Water and sanitation for disabled people and other vulnerable groups:

Report of Conference and Workshop in Cambodia

9th – 10th March 2006

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Glossary

CDPO  Cambodia Disabled People’s Organisation
DAC   Disability Action Council
DDSP  Disability and Development Services Pursat
DFID  Department for International Development
DPO   Disabled people’s organisation
DTW   Development Technology Workshop
MOSVY Ministry of Social Affairs Veteran and Youth Rehabilitation
MRD   Ministry of Rural Development
NGO   non-government organisation
WATSAN water and sanitation
WEDC  The Water, Engineering and Development Centre, Loughborough University
WSP   Water and Sanitation Programme
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1. **Background**

1.1 **The research project**

The research project KAR R8059: 'Water supply and sanitation, access and use by physically disabled people' was funded by the UK Department for International Development (DFID), and led by WEDC (see the project webpage, address on p.15). The main output of the research was a resource book entitled "Water and sanitation for disabled people and other vulnerable groups: designing services to improve accessibility", which provides information and ideas for service providers to make facilities and services more accessible for disabled people and other vulnerable groups. Distribution of the resource book has been wide: 635 copies have been distributed to key agencies globally; it is available to download from the project webpage (see Section 4.2 on p.15), and information about the publication has been circulated globally.

1.2 **Dissemination phase**

Dissemination consists of more than just distributing books and information, however. To achieve the overall aim of the research, i.e. to contribute to poverty reduction, actual practical changes need to come about. For most people, it requires a major leap in thinking between receiving new information to applying it in practice. More proactive measures are therefore needed to support people to move towards practical implementation.

Funding was therefore approved by DFID for follow-up dissemination activities between July 2005 and March 2006. Activities include producing accessible versions of the resource book, including electronic format and a translation, and organising presentations, discussions and workshops in Cambodia and Uganda. These two countries were selected for dissemination activities because of strong contacts with relevant implementers in the country, which were made during the original field-work for the research in 2003.

This interim report draws together lessons from dissemination activities in Cambodia. A final report on all the dissemination activities will be produced after completion of the dissemination phase in April 2006.

2. **Dissemination activities in Cambodia**

Dissemination activities in Cambodia centred around a one-day Conference in Phnom Penh, followed by a one-day practical workshop. These took place on the 9th and 10th March, 2006.

The objectives of dissemination were:

1. Distribution of the resource book and CD of “Water and sanitation for disabled people and other vulnerable groups: designing services to improve
accessibility”. Fifty copies of the book and 30 CDs were distributed to participants and relevant agencies.

2. Advocacy – to increase awareness and understanding of the importance of improving accessibility for disabled people and vulnerable groups among the WATSAN and disability sectors,

3. Application – to encourage people to think about how they could apply or adapt the information and ideas presented at the Conference in their own work.

The Conference and workshop were jointly hosted by two major agencies: Disability Action Council (DAC) from the disability sector, and the Water and Sanitation Programme (WSP) of the World Bank from the water and sanitation (WATSAN) sector. The practical organisation of the workshop was undertaken by DAC, including all the preparation, communications and logistics.

2.1 Conference

The one day Conference held on 9th March 2006 was entitled “Water and sanitation for disabled people and other vulnerable groups: improving access and inclusion.”

2.1.1 Purpose:

The purpose of the conference was to introduce the issues and problems of accessing and using WATSAN services and facilities for disabled people and other vulnerable groups, including solutions and examples of good practice for making WATSAN facilities more accessible and inclusive in Cambodia.

2.1.2 Objectives:

By the end of the conference, participants would be expected to have a better understanding of:

- The problems facing disabled people, elderly people and other vulnerable groups in accessing water and sanitation,
- Challenges facing the WATSAN sector in serving vulnerable groups, and
- Possible solutions to address these issues in Cambodia.

2.1.3 Target audience:

Participants were from a wide range of relevant organisations, including WATSAN sector professionals, disabled people’s organisations and disability service providers, and organisations representing or working with other socially excluded groups, e.g. women, poor farmers.

2.1.4 Outputs:

The following documents were produced as a result of the Conference
• Conference report, including a list of key issues and practical ideas for implementation.

• Electronic copies of workshop presentations. (available on CD from DAC, address on p.23).

2.1.5 Description

(See Appendix A2 for the full Conference programme).

The morning consisted of a series of presentations, whilst the afternoon provided an opportunity for participants to discuss many of the issues raised in the morning, and to exchange experience between participants from different sectors.

Breaks were deliberately long, as this was a valuable time for informal discussion and networking. Display boards and space was also provided for NGOs to display information about their work, including posters, photos and equipment, relevant to the conference theme.

Opening session

The Chairman in the morning was the Executive Director of DAC, Mr Long Sothy, whose welcome remarks were followed by presentations from:

Mr Ngin Saorath, Director of Cambodia Disabled People’s Organisation (CDPO) who emphasised the importance of addressing the needs of disabled people and the role of CDPO in representing the voice of disabled people in Cambodia (Appendix A3).

Mr Bob Reed, Senior Programme Manager, WEDC, who highlighted some key reasons why it is important for the WATSAN sector to address the issue of disability.

The Conference was then formally opened by His Excellency Ith Sam Heng, Minister of the Ministry of Social Affairs Veteran and Youth Rehabilitation (MOSVY), whose speech emphasised the importance of this conference in helping Cambodia achieve its Millennium Development Goals, by making services accessible to the most vulnerable of Cambodia’s citizens. (Appendix A4).

Keynote presentations

Informed Choice Manual on Rural Household Latrine Selection

Dr Mao Saray, Director of Rural Health Care, Ministry of Rural Development (MRD).

A new manual on sanitation informed choice was introduced, which presents a range of options for users to select from, according to their needs and available resources, and includes a page of options that are suitable for disabled people and elderly people. (Appendix A5).
Water and sanitation issues for women with disabilities in Kompong Speu
Ms Prak Sopho, Disabled Women’s Association, Kompong Speu Province.
The presentation was about the findings of a survey identifying the problems
that disabled women in the rural areas have accessing water and sanitation
facilities. (Appendix A6).

Water and sanitation for disabled people and other vulnerable groups –
designing for improved accessibility
Hazel Jones, Assistant Programme Manager, WEDC.
The presentation was based on recent research led by WEDC, and introduced
a resource book for implementers, giving an overview of practical solutions
and approaches relevant to Cambodia, and examples of how they have
started to be put into practice. (Appendix A7).

Promoting access to water and sanitation in mine-affected communities
in Pursat
Khiev Charya, Development Technology Workshop (DTW) and Nuon Chanta,
Disability Development Services Pursat (DDSP).
Presenters gave an overview of the work of DDSP, particularly focusing on a
collaborative pilot project with DTW, to implement water and sanitation for dis-
abled people in Pursat Province. (Appendix A8).
Following the presentations, participants had an opportunity to make com-
ments and ask questions of the presenters, before breaking for lunch.

Small group discussions

The afternoon was chaired by Bob Reed, WEDC. Participants were divided
into mixed, multi-sectoral groups, and given a set of questions:
1. Individual introductions, including their name, organisation and their job.
2. Discuss what the next steps should be in moving towards equal access to
   water and sanitation for disabled people.
3. What could each group member do as an individual (not their organisa-
   tion) do to contribute to the steps identified in question 2.
The key points were summarised and presented in a plenary session. (See
Appendix A9 for a summary of points from the groups).

Dr Mao Saray from the Department of Public Health, MRD gave the closing
speech (Appendix A10)/

2.2 Workshop

The one-day workshop was entitled “Water and sanitation for disabled people
and other vulnerable groups: developing practical approaches”. It was held on
10th March, and took up the issues raised at the previous day’s Conference.
(See Appendix A11 for the workshop programme).
2.2.1 **Purpose**

The purpose of the workshop was to explore opportunities for the development of practical approaches to the issues of access and inclusion in WATSAN facilities and programmes, through collaboration between the disability sector and the WATSAN sector.

2.2.2 **Objectives**

By the end of the workshop, participants would have a better understanding of:
- Each others’ sector,
- Opportunities for collaboration,
- Plans and practical starting points for implementation to improve inclusion.

2.2.3 **Target audience**

Participants were implementers from a range of relevant stakeholders:
- WATSAN sector personnel with an interest in exploring collaborative activities;
- Disabled people and practitioners from the disability sector, including disabled people’s organisations (DPOs) and disability service providers, from national to commune level.

2.2.4 **Description**

All participants had attended the Conference on the previous day, so the workshop activities were designed to explore the same issues in more depth, building on the experience and interests of participants.

Further opportunities were provided for participants from the different sectors to get to know each other, and to learn about each others’ experience.

Small group discussions were held in Khmer language and English language groups, on the following themes:
1. Policy/Strategy Planning,
2. Information dissemination/advocacy
3. Development of knowledge and skills

The focus of the discussions was on practical steps that individuals and organisations could initiate in their own work or in collaboration with other agencies. There was feedback from the groups in a plenary session. (See Appendix A12 for a summary of points from the groups).

In the final session, a practical Action-plan was produced by participants as a whole, outlining what organisations and participants would do next (See Section 2.6.7).
2.3 Preparation and discussions

WEDC researchers were in Phnom Penh from 1st March until the Conference. The time was spent:

- In discussion with conference organisers at DAC, to clarify, plan and prepare for the conference. This was the first time of meeting, as communication between WEDC and DAC had until then been via email only;
- Contacting agencies via phone and visits to mobilise participation, particularly from the WATSAN sector;
- Meeting interested agencies, to exchange information and update each other about recent developments, which enabled WEDC to better prepare for the Conference. (See Appendix A13 for notes from selected meetings).

After the Conference, time was also available for follow-up discussions with individual agencies/groups about further collaboration, proposal design, pilot ideas, etc.

2.4 Achievements

The Conference and workshop largely achieved their objectives:

Raised profile and awareness of the issue: The Conference was attended by over 80 participants, including a government minister and senior government staff, international donors, UN and other international agencies, international and local non-government organisations (NGOs). Participants were from the WATSAN sector, rural development, and the disability sector, including representatives of disabled people at National level.

The issue of water and sanitation for disabled people and other vulnerable groups received the highest endorsement, representation and support, through the opening of the Conference by the Minister for MOSVY, presentations by two government officials from MRD, and being co-hosted by WSP and DAC. Statements from relevant government departments recognising the importance of addressing the needs of vulnerable groups, and information about actions undertaken.

Dissemination of information about possible solutions and agencies with expertise in this field, resulting in increased knowledge and recognition of the importance of the issue among participants; increased interest in the issue among relevant agencies.

Networking: The conference provided an opportunity for a wide range of individuals and organisations from different sectors to get to know each other, to share information and ideas, to discuss and exchange views, and to explore ideas for practical collaboration between the WATSAN and disability sectors.

A list of ideas for practical actions was produced during both the conference and workshop (Appendix A9, A12), which could be used among planners and service providers in the future, for information and awareness raising in the sector, and as starting points for developing implementation.
Several organisations and individuals made commitments to practical follow-up tasks (see Table 1).

2.5 Constraints to achieving the objectives

The Conference and workshop objectives were largely achieved, although the full benefits would have been even greater if not for the following constraints:

- Some invited participants did not attend, because of conflicting commitments, but also possibly because it is low priority. However, several of those unable to attend, did arrange separate meetings with WEDC to discuss the issue, e.g. DFID, World Bank.
- Many of the participants were not in a position to make commitments or decisions on behalf of their organisation.
- It takes time for the process of new ideas to become part of a person’s way of thinking, and gradually to re-emerge as their own ideas. This is particularly true for an issue like disability, with so much myth, misinformation and stigma attached. Consequently most participants tended to think in general terms of ‘awareness-raising’, make sweeping statements about what should happen (i.e. what other people should do), rather than focusing on practical and realistic implementation, within their own capacity.
- Difficulties in communicating with people from a different sector, because of differences in perspective, in the way language is used, different ways of working, etc.

2.6 Recommendations agreed at the Conference for future activities in Cambodia

The following is a summary of recommendations to promote accessibility in the WATSAN sector, that emerged from group discussions (Appendix A9 & A12).

2.6.1 Policy/ Strategy planning

- WATSAN policies and strategies need to be reviewed to see how disability and vulnerability can be included, at National, provincial and community level. This needs to done by the WATSAN sector in consultation with DPOs and representatives of vulnerable groups. Policy and strategy review are also needed within participants’ own organisations.
- A watch-dog body/ mechanism needs to be established to monitor this.

2.6.2 Advocacy/ awareness-raising

- Awareness-raising is needed, to draw attention to the issue among the WATSAN sector, and to improve their understanding of the benefits and
cost-effectiveness of accessible/inclusive design. Among the disability sector there is a need to stimulate demand, and to promote understanding of the benefits of safe water and sanitation.

- The importance of lobbying for accessibility in schools, including accessible school toilets, was particularly emphasised.
- Advocacy and awareness-raising need to continue at all levels, at policy and decision-making level, at organisational/institutional level, and at local District and community level. A range of approaches and media need to be used, including existing communication networks, popular media, meetings and workshops, posters and leaflets.

### 2.6.3 Information sharing

- There is a need to disseminate information from the conference and workshop both within participants' own organisations and more widely. Local translations and versions of materials are also needed, with different formats for different audiences. This will contribute to stimulating demand, and improve understanding of what solutions are possible.
- Existing information about good practice needs to be documented and made easily available, which can be done through existing networks.
- All participants recognised the need for improved communication and understanding between technical WATSAN sector agencies and disability organisations, including information sharing and exchange visits.

### 2.6.4 Development of appropriate technology options

- The development of appropriate and accessible facilities needs to be based on a clearer understanding of what problems disabled people face, and what already works for them. There was agreement that technical specialists and disabled people need to collaborate to develop appropriate technical options, and to understand how to modify existing facilities, as all recognised that no single agency would be able to carry this out alone.
- Examples of accessible facilities need to be constructed as demonstration models, which would serve to trial design options and raise awareness of the benefits. The solutions identified should then be incorporated into standard designs.

### 2.6.5 Development of inclusive planning/service delivery

- Suggestions were made for incorporating disability/vulnerability issues at all stages of the project cycle in WATSAN projects. Questions need to be included in initial baseline surveys about disabled people and their needs; indicators need to be developed to monitor the benefits to disabled people; specific opportunities should be provided for disabled people to participate in project planning and design.
2.6.6 Capacity building

- Collaboration is needed between technical WATSAN sector agencies and disability organisations, to provide expertise to the other sector. This can be through training, exchange visits and practical collaboration.

- Many disabled people and DPOs need information and knowledge about possible solutions to make facilities more accessible, so that they can participate more actively in WATSAN issues,

- For many disabled people and their families, information about the benefits of WATSAN, i.e. basic health and hygiene promotion are needed.

2.6.7 Action plans for individual organisations

Several individuals and organisations made commitments to carry out specific practical activities (see Table 1). There was a strong focus on developing and maintaining networks of communication, so that different organisations know who to contact, if they wish to share or access relevant information or advice. Both DAC and the WATSAN working group acknowledged that could play an important role in facilitating this.

NGOs such as DTW, DDSP, Handicap International and the Centre for Development have already initiated work in this area, and made practical suggestions for follow-up networking activities. (See Appendix A13: Notes of meetings for more details).

Table 1: Next steps for individual organisations

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<tr>
<th>Action</th>
<th>Who</th>
<th>When</th>
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<tr>
<td>1. Collect information, translate, and write workshop report</td>
<td>WEDC &amp; DAC</td>
<td>by end of April</td>
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<tr>
<td>2. Sanitation manual launched</td>
<td>MRD</td>
<td>24th March 2006</td>
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<tr>
<td>3. Translate WELL Briefing Note into Khmer</td>
<td>CFD</td>
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<tr>
<td>4. Follow up conference to map progress and experiences in one year’s time</td>
<td>HI</td>
<td>2007</td>
</tr>
<tr>
<td>5. Existing WATSAN baseline survey that includes questions on disability available now to interested organisations</td>
<td>Vince at DTW</td>
<td>From now</td>
</tr>
<tr>
<td>6. Project in Pursat to hold regular workshops which could be open to a wider audience</td>
<td>DDSP/DTW (Vince)</td>
<td></td>
</tr>
<tr>
<td>7. WATSAN working group at MRD to invite disability organisations to attend</td>
<td>WATSAN working group, DAC Children’s Committee</td>
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<tr>
<td>8. Display area to trial technologies under consideration.</td>
<td>DTW</td>
<td>Await further news</td>
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3. Lessons learned

This section summarises key learning points from both the process of activities undertaken, and from the recommendations and action-points that emerged from conference and workshop discussions.

It was important for the Conference to have major players from each sector as co-hosts, which gave it a higher profile and additional credibility, and undoubtedly helped to attract participation from both sectors. It also provided a demonstration of what is continually being recommended, i.e. the importance of inter-sectoral collaboration. This was also reflected in the balance of representation at government level, and balance of speeches and presentations from both the WATSAN and disability sectors.

It was important to spend time beforehand contacting relevant agencies – particularly those in the WATSAN sector – by phone and by visiting in person, to explain the relevance and importance of the conference, and to encourage them to attend.

The suggestion by WEDC to bring together a range of vulnerable groups, including elderly people and people living with HIV/AIDS, was not taken up by local partners. This may be because it is difficult for special interest groups to see beyond their differences and special needs, to the issues that they have in common. It is already a challenge to make links between two unfamiliar sectors, so to add further dimensions could be too great a challenge. Further, marginalised/stigmatised groups who are struggling for recognition and to make their voice heard may be reluctant to ally with other stigmatised groups.

The intended aim of producing ideas for pilot projects was unrealistic in the time-frame, as the process of developing practical implementation takes time. Cambodia was selected for these dissemination activities because of innovative activities and forward thinking among a few implementers in the country. However, it must still be acknowledged that for the overwhelming majority of participants these issues were completely new, so were starting from scratch.

The structure of the workshop could be improved to force participants to think and act in concrete practical terms. This could be done by making activities more task focused, e.g:

- Based on the resource book, adapt a page of visual materials for use in one's own work, e.g. an advocacy campaign, community-level consultation, etc. Take an assessment/audit checklist from the resource book, and adapt it for one's own community
- Design questions for a baseline survey
- Training type activities, e.g. role play – design a latrine with requirements from the perspectives of different stakeholders (women, disabled people, elderly people, engineers, donors, etc).
4. References

4.1 Documents


Centre for Development (2006) Selection of background documents of the project “Capacity building and provision of basic services in Cambodia Water User Groups”. Centre for Development: Cambodia.


David, V. (undated) Projet Accessibilité des Bâtiments Scolaires et à l'Eau pour les personnes à mobilité réduite. Handicap International: Cambodia. (Unpublished)


WELL (2005) Briefing Note No. 12: Why should the water and sanitation sector consider disabled people? WELL: UK.

Text only html version: http://www.lboro.ac.uk/well/resources/Publications/Briefing%20Notes/BN12%20Disabled.htm

or


4.2 Relevant webpages

CDPO: http://www.cdpo.org/

DAC: http://www.dac.org.kh/index.htm

DTW: http://www.dtw.org.kh/

IDE Cambodia: http://www.ideorg.org/sectionindex.asp?sectionid=111
NCDP: http://www.ncdpcam.org/
WEDC: http://wedc.lboro.ac.uk
- Dissemination phase: http://wedc.lboro.ac.uk/projects/new_projects3.php?id=177
WSP Cambodia: http://www.wsp.org/10_Contact_List.asp?CountryID=45&Region=East+Asia+and+the+Pacific
**A1  List of participants**

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<thead>
<tr>
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<th>Name</th>
<th>Position</th>
<th>Organisation/Address</th>
<th>Phone/email</th>
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<tbody>
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<td>c/o Concern Worldwide</td>
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<td>6</td>
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<td>Heng Chauntey</td>
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<tr>
<td>11</td>
<td>Narin Piseth</td>
<td>Program Manager</td>
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<td>12</td>
<td>Mr. Touch Narin</td>
<td>Technical Advisor</td>
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<tr>
<td>13. Mr Me Kosal</td>
<td>National Co-ordinator</td>
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**A1.1 Facilitators**

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# A2 Conference programme

**Water and sanitation for disabled people and other vulnerable groups**  
*Thursday, 9th March 2006*

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<td>8.00</td>
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<tr>
<td>8.30</td>
<td>Arrival of Minister of Social Affairs, Veteran and Youth Rehabilitation (MOSVY)</td>
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<td>Welcome, introductions and opening remarks by Chairman</td>
<td>Long Sothy, Director, Disability Action Council (DAC)</td>
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<td>8.40</td>
<td>Disabled people and development</td>
<td>Ngin Saorath, Executive Director, Cambodian Disabled People's Organisation (CDPO)</td>
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<td>8.50</td>
<td>Why is the issue of water and sanitation important for disabled people and other vulnerable groups?</td>
<td>Bob Reed, Senior Programme Manager, Water, Engineering and Development Centre (WEDC)</td>
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<tr>
<td>9.00</td>
<td>Official opening speech by Minister</td>
<td>H.E. Ith Sam Heng, Minister, MOSVY</td>
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<td>9.15</td>
<td>Sanitation informed choice manual - inclusion of options for disabled and elderly people</td>
<td>Dr Chea Samnang, Director, Dept of Rural Health Care, Ministry of Rural Development</td>
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<tr>
<td>9.40</td>
<td><strong>Break</strong></td>
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<tr>
<td>10.10</td>
<td>Water and sanitation issues for women with disabilities</td>
<td>Ms Prak Sopho, Disabled Women's Federation, Kampong Speu</td>
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<td>10.20</td>
<td>Collaborative pilot project to implement water and sanitation for disabled people in Pursat Province</td>
<td>Khiev Charya, Development Technology Workshop &amp; Nuon Chanta, Disability Development Services Pursat</td>
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<tr>
<td>10.40</td>
<td>WEDC research on water and sanitation for disabled people - accessible solutions and approaches.</td>
<td>Hazel Jones, Assistant Programme Manager, WEDC</td>
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<tr>
<td>11.30</td>
<td>Questions and contributions from the floor.</td>
<td>Chairman</td>
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<td>12.00</td>
<td><strong>Lunch</strong></td>
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<tr>
<td>2pm</td>
<td>Introduction to the afternoon programme</td>
<td>Bob Reed, WEDC</td>
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<td>2.15</td>
<td>Group discussions based on issues and questions in the morning.</td>
<td>DAC/WEDC</td>
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<td>3.15</td>
<td>Feedback in plenary of key points from groups</td>
<td>DAC/WEDC</td>
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<td>4.00</td>
<td><strong>Break</strong></td>
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<td>4.30</td>
<td>Summary of key issues and recommendations</td>
<td>Bob Reed, WEDC</td>
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<td>4.45-5.00</td>
<td>Closing remarks</td>
<td>Dr. Mao Saray. Director, Dept of Rural Water Supply, Ministry of Rural Development.</td>
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A3 Disabled People and Development in Cambodia

Address by Mr. NGIN Saorath, CDPO’s Executive Director

Your Excellency ITH Sam Heng, Minister of Social Affairs, Labor, Vocational Training and Youth Rehabilitation
Excellencies, Louk Chum Tievs, Ladies, Gentlemen, and Respected National and International Guests!

On behalf of people with disabilities and other representative organizations for disabled people, I have great honor and am very happy to have the opportunity to participate in this critical workshop. This is an achievement of cooperation and contribution of all parties to help people with disabilities receive the rights, equality, and fully opportunity to contribute to the development of Cambodia as general citizens, and have access to education on clean water in developing countries like ours.

Excellencies, Louk Chum Tievs, Ladies, Gentlemen, and all respected people with disabilities!

On this eminent occasion, I would like briefly to provide Excellencies, National and International guests some information on the history of the Cambodian Disabled People’s Organization (CDPO). CDPO was organized subject to the will of a total of 119 representatives of disabled people during the first disability national workshop that were joined by provinces/municipalities on September 1994, in Phnom Penh, Cambodia.

CDPO is the organization for people with disabilities whose vision is to:
Develop a disability network to support, protect, serve and uphold the rights, achievements of people with disabilities to successfully achieve the goal so that people with disabilities could achieve equality in society.

CDPO promotes positive changes in attitudes of society to all kinds and ages of people with disabilities. To help promote, support, and protect the rights of people with disabilities, it encourages the establishment of associations and organizations for people with disabilities so that they may have capability to solve the socio-economic problems among their members.

To closely cooperate with the Royal Government in making laws and other regulations such as law on labor standards for skilful and qualified people with disabilities, law on providing and receiving equal opportunities and shifting capability coordination to ensure disabled people have an equal opportunity to share in all aspects of society.

To closely cooperate with ministries-institutions, national and international organizations to provide support and strengthen community based programs and other services to serve and benefit people with disabilities and their fami-
lies. CDPO is the only advocacy organization in Cambodia and represents Disabled People’s International (DPI) in Cambodia.

Your Excellencies, Louk Chum Tievs, Ladies, Gentlemen and all respected people with disabilities,

Clean water is a critical issue among other issues of our people with disabilities in communities because wells and toilet environment are not well-organized to make it possible for the use of people with blindness and wheelchair users. On the other hand, water experts do not fully understand the needs of our disabled people yet. Some of the wells are just far away from their houses and generate unfavorable conditions for their travel, and some of the wells are not sanitary to use.

What our organizations for disabled people usually see is that some community development programs forget the needs of people with disabilities, and do not consult with disabled people’s organizations about the needs of disabled people. Clean water is a main factor for pure living, pure eating, and sanitary conditions for all people. In this regard, to solve the critical problem of disabled people who at present face difficulties, in the name of Executive Director represented at national level, I would like to call on donors to note the three following points:

Firstly, I would like national and international donors to donate funds to organizations involved with clean water service to provide vocational training to people with disabilities so that they would be able to have a clear profession to make a living in the society development.

Secondly, I would like national and international donors to donate funds to the representative organizations so that these organizations would be able to advocate and raise disability awareness to people and whole society in Cambodia.

Thirdly, I would like national and international donors to include disability, as well as granting employment opportunities to people with disabilities in development programs, to ensure that discrimination of disabled people will not occur, and also turn out to be an encouragement for people with disabilities.

Your Excellencies, Louk Chum Tievs, Ladies, Gentlemen and all respected participants in this workshop

The three requirements are truly useful for the development of disability sector to make progress without shortage of any factors. If any of these factors just mentioned are lacking, the development of people with disabilities is unlikely to be carried out.

As a final point, on behalf of the organization representing all disabled people in Cambodia, I can see that workshop on clean water and sanitation for disabled and vulnerable people is truly vital for disabled and vulnerable people. I wish this workshop will run well and that experiences will be learned from this critical workshop.
Opening Speech

H.E. Ith Sam Heng, Minister of Ministry of Social Affairs, Veteran and Youth Rehabilitation

During the opening ceremony of Conference on “Water and Sanitation for Disabled and Vulnerable People” March 09, 2006, National Institute of Public Health, Phnom Penh

Excellencies, Distinguished Guests, Ladies and Gentlemen, Respected participants,

Today, it is a great honour and pleasure for me to participate with Excellencies, Her Excellency, Ladies and Gentlemen in the opening ceremony of conference on “Water and Sanitation for Disabled and Vulnerable People”.

In the name of the Royal Government of Cambodia (RGC) and in my own name, please allow me to express my deep gratitude and sincere thanks to the Research Team of Water, Engineering and Development Centre (WEDC) and Disability Action Council (DAC) in co-organizing this consultative conference to explore the understanding of the above topic, especially focus on water and sanitation for disabled and vulnerable people.

Lack of safe water and sanitation are major factors that keep people in poverty. They affect the health and well-being of a family, and can restrict their opportunities to get an education and earn a decent living. Improving access to safe water supply and sanitation are therefore not only important Millennium Development Goals in themselves, but also play a fundamental contribution to the MDGs of poverty reduction and improving health.

Some of the poorest and most socially excluded groups in every society are disabled and elderly people. In Cambodia there are over half a million disabled people, 840,000 elderly people, and at least 170,000 people living with HIV/AIDS, most of whom are living in poverty. They also have the most need but the least access to sanitation and safe water, and often find it difficult to use existing facilities because they are inaccessible.

Many other vulnerable groups also experience difficulties using water and sanitation facilities, such as pregnant women, parents with small children, and people who are injured or sick, including people living with HIV/AIDS.

It is clear that the Millennium Development Goals of poverty reduction, health and access to safe water and sanitation will be difficult to achieve equitably in Cambodia, unless the access needs of these vulnerable groups are addressed.

Excellencies, Ladies and Gentlemen,

Here in Cambodia, some encouraging initiatives are already taking place, that demonstrate the effectiveness of practical low-cost solutions and approaches. Community based rehabilitation programmes support disabled people in their homes and communities, with the aim of helping them to live as independently as possible. MOSVY centres, such as SCI in Battambang, PRC in Siem Reap,
as part of their rehabilitation programme, produce equipment for disabled people according to their needs, such as toileting and bathing equipment, and advice on how to use it.

NGOs such as Helpage have supported the provision of latrines specifically for elderly people in Battambang.

A number of water and sanitation service providers such as UNICEF, Cambodian Red Cross, and Jesuit Services have specifically included disabled people among their priority target groups, and have developed latrine designs and service delivery approaches to respond to their needs.

Disabled people themselves have developed some very practical solutions based on their understanding of their own needs, which other disabled people and service providers could surely learn from.

More recently, some new initiatives have developed, which have involved collaboration between the water and sanitation sector and the disability sector.

For example, two NGOs, one from the disability sector and the other from the water sector are working together to develop accessible water and sanitation options for disabled people in Pursat Province.

Here in Phnom Penh, the Ministry of Rural Development, with the support of WSP have produced an “Informed Choice Manual on Rural Household Latrine Selection” which includes sanitation technology options that are suitable for disabled and elderly people.

Excellencies, Ladies and Gentlemen,

Why this Conference? These are innovative and promising developments, but there is still a long way to go. Water and sanitation service providers recognise the importance of reaching the poorest and most vulnerable groups in the country, but on the whole, neither they, nor organisations of disabled and elderly people, have paid much attention to the issue until recently.

There has been both a lack of awareness about the issue, and a lack of information about accessible solutions and approaches. Information about the good practice I’ve just described has not yet been widely shared.

This conference will start to address this lack of information, by providing a forum for a wide range of stakeholder groups to come together to share information and experience, to understand each others’ perspectives, and to discuss and produce recommendations for ways forward to improve access and coverage. A follow-up workshop will take place tomorrow, which will take up the recommendations, and produce strategies and practical action plans outlining steps for implementation in Cambodia.

The government of Cambodia welcomes this timely and ground-breaking initiative, and encourages all relevant national and international agencies to collaborate together with disabled, elderly and other stakeholder groups, and play an active role in helping to turn these ideas into practice, for the benefit of our most needy citizens of Cambodia.

Excellencies, Ladies and Gentlemen,
I myself and the Ministry of Social Affairs, Veteran and Youth Rehabilitation, surely believe that this conference is a very important event and the results and recommendations made by the conference would be an invaluable contribution to encourage and improve the inclusion of disabled people in all practical development activities as maximum as possible.

Again I would like to take this opportunity to express my sincere admiration to the Research Team of Water Engineering and Development Centre (WEDC) and Disability Action Council (DAC) in co-organizing this conference which will proceed to success.

Before I end I would like to wish the conference the utmost success.

Finally, may I take this opportunity to wish his Excellency, Her Excellency, national and international Distinguished Guest, Ladies and Gentlemen and all participants the five Buddhist blessings: Long Life, Dignity, Good Health, Strength and Prosperity.

From now on, I would like to officially announce the opening of the Conference.

Thank you for your attention!
A5  Informed Choice Manual on Rural Household Latrine Selection

Dr. Chea Samnang, Director, Department of Rural Health Care, MRD.
[This summary is adapted from the Powerpoint presentation, which is available on request from DAC]

1. Purpose of developing Informed Choice Manual on Rural Household Latrine Selection
   1. To increase sanitation demand to reach CMDG target, which is stated that in 2015, 30 % of rural households with toilet facility;
   2. To contribute to the improvement of healthy environment in local community

2. Specific purpose of the manual is to present
   3. What a latrine is;
   4. The different parts that make up a latrine - on, above and under ground;
   5. What advantages and disadvantages of all choices;
   6. Approximate costs for each part of a latrine;
   7. Expected life span of all choices of latrine;

3. What is “Sanitation”?
   - “Collection and treatment of excreta and community liquid wastes in a hygienic way so as not to endanger the health of individuals and the community as a whole”
   - It relates to, but does not include:
   8. Drainage
   9. Housing conditions
   10. Solid waste collection and disposal

4. Sanitation can prevent most feco-oral transmission
   Diagram

5. Goals – water and sanitation

6. Why we include latrine design for disabled people
   - All latrine design and construction, must be pay attention to any users with special needs in the family – elderly people, pregnant women and disable people;

7. The process of designing latrine facility for users with special needs
   11. Field survey in five provinces – Kg.Cham, Kandal, Prey Veng, Siem Reap and Battambang;
   12. Visit the sanitation program in the rehabilitation center for disable people in Kean Svay District;
   13. Overview and specific drawing were prepared by an artist;
14. First draft of all latrine designs was presented to a sector stakeholders workshop in July 2005 for feedback

8. Superstructure and wooden chair for disabled people

9. Seat and support material for users with special needs

10. Underground materials

11. Flooding Wet Pit Latrine

12. Who can use this manual
   - The beneficiaries, users and villagers to discuss and select the type of latrine that will benefit them the most, and they are willing and able to pay for materials and labor as the community participation

13. How the concerned organizations can use this manual
   - MRD will organized Official Launching the Informed Choice Manual on Rural Household Latrine Selection on 24 March 2006;
   - Interested organization can contact the Department of Rural Health Care, MRD for the manual – Tel: 012 873 671, cheasamnang@online.com.kh

14. Next Steps
   - Develop the five-year Strategic Plan on Rural Sanitation and Hygiene Improvement;
   - Develop the Construction Manual;
   - Financial Mobilization to implement the Informed Choice Manual on rural household latrine selection (at present, UNICEF, Plan International will implement this manual);
   - Organize training on how to use this manual and community mobilization (PHAST/MPA) to improve rural sanitation and hygiene to the Provincial Department of Rural Development staff.
Firstly, I offer my respects to H.E. Eth Som Heng and all the participants who join the workshop today. I would like to speak on behalf of disabled women living in Kampong Speu province and present their problem: they can not access clean water and sanitation. After receiving the results from the research by the Disabled People's Development Federation members, it's clear that only 32% of disabled people living in Kampong Speu province have access to water and sanitation services. In particular, the water source is far from people with wheelchairs, so is very difficult for them to collect water. This issue is because people with wheelchairs never join in the meetings and do not have the opportunity to discuss the building of ponds, which would be an asset to community members. Only 26% of people with speaking and hearing impairments have access to [water and sanitation?] services, which demonstrates that they have a lack of access to health care information and information on how to improve their health. Blind people have better access to health care information, and water and sanitation services than people with speaking and hearing impairment.

The problem for disabled people is that they have a lack of access to water and sanitation services and lavatories. People like me who are humped back, or Ms. Chin Oy, Ms. Hing Srey and Ms. Mang Savy who are all blind and Mrs. Samin who is a wheelchair user...etc. do not have proper access to water and sanitation services and lavatories because we lack the opportunities to participate in meetings. For example, when the local authority and other institutions consider building a pond.

I request the government to consider the following points:

1. That the government should provide water and sanitation services to disabled people, especially disabled women.
2. That NGOs and other institutions include disabled people in development programs.

In conclusion, I wish all participants a good lunch, good health and success in their work.
A7 Water and sanitation for disabled people and other vulnerable groups - improving accessibility

Hazel Jones, Assistant Programme Manager, WEDC.
[This summary is adapted from the Powerpoint presentation, available on request from DAC]

1. What I will talk about
   • Brief background to the research
   • Findings and information produced
   • Technology & service delivery options
   • Getting started
   • Contact information

2. Aims of the research
   • Goal – poverty reduction
   • Aim – to improve WATSAN services and facilities for disabled people
   • How? By providing information on simple low-cost solutions and approaches to making WATSAN facilities more accessible.

3. Focus of the research
   • Documenting examples of good/helpful practice in improving the accessibility and use of water and sanitation facilities.
   • Focus on household provision in poor rural and peri-urban areas of low- and middle-income countries.
   • Practical field research in Cambodia, Bangladesh and Uganda.
   • Who is this relevant for?
   • People who have difficulty using existing water and sanitation facilities to carry out daily activities, because of limitations in physical functioning, for whatever reason.

4. The Resource Book
   Contents
   • Why consider disability?
   • Understanding the WATSAN sector
   • Understanding the disability sector
   • Making facilities physically accessible
   • Service delivery approaches
   • Case studies

5. Examples of obstacles to accessibility
   • Rough paths, long distances
   • Inaccessible water points
   • Inaccessible toilets
   • Narrow doorways, steps...

6. Accessible and inclusive design
7. **Approaches to improving accessibility**
   1. Design and construct facilities that are accessible for all.
   2. Adapt and modify existing facilities to improve accessibility.
   3. To provide assistive devices to individuals to enable them to access existing facilities.

8. **Making facilities physically accessible**
   a. Getting there:
      - paths, ramps, support rails, landmarks for blind people
   b. Getting in:
      - thresholds, wide entrance, flat platform in front of door,
      - doors - easy to close, lockable for privacy
   c. Usability:
      - Handpump aprons
      - Internal dimensions - extra space for wheelchair to enter and turn, user + helper, or to move a seat to one side.
      - Support rails: fixed to the floor, adjustable height, movable frame, Rope suspended from a beam overhead
      - Seating – fixed, movable
      - Design of equipment
         - adapted water lifting mechanism

9. **WATSAN Service Delivery Approaches**
   - Implementation - project cycle
   - Consultation with disabled people and their representatives
   - Organisational level
      - Consultation, guidelines, policies, strategies, technology options, research

10. **Implementation cycle**
    - Design:
      - Questions in baseline data collection;
      - Community consultations – are views of disabled people and their carers heard?
    - Is information about accessible options available?
    - Monitoring & evaluation:
      - Include disability related impact indicators.

11. **Consultation with disabled people**
    - Consult on project design, technology options, staff training…
    - Make sure to consult disabled women as well as disabled men.
    - Disability service providers can also be a useful source of advice and skills.
1. **Disability Development Service Pursat -Introduction to Projects:**
   1. Community Based Rehabilitation (CBR)
   2. Paraplegic/Quadriplegic Rehabilitation (PQR)
   3. Mith Kumar Pikar (MKP)

2. **Approach - baseline survey**
   - 127 PWDs - 43 females and 84 males in Pursat
   - Discuss & record existing WatSan facilities
   - Difficulties accessing & using water and sanitation facilities
   - Consider potential solutions

3. **Baseline survey information - latrines**
   - 77% of PWDs practice open defecation
   - Main difficulties included:
     - Distance to forest
     - Height for wheelchair users
     - Discomfort in squatting
     - Carers holding children

4. **Baseline survey information - water**
   - 74% of PWDs’ families use open water sources
   - Main difficulties include:
     - Distance to the water source
     - Accessing open wells/ponds
     - Risk of accidents – steep banks, thin planks and large apertures,
     - Paths across fields not smooth
     - Transporting water – strength limitations: women, children and PWDs

5. **Design issues**
   - Some PWDs are unaware of solutions
   - They ‘cope’ with their difficulties
   - PWDs involved in the design process –
     - Discuss ideas together; manufacture & test; feedback; refine
   - Some PWDs make their own solutions
   - ‘HI’ style latrine
   - Demonstrating assistive devices
   - Treadle pump height excludes some people
   - Alternative designs becoming available - with improved access

6. **Manuals**
1] Practical ‘field’ manual – pictorial
   • Include approach ideas, range of options, adv/disadvantages questions
2] Construction manual – dimensions, materials -

7. **Collaboration**
   • Working together with other organizations
   • Learning together
   • Improving opportunity for disabled people to access water and sanitation

8. **Promoting access to water and sanitation in mine-affected communities in Pursat’**
   • A water and sanitation project supported by AusAid Landmine Victim Assistance Fund (LVAF)
   • in partnership with DTW and the Big Lottery Fund

9. **Major objectives**
   • To increase disabled people’s experience and skill in planning and implementing watsan activities in their communities.
   • To improve the access of landmine victims, their families and communities to appropriate watsan facilities.
   • To increase the ability of community, rehabilitation and watsan service-providers to meet the watsan needs of disabled people.

10. **Target areas**
    • CBR - 9 villages in 3 communes (Roleap, Talou and Phteah Rung)
    • PQR – the whole of Pursat province
    • MKP – Sampov Meas district

11. **Project duration**
    18 months for LVAF AusAid (1/09/05 to 28/02/07)
    4 years for Big Lottery Fund (BLF) (1/08/05 to 31/07/09)

12. **Activities so far**
    1. VDPC formation and training
       • Established in 6 villages
       • Trained in water and sanitation, roles & responsibilities, proposal writing, finance, minute-taking
    2. PDRD collaboration – MOU drafted

13. **Planned future activities**
    Facilitating the VDPCs to:
    • dig 45 wells (serial code number following PDRD guidelines )
    • dig 8 ponds (5 small, 3 big)
    • establish 18 water cart groups for water transport
    • provide 180 water jars
    • provide health/hygiene education and IEC materials
    • extend to 3 new villages
A9 Conference List of Recommendations

for furthering progress towards equal access to water supply and sanitation for disabled people and other vulnerable groups

1. Policy/strategy planning
   a. Contribute to review of policies and principles for WATSAN, including national WATSAN policy and guidelines, to incorporate a disability focus, in consultation with DPOs
   b. Review policy and strategy to incorporate new ideas and improve accessibility of services
   c. Collaborate with different levels of government, e.g. Provincial Department of Rural Development, local councils, etc. to promote equal access to services for disabled people in the development of community development plans.
   d. Develop vertical co-operation between national government and local authorities and donors.

2. Advocacy and information dissemination
   a. Raise awareness and understanding of the problems and needs of disabled people, particularly in the design of inclusive facilities and delivery of WATSAN services.
   b. Raise the issues of accessible facilities with the MRD WATSAN group.
   c. Raise awareness within our own organisations and the wider community about the problems and needs of disabled people.
   d. Lobby leaders, donors, etc to recognise the needs and problems of vulnerable groups and collaborate closely to raise awareness.
   e. WATSAN NGOs should collaborate with DPOs
   f. Talk to influential people at Min of Ed to raise awareness in the provision of school infrastructure.
   g. Look for possible WATSAN service providers in an area and advocate them to make their services more inclusive.

Information
   h. Share new knowledge and information from this conference with colleagues in own organisation.
   i. Prepare relevant documentation in Khmer language so that it can be used to seek support from local WATSAN implementers and the community, e.g. translate the WELL Briefing Note into Khmer
   j. Disseminate information to vulnerable groups and other relevant stakeholders through community meetings, radio, distribution of bulletins, posters, leaflets.

3. Development of appropriate technology options
   a. Become better acquainted with disabled people in my community to understand their personal challenges and work with them to develop appropriate solutions to making WATSAN services more accessible.
b. Examine current situation of disabled people’s access to WATSAN and then review designs to make them more accessible.

c. Investigate solutions currently being implemented in the community and, where appropriate, incorporate them into future work.

d. Investigate improving specific features such as the design of taps to improve their accessibility to disabled people.

e. Identify key features that make facilities accessible and incorporate them into minimum standards for designing future projects.

f. Produce some practical demonstrations of accessible technology.

g. Provide a choice of facilities within a community so that everyone is served.

h. Adapt existing water points to make them accessible by all.

4. Development of inclusive planning/service delivery

Project cycle

a. Include questions about disability in WATSAN initial surveys

b. Standardize questionnaires/surveys to learn more about the problems and needs of disabled people in the community that are not addressed by current minimum standards.

c. Develop indicators to monitor equal access to WATSAN services.

Participation in planning

d. Provide opportunities and encourage disabled people and their families to participate in community decision making, in planning and design of WATSAN projects at community and national level, and all elements of the WATSAN project cycle.

e. Support disabled people to put forward ideas for making services more accessible.

f. WATSAN and DPOs collaborate and coordinate their activities to improve service delivery.

g. Collaborate with local authorities, communities and other stakeholders.

5. Capacity building

a. Improve knowledge of WATSAN among DPOs so that they can advocate more effectively.

b. Improve knowledge of disabled people about how WATSAN facilities can be adapted to meet their needs.

c. Organise study visits to learn from other projects.

d. Organise training workshops to improve knowledge and skills.

e. Document and disseminate project experience.

6. Health and hygiene promotion

a. Raise awareness of and explain the benefits of using WATSAN services to disabled people and their families.

b. Include education about WATSAN in vocational training curriculum for disabled people.
A10 Closing Remarks

Conference on Water and Sanitation for Disabled People and other vulnerable groups

Dr. Mao Saray, Director of the Department of Rural Water Supply, Ministry of Rural Development

Excellencies
Distinguished Guests from Development Partner Agencies, Ladies and Gentlemen:

First of all, I would like to express my thanks to WEDC for inviting me to participate and give closing remarks in this workshop. Although this workshop is organized only for one day, the effect of today’s discussions would hopefully benefit disabled people in Cambodia for a long-term impact. Therefore, my thanks to WEDC also for supporting and organizing this important workshop.

During today’s discussions at this workshop, we have emphasized the importance of water and sanitation for disabled persons and other vulnerable groups of our society. We have always been talking about the health and social impact of safe water supply and adequate sanitation facilities, through “Water for All” framework. Improved access to safe and affordable water supply and sanitation is an essential component of the National Development Strategy and National Poverty Reduction Strategy. Our National Policy specifically states that “Every person in rural communities has sustained access to safe water supply and sanitation services and lives in a hygienic environment by 2025”. In the Government’s Rectangular strategy, the focus of the water resources and irrigation component is: (1) providing all citizens with clean and safe water; (2) protecting all citizens from water-related diseases; (3) providing adequate water supply to ensure food security, economic activities and appropriate living standards; and (4) ensuring water resources and an environment free from toxic elements. These improvements are not limited to a particular segment of our society; but for all, including poor, vulnerable communities, and disabled persons.

Distinguished Guests, Ladies and Gentlemen;
These vulnerable people actually need our help much more than other people. They are physically weak, socially vulnerable and spiritually reliant on other people. We as a whole society have responsibility for welfare of such vulnerable people. I would like to stress here the importance of technology developments on disabled persons and vulnerable groups. The technology aspects should be highlighted from the conceptual development stage of water supply and sanitation programs and projects. At the present time, the range of technologies available in Cambodia for delivering water is still limited. During the development of design concept, we need to include adaptation of appropriate technical designs which should be disabled people friendly designs.

Here, I would like to take this opportunity to request our development partners and colleagues from International Organizations and International NGOs, to share your technical knowledge regarding the development of technical designs, which are friendly to handicapped people and other vulnerable groups. Together with our international partners, we should start modifying the avail-
able technologies and appropriate technical designs for water supply and sanitation to be compatible with social, cultural and economical conditions of our vulnerable people using locally available materials. Selection of the most appropriate technologies is important, so it is essential that planners and decision-makers have plenty of information about alternatives.

Distinguished Guests, Ladies and Gentlemen;
The challenge is vast and cannot be met simply by one or two agencies; but partnerships between governments, International development partners and development agencies, NGOs, UN and IOs, the private sector, and civil society are very essential for development of safe water supply and sanitation for disabled people and vulnerable groups.

On my part, the Department of Rural Water Supply and the Department of Rural Health Care of the MRD will actively participate and contribute to the development of appropriate technology for disabled persons and vulnerable groups, and we will cooperate and work together with development partners to develop more appropriate technology application for rural water supply and sanitation sector. Taking this opportunity, I would like to disseminate information through this workshop to all our development partner agencies that the Department of Rural Water Supply and Rural Health Care, MRD has recently launched the "Tonle Sap Rural Water Supply and Sanitation Project" with financial support of ADB, and in which we have included a sub-component activity to enhance the appropriate technology development for rural water supply and sanitation sector. We will be cooperating and collaborating with other development partners for development of appropriate technology including technical aspects for disabled people and other vulnerable communities.

I hope today’s discussions will be very useful and for our project activities, and therefore I would like to thank every participant in this workshop for your valuable contribution and kind consideration of provision of safe water and sanitation facilities for disabled people and vulnerable groups. I can assure at least for my part as the Director of Rural Water Supply, that today’s discussions will be a good source for further development of design concept and technology improvements. Through the lessons of this workshop, we will be able to extend and expand the concept of water and sanitation for disabled people and vulnerable groups.

Distinguished Guests, Ladies and Gentlemen;
Before closing, I would like to express thanks again to WEDC for their efforts for organizing the workshop successfully. I also congratulate organizers and facilitators for their excellent work and achievements during this workshop sessions. And also I send my gratitude to all speakers and participants for your valuable contributions and encouragement which made this workshop very effective and successful and produce fruitful outcomes.

In concluding, I would like to extend to all of you, Excellencies, Ladies and Gentlemen, the five gems of Buddhist wishes, and my own wishes. And last but not least, I would like to call all of you to join with me in wishing for sustainability and safety of our rivers. And I am pleased to announce that the workshop has successfully convened and is now closed.

Thank you.
## A11  Workshop programme

Friday, 10th March

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.00</td>
<td>Arrival and registration of participants</td>
</tr>
<tr>
<td>8.30</td>
<td>Welcome and opening remarks</td>
</tr>
</tbody>
</table>
| 8.40  | Introductory activity  
Divide into 5 self-selected groups  
Group members introduce themselves – name, organisation, what organisation does, own job description. |
| 9.10  | Recap of Conference outcomes  
Introduction to group discussion themes:  
1. Policy/Strategy Planning,  
2. Information dissemination/advocacy  
3. Development of knowledge and skills  
Sign up for Session 1 and Session 2 up to maximum 6 members |
| 9.30  | Break                                                                                                |
| 10.00 | Group discussions 1                                                                                |
| 12    | Lunch                                                                                                |
| 1.00  | “Egg-breaker” activity                                                                             |
| 1.30  | Group discussions 2                                                                                |
| 2.45  | Break                                                                                                |
| 3.15  | Feedback from groups                                                                               |
| 4.00  | Ways forward – whole group discussion                                                             |
| 4.20  | Close                                                                                                |
## A12 Summary of group discussions from the Workshop

### Group 1 Policies/strategies

<table>
<thead>
<tr>
<th>Policies</th>
<th>Acronyms</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. All disabled people having equal access to water and sanitation services.</td>
<td>CWARS, IDE, MMA¹</td>
</tr>
<tr>
<td>2. Disabled people should be included in all safe water and sanitation and development programs</td>
<td>CDDF, IDE, HU, and DDSP/DTW</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Acronyms</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Organize vertical network from local to the national level.</td>
<td>CDDF, CADFP, DDSP/DTW</td>
</tr>
<tr>
<td>4. Conduct study on policies of our own organization and other relevant institutions,</td>
<td>CDDF, CADFP</td>
</tr>
<tr>
<td>5. Develop legal principle</td>
<td>CADFP, SARF, DDSP/DTW</td>
</tr>
<tr>
<td>6. Study / research on practical needs of disabled people</td>
<td>WVC, CDDF, SARF</td>
</tr>
<tr>
<td>7. Form council / management committee and play the role of watchdog.</td>
<td>VAPSO, SARF</td>
</tr>
<tr>
<td>8. Provide trainings and disseminate information to stakeholders and targets groups.</td>
<td>CADFP, SARF</td>
</tr>
<tr>
<td>9. Encourage the implementation of project that benefits disabled people.</td>
<td>VAPSO</td>
</tr>
<tr>
<td>10. Include disabled people into all social activities through consultation, decision-making and implementation.</td>
<td>WVC, CADFP, SARF</td>
</tr>
</tbody>
</table>

### Group 2 Information / advocacy

**Information:**

1. Collaborate with communities and stakeholders. (TCF, HU, HI, DTW, DDSP, VI, SARF), with local authority and stakeholders (CFD, FAP, MMA, ADD, HU, CDDF, CDPO, AARR)

2. Identify target partners, conduct research study on the need of information, analyse the information and data, prioritize information needs and plan for dissemination, Disseminate information to vulnerable groups and stakeholders through Radio, TV, Meetings, printed materials, etc. (DDSP, DTW, SARF) through village meetings, commune meetings). (AARR, VAPSO, FAP, CDDF)

3. Distribute information materials such as leaflet, T-shirt or through electronic means – TV, Radio to stakeholders. (IDE, CFD)

4. Distribute bulletins, posters, leaflets. (CDDF, CDF, FAP, CDPO, AARR)

¹ Acronyms in brackets are organisations that expressed a committed to that particular point. (See the list of participants in Appendix A1 for full names of organisations).
5. Watsan NGOs collaborate with disability NGOs (VI, DDSP, DTW, HU, SARF)
6. Organise interaction between technical groups and disabled persons (DTW, HI, HU, DDSP)
7. Document and disseminate the experiences of Watsan and disability NGOs collaborative project to other relevant NGOs. (DDSP, DTW, RWC, HI, CFD, SARF)
8. Draft Memorandum of Understanding (MoU) with MRD/PDRD. (DDSP, DTW)
9. Carry out exchange visits, (CDDF, FAP, HU, AARR)
10. Conduct workshops and training (CDDF, FAP, AARR, HU) to beneficiaries. (HI, SARF, DTW, DDSP)
11. Organize information feedback system
12. Disseminate the policies and strategies on the inclusion of disabled people (CDDF, VAPSD, CSDFP)
13. Translate the WELL Briefing Note into Khmer (CFD, HI)

Advocacy:
14. Talk with provincial department of education and school director to understand the accessibility of disabled people so that they have the rights and able to attend school like other children. (MMA, SARF, VU, DDSP, DTW, CDDF, CDPO)
15. Lobby powerful people, donors and other relevant organizations and institutions to accept and recognize issues and needs of vulnerable groups (CDPO, AARR, ADD, DDSP/DTW, CADFP, VAPSO, CDDF, FAP, SARF)
16. Lobby vulnerable group to realize the issues and train them in advocacy skills.

Group 3: Development of knowledge and skills
1. Produce report and raise awareness about the interest in using water and sanitation system to colleagues in the workplace. (IDE, MMA, CWARS)
2. Mainstream or integrate the education content on the use of safe water in vocational training program for disabled people and in any traditional ceremonies or other communities meetings. (CWARS, DDSPI, DTW)
3. Cooperate with neighbors and authorities to further disseminate this knowledge and education. (CWARS, IDE)
4. Prepare the program with individual target family and hold the meeting to exchange experience, good practice to be replicated. (CWARS, IDE)
5. Asking for cooperation from partners to help build our capacity, provide skill training on appropriate techniques. WATSAN, Rainwater Organization, FAP, MMA, HU, ADD.
6. Conduct exchange visits. (HU, IDE, VI)
7. Conduct trainings for community and disabled people on water and sanitation, latrine construction and the use of that facility by
   o Using the material such as posters, electronic mean-TV,
   o Meeting with disabled people and community. (HI)

Group 4 Develop practical implementation
1. Ensure inclusion of disability issues in (WATSAN) baseline surveys (HU, HI, RWC)
2. Conduct data collection, research study and analyse the data. Each organization responsible to implement the activities – well and latrine construction, using and study the difficulty in using it. (IDE, VI, CDDF)
3. Prepare planning for dissemination, training and providing water and sanitation service etc. (SCI-Battambang, IDE, CWARS, DDSP/DTW)
4. Create mechanism for discussion and consultation with stakeholders. (HI)
5. Meet and consult with disabled people in groups, family or individuals. (MMA, CFD)
6. Establish group discussion and study team (disabled people group and experts) to develop appropriate technical options for disabled people. (AARR, IDE, SCI-Battambang, VAPSO, CWARS, FAP, CFD, WVC)
7. Adapt and modify existing facilities to improve access for disabled people to: latrines: (CDDF, WVC, DEEP, HI); latrines and wells: (VI, IDE, SCI-Battambang, MMA, AARR, CWARS, CFD, TCF, DDSP/DTW)
8. Construct accessible safe water and sanitation system in our own office as a model for others. (IDE, MMA, CWARS)
9. Seek partners to work with who have technical skills and specialists in safe water and sanitation (TCF, HU, IDE, FAP)
10. Seek funding support from WATSAN donors. (CDDF, SCI-Battambang, DDSP, DTW, VI, TCF, AARR, MMA).
11. Motivate and encourage beneficiaries to repair and maintain by themselves. (HU, SCI-Battambang) Organize maintaining committee. (SCI-Battambang, TCF, CWARS, AARR)
12. Explain to disabled people and their families the benefits of safe water and sanitation (VAPSO, SARF, CWARS, TCF, AARR, HU, IDE)
A13  Notes from individual meetings

Several meetings took place with interested agencies, with the purpose of sharing information on issues of WATSAN for vulnerable and excluded groups. Information relevant to the project is included below.

A13.1  Centre for Development (CfD)  3.03.06
Mr Sovann Narak, Project Manager

The project “Capacity building and provision of basic services in Cambodia Water User Groups” is working in 10 small towns targeting poor and vulnerable households, including disabled and elderly people. Over 6,000 toilets are expected to be provided by Sept 2006 (CfD, 2006).

A baseline environmental sanitation study (BESS) is carried out using a house-to-house survey questionnaire and interviews. Questions include – is anyone in the household disabled, then itemised, e.g. can’t talk, can’t walk, etc.; questions on sanitation include where they defecate, whether they use water for anal cleansing etc.

To avoid exclusion, different designs of latrine are available, with features such as a toilet up in a raised stilt house, with a soil pipe that leads all the way down to the septic tank on the ground. Other designs include a raised seat, handrails, and a ramp instead of steps, where the toilet floor is above ground.

Family members are helped by community workers to select the most appropriate design for their circumstances, with pictures to help. Families are encouraged to consider not only their current situation, but to plan ahead for the future, e.g. as they get older and less mobile.

Mr Srey Vanthon, ADD Country Representative, is on CfD advisory board, and gave a copy of WEDC resource book to CfD (See Section A13.5 below).

A13.2  Handicap International  3.03.06
Claire Perrin-Houdon, Co-ordinator, Socio-economic integration domain

Suggestions were forwarded from HI adviser Vincent David, working on accessibility to infrastructure, concerning relevant participants to invite to the Conference:
• Ministry of Planning,
• Ministry of Land Management, Urban Planning & Construction
• Architect and Business Associations.

An unpublished HI document was provided, the information in it based on practical implementation of accessibility to school buildings for children with limited mobility.


A13.3  Presentation at MRD WATSAN sector working group meeting  7.03.06
At the invitation of UNICEF and MRD, Bob Reed made a presentation to the MRD WATSAN sector working group meeting on issues related to school sanitation and hygiene. This also provided an opportunity to share information about the Conference.
A new 5 year National Resource Management (NRM) programme is currently in preparation, to be implemented jointly by DFID and Danida from 2006-2010. Its development objective is to "contribute to improving the livelihoods of poor rural people and the sustainable management of natural resources through good NR management and governance arrangements." (DANIDA & DFID, 2006) [http://www.danida-cambodia.org/Development_Cooperation_in_Cambodia.html](http://www.danida-cambodia.org/Development_Cooperation_in_Cambodia.html)

The programme will operate in 14 provinces, including Pursat, Kampot, Ko Kong and Kompong Speu. The programme will build capacity of users to articulate demand for services, and support capacity of service providers to deliver services that respond to that demand. A key component is investment funds through decentralisation, i.e. support to democratic decision-making at Provincial, District and commune levels.

DFID, through Seila, has provided funds for small-scale investments, some specifically for infrastructure to respond to local demand. The new Danida/DFID programme is to make funds available at commune level for Natural Resources Management related issues.

Key issues: finding ways for poor people to engage in these processes, and to better articulate their needs. This will in part be operationalising DFID's policy on social exclusion. A Poverty Assessment provided information to develop this programme (Andersen, 2003).²

WEDC's information on watsan options for disabled people could potentially be valuable.

There might be opportunities for CBOs/ NGOs to participate in the decentralisation processes. At Provincial level this could potentially include groups representing disadvantaged populations, e.g. could involve a DPO representative to represent the interests and concerns of disabled people. However, this would be subject to agreement with RGC at Provincial level when the new National Decentralisation and Deconcentration Strategy emerges. There is also a need for the disability sector to engage at National level.

ADD received the Resource book on “Water and sanitation for disabled people and other vulnerable groups” from WEDC, and introduced it to Disabled People’s Federations in the provinces. Some of the Federation members have already used ideas from the book in their own households.

Mr Vanthon is also on the Advisory Board of the Centre for Development, a position which enables him to advise on how disabled people can be included in their projects. He also gave them a copy of the resource book (see Section A13.1 above).

² Issues of vulnerability in general are referred to in the Poverty Assessment but no specific mention is made of disability or disabled people – HEJ.