CARE REFORM
Perspectives from a Subnational Level

PHASE ONE

Impact, Learning and Effectiveness Section (ILE)

August 2020

THIS LIFE

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Acknowledgements

Acronyms

CIF	Children in Families
CG	Collaborative Grant
DoSVY	Provincial/Municipal Department of Social Affairs, Veterans and Youth Rehabilitation
FCF|REACT	Family Care First	REACT
ILE	Impact, Learning & Effectiveness
M&E	Monitoring and Evaluation
MoI	Ministry of Interior
MoSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation
NGOs	Non-Government Organisations
OSVY	City/District/Khan Office of Social Affairs, Veterans and Youth Rehabilitation
RCIs	Residential Care Institutions
SNA	Sub-national Administrative

Introduction

Through its Children in Families initiative (CIF), the GHR Foundation seeks to transform child protection and shift the dominant care model from institutions towards prioritising family-based care. The Foundation began funding programs in Cambodia in 2015 through a two-pronged approach - funding of the Family Care First|REACT (FCF|REACT) coalition and, direct grants to seven local Non-Government Organisations (NGOs) through a Collaborative Grant (CG). FCF|REACT engages more than 60-member organisations, some being funded through the project working to prevent children from being separated from their families and to increase the number of children who are safely and successfully integrated into family care[1]. The seven CG NGO partners are all FCF members who are funded independently by GHR to work at the local and provincial level to advance services and build capacity to deliver quality interventions to support children in families.

This Life is currently one of the seven GHR partners in Cambodia, receiving grant funding for their This Life in Family program. The Impact, Learning & Effectiveness (ILE) functions independently of This Life's program implementation. Three years into project implementation, GHR partners have responded positively to participating in a collaborative grantmaking (CG) process. With their field of work in childcare and care reform in Cambodia, the GHR grantees are valuable contributors to this work.

In 2018, the ILE section led the "Care Reform in Cambodia: Insight Analysis" research piece and published the report,[2] with the support of the GHR Foundation. This work assessed the current efforts of the government and NGOs working on care reform in Cambodia. While appreciating the achievements so far, the report points out the need to better understand implementation challenges, especially those faced by key actors at the subnational level. These include; (i) decentralised offices of Ministry of Social Affairs, Veteran and Youth Rehabilitation (MoSVY), i.e. Office of Social Affairs, Veteran and Youth Rehabilitation (OSVY), Provincial Department of Social Affairs, Veteran and Youth (DoSVY), and state Residential Care Institutions (RCI), (ii) Subnational Administrations (SNA), i.e. communes, districts and provincial administrations, and (iii) service providing NGOs.

While some of the implementation challenges have already been mentioned in various pieces of research, the existing knowledge has been anecdotal, un-concrete, and insufficient in terms of the root-causes of the problems and its possible solutions. Lacking a systematic understanding of those implementation challenges, especially from the perspectives of local administrations and service providers themselves, can negatively affect the effectiveness of the design of new initiatives, support from the national to subnational level (e.g., training), coordination among different actors, and monitoring and evaluation (M&E).

Objectives of the Research

Following the recommendation from the 2018 Insight Analysis report, this next piece of research aims to "better understand the implementation challenges, impacts, their root-causes and potential entry points for concrete solutions" for care reform in Cambodia. The study will focus primarily on perspectives and experiences of key actors at the subnational level as well as the Ministry of Social Affairs, Veteran and Youth Rehabilitation (MoSVY) and the Ministry of Interior (MoI), at the national level.

This research is broken down into two phases; phase one aims to gather common understandings of key challenges of care reform implementation at the subnational level to lay a foundation and test research tools for phase two. Phase two will use the research tools developed and tested in phase one on a larger-scale national study which would address the recommendation of the 2018 report and identify challenges, issues and solutions to contribute to policy change at the national level and practice change at all levels. Phase two aims

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[1] https://www.fcf-react.org/about-us/#key-activities

[2] This Life Cambodia, 2018. "Care Reform in Cambodia: Insight Analysis". Link - http://www.thislifecambodia.org/wp-content/uploads/2019/02/GHR-Insight-Report-Oct18_final.pdf

to provide key recommendations to aid stakeholders, especially service providing NGOs, to inform their interventions and improve their implementation strategies and local practices.

Based on the perspectives and experiences of the three groups of subnational actors (i.e., OSVY, DoSVY, State RCI, and NGOs), the research seeks to answer the following four related questions;

- What are the key implementation challenges faced both separately and jointly by these three groups of subnational actors?
- What are the impacts of these challenges on the ability of the actors in assisting vulnerable children in accordance with relevant regulations and policies?
- For each of the challenges identified, what are the leading root causes, both at the subnational areas and national level? and
- Having identified the root-causes, what might be the proposed solutions and/or entry points to start addressing those problems?

To answer the four questions above, the research focuses on the following six areas of subnational actors' perceptions and experiences of the following;

- Roles and responsibilities of their official and actual tasks
- Understanding and practicality of guidelines and instructions provided from the national level,
- The effectiveness of technical support and capacity building provided to them, both by the national government and development partners,
- Budget availability and accessibility needed for them to perform their expected tasks,
- Understanding of current M&E and feedback mechanisms, and
- The effectiveness and challenges around coordination among the different actors.

The interconnections between the four related questions and which actors and stakeholders these relate to are displayed in Figure 1 below. The six areas of focus and how these link to one another is displayed in Figure 2 below.

Figure 1: The four related questions of the research

Figure 2: The six key areas of focus of the research
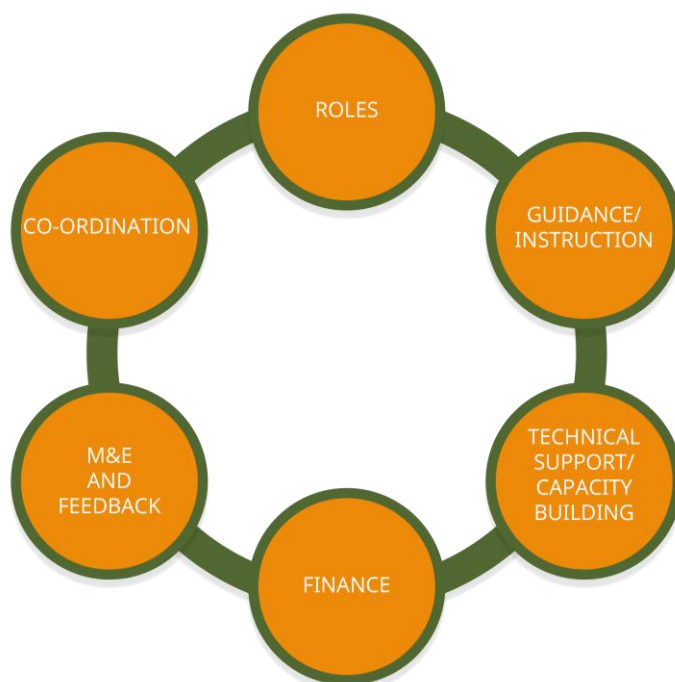
Methodology

In response to the strategic objectives of the research phase one mentioned above, this research applied a methodology that has four consecutive and related parts, each discussed below. This Life worked with an external consultant with broad knowledge in this research area to discuss key topic areas and draft questions for the research tools. The study was also supported by GHR grantees that provided assistance with contact information for representatives from the prioritised and non-prioritised provinces.

Step 1: Develop research tools to gather information from GHR grantees and subnational level stakeholders.

The external consultant was invited to participate in the GHR CIF group quarterly meeting on two occasions to present the aims and objectives of the research, and seek feedback from the grantees in the group to inform the research tool creation. Two research tools were then developed in collaboration with the ILE section, the external consultant, and This Life's Children and Families section.

- An online survey questionnaire was developed using Google Form to gather quantitative data, for use with Social Workers and Case Managers;
- An interview tool was also developed to gather in-depth qualitative data for use with Project Managers.

Both tools were presented in English and Khmer and included an optional question for participants to feedback on the topics discussed and the research process. Support was offered to participants and all were given appropriate time to complete the questionnaire and the interview. Upon completion of each interview, the data collector reported back their observations and challenges faced by the participants with the process and specific questions.

Step 2: Test research tools with the GHR grantees

The online questionnaire was shared with the GHR CIF group of grantees with instructions for five Social Workers and Case Managers to complete this within the allotted time. A total of 35 surveys were sought from the seven grantee organisations. One Project Manager from each grantee was invited for an interview, and all

were offered additional time to feedback on their perceptions of the interview tool and research process more generally. A total of seven interviews were organised with the grantees.

Step 3: Test research tools with subnational level stakeholders

Subnational stakeholders were separated into two groups; prioritised provinces (Kandal, Sihanoukville, Battambang, Siem Reap, Phnom Penh), non-prioritised provinces (Kampong Chhnang, Kampong Thom and Kampot), and state RCI organisations. Five surveys from each of the eight provinces and the three RCIs were sought from Social Workers and Case Managers, with a total of 55 required overall. One Project Manager from each province and one from each RCI was invited for an interview with a total of 11 interviews required in total.

Prioritised and non-prioritised provinces were agreed by reviewing a research study conducted by the Cambodian government[3]. The five prioritised provinces are being targeted for a range of de-institutionalisation and reintegration services by MoSVY and UNICEF, in collaboration with the 3PC partners and financial support from the Displaced Children and Orphans Fund-USAID. The non-prioritised provinces make up three of the four that were not selected by UNICEF for project implementation from the nine residential care institutions identified in the research.

Stamped letters were developed and addressed to DoSVY and OSVY to formally request permission for their representatives to participate in the research. These letters were sent electronically via Telegram to contact persons at each province and followed up with hand-delivered letters. Phone calls were made to arrange appointments for interviews and to check which platform or process best suits the participant; face to face, Zoom video call, telephone call, or Telegram call.

The number of surveys and interviews achieved are detailed in Table 1 below.

Step 4: Review research tools and develop recommendations

Following the completion of the data collection, the survey and interview tools were reviewed against the following;

- Topics and questions in the tools that may be in need of change to improve data accuracy
- Anecdotal feedback offered by the participants about the research tools and the research process
- A group discussion with the data collector and ILE team to review the process and tools, considering all feedback offered and observations of participants

Table 1: Number of surveys and interviews completed by each subnational actor

Stakeholder	Survey	Interview	Total
GHR grantees	35	7	42
DoSVY, OSVY, CCWC (prioritised provinces)	21	4	25
DoSVY, OSVY, CCWC (non-prioritised provinces)	14	3	17
RCIs	5	2	7
TOTALS	*75*	*16*	*91*

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3   MoSVY 2017. "Mapping of Residential Care Facilities in the Capitals and 24 provinces of the Kingdom of Cambodia". Phnom Penh, Cambodia. Link: https://www.unicef.org/cambodia/reports/mapping-residential-care-facilities-capital-and-24-provinces-kingdom-cambodia

Limitations

There were some limitations to the methodology of this phase one research, impacted by the COVID-19 pandemic. Due to the pandemic, hygiene and safety precautions were being advised by the government, as well as careful travel considerations, and this directly affected the methodology and data collection. Many research participants reported limited staff capacity due to requirements to 'pivot' their operations, which meant that less time was available for them to complete a survey or attend an interview. This also restricted the planned travel to each province to conduct interviews face-to-face with participants; instead, most Project Managers were interviewed via Zoom video call. This Life also took the executive decision to limit the number of data collectors on this project, opting for one to conduct all interviews to ensure better safety precautions and social distancing measures. Having only one data collector was a minor limitation as it made it essential to cross reference the participant schedules with theirs, limiting the flexibility of when interviews could be organised.

Due to staff capacity challenges and the impact of COVID-19 on participants' team and individual workloads, there were limitations with the number of surveys and interviews that could be completed by the subnational stakeholders in both the prioritised and non-prioritised provinces, and the RCIs. Referring to Table 1 above, the number of surveys required overall was 90, and the number of surveys completed in total was 75 - a difference of 15. Similarly, the number of interviews required overall was 18, and the number completed was 16 - a difference of two. One targeted RCI was uncontactable and one prioritised province - Phnom Penh - was unavailable for an interview during the data collection period.

Another key limitation was the time required to prepare, send and follow up on the letters of invitation sent to DoSVY, OSVY and RCIs. The process of ensuring the right person with the appropriate job role and responsibilities (i.e., Social Worker vs Project Manager) completed the surveys and participated in the interviews was particularly challenging and time consuming for the ILE team. This was largely due to organisational transformations from the national to the subnational level, especially with RCIs and OSVY who longer report to DoSVY, and now report to the district governor.

Some participants who were approached for the survey found this challenging to complete online and reported many reasons for this. The most common feedback comments were; that their smartphone could not display or write in Khmer language, issues with the internet connection, and limited technical knowledge on survey platforms. Some participants therefore had to print the questions to hand write the answers and send them back to the ILE team. This could be considered a limitation as there is a lack of consistency with how the data was collected. As proposed solutions, the ILE team either conducted the survey through telephone calls, noting the participants' responses and typing them into a form later, or downloaded the questions into a printable PDF for participants to hand-write responses and return back when completed.

The change to the data collection process - limiting face-to-face interviews and instead using online platforms - also created some limitations. Some participants reported that interviews conducted over the phone or video conference were less desirable due to challenges with internet connections, particularly when the data collector was offering a further explanation on specific questions or topics. Two Project Managers insisted on face-to-face interviews, regardless of the challenges and concerns raised in light of COVID-19. This then shows a difference between the way the data was captured and could lead to differences in the participant experience of the research process and understanding of the tools.

Findings

Findings have been broken down into the following categories; findings from the tool testing from both the online survey and the in-depth interviews, and findings from the data collected for both tools. A total of 75 surveys were completed, and a total of 16 interviews were conducted.

Findings from tool testing

A.   **Online survey tool**
   - Social Workers and Case Managers from the GHR grantees offered positive feedback about the choice of online platform - Google Forms - and the flow and topics covered in the survey.
   - Some participants from DoSVY and OSVY also reported that they were unable to remember some guidelines and policies that relate to their roles and responsibilities and since they were unable to skip this question, their answers were unclear.
   - One RCI reported that they did not have employed Case Managers or Social Workers at the organisation so they couldn't complete the survey. This RCI relied on contract officers which were not permanent employees.

B.   **In-depth interviews**
   - Some Project Managers from DoSVY offered feedback about the interview questions, stating that some seemed to be repetitive and a review of all questions could be beneficial to ensure the tool is more concise.
   - Regardless of their position in the organisation, some participants from DoSVY displayed reluctance to answer questions related to skill requirements and the decentralisation process. It was not made clear whether this was due to a limited understanding of these topics or whether it was due to the wording of the questions.
   - One RCI representative was reluctant to answer questions related to the improvement of guidelines and policies and the government budgets. They reported that they perceived the guidelines and policies to be good and that the budget is good enough to run the institution. They also reported that they must follow the decision making of their top leaders. It is not clear whether this hesitation to answer the questions was due to fear of undermining their superiors or a lack of understanding to the questions posed.

Findings from the data collected

A.   **Data from the survey**

Observations about child vulnerability
Firstly, the survey focused on the roles and responsibilities of the participants in regards to childcare, care reform and their perception of child vulnerability in their target location. 55% of participants perceived child vulnerability was 'better' in their areas compared to three years ago, while one-third of participants thought this was 'a lot better'. The top four main responsibilities of the Case Managers and Social Workers were reported as being; visiting children's families (64%), referring vulnerable children (52%), coordinating with stakeholders (43%), and receiving cases (33%).

Roles, policies and guidelines
The second theme explored was the understanding of the guidelines and policies related to childcare. Three participants answered "do not know" or "never received training" when asked what guidelines and policies they need to follow or refer to most often to perform their tasks. In contrast, other participants provided diverse guidelines and policies, demonstrating a strong understanding of how these connect to their roles. Other participants could identify guidelines and policies, however, the names offered were diverse and inconsistent. Findings on capacity strengthening indicated that one in four participants joined training on

guidelines and policies on one occasion, however, no participants reported understanding everything at that training. Answers relating to what points in the guidelines and policies were unclear, to identify capacity strengthening opportunities, were mixed. In contrast, half of the participants reported they did not require any support on the unclear points and one responded that they did "not know the points".

Staffing, budget, and coordination

Thirdly, all participants were questioned about human resources and budgets in their office. One in three of the participants reported staff resourcing to be 'inadequate' to fulfil their tasks, while new recruitment for full-time staff and volunteers was their organisation's main solution The participants were asked about the environment of working together with stakeholders and the data indicated three main challenges including; the unclear procedure on how to work together (52%), the requirement of formal letters (45%), and the lack of interest and willingness to collaborate (43%). Regarding the amount budgeted to perform the representatives' tasks, the majority of Case Managers and Social Workers at DoSVY and OSVY perceived the government budget to be not enough to cover their activities (90%). The participants reported four main challenges in using the budget for task implementation; the budget reallocated is too little compared to actual needs, too many steps and too much time needed to get the budget proposal approved, need to spend their own money first, and reimbursement takes too long.

Decentralisation

The fourth theme was on the perception of the decentralisation reform in the last five years. The data from the survey indicated that nearly all participants understood that this reform was focusing on the transferring of functions relating to childcare and child protection to the district/municipal level. Participants reported that it also focused on the transfer of state-managed orphanages to the provincial level, the roles of CWCC, upcoming restructuring of district administrative, and the current increase in Commune Sangka Fund (CSF). Nearly half of the participants said the decentralisation reform was 'okay' while others appeared reluctant to reply positively.

As a result, their perception of the implementation of decentralisation reform was mostly reported as neutral for more than half, while 3% noted it was 'not well implemented at all'. To manage these concerns, some participants provided some critical requests to the government about decentralisation reform as follows;

- Increase the number of Social Workers and Case Managers who have skills in the social work, and provide capacity strengthening to existing staff, local authorities, and stakeholders about the decentralisation reform, case management and integration.
- Engage and collaborate with stakeholders who are working with children and families.
- Increase government budgets and level of budget transparency and accountability at all levels.
- Develop M&E mechanisms and templates.

M&E data and reporting

The fifth theme was related to monitoring and evaluation and participants identified challenges with this; more than 60% of participants reported that they had limited capacity in report writing, 33% reported that too many reports were needed, 24% highlighted that there was no standard report template, and 24% explained that not enough progress is made to report monthly. The findings also indicated that almost all participants at DoSVY and OSVY and RCIs never access online data inputs.

Feedback on research tool

Finally, participants were asked to provide feedback on the research tool. Only three participants provided input; one reported that some questions were complicated which meant they didn't know how to answer them, one reported that they couldn't answer some of the questions because of their role and responsibilities is not one with decision-making power, another proposed to have a printed copy to complete and keep at their office. No more information was offered about the themes, questions or process of the research.

B. Data from interviews

All interview participants perceived the guidelines and policies are appropriate for their roles and to implement their tasks, however they raised concerns about low staff numbers and staff capacity challenges. Almost all participants suggested capacity strengthening and training could be conducted with stakeholders, including local authorities, who play critical roles in the decentralisation reform.

All participants from DoSVY and OSVY reported being aware of the decentralisation reform and the transferring of functions to different levels. The majority of participants highlighted the government budget as being not enough to implement their work. They suggested that the budget could be allocated and prepared ahead of time for emergency cases. They also suggested that ministries could allocate a budget or a package amount to work on emergency issues, transferring the decision-making and implementation powers to the local level to work directly with the beneficiaries.

Fifteen of the 16 participants also reported that training and support with building technical skills was limited for their teams, particularly those working directly with children and families. They suggested organising a collaboration between the organisations working in this field and DoSVY representatives. It was noted that DoSVY and OSVY representatives are rarely invited to attend training sessions with the organisations, limiting the opportunities for face-to-face communication and building collaborative relationships. In contract, RCI representatives reported that although they are now under their administrative management, they are still receiving technical support from DoSVY.

Different perceptions towards the decentralisation reform were noted between the GHR grantees and the other Project Manager participants. Four stated that the mechanisms would make a positive change to the process of care reform when subnational actors have their own decision-making power. This answer reflected the understanding that there is an easier process of collaboration and engagement between subnational level authorities and the GHR grantees to work with beneficiaries. Four participants reported that the decentralisation reform had a negative impact on their current role due to the recruitment of new staff slowing down working processes and risks of internal conflict. They suggested capacity strengthening is needed to improve the working environment, particularly for new staff members. Two GHR grantee Project Managers and two DoSVY Project Managers did not offer their ideas.

Participants from the GHR grantee organisations indicated that they didn't clearly understand the decentralisation reform process and they were unable to answer these questions precisely. Many followed up by highlighting that while they didn't have a complete understanding, they welcomed the change as the process could create an effective working environment with local authorities and case management operations were now more straightforward. One GHR grantee and six participants from OSVY and DoSVY noted that they were not clear about the monitoring and evaluation process in their organisation and specific department.

Participants from DoSVY and OSVY expressed their agreement with the national decentralisation reform by emphasising that they follow the guidance and instructions from the ministry, and they agreed with the improvements implemented by the higher levels. In regards to the budget, the participants preferred not to answer and instead informed the data collector that high ranking officials prepared the budgets. They did however highlight that there was not enough money to manage their tasks and the authorisation process often took a long time. Some participants chose not to offer their perceptions of the decentralisation reform, instead stating that they followed the instructions from the high-ranking officers as they 'did not have the right to question' them. Similarly, RCI participants opted out of sharing their views on challenges in their organisations' management, stating that they preferred not to answer as they believed these were internal matters and this shows the weakness of each RCI.

When asked for feedback on the research process and interview tool, the participants reported that the questions relating to roles and responsibilities were complex and their understanding of these questions were

limited. Participants suggested a printed copy of the questions would facilitate their understanding and participation. It is also noted that participants were reluctant to answer some questions relating to budgets and share ideas relating to guidelines and policies. This suggests these questions may also need to be reviewed as well as the interview environment if risks to confidentiality are limiting participants' input. No other feedback was offered about the interview tool.

Recommendations

The small sample of participants selected for the research, coupled with the challenges of COVID-19 further limiting the response rate from those who were approached, highlights the need for further work in this area. Some key challenges and root causes from the subnational perspective have been explored, however, a larger and more diverse sample size is required to inform a national study to propose entry points to address the problems. These findings act as a road map to guide phase two of the research which aims to contribute to policy change at the national level and practice change at all levels.

Phase two of the research will include both national and subnational actors, the methodology and analysis of which will be conducted in three stages; (1) national level partnership and key interviews with national actor representatives, (2) data collection at the subnational level with over 415 participants, and (3) findings verification and proposed solutions disseminated, including ongoing dialogue with national actors. A review of the limitations and challenges of the research process, together with the findings of the data collection for phase one will be utilised to inform and improve the process and research tools for phase two.

Due to the challenges with contacting the relevant representatives at DoSVY, OSVY and RCIs and the issues with logistical arrangements of formal letters of invitation, it would be beneficial to allocate more time to this preparation and ensure the representatives are contacted further in advance, and any with no response are followed up accordingly. For phase one of this research, GHR grantee representatives supported the logistics of the invitation letters and with identifying appropriate representatives to approach for interviews. This worked well and would benefit the national study if GHR grantees continued their support. Furthermore, establishing a collaboration between the Ministry of Interior, who oversees OSVYs and state RCIs, would ensure a smoother process and may encourage more communication between stakeholders about concerns and issues with decentralisation, M&E and budgets.

Changes and improvements should be made to the two research tools by utilising the data collection findings and feedback from the participants. One of the biggest challenges highlighted by the participants was the use of telephone or online platforms to conduct the research, with participants suggesting that surveys and interviews could be offered face-to-face to increase accuracy and reliability, and ensure there were no technical issues affecting the process.

Some participants reported facing challenges with the open-ended questions for reasons including them having limited knowledge or understanding of the topic, and feeling reluctant to comment or be seen to criticise their superiors. The research tools can, therefore, be updated to include only close-ended questions in the survey tool and more simplified open-ended questions in the interview tool. The limited understanding of the questions could be addressed by sharing the tool with the participants ahead of time, and include additional explanation and detail for each section with the estimated time each should take to complete. The reluctance of participants to openly share their perceptions could be addressed by reaffirming the confidential nature of the research and the fact their superiors will not have access to their individual responses.

Appendices

Appendix one: Survey tool

Questions	Answers
Section 1: Background information	
Sex	- Female - Male - Other / prefer not to say
Age	18 - 25 years old 26 -35 years old 36 - 45 years old 46 - 55 years old 56 - 65 years old 65+
Agency	Please choose 1 answer - Provincial administration - DoSVY - District/municipal administrations - OSVY - Commune/Sangkat - Police at commune level - NGOs - Other (please specify):
Role/position	…………………………………
Urban or rural	Please choose 1 answer - Urban - Rural
Section 2: Observations around the vulnerability of children	
What do you think of child vulnerability in your areas now compared to 3 years ago?	Please choose 1 answer - A lot better - Better - The same - Worse - A lot worse
Who are the most vulnerable children in your areas of living (i.e., provinces, districts or communes) that the Government needs to give priority?	Please choose up to 3 answers - Street children - Children left behind by parents who have migrated elsewhere for work - Reintegrated children - Children engaged in child labour - Children who are victims of violence - Abandoned children - Children with disabilities - Children in conflict with the law - Children who are victims of sexual violence - Other (please specify):
What are the significant factors contributing to the vulnerability of children in your area?	Please choose up to 3 answers - Poor families - Domestic violence - Drug issues - Alcohol issues - Safety issues - Gambling - Traffic accidents - Children left behind by parents who have migrated elsewhere for work

	● Caregiver not knowing how to care for children ● Other (please specify):
Section 3: Roles and policies/guidelines	
In your daily work, what are the tasks that you spend the most time on?	Please choose up to 3 answers ● Receiving cases ● Referring vulnerable children ● Preparing reports ● Visiting children's families ● Preparing budgets and work plans ● Inspecting residential care institutions ● Coordinating with other stakeholders ● Managing case files ● Supporting children one-to-one ● Other (please specify):
What are three policies or guidelines that you need to follow/refer to most often in order to perform your tasks?	Please specify up to 3 answers ● …………………… ● ………………….. ● ………………….
How many times have you been trained in these policies and guidelines within the last three years?	Please choose 1 answer ● 1 time ● 2-4 times ● More than 4 times
How clearly do you understand these policies and guidelines in order to perform your roles and tasks?	Please choose 1 answer ● 1 = I don't understand at all ● 2 = I understand some ● 3 = I understand most ● 4 = I understand everything
What parts, if any, of the policies and guidelines that you identified in the above question are you unclear about?	Please specify up to 3 answers ● ………………………. ● ………………………. ● ………………………. ● NA - I understand everything
When you have questions about how the policies and guidelines operate, where/who have you often turned to for guidance and support?	Please choose up to 3 answers ● Your colleagues ● Your immediate supervisor ● Officials at DoSVY ● Officials at OSVY ● Police officials ● NGOs ● Commune chiefs ● CCWC at communes ● WCCC at district level ● WCCC at province level ● MoSVY officials ● Donor agencies ● Other (please specify):
How often have you been given different and/or conflicting explanations/ instructions on how to implement a guideline?	Please choose 1 answer ● Never ● Only rarely ● Often ● Very often
In your past experience, when you do not clearly understand a policy/guideline, what have been the impacts/ consequences?	Please specify up to 3 answers ● ………………………. ● ………………………. ● ……………………….
Section 4: Staff and budget	
Compared to the tasks that need to be done, is staff resourcing adequate in your office / agency?	Please choose 1 answer ● Fully adequate ● Adequate

	• Not adequate • Seriously inadequate
If there is a shortage of staff, what have been the common solutions/responses so far?	Please choose up to 3 answers • Existing staff spending more time at work • Recruitment of paid staff • Recruitment of volunteers • Recruitment of contractors • Support sought from NGOs • Support sought from other government agencies • Make the current scope of work smaller • Other (please specify):
In performing these tasks, what does the budget need to cover?	Please choose up to 3 answers • Travel allowance and gasoline • Telephone/internet costs • Printing and copying costs • Supplies for children (such as school materials, foods, clothes, health allowance, hygiene kits) • Supplies for families of the children (such as school materials, foods, clothes, health allowance, hygiene kits)
In your opinion, is the government budget to cover these activities adequate?	Please choose 1 answer • Fully adequate • Adequate • Not adequate • Seriously inadequate
If your organisation uses the government budget, what challenges do you face in using the government budget?	Please choose up to 3 answers • Not knowing about the amount of available budget to plan my activities • Limited understanding of the procedure and procurement process • Too many steps and too much time needed to get the budget proposal approved • The budget allocated is too little compared to actual needs • Per diem/ travel allowance is not enough for field visits • Need to spend own money first • Reimbursements take too long • Too many supporting documents required • Disbursement of funds comes too late to take action • Too much spending in the last quarter • Other (please specify): • NA - we do not use the government budget
When you do not have the budget to perform your tasks, what actions have you taken?	Please choose up to 3 answers • Not perform the tasks • Ask higher level officials to request additional funds • Use own funds and claim back later • Seek support from NGOs • Other (please specify):
Section 5: Coordination and information sharing	
In your daily tasks, who do you work closely with?	Please choose up to 3 answers • Line Manager • Colleagues • Consultant • Clients as children • Clients as children's families • Provincial Administration

	- DoSVY - OSVY - Police Officials - Prison Officials - NGO partners - Other (please specify):
What are the most common tasks that require you to work with these stakeholders?	Please choose up to 3 answers - Case referrals - Case conferences - Case filing and case management - Meetings/trainings/workshops - Budgeting and planning - Coordination and partnership - Consultation - Other (please specify):
What are your main means of communicating with these stakeholders?	Please choose up to 3 answers - Email - Telegram - Facebook messenger - WhatsApp - Paper-based official letters - Phone calls - Internet calls - Face to face discussion - Other (please specify):
Among these stakeholders, which ones do you think are the easiest to work with?	Please choose up to 3 answers - Line Manager - Colleagues - Consultant - Clients - children - Clients - children's families - Provincial Administration - DoSVY - OSVY - Police Officials - Prison Officials - NGO partners - Other (please specify):
What are the common factors that make it difficult to work with stakeholders?	Please choose up to 3 answers - Requiring formal letters - Unclear procedures on how to work together - Lack of interest and willingness to collaborate - Difficult mobile connection - Lack of travel budget on your part - Lack of travel budget on their part - Shortage of staff on your part - Shortage of staff on their part - Other (please specify):
Section 6: Decentralisation	
What decentralisation reforms (in the last five years) in the care sector are you aware of?	Please choose up to 3 answers - The transfer of state managed orphanages to the provincial level - The transfer of functions relating to childcare and child protection to district/municipal level - The role of the CCWC - The recent increase in Commune Sangkat Fund (CSF) - The upcoming restructuring of district/ municipal administration

	● Plans to recruit new social workers at the provincial level ● Plans to recruit volunteers to help with social work (skilled and unskilled) ● None of the above ● Other (please specify):
Do you think it is a good idea to transfer more functions to sub-national administration?	Please choose 1 answer ● 1 = Very bad idea ● 2 = Bad idea ● 3 = Neither a good idea or a bad idea ● 4 = Good idea ● 5 = Very good idea ● Unsure
If you have any knowledge of recent decentralisation reforms, how well have they been implemented?	Please choose 1 answer ● 1 = Not well implemented at all ● 2 = Not well implemented ● 3 = Neither ● 4 = Well implemented ● 5 = Very well implemented ● NA - I'm not aware of the reforms
What key requests would you like to make to the government about decentralisation reforms in the coming few years?	Please specify up to 3 requests ● Request 1: …………………………………………………………. ● Request 2: …………………………………………………………. ● Request 3: ………………………………………………………….
Section 7: M&E data and reporting	
For whom do you need to prepare reports every month?	Please choose up to 3 answers ● Monthly report to head of department/office ● Monthly report to salakhet (provincial admin) ● Monthly report to district administration ● Report to donor agencies ● Report to MOSVY ● Other (please specify):
In your experience, what are the challenges in the reporting process?	Please choose up to 3 answers ● Not enough progress to report monthly ● Too much reporting needed ● Limited acknowledgment of report writing ● No standard report templates ● No standardisation of data collection and data management ● Other (please specify):
In your reports, how often have you requested partners or officials at the higher level to provide support in resolving your challenges?	Please choose 1 answer ● Never ● Sometimes ● Often ● Very often
If yes to the previous question, how often have they provided feedback?	Please choose 1 answer ● Never ● Sometimes ● Often ● Very often ● NA - I have not requested support
How many times per year are you required to collect data?	Please choose 1 answer ● Never ● 1 time ● 2 times ● 4 times

	● More than 4 times
What kinds of data have you been required to collect most often?	Please choose up to 3 answers ● Number of vulnerable children in your localities ● Activities performed during the month ● Number of NGOs working with ● Inspection on residential care institutions ● Number of children re-integrated ● Other (please specify): ● NA - I am not required to collect data
How often have you had to input data into an online database?	Please choose 1 answer ● Never ● Sometimes ● Often ● Very often
If you have to input data into an online database often, how helpful do you think it is for reporting purposes?	Please choose 1 answer ● 1 = Not helpful at all ● 2 = Not helpful ● 3 = Neither helpful or unhelpful ● 4 = Helpful ● 5 = Very helpful ● NA - I have not input data into an online database
Have you ever tried searching for and downloading data from the database on child integration set up by MoSVY)?	Please choose 1 answer ● Never ● Sometimes ● Often ● Very often
If yes, how satisfied have you been with access to the online database?	Please choose 1 answer ● 1 = Not satisfied at all ● 2 = Not satisfied ● 3 = So, so ● 4 = satisfied ● 5 = Very satisfied ● NA - I have not used the database

Optional question:

This survey will lay the foundations for a second phase of research conducted nationally. As such, we would be grateful for any feedback that would help to improve the information collected through this tool. If you have any feedback, suggestions for improvement, or feel we are missing important questions and/or suggested answers, please notify us in the box below. Your feedback is greatly appreciated.

[FREE TEXT ANSWER]

Appendix two: In-depth interview tool

Interview Questions
Implementation Challenges for Care Reform at the Subnational Level

Background and rationale to questions

Interviews in phase one will focus on social workers and case managers (35 in total) and social work project managers (seven in total) from the seven GHR grantees currently participating in the collaborative grant. This will be an iterative process in which the experience and insight of those being interviewed will inform interview questions for phase 2.

The six areas of focus for this research will focus on subnational actors, including:

1. Their official and actual roles and responsibilities,
2. Clarity and practicality of guidelines and instructions provided from the national level,
3. The effectiveness of technical support and capacity building provided to them, both by the national government and development partners,
4. Budget availability and accessibility needed for them to perform their expected tasks,
5. The adequacy and practicality of the current M&E and feedback mechanisms from national to sub-national actors, and
6. The effectiveness and challenges around coordination among the different actors.

The questions developed below reflect the above focus areas.

Questions

1. Can you please tell me what your position's roles and responsibilities are?

   a. In actual practice, does your role involve any additional roles and responsibilities to what you just described? If yes, what are they?
   b. In your view, what do you think the role of subnational actors in the care reform sector mainly is?
   c. In your view, what is the role of national level actors?

2. Which national level guidelines are most important in your day-to-day work?

   a. How much input did you provide as a practitioner to the development of these guidelines?
   b. How practical are the guidelines in practice? Do you find them useful to your work? What could be improved?
   c. How do you think these guidelines should be improved? Any requests/ recommendations?

3. How would you describe coordination efforts between different subnational level actors working in the care reform sector?

   a. Has coordination improved service delivery? If yes or no, why?
   b. How might coordination efforts be improved?

4. Do you feel you have the necessary skills to undertake your role effectively?

   a. If no, what other areas would you like more technical support or capacity building in to effectively do your job?
   b. What kind of training or method would help you best?

    c.   Have you been involved in any capacity building training activities? If yes, what did the training or activities focus on?

    d.   Do you find training/ capacity building events and workshops helpful, or would you prefer ongoing mentoring in your day-to-day job? Why?

    e.   Are there any other requests/ suggestions on capacity building for you and/or your staff at your organisation?

5.   What kind of funding do you receive from the national government?

    a.   How important is this funding to undertaking your work?

    b.   Is this funding easy to access? If yes or no, why?

    c.   What other funding do you receive?

    d.   Are there any changes to funding that you'd like to see?

6.   What have been the main changes since the transfer of functions to district and municipality level?

    a.   Has this affected your work? If so, how?

    b.   What have been the challenges?

    c.   What have been the benefits?

    d.   Are there any other requests/ suggestions on how to make the functional transfer more effective?

7.   What have been the main changes since the restructuring of the district and municipality administrations?

    a.   Has this affected your work? If so, how?

    b.   What have been the challenges?

    c.   What have been the benefits?

    d.   Are there any other requests/ suggestions on how to make this particular reform more effective?

8.   What kind of monitoring and evaluation (M&E) activities do you undertake?

    a.   How often is M&E undertaken?

    b.   Are there any M&E activities undertaken by external organisations?

    c.   Do you feel that feedback from M&E findings is effectively actioned by subnational and national level actors?

    d.   What improvements would you suggest for M&E and other feedback mechanisms?

9.   What are some of the biggest challenges you face in your work?

    a.   How do these challenges impact the children you are assisting?

    b.   What would help to reduce the negative impact of these challenges?

10.   Is there anything else you'd like to add?