

Annex E2: Endline Survey from Kep (HP 306-310)



10 October 2023

Damnok Toek Endline Report Regarding People with Intellectual Disabilities in Kep

Introduction

Damnok Toek (DT) implemented a one-year pilot project between October 2022 and September 2023, supported by the Danish organisation, Lev, to increase the understanding of disability rights among adult residents with intellectual disabilities (IDs) at DT Kep, community members, and authority figures to promote self-advocacy among residents of DT Kep and increase their inclusion in the Kep community.

DT has been operating a disability program in Kep since 2016 that supports 29 adult residents with a range of disabilities who, so far, have been unable to integrate back into their familial structures or live independently in society. Of these 29 residents, DT identified nine capable of transitioning to more independent living and constructed three semi-independent living arrangements (SILA) on the DT Kep premises to facilitate a transition for residents who, with proper education and support, were most likely to be able to live fully independently, or in the care of family members outside of the DT program.

The pilot began three months before the scheduled transition to SILA with a baseline assessment of the understanding of rights among the nine SILA residents, community members and authority figures. In addition, a baseline group discussion was held among staff members; however, the structure of this discussion did not produce any measurable data that could be included as a baseline assessment.

Based on the findings from the baseline assessments, DT determined the vast majority of residents transitioning to SILA had little to no understanding of basic rights in general, extremely limited communication techniques for when they were not understood by community members, and a very limited scope of what the “community” and participation in it consisted of. These results were consistent among community members and authority figures. The project scope was, therefore, adapted from promoting self-advocacy to increasing the understanding of disability rights.

The findings from the baseline assessment provided the basis for the strategy DT would adopt throughout the pilot project. The team identified three focal areas to prioritise during the pilot

including 1) increasing the capacity of residents for greater independent living, 2) increasing interactions between residents and community members through more frequent visits to the community, 3) increasing understanding of disability rights among authority figures through awareness raising events.

This report details the findings from the baseline assessment, the pilot project, and the results of the endline assessment evaluating the success of the strategy and lessons learned from the pilot. It highlights recommendations for DT to implement in order to continue to improve and expand its efforts of promoting greater understanding of disability rights and further inclusion into society.

Baseline Assessment

Residents

The baseline assessment was the first evaluation conducted among DT's residents and staff to assess their level of understanding about rights and existing barriers to their participation in the community. The DT team collaborated with Lev to conduct the survey among the nine residents transitioning to SILA. However, as the team began the evaluation process, it was determined that the survey would provide an opportunity to establish an open dialogue between staff and residents to discuss the residents' goals and give the residents a platform to express themselves.

Through these conversations, the team learned that while the residents' understanding of rights as an established concept was quite low, they were able to express needs and goals that correlated with abstract ideas of basic rights. The team was surprised residents were so vocal about their opinions of group dynamics within the Kep project site, their desire to increase their own life skills to be more capable of getting employment in the community, and the necessity to develop greater communication techniques to express themselves both within and outside of the DT Kep project site.

In addition, the baseline assessments provided insights into the current relationship between residents and community members, which was found to be functional but not very interactive. Residents with greater capacity for speech communication found interactions with community members to be positive and productive, where residents with limited speech capabilities expressed frustrations and stated that in situations where they were not being understood, they would often give up as they did not have alternative forms of communication to utilise. However, despite communication barriers, all of the residents interviewed stated that they enjoyed community outings and would like the opportunity to increase their participation in the community.

Community Member

Since the pilot project was focused on promoting the understanding of rights among the DT residents themselves, the baseline assessments of community members were scheduled to be conducted following a kick-off event hosted at the DT Kep centre celebrating the official start of the pilot project with Lev. Unfortunately, DT could only formally interview one community member, a man in his mid-30s who owned a farm nearby.

For the community member, the kick-off event was his first in-person visit to the DT Kep project and his first interaction with people with a range of disabilities. Based on his experience at the event, he thought people with disabilities could have limited participation in society depending on their abilities. The team asked if he would consider hiring any of the residents to work on his farm should he ever need additional assistance. He responded that although some could, he worried that they would not have the strength necessary to perform certain tasks. Ultimately, he was grateful to have been invited to the event and said his attendance had changed his perception on the work being done at DT Kep and expressed a desire to be invited to future events held by DT.

Authority Figure

Similar to the community member, the interview with the authority figure was conducted following the kick-off event. Two members from the Kep Provincial Department of Social Youth and Veteran Affairs (DoSVY) were scheduled to attend the event, but one representative had another engagement to attend; therefore, the team could only interview one DoSVY representative, a 30-year-old man working in the Health Department.

The interviewee had been to the DT Kep centre many times and had a good relationship with the residents. He expressed that during his initial visit he was quite intimidated by the residents but that after spending a few hours with them, he became more comfortable. On the day of the interview, he said he had no hesitation about interacting with the residents.

His understanding of disability was quite extensive (compared to others assessed throughout the pilot) and he could identify different types of disabilities and had a good understanding of the barriers people with disabilities face in society. His understanding of disability was attributed to attending training sessions about disability and he expressed the importance of more authority figures attending these types of sessions to increase their understanding of and capacity to work with people with disabilities. However, he noted that disability rights were still not a separate focal point of his department.

Strategy of the Pilot

The information collected during the baseline assessments was used to create the strategy of the pilot project. Based on the interviews, the goals of the project were adjusted to focus more on increasing the understanding of rights among residents in SILA, increasing their ability to

communicate with each other, DT staff, and community members, and increasing their visibility and opportunities to contribute to the Kep community through more frequent outings.

DT established a bi-weekly peer support group attended by residents of SILA and led by DT staff. The peer support group provided a platform for residents to express frustrations with the living situation and provide feedback for how to improve the SILA project. By the end of the pilot project, the residents of SILA had elected two resident representatives who would attend future DT management meetings on behalf of the other residents and would lead the peer-support groups with assistance from DT staff given only when requested.

The SILA residents were given a shared phone and the two representatives received basic media tech training, including internet safety and how to properly use communication apps. These skills will be taught to other SILA residents by the representatives. In addition, the DT team established a Telegram group to increase independent communication between DT staff and residents with the aim of increasing their technological literacy. The team aims to add members from other disability organisations to the group chat so residents can have communication with their peers outside of the DT centre to continue to develop their own relationships with others outside of the purview of DT.

To increase visibility and participation in society, DT initiated more volunteer activities including beach clean-ups around the Kep community. These activities have been an effective way for community members to see the residents' abilities to contribute to the betterment of the community and break down misconceptions of people with intellectual disabilities as societal burdens. In addition, the residents travelled into the community more frequently, with some SILA residents choosing to go into town on their own. Residents were encouraged to interact with community members more independently of DT staff, ordering their own food and buying their own products from vendors and shop owners. DT staff were present to help facilitate communication barriers but residents were encouraged to utilise other methods of communication, including body language, and ask their peers for assistance first, if necessary.

During the pilot, DT held several awareness raising events including a workshop in Phnom Penh in March 2023 and a walking campaign in Kep in August 2023. The walking campaign was the largest effort of DT to date to engage community members and coordinate collective awareness raising among various disability NGOs in the area. It also marked the first occasion for a DT resident (one of the two resident representatives) to give a public speech about his experiences and goals as a person with an intellectual disability in the community.

DT also initiated an exchange program with the NGO, Kampuchea Seila Handicap (KSH), which specialises in job skills training. The exchange program aimed to increase the capacity of people with IDs to build relationships with others, learn new skills, and gain exposure to different geographical locations and lifestyles.

Endline Results

Between 5-8 September 2023 Damnok Toek conducted several interviews to determine the endline understanding of disability among community members in Kep. Damnok Toek Kep staff and residents from the Semi-Independent Living Arrangement (SILA) were also interviewed to determine the current levels of communication, areas where the capacity of staff can be improved, and goals for residents as they continue to transition to more independent living.

The interviews were conducted by Tham Chanmolyta, Damnok Toek's Monitoring and Evaluation Officer, Ke Dararoth, Director of the Kep Program, and Sarah Saunders, Communication Lead. The team prepared separate survey questions for each group of participants. The interviews were conducted in Khmer and were later transcribed in English. Interviews took place both at the Damnok Toek Kep centre and in the community.

Over the course of the week, the team interviewed the following groups of participants:

- **DT Kep residents (4 persons)**
- **DT Kep staff (3 persons)**
- **Local vendors in Kep (2 persons)**
- **Kep local authorities (3 persons)**

The endline assessment will help DT identify areas where training, awareness-raising, capacity building, and advocacy are necessary to reach the goal of full inclusion for people with disabilities, especially those with intellectual disabilities, in the Kep community. The findings from these surveys will contribute to the development of DT's strategy for the disability project in Kep through 2025.

Summary of Results

Below is a summary of the results from the various interviews. The findings are divided by group of participants and include takeaways that Damnok Toek will integrate into its program strategy moving forward.

Residents

For the endline, DT evaluated four residents (2 male, 2 female) between the ages of 22 and 30 years old to determine how much they had learned about their rights, how comfortable they were communicating with community members, and how confident they were interacting with community members without the assistance of DT staff.

- All residents enjoy going out in the community;
- 3 out of 4 residents expressed that communication with community members was easy; however, when a communication issue arose, they needed support from their peers or DT staff to help bridge the communication barrier with community members;

- 3 out of 4 residents felt they still needed support from DT staff to go out alone and communicate with the community;
- All expressed interest in working jobs (both inside and outside the DT centre) that included washing dishes and working in kitchens, mechanic repairs, helping with other DT residents who require more support, and one resident expressed her desire to become a doctor;
- All expressed at least a modicum of frustration with the living situation in SILA. This was mostly attributed to peer conflict;
- 3 residents expressed wanting to learn more academically:
 - One specifically expressed interest in learning English and one, who has difficulty with speech communication, wanted more training in Khmer writing.

Staff

For the endline evaluation, DT chose to modify the method of information gathering to individual interviews instead of a group discussion. The team interviewed three staff members (2 male, 1 female) between 31 and 50 years old. One male staff is in a management position and the other two are in caregiver positions. All three work closely with the SILA residents.

- All three explained that the differences between people with IDs and people with physical disabilities are mostly related to ease of communication, with people with IDs being more difficult to understand:
 - The management staff member has found body language to be effective tool to bridge communication barriers with residents;
- Challenges with the day-to-day job mostly involve the ratio of staff to residents and not having enough staff to deal with conflicts that arise;
- All three staff said they need more training:
 - The younger caregiver staff attends many training sessions but still would like more in child protection for at risk individuals and “disability and communication”;
 - The older caregiver (female) is hesitant to attend training because she cannot read or write;
 - The management staff expressed that training in communication is still a necessity;
- None of the staff expressed fear working with the residents, even in times of conflict, just that more staff support and better training could help alleviate this issue;
- All staff members believe the community’s reaction to the work of DT Kep is mixed, which they mostly attributed to a lack of understanding about disability:
 - Reactions ranged from the female staff member being told she will have good karma to the male staff being asked about the difficulties of working with “mentally retarded people”;
- All staff members believed the interaction between residents and community members is mostly good but issues with communication still require DT staff to help:

- For the female staff, she thinks it would not be possible for the residents to live independently or travel fully independently to the community but she also said she rarely attends community visits with them;
- For the male staff and management staff, working in the community is possible for the residents but the community would have to be accepting of it first:
 - The female staff agreed that some could have a job but working would not be possible without support;
- The male staff believed people with IDs would be capable of full participation in society but they would need much assistance in the beginning:
 - The female staff indicated the level of societal participation would be limited to getting a birth certificate and ID card;
- None of the staff experienced discrimination among family or peers about the type of work the staff do. If anything, there is more interest because this type of work is uncommon.

Vendors

The team interviewed two female vendors who interact regularly with the residents during their outings in the community. One is in her 30s and sells fruit and the other woman is in her 40s and sells food, which the residents pick out and she prepares on site.

- Both vendors have been selling to the residents for a while. Their understanding of the abilities of people with IDs has improved dramatically since they began selling to them:
 - The fruit vendor noticed the residents are better at ordering and communicating with her than when she first started selling to them;
 - The food vendor mentioned she gives the residents lower prices because she knows they don't have money and feels bad;
- Neither understands the difference between intellectual and physical disability;
- Both find communication with them easy, either through speaking (presumably with the assistance of staff or peers when necessary) or by pointing at different objects;
- Both are happy to sell their products to the residents and do not think of them differently than other customers (except for one feeling bad and lowering her price);
- Both think that if they have the abilities, they can get work outside the centre.

Authority Figures/ Community Members

The DT team interviewed three authority and community members. Initially, the team wanted to target and interview these groups separately; however, a few of the authority figures were new to their positions and were uncomfortable speaking on behalf of the official policy due to their unfamiliarity with it. Thus, the team decided that the questions designed for community members were more applicable to the experiences of these interviewees and combined the two questionnaires.

Three females were interviewed. One woman, aged 60 years old, is a member of the Commune Committee for Women and Children (CCWC); one, aged 20 years old is the Assistant Village

Chief (AVC) in Kep; and the final interviewee was a woman in her 20s, who is a member of the Kep Provincial Department of Social Youth and Veteran Affairs (DoSVY).

- The CCWC member and the AVC were new to their jobs and were hesitant to answer official questions due to their lack of understanding about official policies and were asked questions initially intended for community members;
- The DoSVY official could distinguish between physical and intellectual disabilities based on the Ministry of Social Youth and Veteran Affairs (MoSVY) definition; however, the other two women were unsure about disability but had seen people in the community experiencing “fits”;
- When asked about their experience with disability, the CCWC member and the AVC had seen people with disabilities in their community and their understanding of disability was based on these specific cases:
 - Based on their understanding and interaction with these specific individuals, both believed that people with disabilities can get jobs but it would be limited to household work or work that didn’t require any physical strength;
- The DoSVY member had attended training sessions so her understanding of disabilities was more comprehensive:
 - Neither the CCWC member nor the AVC had any disability training but would be willing to attend sessions if they had permission from their supervisors;
- Disability is not a topic that is discussed at commune meetings because they mostly focus on resolving more immediate issues like flooding relief and poverty reduction and support for those living in poverty:
 - However, the DoSVY member mentioned plans to increase the private sector support for people with disabilities and also support them with reduced or free public services;
- Because of the CCWC member’s and the AVC’s lack of understanding of disability, the team chose to ask about their understanding of child rights. The AVC did not indicate whether she knew any but the CCWC member could list four rights;
- The CCWC member also believed that parents should be responsible for caring for their children with disabilities. If they could not, the responsibility should go to NGOs;
- The AVC and the DoSVY representative thought that people with disabilities should be entitled to full participation in society;
- The DoSVY representative said that the severity of a person’s disability would determine the work they could get:
 - She understood and articulated that awareness raising in the community was essential because many in the community have little to no understanding of disability outside of “mental retardation”.
 - She also mentioned that there was a person with a disability (amputee) working in her office but no employees with intellectual disabilities

Challenges

Pilot Project Activity Implementation

The team experienced several challenges during the implementation of the pilot, which were mostly related to a lack of human resources to implement activities or the lack of capacity among staff to implement more advanced training sessions. To address this challenge, DT has connected with several specialists who have offered to provide more comprehensive training sessions to residents, staff, and other relevant stakeholders.

In addition, DT experienced numerous staff transitions during the pilot implementation period, so priority was given to onboarding new staff to day-to-day procedures before involving them with the specifics of the pilot. However, with stable staff now in place, the DT team believes it can better implement the more laborious elements of the project.

Coordination among various stakeholders including other NGOs was limited as regular meetings to assess opportunities for collaboration were difficult to maintain due to scheduling conflicts and limited human resources. To address this, DT has strengthened its position as a lead coordinator and will better delegate roles and responsibilities to other stakeholders interested in collaboration.

Evaluation Methodology

The team faced several challenges during the survey process, which will be addressed and improved in future inquiries:

- Language and terminology are an issue for those with little understanding of disability. Many of the team's questions were predicated on the assumption that people would understand at least a few differences between physical and intellectual disability but it was found this was often not the case;
- The survey team had difficulty wording the questions as certain words and concepts in English do not exist or have drastically different meanings in Khmer. The team was able to modify the survey to accommodate these nuances but it could be improved upon in the future to ensure there is nothing lost in translation;
- Communication and assessing the level of comprehension of the survey questions for the residents was a challenge during the first two interviews. The team modified this for the last interview and asked one of the resident representatives to help translate;
- A few of the local authorities were wary of being recorded. The survey team addressed this by fully explaining that their answers would only be used internally but there was still hesitation as the authorities interviewed were new to their positions and uncertain of the official stance on disability issues.

Lessons Learned:

Evaluation Methodology

During the survey process, the team adapted their strategy to improve the quality of the answers received. Through this, the team learned several important lessons that should be included in any future surveys conducted:

- For resident interviews and surveys, the team believes having a fellow resident present is essential to improve the communication between residents and surveyors and ensure maximum comprehension of questions and comfort during the interview process;
- For interviewees who have little to no understanding of disability, further clarification should be given or specific examples of different types of disabilities and the different levels of severity so the interviewee can answer based on their understanding of disability as a spectrum;
- The CCWC member was much older than the Asst Village Chief and was present during her interview. The team will ensure that future interviews take place separately.

Residents

- DT needs to implement broader opportunities for vocational training and job skills training in areas that residents deemed important and interesting. If DT introduces classes in these areas, it could also help alleviate peer conflict and boost the residents' skillset and confidence when entering the workforce;
- Peer support groups seem to help address some of the conflicts with the living space and should be continued with greater leadership from resident representatives;
- Residents who are capable of taking on greater responsibilities at the DT Kep centre, should be given the option to do so in compensated positions;
- Greater training, especially in sexual reproductive health, safe and empathetic care, and communication is needed to improve the SILA project and prepare the residents for greater independent living.

Staff

- Communication tools and techniques between staff and residents needs to be improved and the current staff members do not have the capacity to provide the comprehensive training necessary:
 - Could be addressed by OIC collaboration;
- Residents are better behaved in the community than at the centre; therefore, it could be that some communication exercises take place outside the centre to make sessions more effective;
- Staff want more training to perform their duties better, specifically in communication and conflict resolution techniques; therefore, with more training, the concerns about the ratio of staff to residents could be alleviated. Otherwise, more staff might be necessary, especially during the progression of the SILA transitions;

- DT needs to ensure training is accessible to illiterate staff;
- More community interaction and visibility material and activities could help the community better understand disability and the Kep program;
- Staff suggestion: More education about the Kep program and specific training about disability could help improve the understanding of disability among community members.

Vendors and Community Members

- The vendors who interact with the residents often have a much better understanding of their abilities than those who have had no interaction with them; therefore, DT needs to continue awareness raising activities in the community and ensure community members are being invited to events hosted at the DT Kep centre;
 - This increased involvement could lead to these people becoming advocates for people with intellectual disabilities in the future;
- Visibility material, including graphics for non-verbal communication techniques, and further education about the different kinds of disability could be beneficial to bridge communication barriers;
 - Increased techniques for communication will help reduce the residents' reliance on DT staff during outings.

Authority Figures

- Authority figures at various levels of government should be included as target groups for future training sessions;
- Visibility and educational material about the work of DT Kep and on disability in general would be beneficial;
- Invitations to DT Kep events should be extended to authority figures at every opportunity;
- DoSVY suggested annual training sessions should be held as refresher courses because many people do not have the opportunity to practice the information at the sessions in their daily work lives.