fulfilling lives as part of their community.

Fred Hollows Foundation (FHF) – has worked at all levels in Cambodia since 1998 on eye health, including through an avoidable blindness program. FHF works with the RGC and other key partners to strengthen and expand all levels of the public eye care system sustainably and cost effectively, including through the provision of eye glasses.

Humanity & Inclusion (HI) – an ACCESS 2 Rehabilitation Partner – formerly known as Handicap International, has been working in Cambodia since 1987. Currently, HI provides technical and financial support to the Kampong Cham PRC to ensure quality rehabilitation services, including outreach services in Kampong Cham and Tbong Khmum provinces. HI also provides services to support early childhood development and the economic inclusion of persons with disabilities to reduce poverty and social exclusion.

Krousar Thmey (KT) – has been working since 1994 to support the education of deaf or blind children and their inclusion in society through a network of five special schools. The schools were transferred to the MoEYS in 2019. KT assists in the implementation of quality education in the five Special Education High schools and inclusive classrooms in public schools. KT implements activities to improve the inclusion of children with disabilities in the education system and in society through the provision of adapted learning tools and promoting their access to training and employment.

Organisation to Improve Communication and Swallowing Therapy Services in Cambodia (OIC) – an ACCESS 2 Rehabilitation Partner – works to develop sustainable support for adults and children with communication and swallowing difficulties, a group largely excluded and unrecognised within existing services and systems. OIC has extensive experience using Speech Therapy technical knowledge for systems strengthening and to equip Cambodia's health, education, and rehabilitation sectors through training, resource development, policy development, and direct service provision.

People's Action for Inclusive Development (PAfID) – an ACCESS 2 Disability Inclusion Partner – works to promote an inclusive society, where opportunities to participate in the cultural, social, and economic environment are open for all, especially for persons with disabilities. PAfID aims to strengthen and support the capacity of relevant actors at the national and subnational level, such as OPDs, NGOs, Government officials, the private sector, and communities at the grassroot and national level. PAfID also works directly with persons with disabilities to ensure that they can access their rights and achieve their potential.

Rabbit School – established in 1997, provides education for children with intellectual impairments in inclusive/integrated classrooms at 15 schools in Phnom Penh, Kampong Speu, Kandal, and Siem Reap provinces.

Safe Haven – established in Siem Reap province in 2010, works through a multidisciplinary team to provide physical and occupational therapy, nursing support, nutritional supplements, developmental services, and social work services for children with disabilities and complex medical problems so they can reach their full potential and highest level of personal independence.

Transcultural Psychosocial Organization (TPO) – an ACCESS 2 GBV Partner – promotes mental health care and psychosocial wellbeing, and advocates for improved mental health care services in Cambodia. TPO provides a comprehensive range of mental health care and support options through a range of structured programs at its Centre in Phnom Penh and in the community. TPO also offers a wide range of training options for professionals, as well as all those who want to build or expand their knowledge and skill in the field of mental health.

Several international organisations (IO) are active in Cambodia providing both disability specific interventions or through the inclusion of disability in their broader programs.

International Committee of the Red Cross (ICRC) – an ACCESS 2 Rehabilitation Partner – has been in Cambodia since 1992. ICRC provides technical and material support to PRCs in Battambang and Kampong Speu provinces. ICRC-supported PRCs also promote the social inclusion of persons with disabilities through referrals and sporting activities. ICRC has provided significant support to the University of Health Sciences (UHS), including the development of an undergraduate program in physiotherapy, scholarships for students, and comprehensive staff training.

United Nations Development Programme (UNDP) – works to support the RGC's development goals including through economic diversification, inclusive growth, and human development. UNDP contributes to removing structural barriers for socio-economic inclusion and empowerment of marginalised groups, including persons with disabilities, through expanding social protection coverage. UNDP also works with RGC ministries and agencies to build capacities to enhance disability inclusion, and to strengthen M&E to measure progress.

United Nations Children's Fund (UNICEF) – an ACCESS 2 Disability Inclusion Partner – provides technical expertise to the RGC to strengthen national and subnational systems to improve quality, equitable, disability-inclusive, gender-sensitive and climate-resilient infrastructure and services. UNICEF also provides technical support on issues such as disability identification and data management, inclusive education, health, WASH, social protection, and inclusive budgeting.

United Nations Population Fund (UNFPA) – an ACCESS 2 GBV Partner – has a mandate to ensure universal access to sexual and reproductive health services and information. UNFPA Cambodia promotes the human rights and social inclusion of women and young persons with disabilities in the areas of access to sexual and reproductive health services, information, and education for persons with disabilities, including preventing and addressing sexual violence and GBV.

United Nations Office of the High Commissioner for Human Rights (UNOHCHR) – provides assistance to the RGC in promoting and respecting human rights, including disability rights. UNOHCHR has supported the drafting of the new Disability Law to ensure it is in line with the CRPD, and provided training to judges, prosecutors, court clerks and lawyers, and PDACs to enhance access to justice for persons with disabilities.

World Health Organization (WHO) – an ACCESS 2 Rehabilitation Partner – works closely with the RGC, international partners and NGOs to improve the health and wellbeing of all Cambodians, including persons with disabilities. The WHO provides technical expertise on strengthening rehabilitation in the health system, and on implementation of the *Roadmap Towards Universal Health Coverage*.

Annex 3: Overarching legal and policy frameworks to promote disability inclusion

Cambodia's overarching legal and policy instruments with the potential to achieve effective disability inclusion, equity and rights includes: the Constitution; the Pentagonal Strategy and Political Platform of the RGC 2023-2028; the *Roadmap Towards Universal Health Coverage 2024-2035*; the *Cambodian Sustainable Development Goals Framework*; the *Law on the Protection of the Rights of Persons with Disabilities*; the *National Disability Strategic Plan 2024-2028*; the CRPD; and, the Incheon Strategy.

National legal and policy frameworks

The supreme law is the 1993 **Constitution of the Kingdom of Cambodia**, which has been revised nine (9) times; most recently in 2021. While not specifically referring to disability, Article 31 states that "Khmer citizens are equal before the law, enjoying the same rights, liberties and duties regardless of race, color, sex, language, beliefs, religions, political tendencies, birth origin, social status, wealth or other situations."

The **Pentagonal Strategy – Phase 1 for Growth, Employment, Equity, Efficiency and Sustainability: Building the Foundation Towards Realizing the Cambodia Vision 2050** continues the successful implementation of the Triangular Strategy and the Rectangular Strategy with a focus on five key priorities: People, Roads, Water, Electricity and Technology. One of the aims of the Pentagonal Strategy-Phase 1 is that "Cambodian people live in dignity and happiness, and enjoy equal access, equal rights, and equal opportunities in social protection". The *Pentagonal Strategy-Phase 1* is the socio-economic policy agenda of the **Political Platform of the Royal Government of Cambodia of the Seventh Legislature of the National Assembly for Nation Building and Defense 2023-2028** and incorporates the Political Platform's six priority policy programs. Actions under the Political Platform clearly identify persons with disabilities as part of broader groups of vulnerable people. Three of the six prioritised programs are especially relevant to the inclusion of persons with disabilities: providing healthcare services towards Universal Health Coverage (UHC); providing nationwide vocational and technical training to youth from poor and at-risk households; and, institutionalising national social security program for the poor households, vulnerable members of poor households, and at-risk households.

The RGC's **Roadmap Towards Universal Health Coverage 2024-2035**, launched on 23 May 2024, reaffirms the first priority of *Pentagonal Strategy*, and will contribute to the goal of "leaving no one behind", including persons with disabilities. The *Roadmap Towards UHC* was designed in line with the NSPPF. It defines the strategic path to UHC in the period 2024 to 2035 through mapping out strategic actions and priority targets. Strategic actions include: the gradual development of the social health protection system; strengthening the capacity to deliver health services in both the public and private sectors; and, reducing out-of-pocket health expenditure as well as increasing efficiency in health expenditures.[117]

The **Cambodian Sustainable Development Goals Framework 2016-2030** (CSDGs) are the nationalised framework based on the 2030 *Agenda for Sustainable Development* (SDGs). The SDGs pledge to leave no one behind, including persons with disabilities and other disadvantaged groups, and has

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[117] For more information, see *Roadmap Towards Universal Health Coverage 2024-2035*, prepared by the National Social Protection Council, April 2024

recognised disability as a cross-cutting issue to be considered in the implementation of all of its goals. The CSDGs also place a high emphasis on leaving no one behind so that all Cambodians share in the country's future development and prosperity. The CSDGs include an additional goal related to mine action and victim assistance.[118]

Cambodia's Sustainable Development Goals

Source: UNDP Cambodia

As of October 2024, a new rights-based **Law on the Protection of the Rights of Persons with Disabilities** (Disability Law) has been drafted and is awaiting adoption. The new Disability Law will replace the 2009 *Law on the Protection and the Promotion of the Rights of Persons with Disabilities*. The purpose of the new Disability Law, as outlined in the draft, is to protect, promote and ensure the full and equal enjoyment of all rights and fundamental freedoms by all persons with disabilities on an equal basis with others. The law seeks to eliminate discrimination of any kind to promote the full and effective inclusion of persons with disabilities and protect the wellbeing of persons with disabilities living independently and with dignity. The draft Disability Law outlines responsibilities for Disability Inclusion stating that "Relevant public and private legal entities at all levels have a responsibility to implement this Law by integrating appropriate disability inclusion provision into policies, programs, action plans and annual budgets in accordance with the National Disability Strategic Plan, and legal documents related to disability...[and] should facilitate full participation of persons with disabilities in the preparation of economic, social, and cultural development projects...."[119]

A key framework to enhance disability inclusion is the whole-of-government **National Disability Strategic Plan 2024-2028** (NDSP3). The NDSP3's seven (7) strategic directions reflect the priorities outlined in strategic plans of RGC' Ministries and institutions.

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[118] For more information, see *Cambodian Sustainable Development Goals (CSDGs) Framework 2016-2030*, approved by the Council of Minister, 19 November 2018

[119] Law on the Protection of the Rights of Persons with Disabilities, unofficial translation of draft dated 10 December 2021

In 2012, Cambodia ratified the **Convention on the Rights of Persons with Disabilities** (CRPD). The CRPD promotes the social model where persons with disabilities are subjects of human rights, active in the decisions that affect their lives and empowered to claim their rights. The CRPD does not introduce any new rights, but rather sets out the RGC's obligations to meet existing civil, cultural, economic, political and social rights in the specific context of persons with disabilities.

In addition, as a Member State of the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP), Cambodia adopted the **Incheon Strategy** in November 2012 as part of the launch of the third Asian and the Pacific Decade for Persons with Disabilities 2013-2023. The *Incheon Strategy* provided the first set of regionally agreed disability-inclusive development goals. Cambodia has also adopted the Jakarta Declaration on the Asian and Pacific Decade of Persons with Disabilities 2023–2032, and renewed its commitment to the Incheon Strategy and the Beijing Declaration, including the **Action Plan to Accelerate the Implementation of the Incheon Strategy**. The 2019 ASEAN **Enabling Master Plan 2025: Mainstreaming the Rights of People with Disabilities** reaffirms Member States commitment to disability inclusion. The Master Plan includes 27 commitments linked to eight (8) principles of the CRPD.

Annex 4: Other relevant legal and policy frameworks to promote disability inclusion

Other national legal and policy frameworks

Other national legal and policy frameworks with the potential to enhance disability inclusion, equity and rights include: MoSVY's *Strategic Plan for Social Development, Veterans and Youth Rehabilitation 2024-2028* and *Cambodia Child Protection Monitoring Framework*; and, the *National Programme for Sub-National Democratic Development*.

MoSVY's **Strategic Plan for Social Development, Veterans and Youth Rehabilitation 2024-2028** includes strategies that promote disability mainstreaming as well as disability specific interventions, such as enhancing employment opportunities and physical rehabilitation services. In addition, MoSVY's **Cambodia Child Protection Monitoring Framework** includes specific indicators relating to children with disabilities.

The second phase 10-year action plan for 2021-2030 to continue implementation of the **National Programme for Sub-National Democratic Development** (NP-SNDD2) is especially relevant to disability-inclusive local governance and community development as it recognises the need for equal opportunity for all citizens to participate in local development. The RGC's vision for the NP-SNDD2 is that citizens have improved access to public services and benefit from local development provided by subnational authorities in a socially equitable and inclusive manner.[120]

Summary of other national legal instruments to enhance disability inclusion

Title	Reference / Date
Letter of Ministry of Health on Provision of Free Health Care Services for Poor Persons with Disabilities	006 ABS.CHPS 30 January 2009
Sub-Decree on Employment Quota for Persons with Disabilities (Full title: Sub-Decree on Determining the Rate and Formality of Recruitment of Disabled Person)	108 ANKr.BK 30 August 2010
Sub-Decree on Policy to Support Poor Persons with Disabilities in the Community	137 ANKr.BK 27 June 2011
Sub-Decree on Identification of Poor Households	291 December 2011
Inter-ministerial Circular on Reasonable Accommodation on Employment of Persons with Disabilities	005 MoSVY.SRNN 20 September 2012
Prakas on Organisation and Functioning of Disability Action Working Groups in Ministries, Institutions	001 DAC.BrK 09 May 2014
Prakas on Organisation and Functioning of Disability Action Council at Municipal/Provincial Level	002 DAC.BrK 09 May 2014
Sub-Decree on Establishment of the Institute for Special Education	117 / 25 July 2017
Prakas on distribution of money from ministries, public institutions and individuals who have not fulfilled the recruitment of persons with disabilities at their institutions	30 May 2018
Prakas on the implementation of policy for poor persons with disabilities in community who received state rehabilitation service	16 March 2020
Prakas on Promulgation of The Social and Rights-Based Approaches to Disability Identification Guideline	August 2020
Inter-Ministerial Sub-decree on providing driving licenses for persons with disabilities (MoH, MoPT and MoSVY)	03 December 2020

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[120] For more information, see www.ncdd.gov.kh/en/

Cambodia also has obligations under other international treaties and frameworks with the potential to promote the rights and inclusion of persons with disabilities.

Cambodia is a signatory to the ***Marrakesh Treaty*** which aims to facilitate access to published materials for people with a range of disabilities that interfere with the effective reading of printed material, such as: people who are blind or visually impaired; and, people with a physical disability who may not be able to hold printed materials.

The RGC also has international obligations applicable to addressing the rights and inclusion of adults and children with disabilities under various instruments of international humanitarian and human rights law to which it is party: ***Convention on the Rights of the Child*** (CRC); ***Convention on the Elimination of All Forms of Discrimination Against Women*** (CEDAW); ***International Covenant on Economic, Social and Cultural Rights*** (ICESCR); and, the ***Anti-Personnel Mine Ban Convention*** (APMBC). Article 6.3 of the APMBC requires that "each State Party in a position to do so shall provide assistance for the care and rehabilitation, and social and economic reintegration, of mine victims (….)". As a State Party, Cambodia has recognised its obligation to assist landmine survivors and their families in the broader context of disability and development.

Annex 5: Disability-inclusive language

The following table presents recommended language to enhance disability inclusion and language to be avoided.[121]

Recommended language	Language to be avoided	Recommended Khmer language
person with disability person with [type of impairment] persons with disabilities people with disabilities	disabled person, handicapped, person with special needs, atypical, person living with a disability, differently abled, people of all abilities, people of determination, person living with a disability	ជនមានពិការភាព
person without disability the rest of the population	normal, healthy, able-bodied, typical, whole, of sound body/mind	ជនមិនមានពិការភាព ប្រជាជនផ្សេងទៀត
have [disability/impairment/condition]	suffer from, afflicted by, stricken by, troubled with	មាន (ពិការភាព ឬការខូច ឬ លក្ខខណ្ឌណាមួយ)
person with an intellectual impairment person with an intellectual disability	retarded, simple, slow, afflicted, brain-damaged, intellectually challenged, subnormal, of unsound mind, feeble-minded, mentally handicapped	ជនមានពិការភាពសតិបញ្ញា ជនមានភាពយឺតសតិបញ្ញា
person with a psychosocial disability	insane, crazy, maniac, psycho, hypersensitive, lunatic, demented, panicked, agitated, mentally deranged, mentally ill	ជនមានពិការភាពចិត្តសង្គម
deaf person person who is deaf person with a hearing disability person with a hearing impairment person with hearing loss deafblind person	the deaf, hearing impaired, deaf and dumb, deaf and mute	ជនមានពិការភាពថ្លង់ ឬ ជនដែលថ្លង់ គ ឬ ជនមានពិការភាពស្តាប់ ជនមានភាពបាត់បង់ការស្តាប់

[121] *Disability-Inclusive Language Guidelines,* United Nations Office at Geneva, 2021

Recommended language	Language to be avoided	Recommended Khmer language
blind person person who is blind person with a vision/visual disability person with a vision/visual impairment person with low vision deafblind person	the blind, partially-sighted	ជនមានពិការភាពភ្នែក ជនមានពិការភាពមើលមិនឃើញ ជនមានពិការភាពភ្នែកខ្សោយ ជនមានពិការភាពថ្លង់ និង ពិការភ្នែក
person with a physical disability person with a physical impairment	crippled, invalid, deformed, lame, handicapped, physically challenged, person with physical limitations, limp	ជនមានពិការភាពផ្នែករាងកាយ
wheelchair user person who uses a wheelchair person with a mobility disability person with a mobility impairment person using a mobility device	confined/restricted to a wheelchair wheelchair-bound	ជនមានពិការភាពប្រើប្រាស់កៅអីរុញ ជនមានពិការភាពដែលពិបាកក្នុងការធ្វើចលនាឬការប្រែប្រួល
person of short stature little person	midget, dwarf, stunted	ជនមានពិការភាពផ្នែករាងកាយ
person with Down syndrome	mongoloid, special person	ជនមានពិការភាពសតិបញ្ញា ជនមានពិការភាពដោនស៊ីនដ្រូម
accessible parking parking reserved for persons with disabilities accessible bathroom	disabled/handicapped parking handicapped bathroom	ចំណតឈ្នួលរថយន្ត ឬចំណតរថយន្តដែលមានលទ្ធភាព ចំណតសម្រាប់បម្រុងទុកទៅឲ្យជនពិការ បន្ទប់ទឹកដែលមានលទ្ធភាព

Annex 6: Checklist for accessible meetings, conferences and other events[122]

		Question		Comments
	Physical accessibility			
1	Do outside pavements have curb ramps (if needed)?		Yes/No	
2	Is the entrance gate large enough (at least 100cm)?		Yes/No	
3	Is there any obstacle on floor close to entrance gate (thresholds, trenches, grids, holes in ground, etc.)?		Yes/No	
4	Is there any obstacle on floor between entry gate and main entrance of building (steps, narrow path, protruding objects, uneven soil, holes in ground, trenches, etc.)?		Yes/No	
5	For people coming by taxi/tuk tuk, is there a drop-on/off space close to main entrance (less than 30m)?		Yes/No	
6	For people coming with a private car, is there at least one parking lot for persons with disabilities?		Yes/No	
7	Is the parking lot big enough (360cmx600cm)?		Yes/No	
8	Is there enough space beside parking lot to get in/out of car (120cm)?		Yes/No	
9	Is parking lot close enough to main entrance of building (less than 50m)?		Yes/No	
10	Is path between parking lot and entrance clear of obstacles, even, flat, large enough (at least 120cm)?		Yes/No	
11	Is there also a ramp in place in front of main entrance (if needed)?		Yes/No	
12	Is the main entrance door easy to open and use?		Yes/No	
13	Are there accessible toilets close to reception area?		Yes/No	
14	Are accessible elevators close to reception area, if any?		Yes/No	
15	If there are steps, is there an accessible ramp as well? (wide at least 120 cm, slope less than 8%)		Yes/No	
16	If building has more than one floor, is there an accessible elevator in place? (door large at least 95cm)		Yes/No	
17	Does accessible elevator connect all floors of building (including mezzanines)?		Yes/No	
18	Is there at least one accessible toilet per floor?		Yes/No	
19	Is door of toilet accessible? (net passage width at least 90-95cm, not too hard to push/pull or sliding, handle at a convenient height (85-110cm))		Yes/No	
20	Is accessible toilet reachable without having to climb stairs?		Yes/No	
	Communication and materials			
1	Invitations/registration forms request information on accessibility requirements		Yes/No	
2	Sign interpreters booked		Yes/No	
3	Meeting documents/PowerPoint presentations follow standard guidance on accessibility		Yes/No	
4	Documents available in other accessible formats, if required		Yes/No	

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[122] Trainer's Manual

Annex 7: Directory of selected organisations and service providers working at subnational level

This directory of selected entities, committees and service providers working at the national and/or subnational level indicates the responsibilities/activities under the seven (7) strategic directions of the NDSP3. It aims to serve as a resource for referring persons with disabilities to appropriate services and to enhance disability inclusion. Annex 2 provides more information on OPDs, NGOs and IOs.

Organisation/committee/ service provider	Strategic direction						
	Work, employment & economic security	Health, rehabilitation & wellbeing	Education & lifelong learning	Social protection & standard of living	Inclusive & accessible communities	Security, rights & justice	Disaster risk & climate change
Governmental administrations / committees / service providers							
Commune/Sangkat Council				*	*	*	*
Provincial/District Departments of line-Ministries	*	*	*	*	*	*	*
PDAC	*	*	*	*	*	*	*
CCWC	*	*	*	*	*	*	*
Representative of persons with disabilities							
OPDs/WWDFs					*	*	
CDPO					*	*	
Association of the Blind in Cambodia (ABC)					*		
Spinal Cord Injury Association					*		
NGOs							
Action on Disability & Development (ADD)			*				
CARE Cambodia						*	
Centre for Child and Adolescent Mental Health (CCAMH)		*					

Organisation/committee/ service provider	Strategic direction						
	Work, employment & economic security	Health, rehabilitation & wellbeing	Education & lifelong learning	Social protection & standard of living	Inclusive & accessible communities	Security, rights & justice	Disaster risk & climate change
Deaf Development Program		*			*		
Disability Development Services Program (DDSP)		*			*		
Epic Arts					*		
Exceed Worldwide		*	*		*		
Fred Hollows Foundation		*					
Humanity & Inclusion (HI)		*			*		
Krousar Thmey			*		*		
OIC Cambodia		*					
PAfID	*				*		
Rabbit School			*				
Safe Haven		*					
Transcultural Psychosocial Organization (TPO)		*					
International organisations							
ICRC		*			*		
UNDP				*	*	*	*
UNFPA						*	
UNICEF		*		*	*		
UNOHCHR						*	
WHO		*			*		

Annex 8: Selected resources and guidance

- *A guide for ensuring inclusion and equity in education*, Education 2030, UNESCO, 2017

- *Accessible meetings and events: a toolkit*, CBM, May 2021

- *Basic Package of Interventions for Rehabilitation: A Toolkit for Primary Care Professionals, Information Sheet*, WHO, 22 August 2024

- *Capacity Building for Local Governance in Cambodia*, World Bank, 2020

- *Changing Perceptions – Empowering teachers: Interpersonal communication and community engagement to support inclusive education*, UNICEF Europe and Central Asia Region, January 2023

- *Disability Inclusion in Gender-Based Violence Programming: promising practices and innovative approaches from UNFPA Asia and the Pacific Country Office*, UNFPA, July 2023

- *Disability Inclusion Trainer's Manual: A guide for supporting training capacity for disability inclusion*, Light for the World, DAC and UNDP

- *Disability Inclusive Budgeting from a Child Rights Perspective: Pathways of Change for UNICEF and Partners*, UNICEF Eastern and Southern Africa Regional Office, Social Policy and Disability Inclusion, Technical Note, March 2024

- *Disability inclusive disaster recovery: Guidance note*, Global Facility for Disaster Reduction and Recovery, 2020

- *Disability Inclusive WASH Practices: Including people with disabilities in UNICEF Water, Sanitation and Hygiene (WASH) Programming*, UNICEF

- *Disability-Inclusive Development Toolkit*, CBM, January 2017

- *Disability-inclusive Disaster Risk Reduction (DIDRR): It is Our Responsibility*, UNESCAP

- *Disability-Inclusive Disaster Risk Reduction (DIDRR): It Is Our Responsibility – Advanced*, UNESCAP

- *Disability-Inclusive Health Services Toolkit: A Resource for Health Facilities in the Western Pacific Region*, WHO Regional Office for the Western Pacific, Manila, Philippines, 2020

- *Disability-Inclusive Health Services Training Package: A Companion to the Disability-Inclusive Health Services Toolkit*, WHO Regional Office for the Western Pacific, Manila, Philippines, 2022

- *Disability-Inclusive Language Guidelines*, United Nations Office at Geneva, 2021

- Finance for All: A Practical Guide to Disability Inclusion for Financial Services Providers in Cambodia, Good Return and Chamroeun Microfinance, March 2023

- Good Practice Guidelines for Engaging with People with Disability, Commonwealth of Australia (Department of Social Services), 2023

- *Guide on Inclusive Technical and Vocational Education and Training (TVET) for People with Disabilities, People in Need and Agile*, 2023

- *Guideline on the process of establishing One-Stop Service Center for survivors of gender-based violence*, MoWA, 2022

- *Guidelines for National Social Assistance Programme Framework for Family Package* (available in Khmer only)

- *Guidelines for National Social Assistance Programme Framework for Emergency Response* (available in Khmer only)

- *Handbook for Trainers on Incorporating Disabilities into Government in Sub-National Administration*, UNICEF and Ministry of Interior, 2016

- How to Design Disability-Inclusive Social Protection, UNESCAP, Bangkok, 2021

- *Inclusive Education – Including children with disabilities in quality learning: what needs to be done?* UNICEF, September 2017

- *The Inclusion Imperative: Towards Disability-inclusive and Accessible Urban Development: Key Recommendations for an Inclusive Urban Agenda*, CBM and Global Network on Disability Inclusive and Accessible Urban Development, 2016

- *International Principles and Guidelines on Access to Justice for Persons with Disabilities*, Special Rapporteur on the rights of persons with disabilities, Committee on the Rights of Persons with Disabilities and Special Envoy of the Secretary-General on Disability and Accessibility, Geneva, 2020

- *Mainstreaming Disability Inclusive Disaster Risk Reduction in Community Development: Guidance for Planning and Practice*, CBM, 2023

- MAKE IT COUNT: Guidance on disability inclusive WASH programme data collection, monitoring and reporting, UNICEF, 2021

- Making lifelong learning a reality: a handbook, Education 2030, UNESCO, 2022

- *Manual for the Identification of Poor Households Procedure*, MoP, 2022

- *National situational analysis and assessment of the impact of the COVID-19 crisis on the rights and wellbeing of persons with disabilities and their access to services and supports*, February 2021

- *Practical Guideline on Legal Aid for Persons with Disabilities in Criminal Justice*, UNDP, 2020 [available in English and Khmer]

- *Practice note: Collecting and using data on disability to inform inclusive development*, Plan International Australia and CBM Australia-Nossal Institute Partnership for Disability Inclusive Development, July 2015

- *Preparation and Development of Commune Development Plans for All*, CDPO and LFTW, December 2020

- *Promoting Disability Inclusion and Information Accessibility in Cambodia*, UNESCO News, 5 April 2024

- *Reasonable accommodation at work – Guidelines and good practices*, Directorate-General for Employment, Social Affairs and Inclusion, European Commission, March 2024

- *Reducing stigma and discrimination against children with disabilities*, UNICEF

- *Social and Behavioural Change Interventions to Strengthen Disability-Inclusive Programming: A synthesis of the evidence*, UNICEF, November 2020

- *Taking action to achieve inclusive WASH*, Global Water and Sanitation Partnership

- Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities, Disability Action Council Secretariat (DAC-SG), 2018 (unofficial translation)

- What you need to know on lifelong learning, UNESCO, 30 August 2024

- *Women and Young Persons with Disabilities: Guidelines for Providing Rights-Based and Gender-Responsive Services to Address Gender-Based Violence and Sexual and Reproductive Health and Rights*, UNFPA, November 2018

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