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ABBREVIATIONS

AASCIF	ASEAN Australia Smart Cities Trust Fund
ADB	Asian Development Bank
ASEAN	Association of South East Asian Nations
CDC	Council for Development of Cambodia
DFAT	Department of Foreign Affairs and Trade (Australia)
ICD	Inclusive Cities Dialogues
TAE	The Asia Foundation

UNCPRD United Nations Convention on the Rights of Persons with Disabilities

1 INTRODUCTION



1.1 BACKGROUND AND PROJECT RATIONALE

The Inclusive Cities Dialogues (ICD) project directly contributes to the ASEAN Australia Smart Cities Trust Fund (AASCTF or "Trust Fund") program's aim to build livable, resilient, and inclusive cities across Southeast Asia, while in the process identifying scalable best practices that can be replicated across cities in Asia and the Pacific. Through a series of regional dialogues with key city actors pursuing reform or with decision-making roles, the ICD Project will provide a platform for dialogue on the potential for planning and implementing more inclusive cities. These dialogues bring together a diverse range of stakeholders from "bronze," "silver," and "gold" level cities on dynamics of exclusion to build consensus and incentivize actionable and participative reforms to strengthen inclusion on salient urban issues.

At its core, the ICD project seeks to embed a gender equality and inclusion lens in how cities are designed and governed, and thereby to improve responsiveness, accessibility, and quality of urban governance to effectively address and meet the needs of women, people with disabilities, children, older persons, and members of other marginalized groups. In seeking solutions to some of these challenges, the project focuses on the intersection between Smart and Inclusive. By "smart," we mean the ways in which urban living is being improved through innovations in technology, design, planning and policy. By "inclusive", we mean the ways in which urban living is being improved through greater access to opportunities, services and resources for all citizens, but in particular the marginalized and disadvantaged.

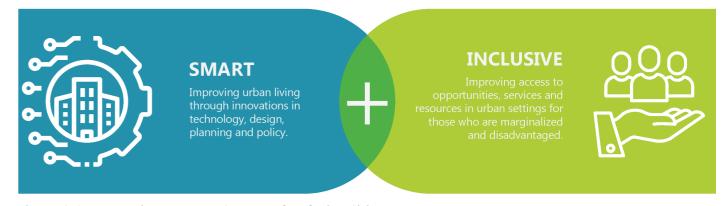


Figure 1-1 Intersection Between Smart and Inclusive Cities

The ICD project has been designed to ensure early and continuous engagement with stakeholders throughout the project period. The project began with a stakeholder and issues mapping analysis. Based on the stakeholder and issues mapping analysis, the ICD team identified three issues that were seen as salient by a diverse set of actors within each city and across the various cities. Each multi-stakeholder dialogue focuses on one of these issues, namely:

- Module 1: Access to infrastructure and services
- · Module 2: Safety and security
- Module 3: Access to decent work and income

In line with the project's strategic approach of local ownership; political feasibility; and inclusive process, the multi-stakeholder sessions have been framed from the perspective of disadvantaged groups and are intended to enable peer learning among city-level and national stakeholders. In order to maximize engagement, participants have been divided into three cohorts. The first two cohorts comprise of city-level actors from government and non-governmental organizations, while the third cohort comprises of national

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and regional level actors. Each participant cohort will attend a total of three dialogues, each focused on one significant inclusion issue. Table 1-1 summarizes the key activities under the ICD project:

Table 1-1 ICD Activities

No.	Key Activities		Timeline
I.	Stakeholder and Issues Mapping		October to November 2022
	Multi-stakeholder dialogues	Module 1: Access to infrastructure and services	4th, 17th, and 24th March 2022
		Module 2: Safety and Security	May 2022
		Module 3: Access to decent work and income	June-July 2022
III.	Inclusive Cities Event		September 2022
IV.	E-Learning Module		September 2022

The dialogues will conclude with an online public Inclusive Cities Event that will bring together stakeholders across the region to highlight locally-led examples of good practices, share reflections from the dialogues, provide further networking opportunities for dialogue participants with a wider group of stakeholders, and contribute to building momentum around inclusive reform. The ICD Project will also deliver an e-learning module on inclusive cities that consolidates the workshops into one product for broader dissemination by participating cities, partners, and champions therein.

Together, the ICD Project aims to:

- Increase awareness towards addressing exclusion, disenfranchisement, and discrimination when understood from the perspective of women, disabled persons, and other marginalized groups.
- Facilitate engagement between stakeholders to identify strategies to address exclusion and marginalization.
- Support networking and galvanize action towards politically feasible reforms for inclusive cities in ASEAN.

The ICD Project has been engaging stakeholders from government, civil society and the private sector from a total of 14 cities that are already part of the AASCTF¹. The selection of cities was based on level of traction with engaging stakeholders across Trust Fund cities by November 2021. Cities where the Trust Fund was in the early stages of building relationships were left out mainly due to time constraints.

Table 1-2 Project Focus Cities

Country	City
Indonesia	Makassar; Semarang; Banjarmasin
Viet Nam	Hue
Cambodia	Battambang; Phnom Penh
Philippines	Baguio; El Nido; Coron
Malaysia	Penang
Thailand	Chonburi
Lao PDR	Kaysone; Luang Prabang
Lao PDR	Pakse

¹ ASEAN cities participating in AASCTF are Makassar, Semarang, Banjarmasin, Hue, Gia Nghia, Phan Rang, Phan Thiet, Ho Chi Minh City, Battambang, Phnom Penh, Kampot, Bevat, baguio, El Nido, Coron, Penang, Kaysone, Luang prabang, Pakse, Vientane, Chonburi

In order to ensure full and inclusive participation of all stakeholders, the multi-stakeholders ensured simultaneous translation was available. Table 1-3 portrays the list of languages and translations being offered for each cohort.

Table 1-3 List of language translation provided in each cohort

Cohort	Languages
Α	Bahasa
	Khmer
	Lao
	Indonesian Sign Language
В	Bahasa
	Khmer
	Lao
	Malay
	Thai
	Indonesian Sign Language
С	Bahasa
	Khmer
	Lao
	Thai

This Project is a collaboration between Ramboll and The Asia Foundation ("The Foundation").

- The Ramboll team leads in liaising with ADB/DFAT; ensuring alignment of activities and communications across the wider AASCTF program and activity streams; guiding the e-learning module production; coordinating and facilitating broad stakeholder engagement; and supporting logistics around-, and interpretation requirements for each dialogue session and the final event.
- The team at The Asia Foundation is being led by its Regional Governance Team in partnership with six country offices and Kore Global. The Foundation is leading the development and facilitation of each dialogue session and the online community; identifying and engaging with participants and speakers; and developing communication content.

1.2 OBJECTIVES OF THIS REPORT

This report provides an update on project activities implemented between December 2021-March 2022. It includes three sections beginning with a summary of the overall aim and approach of the Project. The second section details the design of the multi-stakeholder dialogues and delivery of Module 1 including information on key activities and outputs. The report concludes by summarizing key learnings and detailing upcoming activities and key priorities for the team moving forward.

2 MODULE 1- SERVICES AND **INFRASTRUCTURE**



2.1 PRE-MODULE SURVEY SNAPSHOT

In order to ensure the multi-stakeholder dialogues were responsive to the priorities and challenges of stakeholders, the ICD team launched a pre-module survey that was implemented between December 2021 and February 2022. A total of 54 participants responded to the survey. Close to 50 % of respondents identified as male with the other half identifying as female. One respondent identified as non-binary.

Over 40% of the respondents were from city governments highlighting a strong interest from city level decision makers and administrators. Overall, 84% of the respondents were working on increasing inclusion in their respective cities and countries, thus demonstrating a strong alignment of interest and commitment to the Project objectives.

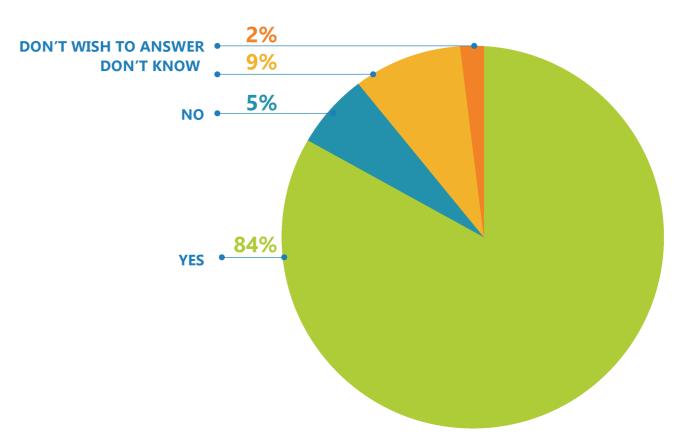


Figure 2-1 Percentage of participants working on inclusion

When asked about the relevance of the module themes, i.e., access to services and infrastructure, safety and security, and access to decent work and income, 90% of the respondents noted it as very relevant or extremely relevant. The survey provided space for respondents to note other inclusion challenges in their city. Here respondents noted "education for all" as a key priority and highlighted that women, children and people living with disabilities continue to remain marginalized.

See figure 2-2, 2-3, 2-4, 2-5 and 2-6 shows the relevance of respective inclusion topics to the role of respondents.

RELEVANCE OF ACCESS TO SERVICES TO RESPONDENTS ROLE

EXTREMELY RELEVANT 35% VERY RELEVANT 45% MODERATELY RELEVANT 7% NOT RELEVANT AT ALL 0%

Figure 2-2 Are there any specific inclusion issues that you think are very important or particularly challenging in your role in terms of ACCESS TO SERVICES (e.g., transportation, healthcare, education etc.)?

RELEVANCE OF ACCESS TO INFRASTRUCTURE TO RESPONDENTS ROLE

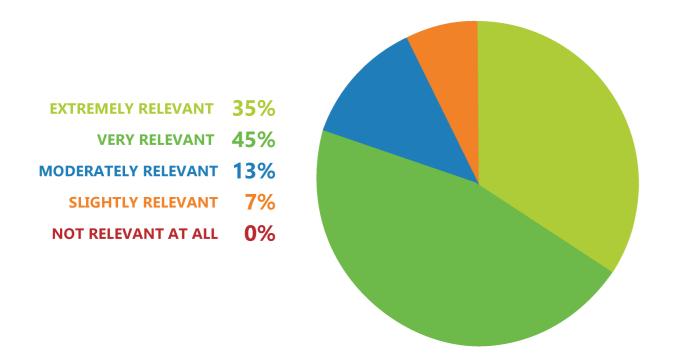


Figure 2-3 Are there any specific inclusion issues that you think are very important or particularly challenging in your role in terms of ACCESS TO INFRASTRUCTURE (e.g., pavements, roads, public spaces etc.)?

RELEVANCE OF ACCESS TO SAFETY AND SECURITY TO RESPONDENTS ROLE

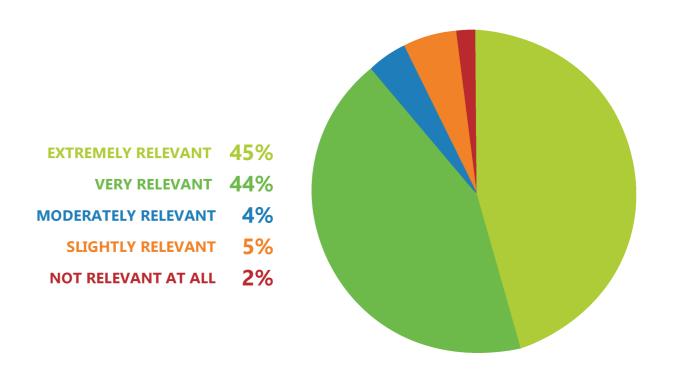


Figure 2-4 Are there any specific inclusion issues that you think are very important or particularly challenging in your role in terms of SAFETY AND SECURITY (e.g., physical and/or emotional security of women being able to stay out late at night; safe neighborhoods)?

RELEVANCE OF ACCESS TO DECENT JOBS TO RESPONDENTS ROLE

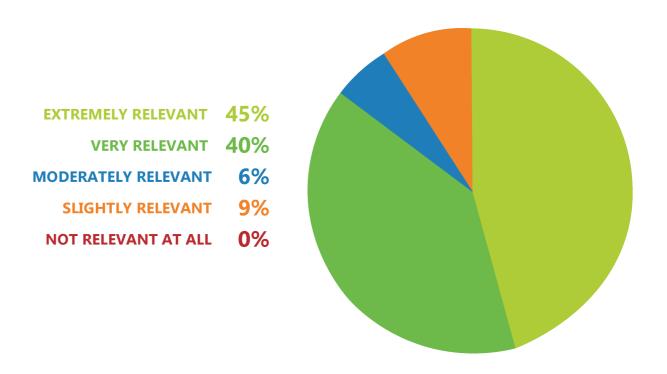


Figure 2-5 Are there any specific inclusion issues that you think are very important or particularly challenging in your role in terms of ACCESS TO DECENT JOBS (eg. opportunities and access to information about employment to women and people with disabilities?

What do you look forward to take away from the multi-stakeholder dialogues?

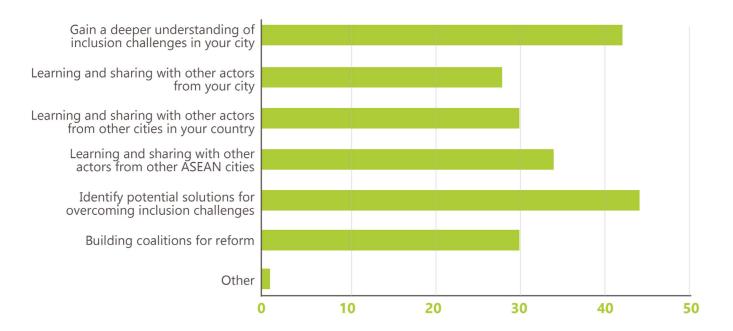


Figure 2-6 Expectations from Multi Stakeholder dialogues

Responses on the pre-module survey demonstrated a high level of interest in both the content and design of the dialogues. The findings furthermore directly contributed to the content design of the multi-stakeholder dialogues.

2.2 MODULE 1: OVERVIEW

The first module on access to services and infrastructure the project team considered five dimensions (see Figure 2-7) that need to be considered to ensure that individuals and groups can physically access services such as public transport and are afforded basic services such as transport, water, health and education; that services themselves are geographically distributed and available for all instead of for a privileged few; that discrimination and stigma and barriers related to them are overcome; and that all residents, particularly those most marginalized, have equal voice and opportunity to influence decisions in the planning of urban infrastructure and services.

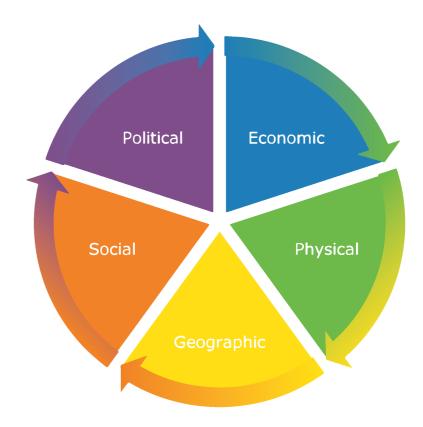


Figure 2-7 Dimensions for inclusive access to infrastructure and services

In line with the project's approach around building local ownership and keeping with adult learning principles, each dialogue was designed to be led by local actors on issues that mattered within individual cities and facilitate discussions among peers to deepen learning (See Appendix A for illustrative session design). In most cases, the team identified speakers from dialogue participants who were already leading inclusion-focused initiatives on the focus issues. These participants or "sharers" were invited to share their insights regarding on-going challenges and how they have responded to them in their city.

2.3 PARTICIPANT BACKGROUND

The stakeholder mapping process identified a total of 169 stakeholders that were invited to attend the dialogues.² Stakeholders were divided into three cohorts from each city to ensure fuller participation. The first two cohorts included stakeholders working at a city level across a range of issues. The third cohort actors focused on the participating AASCTF cities but working at national and regional level.

COHORT A

A total of 50 participants attended the first cohort from the following cities:

- Coron (PHI)
- El Nido (PHI)
- Semarang (INO)
- Phnom Penh (CAM)
- Kaysone (LAO)

As per a short Mentimeter poll conducted at the beginning of the session, those attending came from a variety of backgrounds ranging from government, private sector, civil society and academia, or multi-lateral agencies and INGOs.

The ICD team was also keen to learn about participants experience and depth of knowledge with regard to inclusion aspects of urban governance. Here too, the Mentimeter poll indicated that the majority of participants felt they were well informed about inclusion issues, though no one felt their knowledge level was advanced. Few participants saw themselves as starting out but indicated an interest and willingness to learn more.

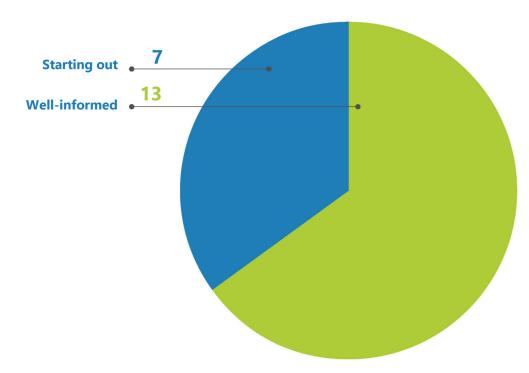


Figure 2-8 Cohort A. How would you describe your knowledge and experience on this topic?

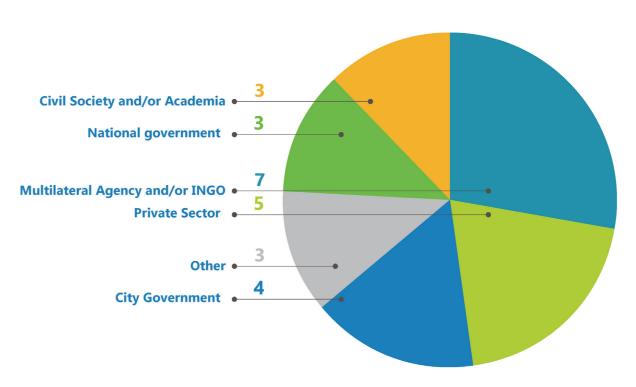


Figure 2-9 Cohort A. What is your background?



Figure 2-10 Cohort A of Module 1 (Access to service and Infrastructure)

² This included a total of 58 participants invited for Cohort A; 85 participants for Cohort B; and 26 participants for Cohort C.

COHORT B

A total of 79 participants attended the second cohort from the following cities:

- Baguio (PHI)
- Makassar (INO)
- Penang (MAL)
- Battambang (CAM)
- Pakse (LAO)
- Davao (PHI)
- Luang Prabang (LAO)
- Chonburi (THA)

Cohort B had a sizeable proportion of participants from civil society and academia in addition to representatives from city government and the private sector. Participants who indicated "other" were representatives from marginalized communities who saw themselves as distinct from civil society.

Participants in this cohort were more mixed in terms of their knowledge and experience, with a small proportion who described their knowledge as advanced. Most of the participants still felt that they were either starting out or were well-informed about the subject.

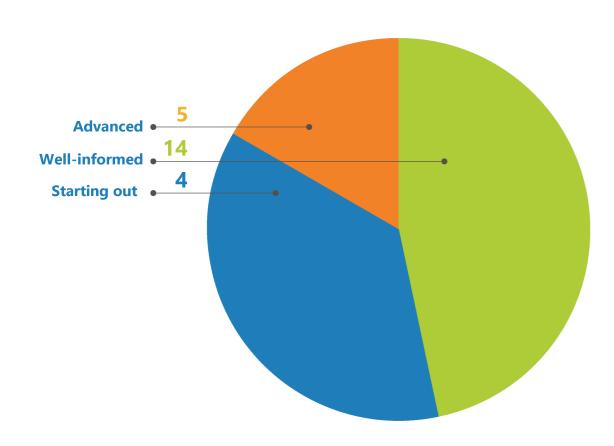


Figure 2-11 Cohort B. How would you describe your knowledge and experience on this topic?

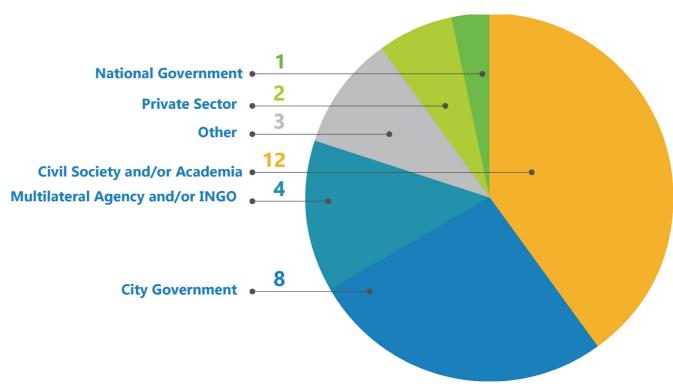


Figure 2-12 Cohort B. What is your background?

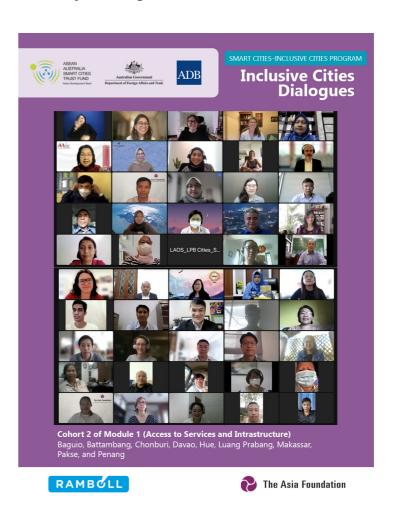


Figure 2-13 Cohort B of Module 1 (Access to service and Infrastructure)

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COHORT C

A total of 45 participants attended the third cohort from national and regional government. They included representatives from regional organizations and collectives such as the ASEAN Secretariat and Partnerships for Infrastructure. The cohort also included participants from national government such as the Deputy Director of the Private Investment Strategy Analysis Department, The Council for the Development of Cambodia (CDC), and Deputy Director General, Department of Housing and Urban Planning, Ministry of Public Works and Transport, Lao PDR; civil society such as Philippine Coalition on Convention on the Rights of Persons With Disabilities in the Philippines (UNCPRD) and Partnership for Governance Reforms (Kemitraan), Indonesia; and the private sector.

The majority of participants felt they were well-informed about aspects of inclusion in relation to access to infrastructure and services, with some noting that they were just starting out and even fewer with advanced levels of knowledge and experience.

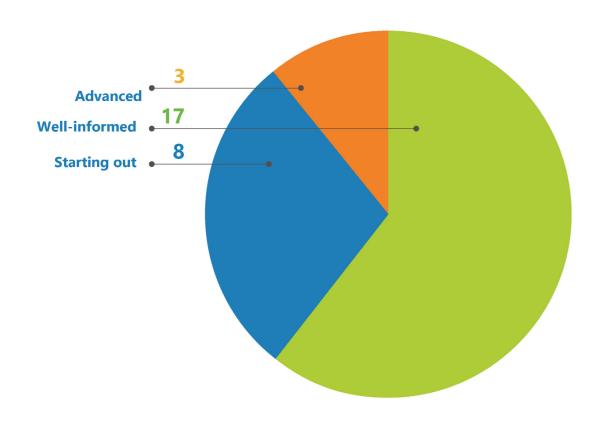


Figure 2-14 Cohort C. How would you describe your knowledge and experience on this topic?

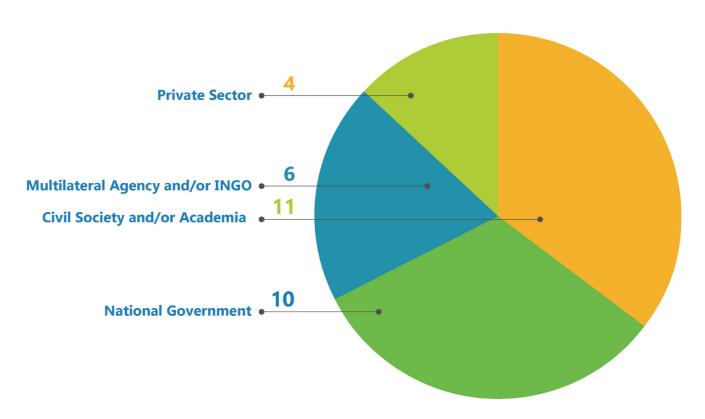


Figure 2-15 Cohort C. What is your background?



Figure 2-16 Cohort C of Module 1 (Access to services and infrastructure)

2.4 DIALOGUE OBJECTIVES

Each dialogue followed a similar structure consisting of three core sessions each corresponding to the dialogue objectives, which were to:

- 1. Deepen understanding of the ways in which marginalized groups experience exclusion and discrimination and why these issues continue to persist;
- 2. Learn from efforts (or the absence of efforts) to address exclusions in urban environments what has worked, what hasn't and why?; and
- 3. Facilitate discussions on potential solutions.

Table 2-1 Opening Remarks from DFAT/ADB Representatives

Cohort	Opening Remarks	Speaker (Name, position, background)
	DFAT Representative	Caroline Scott, Deputy Head of Mission to the Australian Mission to the ASEAN
A	ADB Representative	Elizabeth Jung, Urban Development Specialist, Southeast Asia Department, Asian Development Bank
D	DFAT Representative	Caroline Scott, Deputy Head of Mission to the Australian Mission to the ASEAN
В	ADB Representative	Veronica Mendizabal Joffre, Senior Gender and Social Development Specialist
	DFAT Representative	Christine Clarke CSC, Ambassador for Women and Girls, Department of Foreign Affairs and Trade
C	ADB Representative	Samantha Hung, Chief of Gender Equality Thematic Group, Sustainable Development and Climate Change Department

Each dialogue followed a similar structure (see Appendix A for illustrative agenda) that was tailored to each set of speakers and participants. As it was the first of a series of dialogues, each session opened with remarks from representatives from DFAT and ADB (See Table 2-1). As the multi-stakeholder dialogues have been presented as a series of one overall activity, DFAT and ADB will be requested to provide opening remarks at Final Inclusive Cities Event.

Each module consisted of three core sessions, namely:

- Session 1: to deepen understanding of the ways in which marginalized groups experience exclusion and discrimination and why these issues continue to persist;
- Session 2: to learn from on-going efforts across ASEAN cities to address exclusion and marginalization in urban environments;
- Session 3: small group discussion (and action) on potential solutions and actions to strengthen inclusion in AASCTF participating cities.



2.5 BRIEF DESCRIPTION OF EACH COHORT

During Cohort A, sharers were invited to present their analysis and experience in both session 1 and 2 of the workshops. Following the first session with Cohort A and based on discussions from the post-dialogue reflection, the team decided to reduce the number of presentations to make more space for interaction among participants. The team was intentional in ensuring that each session had a balance of actors from civil society, government, and private sector, and represented different dimensions of inclusion.

Both Session 1 and 2 included a plenary discussion where all participants were invited to share their experiences and reflections on the presentations. For session 1, participants were encouraged to share their views on the issue of inclusion: what kind of issues exist and why the problems persist. Responses were received from participants from Makassar, Indonesia discussing that curriculum in schools needed to include awareness on physical disablement. Other participants added the need to normalize disablement by the government and reflected on the need for building infrastructure suitable to the requirements of the people living with disabilities. Others highlighted the need to broaden the framing of disability beyond physical access to one that is responsive to multiple forms of disability. An important and recurring conversation was the need to challenge discriminatory social norms and generate more acceptance among society. Participants from Philippines highlighted on the need for inclusive teachers and adequate resourcing for training them. This work was seen as complementary and as important as the need to work with formal institutions on planning, budgeting, and infrastructure development. Here lack of adequate budgetary allocation and absence of inclusion considerations at the start of the project was highlighted as a crucial barrier. Both presenters and participants noted that strengthening inclusion requires a multi-sectoral approach.

During session 2, participants reflected on on-going initiatives to address exclusion in their cities and identify factors that contribute to inclusive reform and sustainable programming. Community ownership was highlighted as an important factor in ensuring reform and programs to be accessible and sustainable. In Cohort B, the Chief Executive Officer of the Penang Women's Development Corporation shared with the group that the successes of her organization resulted in mainstreaming gender across budgets in key public sector policies and creating platforms for the participation of women in urban governance. Participants also highlighted the need for consultations and strengthening public participation, particularly with those who are most marginalized, and are often unable to access urban infrastructure and services. Again, the need for an intersectional response was highlighted.

Table 2 2 Overview of speakers and their presentation

Cohort	Session	Speaker (Name, position, background)	Presentation Title
	1	Rada Chor, Technical Support Manager, Humanity and Inclusion (Phnom Penh, Cambodia)	Making Cities Inclusive: Access to Infrastructure and Public Transport Services for Persons with Disabilities in ASEAN (Part I)
	1	Dr. Indra Kertati, Director, Institute for Assessment and Development of Resources (Semarang, Indonesia)	Disability Issues and Challenges in Semarang City
А	1	Chin Fernandez, President, Calamianes Association or Tourism Establishments Inc. (Coron, The Philippines)	Case study of Coron, Philippines
	2	Rada Chor, Technical Support Manager, Humanity and Inclusion (Phnom Penh, Cambodia)	Making Cities Inclusive: Access to Infrastructure and Public Transport Services for Persons with Disabilities in ASEAN (Part II)
	2	Slamet Budiutomo, Regional Planning Agency (Semarang, Indonesia)	No One Left Behind: Building Semarang City as An Inclusive City
	2	Kat Bun Heng, WASH Enterprise & Urban Innovation Program Manager, Habitat for Humanity (Battambang, Cambodia)	Inclusive City: Integrating Urban Poor Informal Settlement Community (slums) into Sustainable Urban Planning and Public Services
В	2	Diego Ramirez-Lovering, Professor or Architecture, Faculty of Art, Design and Architecture, Monash University (Australia)	Revitalizing Informal Settlements and their Environments
	2	Liza Marzaman, Community Facilitator, Build Team, Rise Program (Makassar, Indonesia)	Revitalizing Informal Settlements and their Environments
	2	CEO, Penang Women's Development Corporation (Penang, Malaysia)	Gender Responsive and Participatory Budgeting (GRPB): The Penang Experience
	2	Akhra Chhorn, Director of Disablity Development Unit, Ministry of Social Affairs, Veterans and Youth Rehabilitation, Cambodia	Technical Standards on Physical Accessibility Infrastructure for Persons with Disabilities
С	2	Kerrie Budge, Project Manager, Rise Program, Monash University, Australia	Revitalizing Informal Settlements and their Environments
	2	Liza Marzaman, Community Facilitator, Build Team, Rise Program (Makassar, Indonesia)	Revitalizing Informal Settlements and their Environments

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HIGHLIGHTED DISCUSSION POINTS FROM PARTICIPANTS FROM COHORT B AND C

Table 2-3 Discussion points from Cohort B and C

Country	Inclusion issues	Emerging opportunities
Philippines	 Introduction of Mini-bus is not PWD (persons with disabilities) friendly Accessibility of emergency exits and routes for PWDS Poor Implementation of accessibility law Non-sustainability of earlier efforts on participatory and bottom-up planning 	Meaningful collaboration in governance processes between LGU and the community now with full devolution in place
Thailand	 Collaboration between local and national planning More voices to be reflected from ethnic minorities Lack of data on marginalized groups 	Accessibility issue to be considered in the future building constructions
Lao PDR	 Lack of access to financial support Lack of access to public transportation, especially for the disability Homelessness and informal dwelling resulted by migration into cities Leadership capacity and commitment at the local level 	 Economic zones in major cities will aid in terms of job creation The building code is being revised to ensure that it is more inclusive Rising public awareness of urban development
Cambodia	 Residents in informal settlements and their access to public services Lack of awareness from the public and implementors on inclusion issues 	 There is a collaboration between the government and civil societies to help the residents in informal settlements. More advocacy to the current implementors on inclusion is happening and also through education so that the inclusion actions are sustained Collaboration between ministries to ensure accessibility issues are covered in the implementations and planning

Table 2-3 cont.

Country	Inclusion issues	Emerging opportunities
Indonesia	 Lack awareness of communities and government on equal rights of marginalized groups including PWDs. Negative stigma and stereotypes are there in society towards minority groups. The issue of minority groups has not become a priority in national development planning. Ensuring access, participation and control by PWDs throughout the process Accommodating specific needs within the budget for marginalized populations 	 Synergy in public education related to the rights of minority groups. Public campaign on accessible facilities, including roads, public transportation, housing, water etc. Improve data collection to ensure the involvement of the most marginalized communities
Malaysia	 Heterogeneous nature of the community in a multi-cultural country Fair women political representation - Currently at 15% for population of 50% out of the country population Digital gap will create barriers to participate in inclusive discussions and actions 	Through policy master plans to give direction towards a better collaboration among agencies.
Regional	 Implementation of what are otherwise good standards - "implementation gap" - not only financial, it is about HOW TO implement as well Acknowledgement of the resourcing (human and financial) required for genuine, meaningful engagement with stakeholders 	 Finding "champions" within the cities that will be key messengers at the right levels Build concrete ideas from the community - local solutions to local problems Inviting policy makers to dialogues and consultations to hear examples of success

2.6 COMMUNICATIONS AND ONLINE ENGAGEMENT

To support project objectives and promote inclusive reforms in ASEAN cities, a communications plan was prepared to generate awareness for the different ICD activities. For Module 1, outreach was done through social media, primarily through the AASCTF channels in Facebook, LinkedIn, and Twitter. Dedicated graphics, such as photo cards and a photo carousel, were prepared to launch the dialogues and to capture post-event recaps. During each dialogue, live tweeting was conducted to capture highlights and interesting takeaways. When available, speakers and/or their organizations were tagged to help encourage likes, retweets, or shares, and amplify the message. For example, The Asia Foundation channel reshared and liked some posts, while individual TAF team members also shared or posted in their own accounts. A key account that posted about the dialogue is Australian Ambassador for Women and Girls Christine Clarke, who provided opening remarks during Cohort C. There was also some social media support from the Twitter account of Australian Ambassador to ASEAN Will Nankervis.



#InclusiveCitiesDialogues provides space for a wide range of urban stakeholders to address constraints for women and vulnerable populations, to participate and benefit equally in ASEAN's urban areas, as leaders, entrepreneurs, workers, and users of infrastructure @aasctf







Vibrant discussion on making SEAsian cities smarter, more inclusive & more liveable at yesterday's #InclusiveCitiesDialogue supported by via @aasctf. With COVID impacts affecting women disproportionately, innovations in tech, design & planning can access to opportunities.



Figure 2-17 Twitter engagement from two Australian ambassadors

The following links lead to the live tweet thread for each session of Module 1:

- Cohort A: https://twitter.com/aasctf/status/1499565426652893186?s=20&t=9xOLfh67hg4TQOC3p12h1Q
- Cohort B: https://twitter.com/nicolajnixon/status/1504332710659391494?s=20&t=9xOLfh67hg4TQOC3p12h1Q
- Cohort C: https://twitter.com/aasctf/status/1506813338785038336?s=20&t=9xOLfh67hq4TQOC3p12h1Q

The ICD project team has also set up a Facebook group to encourage engagement between the dialogue sessions and enable sharing across cohorts. At the end of each dialogue, participants were invited to join the Facebook group to continue discussions beyond the ICD sessions. In order to support these conversations, the ICD team introduced a reflection exercise and encouraged participants to engage in at least one of three potential exercises. The options included:

- WATCH a video shared by the ICD team.
- **CONVERSE** or speak with a colleague or someone from the dialogue. Participants were encouraged to share something that surprised or inspired them, made them reflect, or challenged their previous assumptions.

0

• **OBSERVE** the city around you! Participants were encouraged to take a picture related to "access to services and infrastructure" in their city that captures an example of exclusion or smart approaches to inclusion. Participants were then encouraged to upload these pictures on the Facebook group with a caption or written post.

Furthermore, speaker presentations and panel reflections for each cohort were livestreamed on the Facebook group.

2.7 SUMMARY OF POST-MODULE SURVEY FEEDBACK

Post each dialogue session, a post-module survey form was disseminated during the session and emailed to the participants of each cohort after each session. The objective of the survey was to evaluate the learnings participants gained on the topic, as well as applicability of such learnings to their work and contributions to the project. It also aims to receive feedback on the presentation of the dialogue sessions and suggestions to improve future dialogue sessions.

Responses to the post-module survey was minimal in comparison to the actual participation in the sessions as only 1 response was received from Cohort A, 17 from Cohort B and 8 from Cohort C (see Appendix D).

Among those that responded, above 70 percent of the participants agreed that their knowledge on access to services and infrastructure for marginalized groups in their city had improved after taking part in the dialogue session. 80 percent of the participants agreed that their work and practices post involvement in the session would change. Favorable responses were also received on the use of interpretation channels used during the sessions. Suggestions on including a gap analysis on policy making and its implementation was also provided by one participant and inclusion of topic of indigenous peoples in the discussions.

3 CONCLUSION



3.1 KEY LEARNINGS

The project's emphasis on early and continuous engagement ensured that participants felt that the focus and design of the project was developed in response to their needs and priorities. This was seen as especially important given the online modality of the project. Furthermore, many participants had existing relationships and parallel communication channels with country focal points, who were present online to provide additional support and encouragement during the two-hour zoom session.

The ICD team continued to improve upon and tailor workshop discussions based on debrief sessions and participant feedback post each cohort. A key learning post the first dialogue with cohort A was the need to carve out more time for among participants. In response, the team reduced the number of formal presentations/speakers per session post the session with Cohort A to enable additional time for discussion. Presentations from "sharers" i.e. dialogue participants who were implementing inclusion focused initiatives on the focus issue were limited to the second session of each dialogue that focused on "learning from ongoing initiatives". The first session of each module was also adapted. During this session, The Foundation produced an animated video that provided a framing of understanding inclusion in relation to access to infrastructure and services. Following the video, the ICD team facilitated a plenary discussion where participants were asked to reflect on and share their thoughts on underlying reasons for exclusions in their cities and why they felt these problems continue to persist. These changes to the dialogue format enabled increased interaction among participants from the start of the dialogue, brought in a variety of perspectives from different cities, and allowed for commonalities and differences across cities and perspectives to emerge.

The ICD team was also conscious of "leading from behind." From the start, there was an explicit emphasis on the multi-stakeholder dialogues being locally owned and-led. This meant that barring a seven-minute presentation prepared by The Foundation, which introduced the purpose of the dialogues and framed the focus issue, all presentations were developed and shared by stakeholders from participating cities. The design enabled an environment of peer learning as opposed to a unidirectional training from an "expert". It helped highlighting that strengthening inclusion within urban governance is a continuous and multi-stakeholder process, while simultaneously building momentum by introducing participants to a wider network of actors working to address on-going challenges by underscoring the wealth of experience and perspectives in the room.

The ICD team recognizes the importance of the post module surveys after each multistakeholder dialogues. During Module 1, post module survey forms were shared on conclusion of each module and followed through with individual emails to the participants. A key learning post Module 1 has been that to receive more traction in the responses, in the upcoming modules the survey forms will be shared mid-session with a dedicated timeslot for responses. Further to that, follow -up emails with access to links to the survey forms will be shared.

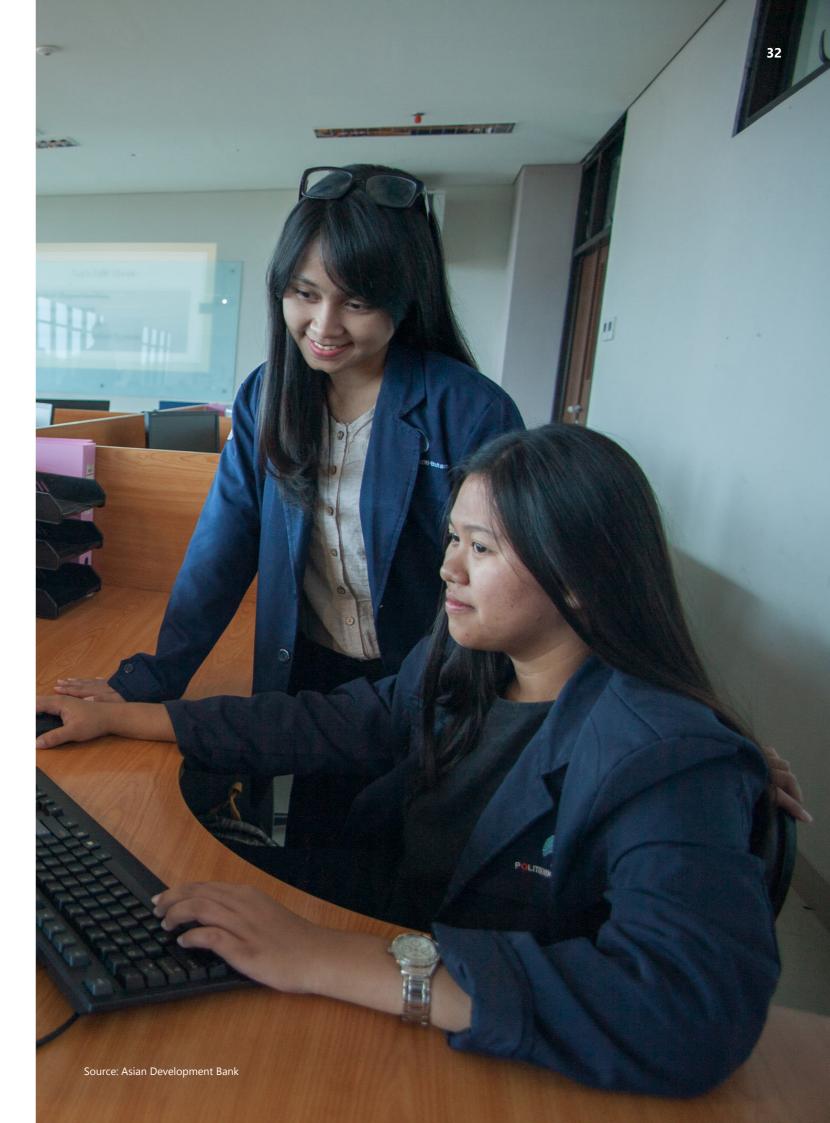
Finally, the dialogues demonstrated the importance of adequately resourcing for translation. The ability to provide simultaneous translation, including sign language translation, enabled us to bring together a diverse set of stakeholders without compromising on the quality of participation and learning.

3.2 NEXT STEPS

Over the next months, the ICD team will be working on developing the content for *Module 2* on Safety and Security. This includes identifying and preparing sharers and developing an animated video to frame the issue in session one.

The ICD team will continue to work on how to strengthen engagement in between dialogues, particularly on the Facebook group. This includes encouraging participants to share posts from their reflection exercise, sharing relevant learning opportunities, and encouraging greater engagement among participants.

Finally, in order to maintain momentum, the ICD team will continue to highlight conversations and insights from Module 1 through blogs, newsletters and other mediums. These communication outputs will be shared across the AASCTF, The Asia Foundation and Kore Global platforms, among others.



APPENDIX A: MODULE 1-ILLUSTRATIVE AGENDA



MODULE 1 ILLUSTRATIVE AGENDA³

В)
vays in which marginalized groups experience exclusion ny these issues continue to persist
oss ASEAN cities to address exclusion and nents
n) on potential solutions and actions to strengthen
oss ASEAN cities to address exclusion and nents

³ This agenda is adapted slightly for each cohort and session so that it is more tailored to the participants.

APPENDIX B: SPEAKER PRESENTATIONS 30

APPENDIX B: SPEAKER PRESENTATIONS



RADAR CHOR_COHORT A_MODULE 1: 4 MARCH 2022



Making cities inclusive:

Access to infrastructure and public transport services for persons with disabilities in ASEAN!

Speaker: Rada CHOR

Handicap International – Humanity & Inclusion

2022/Mar/04



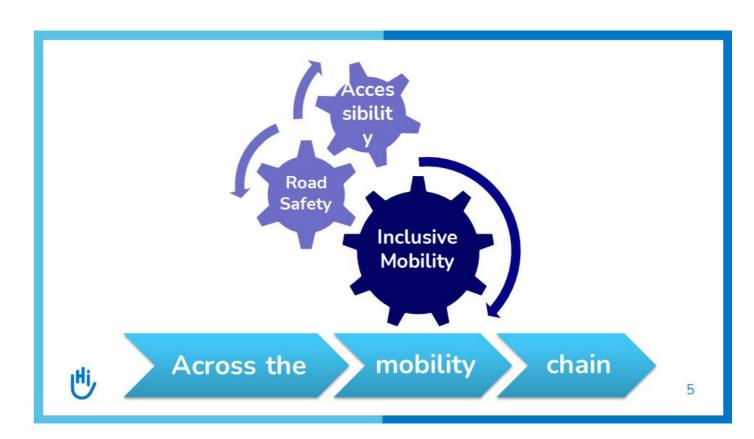
Session 1

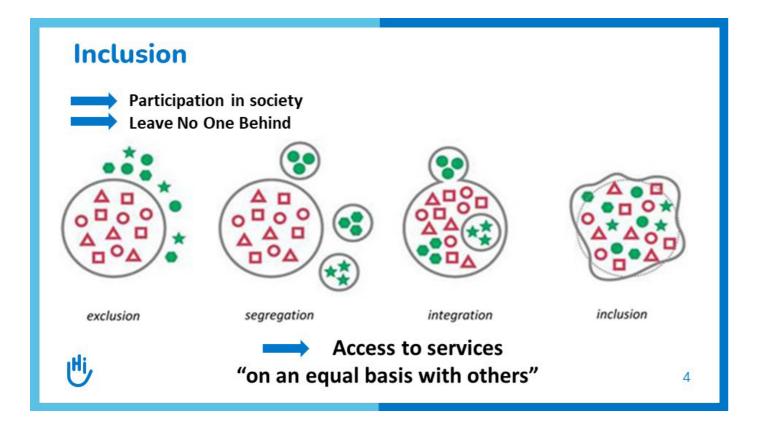


Main Figures

- 15 % of the global populationrepresenting 1 billion people is living with a disability.(WHO 2011)
- 85% of persons with disabilities live in developing countries.
- 46% of road casualties are vulnerable road users.
- 4.9% persons with disabilities, over 5 years old (58.4% of them being female), Cambodian census 2019.
- By 2050, it is estimated that 66% of the global population will live in cities.

3





Law and Policies

- Cambodia policies environment provides protections for Persons with Disabilities
- ➤ Law on the Protection and Promotion of the Rights of Persons with Disabilities, 2009 (currently under revision) to increase the accessibility of transportation for people with disabilities.
- ➤ To improve accessibility (physical infrastructure, public means of transportation, means of communication, knowledge and information technology including devices and other services for persons with disabilities), NDSP 2019-2023.
- People with Disabilities entitled to free public transport (Phnom Penh city bus)
- ➤ The Technical Standards on Physical Accessibility-Infrastructure for Persons with Disabilities, 2018
- But gap in implementation persists.

6

Main barriers for inclusive mobility in city



- Lack of implementation of existing laws/policies
- No involvement of persons with disabilities in decision making processes
- City space not accessible and not safe (road, sidewalk, crossing point, curb ramp, changing level, signage...)
- Lack of accessible public transport and personal financial barriers to use of transport
- Unsafe vehicles and poor driving skills
- Discrimination and believes of disability
- Lack of awareness about disability. etc.



"In the environment: in some public places, it is not convenient for people with disabilities to move around."

"Pedestrians (walkways) are not available to travel/walk. There are no ramps at every changing level along the pedestrians pathways."



a

Testimony

- ".....wanting drivers to obey the traffic laws thereby making the build environment safer for people with disability."
- "The drivers should respect the traffic law and should reduce their speed when there are people crossing the road."







"The city bus has high steps, difficult to climb, space, slopes."



"A wheelchair user cannot access to the bus stop because there is no curb ramp"

10





KEY ISSUE - The fulfillment of basic needs for Persons with Disabilities

Total Population 1.65 million Total persons with disabilities: 3.192 PERSON (0,19%)

1. Not all public facilities are accessible for persons with disabilities for example, religious

government offices etc.

2. Public facilities provided for

persons with disabilities, for

example pedestrian, are often

well as for public parking lots;

3. Lack of information for persons

with disabilities in public areas

still not accessible: narrow, no

sidewalks, ramps and guiding

5. Limited number of bus/train stops have been adapted to the needs

height of the bus stops that are not adjusted to bus doors).

the limited space available:

6. People with disabilities have difficulty using BRT (due to the

of persons with disabilities, due to

block provided.

4. Most of road infrastructures are

taken over by other groups such

as street vendors to sell foods, as

buildings, education facilities,



how does group experience marginalization in relation to access to infrastructure and services?



Infrastructure and Public Services Issues



- Lack of GEDSI perspective from local government employees and other service providers
- Lack of capacity buildings on disability issues

Why does the problem persist?

- Policy implementation gaps
 - Accessibility issue/knowledge
 - Cost/Resources
 - Lack of awareness of legal frameworks and disability
- Consideration of disability inclusion/accessibility in early design stage.
- Lack of awareness of disability (public, policy makers)



11

INDRA KERTATI_COHORT A_MODULE 1: 4 MARCH2022







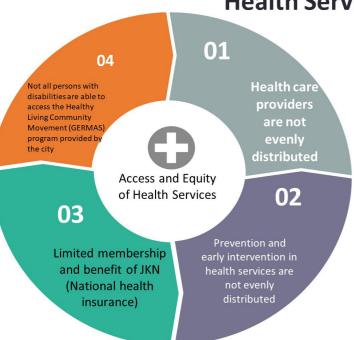








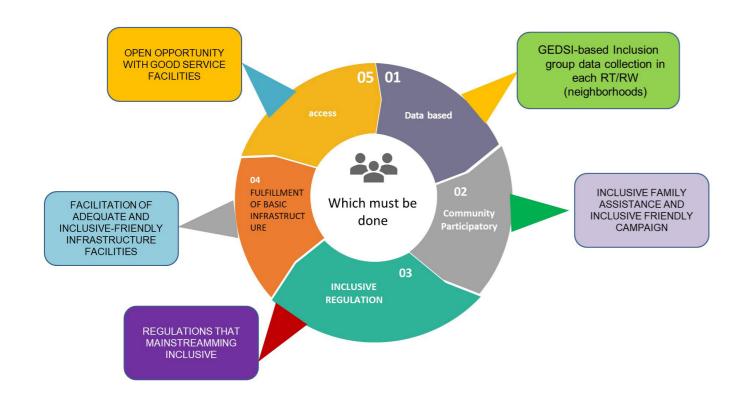
Health Service Issues

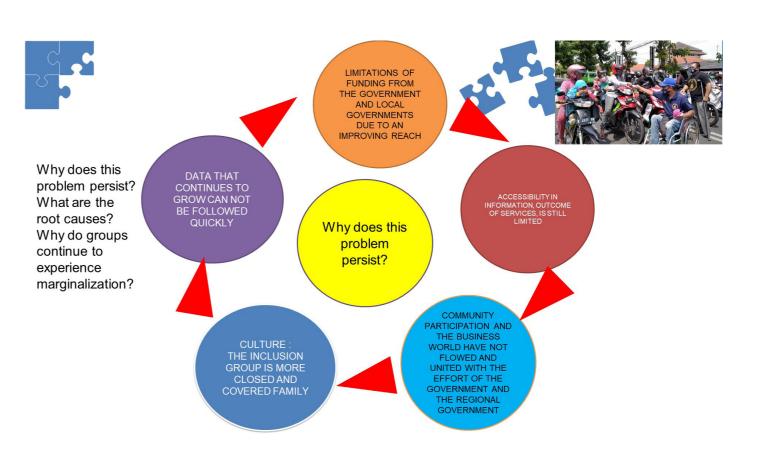


- 1. There are no special health services provided for persons with disabilities, despite the special needs required
- 2. Health services with home care system (available in Semarang) cannot be fully accessed by persons with disabilities;
- 3. Lack of information on reproductive health for persons with disabilities
- 4. Not all persons with disabilities have access for health insurance;
- 5. Lack of access to appropriate health and rehabilitation services;
- 6. Lack of knowledge and awareness of health care providers on the specific needs of persons with disabilities

How does your organization/department seek to understand these issues? Are there any tools you would like to share







What are the root causes?





CHIN FERNANDEZ_COHORT A_MODULE 1: 4 MARCH2022







PROBLEM:

Coron District Hospital (CDH) lacks the necessary facilities, equipment, and manpower, to serve Coronians and neighboring municipalities.

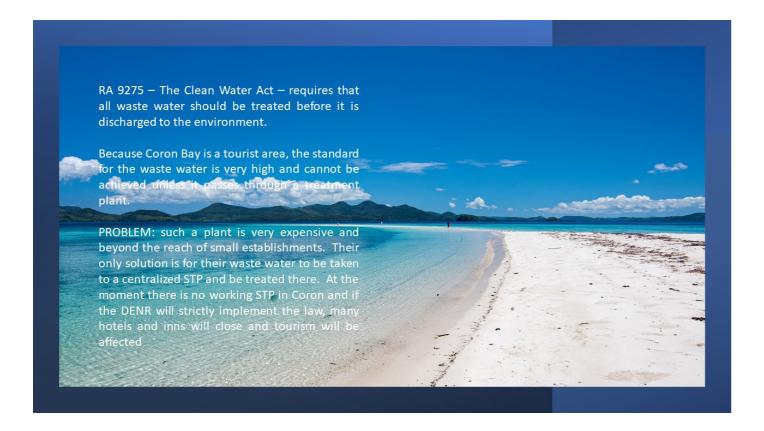
If a patient cannot be treated at CDH, the family has the following options:

- 1) Bring to Culion General Hospital (45 minutes via speedboat; 1.5 hrs via ordinary banca)
- 2) Bring patient to Puerto Princessa City via air ambulance (1.5 hrs away)
- 3) Bring patient to Manila via small plane (chartered) or air ambulance.

All of these options cost money (even if the patient can fly commercial). So those with no financial means are denied access to proper health care.









3.1.1 PRESENTATIONS FOR SESSION 2 ON LEARNING FROM ON-GOING INITIATIVES

RADAR CHOR_COHORT A_MODULE 1 : 4 MARCH 2022



Session 2

Address exclusion and marginalization in urban environments.

Reflecting on initiatives implemented till date.

Need to scale up investments in safe and inclusive mobility in cities!

- to save lives
- to make the slogan "Leave no one behind" a reality for millions of persons with disabilities
- for safer, more inclusive, more prosperous and more resilient cities (domino effect)



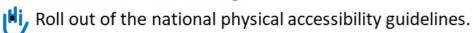
1



Examples of projects in country

CAMBODIA

- Promotion of national accessibility guidelines for a barrier-free environment
- Journey Access Tool Barriers assessment of public transport means in Phnom Penh
- Conducting an accessibility assessment and Policy Dialogue about the transportation system in Phnom Penh city
- HI supports local authorities in understanding, mainstreaming, and implementing accessibility interventions
- HI provides technical assistance on disability inclusion and accessibility to local and international stakeholders by conducting several tailored consultancies and trainings



See what HI say about it...

... and HI recommendations

- Strengthening the policy and financial framework for safe and inclusive mobility action, based on evidence and through participative processes: Place people with disabilities at the center of inclusive city development strategies.
- 2. Provide safe and accessible urban mobility infrastructures applying universal design approach, all along the mobility chain.
- 3. Enhance participatory and evidence-based policy-making for a better governance of road safety, mobility management and urban planning.



13

15

Key messages including Way forward!

- It is important to look at the "mobility chain" to understand interactions with the environment, the choice and mode of mobility depending on the personal preferences of each individual.
- Construction permits should only be delivered for public buildings if accessibility features are in the design
- Disability inclusion should include in the early design stages of all projects.
- If accessibility features are incorporated into the original design of a building, it cost less than 2-5 % of the total cost of the construction.
- · Awareness and advocacy on inclusive cities
- Finalize and implement accessibility guideline for transportation and communication.



Thank you for your attention

Contact: <u>r.chor@hi.org</u> (+855)069 588 050



LAMET BUDIUTOMO_COHORT A_MODULE 1: 4 MARCH 2022



AASCTF Inclusive Cities Dialogue





Understanding the problem and why it persists

- Lack of the fulfillment of disability rights, particularly for their basic needs
- Most of persons with disabilities still live in vulnerable, backward, and/or poor conditions
- There are still restrictions, obstacles, difficulties and elimination of the rights of persons with disabilities
- Lack of equal rights and opportunities for persons with disabilities for more prosperous, independent and non-discriminatory life





Policies and Regulations to respond the issue

- Semarang (City) Regulation No. 9 of 2021 concerning Persons with Disabilities (Perda Kota Semarang)
- 2 Integration of SDGs in the Medium Term Development Planning Document (RPJMD) 2021-2026.
- 3 Implementation of the "Moving Together" Concept in Realizing Semarang an Inclusive City
- 4 Preparation of Regional Action Plans (RAD) for Semarang City as an Inclusive City.

- 5 Involvement of persons with disabilities in the development planning process.
- 6 Continue to developing for public facilities that are friendly to persons with disabilities.



Initiatives Implemented to date

- Improving the quality of population documents by including disability parameters
- Fulfillment of environmentally friendly and accessible facilities and infrastructure for persons with disabilities in services of places of worship, public transportation, expansion of access to government information, fulfillment of housing and a healthy and safe environment
- 3. Increase the role and political participation of persons with disabilities through political education and advocacy as well as the protection of persons with disabilities from violence, exploitation, and neglection through campaigns and outreach and education to law enforcement officers regarding the handling and treatment of cases involving persons with disabilities



Initiatives implemented till date

- 1. Improving the empowerment and independency of persons with disabilities
- 2. Increase capacity and employment opportunities for persons with disabilities
- 3. Improving access and quality of education for persons with disabilities
- Improving access and quality of health services for persons with disabilities through the provision of special services (prevention and early intervention) for persons with disabilities



What went well or didn't go that well, and why

Well:

1. Disabilities Data Collection

Didn't well

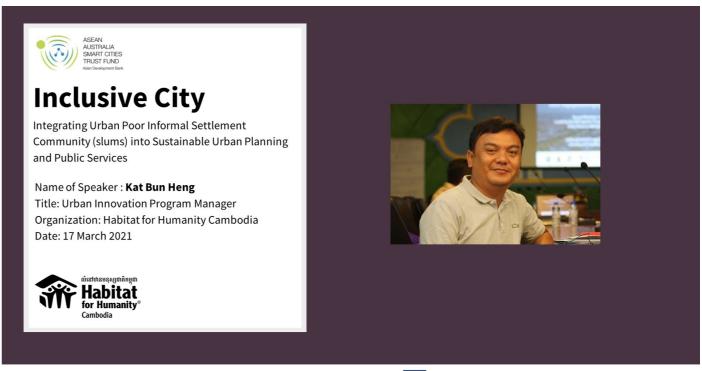
- 1. Sustainable activities with disabilities
- 2. Coordination between agencies in supporting facilities and infrastructure for persons with disabilities

Why

- 1. Other agencies are still focused on their respective activities
- 2. Low commitment to mutual assistance and enhancing the role of disabilities



KAT BUN HENG_COHORT B_MODULE 1: 17 MARCH 2022



AASCTF Inclusive Cities Dialogue







Session 2:

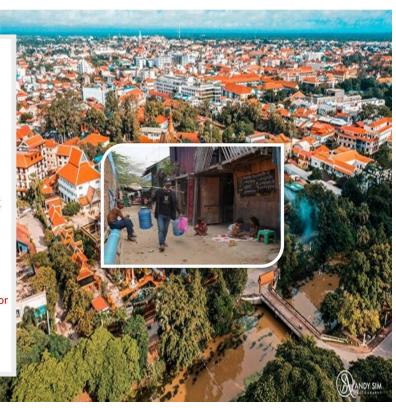
Reflecting on initiatives implemented till date to address exclusion

How have you addressed the problem?

- Pro- Urban Informal Settlement community in process in Participatory City Planning, integrating these most vulnerable groups into public basic service of the city
- Inclusive City Development Approach

What have you learned from this experience?

- Inclusive City means inclusiveness of the urban poor
- Inclusiveness contributes to sustainability
- City development for all



Past-ongoing solutions to address exclusion

City Planning shall have pro-poor policy and principles in place

- pro-poor policy
- · Equity Approach
- · inclusion approach
- Sustainability (in technology and practices)
- Integration (across sectors) approach



What went well or didn't go that well, and why

Went well

- Empower informal and most vulnerable group who are working to contribute to our end goal "Sustainable
- Community level, Lowest local government level are capacitated to develop integrated planning that is well aligned with municipality plan, and national plan

Did not go well

- Technology application among public and key stakeholders
- Uniformed actions and application



Key learnings/ takeaways



Localizing the policy

- Tailor made policy for
- · Pro-poor, inclusiveness
- Integration
- Sustainability



System Change

- Organization Capacity
- Partnership multistakeholders



SDG 2030 - agenda

- UNSDG # 11 : Sustainable
- Cambodia-SDG # 11
- Localizing SDG to local

Discussion



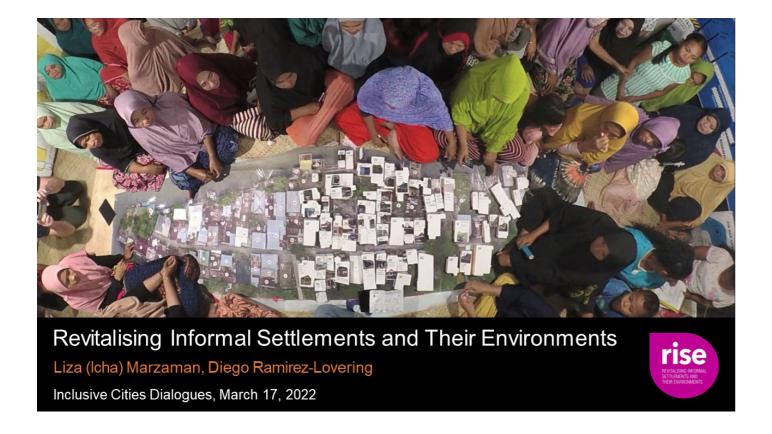






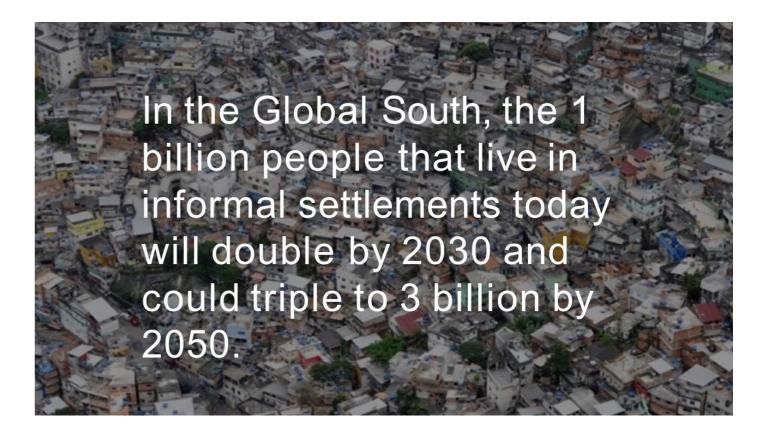


REVITALISING INFORMAL SETTLEMENTS AND THEIR ENVIRONMENTS (RISE) PROGRAM_ COHORT B & C MODULE 1 17 MARCH AND 24 MARCH 2022



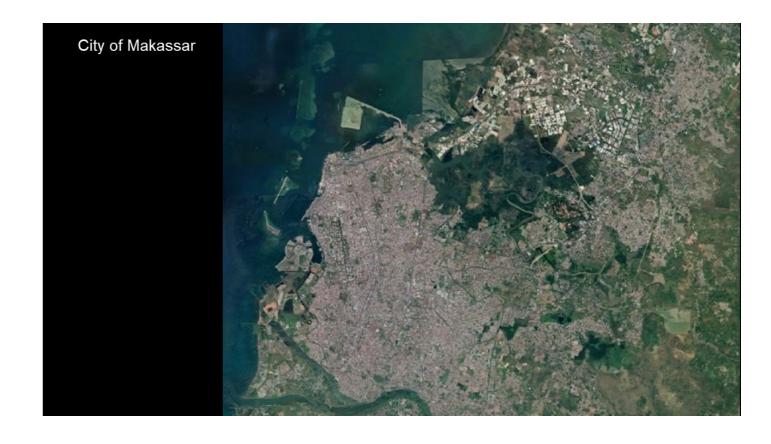
"there are few greater challenges to widespread planetary health and security than the vast proliferation of informal settlements".

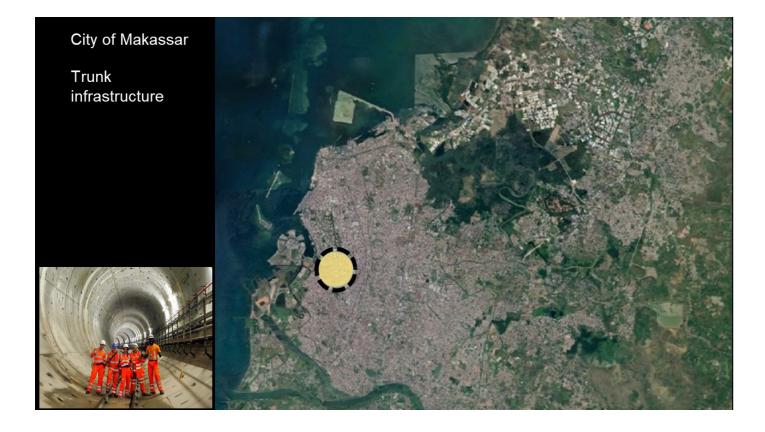
Beardsley, John, and Christian Werthmann, "Improving informal settlements."
Harvard Design Magazine Spring (2008): 31-34.



In informal settlements, the cumulative effects of the water cycle are viewed as a critical factor aggravating the associated challenges of poor environmental quality and human health.





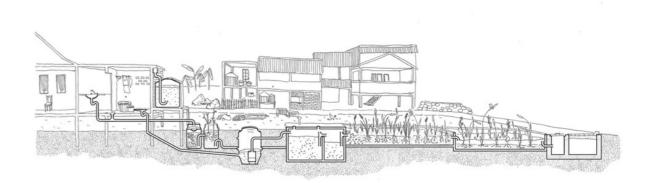


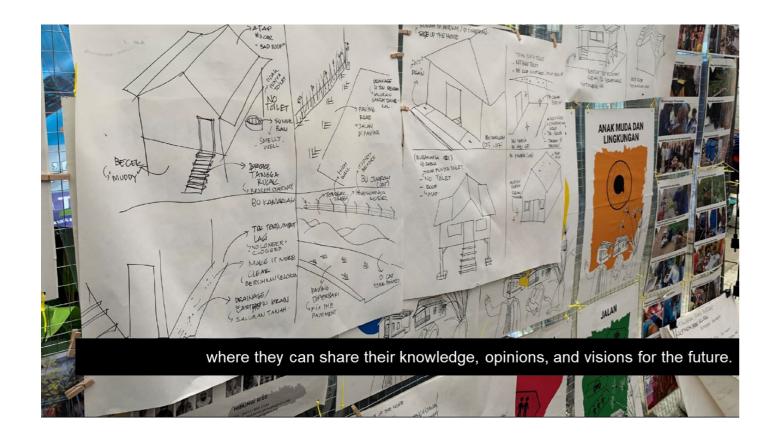


63 APPENDIX B: SPEAKER PRESENTATIONS 6







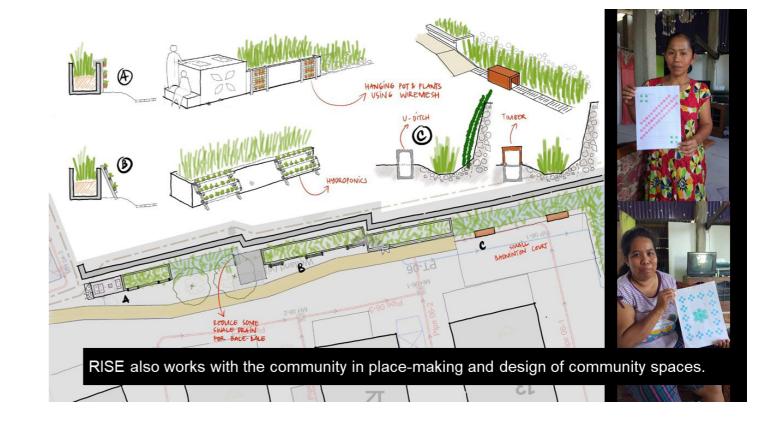








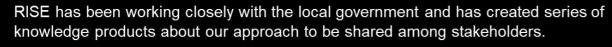














RISE have already started transforming water and sanitation in Indonesia,

70

starting with one settlement.









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73 APPENDIX B: SPEAKER PRESENTATIONS 74



The Batua community has become a place that invites everyone who wants to learn about green infrastructure. It has played a vital role in identifying and troubleshooting problems with the system ifor delivery in future communities.



ONG BEE LENG_COHORT B_MODULE 1: 17 MARCH 2022





Ong Bee Leng CEO, Penang Women's Development Corporation (PWDC)

What is GRPB?



"Different People, Different Needs"

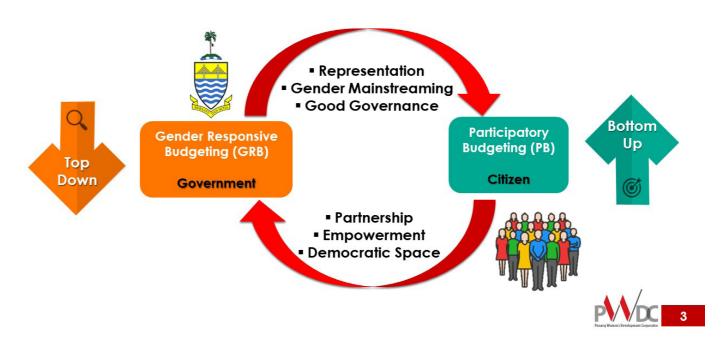
GRPB is an innovative state budget allocation practice which combines participatory democracy and gender responsive budgeting.

Key objective of GRPB is to make **budget** and **policies inclusive** in order to achieve **gender equality** and **social justice**.

Penang became the first state in Malaysia to implement GRPB and the first city in the world to combine two budgeting approaches namely GRB and PB.



GRPB: People-Oriented Model of Penang



Benefit

GRPB is a **"whole of government" activity** that links together communities, agencies and all levels of government.



76



GRPB bridges the gap between service users and service providers.







GRPB also provides transparency, accountability and responsiveness and a tool for the most effective, efficient, socially just policies and budgeting.

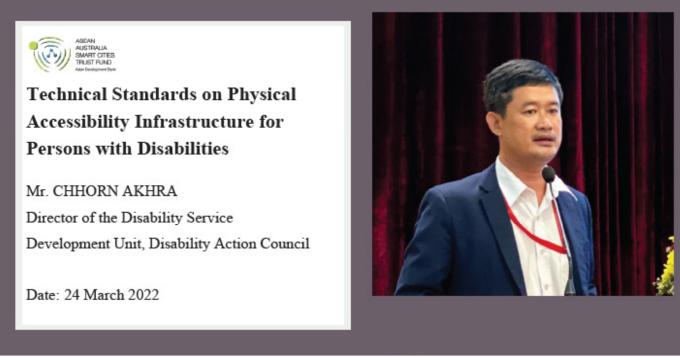
GRPB helps to recognise the often-significant differences in the needs of different people.







CHHORN AKHRA_COHORT C_MODULE 1: 24 MARCH 2022



AASCTF Inclusive Cities Dialogue

RAMBOLL



About Disability Action Council (DAC), Cambodia

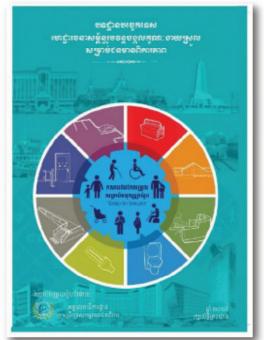


Technical Standards on Physical Accessibility Infrastructure for

Persons with Disabilities

 The standard was signed on Wednesday, November 28, 2018 by Ministry of Social affairs Veterans and Youth Rehabilitation and Ministry of Land Management, Urban Planning and Construction

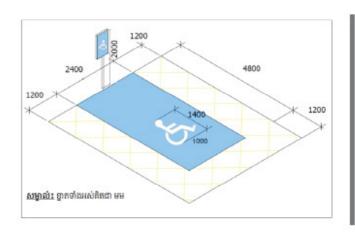
- · It was officially announced on September 18, 2019
- The objective of this standard is to provide persons with disability to access physical infrastructure.
- · The standards covers five sections such as:
 - Pathway and Entrance
 - 2. Car Park Environment
 - 3. Building Types
 - 4. Facilities in Buildings
 - 5. Sanitary Facilities



78



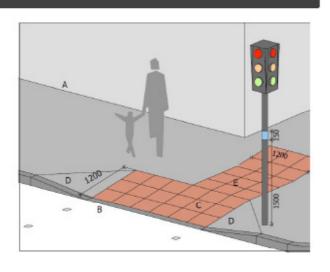
Section II: Car Par Environment





Section I: Pathways and Entrances





Section III: Building Types





Section IV: Facilities in Building





Implementation

What went wel

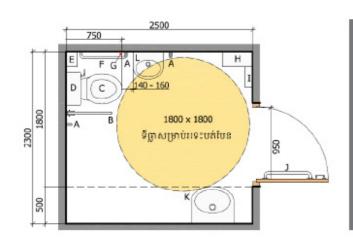
- Technical standard is finalized and published; Training toolkits and assessment tools were developed.
- Dissemination and training workshop was conducted in 10 target provinces for the first round. The second round of the training has been conducted.
- There is good collaboration and support from relevant ministries such as Ministry of Land Management, Urban Planning and Construction, Ministry of Tourism, Ministry of Religions and Cults and Ministry of Interior and donors such as DFAT through ACESS program and private sector.

What didn't go that well and Why?

- Though the technical standard was developed, the law enforcement is not effective. Eg: some private sector prefers to pay fines.
- Dissemination of the standards to remote areas is limited due to lack of budget and support.
- Religious temple (pagoda) is not built to conform to the technical standards, which requires more awareness raising and advocacy.



Section V: Sanitary Facilities





Key learnings/ Takeaways



Law enforcement such as fine and punishment is not the only way to make an effective implementation of the technical standard



Inclusion concept is usually known among stakeholders in the urban areas, while those in remote areas have not been well informed.



Limited budget is a main concern, and the issue requires interventions and efforts from national level and donors.



APPENDIX C: POST-MODULE SURVEY



MODULE 1- POST MODULE SURVEY

Topics/ Questions	Cohort A	Cohort B	Cohort C				
Number of Respondents	1	17	8				
Sector of Participant	City/Municipal Government: 1	National Government :1 City/Municipal Government: 5 Provincial and State Government : 3 Civil Society: 5 Educational Institution :3 Private Sector :0	National Government :2 City/Municipal Government:0 Provincial and State Government : 2 Civil Society: 2 Development Institution :2 Private Sector:0				
Gender	Male: 0 Female: 1 Prefer to self describe: 0	Male: 6 Female: 10 Prefer to self describe :1	Male:8 Female: 0 Prefer to self describe : 0				

93 APPENDIX D: POST-MODULE SURVEY 94

MODULE 1- POST MODULE SURVEY

Questions	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
After taking part in the dialogue session, I consider that my knowledge on access to services and infrastructure for marginalized groups in my city has improved:					1			3	11	3			0	7	1
My work and practices (including contributions to the project) will change due to knowledge I gained from this dialogue session:					1			2	12	3			2	5	1
This dialogue session met my needs and expectations:					1			1	11	5			2	5	1
The information and materials presented during the session were relevant to me:					1			4	8	5			2	5	1
Rate the translation service of the dialogue session:	N. A	Very Poor	Good	Very Good	Excellent	N. A	Very Poor	Good	Very Good	Excellent	N. A	Very Poor	Good	Very Good	Excellent
Please indicate how satisfied you were with the English interpretation during the workshop:				1							3		1	3	1
Did you use another interpretation channel other than English during the dialogue?	No:1					Yes: 4 No: 13					Yes: 4 No :4				
If yes, please specify which language:					Bahasa Indonesia :2 Lao: 1 Khmer:1				Bahasa Indonesia: 3 Khmer :1						
If yes to the above: Please indicate how satisfied you were with the interpretation channel you specified:								2	2				1	3	
On a scale of 1 to 5, based on your experience, how likely are you to participate or recommend future AASCTF workshops or training events to a colleague/peer?	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
On a scale of 1 to 5, based on your experience, how likely are you to participate or recommend future AASCTF workshops or training events to a colleague/peer?					1			1	8	6			2	3	1
On a scale of 1 to 5, based on your experience, how likely are you to participate or recommend future AASCTF workshops or training events to a colleague/peer?					1			1	8	6			2	3	
Is there anything the organizers can improve on to make future dialogue sessions better?	The topic discussed in this session is timely and necessary for the government to look after the needs of the disadvantaged group especially in the rural areas where people are most likely left behind, but i do suggest that issues about the indigenous peoples should also be discussed.					Additional Time for discussions				Additional Time for discussions Suggestions on including a gap analysis on policy making and its implementation was also provided by one participant					

ABOUT THE ASEAN AUSTRALIA SMART CITIES TRUST FUND

The ASEAN Australia Smart Cities Trust Fund (AASCTF) assists ASEAN cities in enhancing their planning systems, service delivery, and financial management by developing and testing appropriate digital urban solutions and systems. By working with cities, AASCTF facilitates their transformation to become more livable, resilient, and inclusive, while in the process identifying scalable best and next practices to be replicated across cities in Asia and the Pacific.





