

Where to Report: The community Working Group and their mechanisms to support GBV survivors

A Learning Brief from CARE's SISIP Project

In the Northeast part of Cambodia, Ratanakiri Province is a home to around 90% of the country's Indigenous communities who face unique cultural and social challenges.

Traditional gender norms and patriarchal attitudes contribute to high rates of Gender-Based Violence (GBV). Low literacy rates are barriers for community members to access information about services, including GBV support. Persons with disabilities from Indigenous communities are further marginalised, experience higher rates of GBV and face multiple barriers in accessing GBV services.

To address these challenges, CARE has been working in Ratanakiri Province through **the Australia – Cambodia Cooperation for Equitable Sustainable Services (ACCESS)** Program since 2021. Since March 2024, CARE is implementing the *Strengthening Inclusive Services for Indigenous Peoples (SISIP)* project under the second phase of the program – ACCESS 2.

The SISIP project aims to increase the voice and participation of GBV survivors and persons with disabilities, strengthening subnational GBV and disability service provision, and ensuring policies respond to their needs. CARE's approaches aim at improving the quality, inclusiveness, coordination, and awareness of GBV and disability services for local authorities and the GBV Working Groups.



Establishing Effective Working Groups to Address GBV

GBV Response Working Groups enable GBV support service providers to better coordinate, report and monitor the implementation of GBV-prevention and GBV-response programs in their province, including for women from Indigenous communities and women with disabilities. Through both Phases of the ACCESS program, CARE has been fundamental in establishing GBV Response Working Groups at both district and provincial level and providing technical support through coaching and mentoring the members.



Ou Ya Dav District is one of the now 10 GBV Response Working Groups in Ratanakiri that CARE has helped to establish. The group currently has 32 members, of which 12 are women. In CARE's baseline survey, the district ranked highest among 10 GBV Response Working Groups in a self-assessment of group functioning, response coordination, and referral networks. On a recent field visit, we met with Ms Koy Kosal, Ou Ya Dav Deputy Governor and Head of the GBV WG, to discuss the key to their success and sustainability.



Technical knowledge and skills improvement: greater supports to GBV survivors

Positive changes were reported by the GBV Response Working Group through the support received by CARE.

Since 2021, CARE trained Working Group members and support set up of process for referring GBV survivors and arranging their travel to get important health services.

"Knowledge gained from CARE supported trainings has enabled me to support the group to function well, including how to refer GBV survivors and analyse cases" Ms. Koy said. A significant change for the Working Group has been their approach to resolution of GBV cases and the number of cases being reported, which link to community members having better understanding on where and how to access the services. There has also been a positive shift in the approach to resolution of cases where the Working Group are now directly responsible for supporting survivors to have their case resolved, ensuring smoother coordination across services and improved timeliness for resolution of cases; currently the resolution rate is around 80%, with remaining cases resolved informally.



Effective leadership fostering community trust in the Group and services

Strengthening the technical knowledge and skills of GBV Response Working Group members is essential, but equally important is having leaders who are not only highly committed and well-respected but also act as GBV champions - driving a clear vision that translates into positive, lasting impact.

Initially, when the Working Group was first set-up, existing staff did not bring the right skills and experience. To address this issue, the Deputy Governor invited the right services to be a part of the Working Group; a female Police Officer and members who are aligned and committed: "Since this change the new members are highly committed".

Her leadership approach is also one of teamwork: "For our Working Group to succeed this work cannot be achieved by working in silos". The Deputy Governor supports her team to understand their roles and responsibilities and encourages members to have ownership of their work. "If you don't perform leadership well it discourages members. It is an important role as a leader to motivate and appreciate them". Transparency is also a key value to how she guides her team and with sharing of information the right advice can be provided for each case, meaning more effective support to GBV survivors.

The group effectiveness in supporting GBV survivors is reflected in the growing number of direct reports received. This suggested that the Working Group's commitment and action in providing services to survivors has built trust within the community and potentially encouraged other survivors to come forward and seek support. For example, under ACCESS 2, local partner Transcultural Psychosocial Organisation (TPO) has provided training in basic counselling skills.







"For our Working Group to succeed, this work cannot be achieved by working in silos".

Ms. Koy Kosal, Ou Ya dav Deputy Governor

Ms. Koy, Ou Ya Dav's Deputy Governor stand in front of the district hall, as she waited for the members of GBV Working Group.

Sen Bolina who is a Police Officer and member of the Working Group shared the training has built her "knowledge and skills on how to respond to survivors during disclosure and has been helpful with dealing with information shared by survivors sensitively and how to respond appropriately". This type of training is critical to ensuring Working Group members like Sen Bolina have the right skills and tools to support GBV survivors to feel safe and heard and ensures services being provided met quality standards. This can lead to a greater sense of satisfaction and support through taking a survivor-centred approach.



Access to quality GBV services for people with disabilities and Indigenous peoples

Through the project, CARE will continue building on the work of the previous phase in raising community awareness about GBV - helping to address the root causes and ensuring people in the community are well informed about the existing services, where and how they can access them. Recognising the vulnerabilities, unique and additional barriers persons with disabilities and Indigenous communities face in accessing GBV services, CARE is working in equitable partnership with local partner organisations to address these challenges.

- CARE is working in partnership with Ratanakiri-based Indigenous organisations, Highlanders Association (HA) and Conserve Indigenous Peoples Languages (CIPL), to ensure communications are translated into Indigenous languages to address the challenge of lower literacy rates (18% of respondents in the project baseline can read and write in Khmer) limiting access to GBV support services and social assistance programs. This is also now a practice for the GBV Response Working Group where Indigenous staff at the Centre are helping to interpret for Indigenous survivors and their families.
- Ensuring persons with disabilities are at the centre of initiatives, the project is taking several approaches in partnerships with Peoples Alliance for Inclusive Development (PAfID), and Organisations of Persons with Disabilities (OPDs), to ensure that persons with disabilities are included and will benefit from the program. These initiatives include ensuring visibility and participation of women with disabilities in community dialogues and events, to help shift harmful social norms and beliefs related to gender and violence.



GBV Response Working Groups at both district and provincial levels will also be supported
through CARE and its partners to raise visibility and awareness about disability, and disability
inclusion reviews will be conducted to identify existing barriers. These approaches will help
address the existing challenge shared by the Ou Ya Dav GBV Working Group; to date there have
been no persons with disabilities who have come forward to access GBV services, yet the
members also need to develop their skills in how to better support persons with disabilities.

The Ou Ya Dav Working Group has been making great strides. While there are still challenges to address, CARE's approach in equitable partnership centres the local organization and their valuable expertise, skills, knowledge and relationship with the community, as the impactful tools in project initiatives.

CARE and partners are working collectively to enhance quality of GBV service provision and promote disability inclusion in Ratanakiri, where diverse communities' needs are being meet.

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This is a learning brief for **the Strengthening Inclusive Services for Indigenous Peoples (SISIP) project under ACCESS 2 program**, a five-years project in Ratanakiri implemented by CARE Cambodia in collaboration with indigenous-led local organizations, the Highlander Association (HA) and the Conserve Indigenous Peoples Languages Organization (CIPL), and disability and development organization, People's Action for Inclusive Development (PAfID).







