

**We open
eyes.**

Accountability Interim Report 2020



Table of contents

List of acronyms	2
1. Opening Statement	3
2. Update on improvement areas identified by the Independent Review Panel (IRP)	4
2.1 Sustainability of your work (B1)	4
2.2 Responsible stewardship for the environment (C5)	4
2.3 People and partners have gained capacities that last beyond immediate intervention (E4)	5
2.4 Evidence regarding the root causes of the problems you address (F1)	6
2.5 Stakeholders support your advocacy work and value changes achieved (F2)	7

List of acronyms

AN	Accountable Now
CBID	Community-Based Inclusive Development
CBM	CBM Christoffel-Blindenmission Christian Blind Mission e.V.
CHS	Core Humanitarian Standards
CO	Country Office
CRPD	Convention on the Rights of Persons with Disabilities
DRR	Disaster Risk Reduction
IPCM	Inclusive Project Cycle Management
IRP	Independent Review Panel
OPD	Organisation of Persons with Disabilities
PQF	Programme Quality Framework
UN	United Nations

1. Opening Statement

2020 has been a year of evolution at CBM. The separation into two distinct CBM entities, CBM Christian Blind Mission and CBM Global, enabled increased focus and efficiency of our operations. Work on the transformation and implementation of our Strategy has progressed well, while at the same time, a more effective organisational set-up for CBM is being implemented.

These changes have brought up new learnings based on which we continue to adapt implementation. In this sense, our flexibility and adaptability increased making it a journey which is equally demanding and rewarding.

Of course, throughout this period of change, some things have remained constant. Our Vision and Mission remain the central pillars which guide our work, motivate our staff and ultimately help make the difference in the lives of those we seek to serve.

At the same time, agility and accountability as an organisation remain fundamental themes of our strategy implementation.

In terms of the delivery of programmes, the Programme Quality Framework (PQF) has been streamlined into our processes. Another key area of focus has been the effective implementation of the collaborative approach between partners, country offices, technical advisors and fundraising teams to jointly own our programmes. This enables a closer connection between beneficiaries and the organisation and improves the quality of our relationships with partner organisations.

As far as staff are concerned, the review of key policies such as our Code of Conduct or the Safeguarding and Safety & Security Policies, is helping to foster an ever clearer understanding amongst CBM staff and partners of the standards they are expected to meet.

And with the launch of our new management structure in 2020, information sharing is being significantly improved. This encourages more effective communication across CBM and creates synergies.

Respectfully,

A handwritten signature in blue ink, appearing to read 'Rainer Brockhaus', is written over a light blue horizontal line.

Dr Rainer Brockhaus

CEO CBM Christian Blind Mission

June 2021

2. Update on improvement areas identified by the Independent Review Panel (IRP)

2.1 Sustainability of your work (B1)

IRP Feedback: ‘The Evaluation Synthesis 2018 and the CHS Self Assessment both point to the need to improve exit strategies. The next CBM accountability report could usefully show whether/how the management has addressed these findings.’

Findings from the independent Evaluation Synthesis 2018 and the CHS self-assessment on exit are being acted upon at different levels, to support embedding of exit and sustainability considerations in the day-to-day work with partners.

Between 2018 and 2020 key programme processes have been undergoing review, resources have been developed and peer learning has been strengthened as follows:

- In 2020, guidance on partner sustainability, capacity development and exit were strengthened in the context of CBM’s partnership process (see section 2.3).
- The reviewed internal project approval process fosters reflection on partner capacity and development at the pre-approval stage. In addition, the project design form includes a section to reflect on sustainability of project aims and outcomes and specifically asks for planning responsible exit.
- CBM standard reporting templates have been reviewed and include more targeted questions on sustainability. Partners submit narrative reports (6-month frequency) and financial reports (3-month frequency) to CBM. Flexibility to use quarterly narrative frequency is also provided for formally agreed cases. An annual or project completion report is submitted at the end of the year/end of project support period.
- There is an increasing focus on peer learning for enhanced understanding of sustainability and exit in project and partner work through online peer-exchange and training sessions. The 2020/21 calendar for online sessions has been developed with input from Country Office and Regional Hubs. For example, a session on ‘Sustainability & Ownership’ was organised in 2020. Two online sessions were organised in February & March 2021 on the partnership process. A session specifically dedicated to ‘Responsible Exit’ will be organised in July 2021, led by colleagues from the Asia & Americas region.
- Input from online sessions on the partnership process have been documented in Learning papers, and good practise examples will be shared across the organisation, e.g. the exit plan template developed by staff in the Asia & Americas region.

Other resources to strengthen sustainability of CBM’s programme work are also being developed. The Crisis Modifier Toolkit was developed in the course of 2020 and will be launched soon. The toolkit will be a major step towards linking humanitarian programming and long-term development by minimising the negative effects of natural disaster on CBM’s development projects.

2.2 Responsible stewardship for the environment (C5)

IRP Feedback: ‘CBM-I is due to strengthen its attention to Environmental Responsibility by implementing an Environment Policy and Guideline, which could be referenced in the next report if complete. The reporting omits quantitative reporting on CBM-I environmental performance, for example, its carbon footprint, or any plans to report such data or to improve environmental performance.’

A CBM Policy on Environmental Responsibility was decided upon in June 2021. The process for its implementation will be developed in the course of 2021/2022. The first quantitative reporting on CBM environmental performance is expected to cover the year 2022.

In the course of 2020, CBM actively contributed to the development of the guide on environmentally sustainable practices in eye health launched by the International Agency for the Prevention of Blindness (IAPB) Climate Action Working Group ([link](#)). Further, CBM promotes responsible environmental stewardship in its project work through dedicated scrutiny of environmental impact and mitigation measures in the Project Design Form and related Guidelines incl. carbon footprint offset payment.

2.3 People and partners have gained capacities that last beyond immediate intervention (E4)

IRP Feedback: ‘The report states that this has been covered in B1 but no information of substance on capacity development is provided there, apart from the Sri Lanka example.’

At partner level, CBM’s partnership process prescribes the development of an action plan after a partner assessment is conducted, based on defined criteria. The aim is to jointly agree with the partner on any areas that require capacity strengthening. In the 2020 review of the partnership process (see also section 2.1) a more explicit partner development pathway, and capacity development requirements, have been outlined. To enable better planning of resources and targeted response to capacity needs, non-earmarked funds are now available at country offices level and a 5-year funding framework is provided.

At project level, depending on identified needs, project interventions contribute to strengthening local capacities and systems. This includes, but is not limited to, strengthening of local networks, capacity development, training and technical support. For example:

- The Cameroon Baptist Convention Health Services, in partnership with CBM, set out to work with local councils and other development stakeholders in the Northwest region of Cameroon to mainstream disability in community development. As a result, some Councils adopted CBID plans and appointed Disability Focal Points, others appointed gender and child safeguarding focal points who work closely with the Program’s Safeguarding Unit. Funding for the reforms is included in the council annual budgets, strengthening the impact of work beyond CBM’s support.
- CBM in Vietnam supported training of trainers and capacity building workshops for local participants (2016-20), including persons with disabilities. As a result, 88 trainers with disabilities have become resource persons to provide training on disability inclusive development and act as focal points for policy advocacy on CRPD and disability rights.
- In 2020, CBM consolidated the Community Based Inclusive Development (CBID) Capacity Development and Training Programme, which had been developed over the past years with active involvement of partners and Organisations of Persons with Disabilities (OPDs). All trainings are delivered with strong involvement of persons with disabilities, as co-trainers, co-facilitators or key resource persons.
- CBM supports the implementation of high quality CBID programmes, which are crucial for realising CRPD and Agenda 2030 at local levels and for which qualified CBID practitioners and managers are needed. The training addresses this need by leading participants through different modules, covering a wide range of topics around disability, disability inclusion, community mapping, stakeholder analysis, understanding CBID, key international frameworks, systems strengthening, accessibility, gender and intersectionality, to name a

few. Training participants are expected to implement and multiply the CBID approach, which aims to ensure that people with disabilities, their families and their organizations are among the leaders in local development and have equal access to social and development benefits like everyone else in their communities.

In addition, in 2020 it was decided to start a programme in 15 countries with a budget of € 5,75 million programme over 5 years to strengthen the humanitarian and DRR/preparedness of CBM's COs and partner organisations.

Section 2.4 and 2.5 provide additional examples of the work implemented by CBM together with its partners and how this contributes to strengthening the long-term impact of our joint work.

2.4 Evidence regarding the root causes of the problems you address (F1)

IRP Feedback: 'The report provides no explanation of how the process of the assessment of root causes works other than stating 'through programme work and technical expertise CBM gather evidence on root causes.'

CBM conducts work at country and international level. The process used by CBM to assess root causes varies according to work being implemented.

For strategic planning exercises, a context analysis, including policy framework, is conducted ahead of any planning processes, and partners & relevant stakeholders are regularly consulted. For example, at country level Ethiopia has made good experiences with its adaptive management approach to ensure that the Country Plan remains relevant. The Country office conducts an internal evaluation on a yearly basis and reviews the country plan based on findings. During the Annual Partners Meeting, a session is always allocated to present about achievements and gaps of the country plan.

The principle of participation and community involvement in project development (iPCM), including advocacy activities, supports our evidence base in programming, and guides our work with partners. Partners determine the needs of the communities and for new projects situation analysis are conducted. The root causes of development issues are worked out in a participatory manner, using methods such as problem trees. Development of project ideas includes consultation with communities and stakeholders. Technical expertise is provided during project design and throughout implementation, when needed. Findings of evaluations and, in some cases, outcomes of feasibility studies, are incorporated into project design. For example:

- In the context of planning the 'Decent employment project in Togo and Benin' (2017-21) with the Federation Togolaise des Associations, key stakeholders from civil society organizations and government institutions were involved, such as ANVT (Agence Nationale de Volontariat) and ANPE (Agence Nationale pour la Promotion de l'Emploi). Both ANVT and ANPE received training on inclusive project management. As a result, inclusion of people with disability was taken up as a priority in their organisational activities. Furthermore, in the process of reviewing its strategy, ANVT has requested input from CBM to ensure inclusion.
- After a series of typhoons and cyclones in Vietnam in 2020, the CBM Country Office liaised with OPDs and held community meetings in Quang Ngai, a province much affected by the heavy rainfalls and COVID-19 pandemic. As a result, a project on *emergency response for disaster recovery and preparedness* was developed to increase efforts in disaster risk reduction for persons with disabilities and their communities.
- CBM jointly with Handicap International (Germany) (HI) and University of Bochum is implementing a research project. As a result, more evidence on the linkages between humanitarian action and disability becomes available (research ongoing). This includes

findings on levels of participation. More information about the one component of the research can be found on the *Humanitarian Practice Network* ([link](#)).

In addition, the CBID training programme (see also 2.3) includes sessions on tools for identification of root causes, e.g. community mapping, stakeholders analysis and community self-assessment among others.

2.5 Stakeholders support your advocacy work and value changes achieved (F2)

IRP Feedback: ‘The report does not explain how partners engage people with disabilities in advocacy messaging or how their representatives engage with the CBM advocacy team.’

CBM conducts and supports advocacy activities at country and international level using different approaches.

At programme country level, CBM supports partners’ advocacy activities and, in some cases, CBM implements its own activities. Support is provided through funding, training or technical expertise. Examples of advocacy activities include the following:

- CBM Country Office Nigeria together with its partner JONAPWD and the Federal Ministry of Health (MoH) ensured that newly developed policies are inclusive of persons with disabilities. As a result, inclusive national guideline and standard operating procedure for Eye Care during the COVID-19 Pandemic have been developed with the Eye Unit under the MoH. Further, inclusive Performance Standards for provision child Eye Health Services in Nigeria have been developed through the collaboration with JONAPWD and MoH (2020).
- In Vietnam, CBM and its partner ACDC have been working closely with Vietnam Federation on Disabilities and member OPDs. As a result, an alternative report on CRPD (shadow report) was developed, and advocacy was conducted for policy development and endorsement for the rights of persons with disabilities in Vietnam.
- In Indonesia, CBM facilitated a process for inclusive policy development, together with the Centre for Inclusive Policy and Disability Rights Fund. As a result, OPDs provided leadership and commitment and a policy paper on social protection for people with disabilities was developed.
- With the support of CBM, the Ethiopian Center for disability and development (ECDD, Ethiopia) organised awareness raising activities on the situation of Persons with disabilities during the Covid-19 pandemic. As a result, WHO/Ministry of Health guidelines and information packages have been produced in alternative accessible formats e.g. Sign language, Braille, Easy-Read versions, and broadcasted

The CBID training (see section 2.3) also includes modules on localised advocacy strategies. The aim is to strengthen capacities for advocacy, and ultimately enhancing of advocacy activities supporting the rights of people with disabilities in line with the CRPD.

At the international level and in donor countries, CBM implements its own advocacy activities and facilitates opportunities for representatives of people with disabilities from the Global South to participate in decision making processes. For example:

- In 2018 Ms. Lan Anh, a CBM partner representing persons with disabilities attended the High-Level Political Forum (HLPF) - a UN central platform for follow-up and review of the 2030 Agenda for Sustainable Development. As a result, Lan Anh was able to make a statement at the Stakeholder Group of Persons with Disabilities session and contribute to the HLPF.

- Two OPD representatives from Kenya and Indonesia visited Germany at the end of 2018. They met several MDP's and government representatives in Berlin. The aim of the meetings was to provide German decision makers working in the field of Development & Cooperation a first-hand impression about the living conditions of people with disabilities in partner countries of Germany's development cooperation.