



For Better Lasting Lives and Livelihoods!

The **New Horizons Society** is an organization of federated self-help groups dedicated to promoting equality; ending poverty, and securing life-changing opportunities for our membership of mainly disabled people.

The New Horizons Society (**NHS**) is a unique organization in Cambodia. We are founded and run by disabled people ourselves, operating on the principle of self-advancement rather than welfare. Key actions put positive focus on ability, empowerment and inclusion. These literally open up new horizons for each of our members, hence the choice of name and logo.

Our members are families living with disability – physical, sensory or psycho-social – or similar social disadvantage in local communities. All take part in a self-assessment poverty assessment tool to qualify for support and which is then used to track their progress towards better lasting lives and livelihoods. Even when members have achieved better standards, they are encouraged to stay on as role-models and to enhance advocacy.

Promoting Equality

Poverty and disability go hand-in-hand. Very often our families living with disability endure other disadvantages of landlessness, chronic ill-health, lack of breadwinner, etc. Many are invisible and isolated in their communities, missing out on development opportunities and denied access to public services. **NHS** members simply ask for fairness and equality of opportunity. This we do through constructive engagement with leaders and neighbours. We use a variety of self-advocacy skills to bring changes in attitudes which in turn influence actions and policies for the better.



Successful advocacy initiatives include: improved access to schooling and vocational training (especially computer skills); greater respect for women who are disabled or family-carers; and improved entitlement to state allowances. War veterans who are injured in active service should receive state benefit, regardless of party allegiances. However, many receive no benefit. Others are persuaded to forsake their rights in return for a small lump sum payment. The persuaders are then able to collect their life-time earnings. **NHS** was first to work with government authorities to expose and resolve this scandal.

Ending Poverty

Each **NHS** member, with his or her family and through their self-help group, comes up with their own best solutions to work their way out of poverty. We encourage variety and diversification to provide new or extra income and all-year round food security. The “relief/handout mentality” is vigorously opposed, with all members “giving and taking” for their groups to succeed and provide continuing benefits to them and other equally deserving new members. Self-savings, active voluntary service, peer-to-peer support promote cohesive group-working so they qualify for capital grants from donor-awarded funds. Those grants are then retained and recycled within the group. As incomes improve, modest interest is paid, and contributions made to the group and federated network running costs. Most of our groups are self-sufficient financially after just three years.

Most popular and successful are small-scale agricultural activities. Pig and chicken-rearing can be done despite restricted mobility and limited land. Many members opt for improved crop production through new tools, seed-types, and fertilizers especially natural compost.



Others combine these with (or just go for) personal services or handicrafts such as retailing, food-processing, hair-dressing etc. Entrepreneurship is encouraged and calculated risk-taking allowed for new ideas to be tried. Second tries are allowed where ventures fail if lessons have been learned and shared.

Kosal's new horizon opened up after his mother received capital for her vegetable stall. She had been in debt to a loan-shark after her husband died of HIV/AIDS. Kosal, who had polio, missed school to beg in the market. Now he attends regularly, is top of his class, and won a national song contest. Kosal invites you to read his blog site: <http://my.cambodia.org/profile/newhorizonsociety>

Life-Changing Opportunities

All our members know about real poverty and leading isolated lives, confined in or around their homes, in rural areas with poor transport, infra-structure, and without electricity. Despite Cambodia's recent promising economic growth, it has not led to “new horizons” for them. There are in fact severe human resources skills-shortages in the country that could be filled by our members. **NHS** members seek to create ways for their families to join the educated and professional classes. The first task is to ensure full schooling for children. This is achieved with modest grants to poor families and effective local advocacy to minimize non-attendance and drop-outs especially of girls. The next task is to provide basic skills in modern technology, language, and preparation for careers, job-applying etc. The final task is to ensure they are then eligible and fairly treated for available opportunities, earning jobs on merit. When these all come together successfully, “ability” not disability is proven to matter. It lays to rest once and for all the traditional prejudice against disabled people.

Sokunthea and Visal are two of **NHS's** role models who have pioneered the way. Both are disabled people and once led lonely lives at home. They were in the first batches of students to join computer and language classes in Kampong Chhnang. Today both are highly-valued by their families, employers, and friends - not just because of their jobs and income. Both have keenly embraced social and education activities once denied to disabled people.



Visal's "new horizon" is very broad! He works in the day time at Yejj an NGO specialist in computer services and job-oriented training. He started as a trainee technician and after just one year was promoted to technician. He studies in the evenings on his four year degree course in Information Technology at SETEC University. He has taught computer skills to disabled children and still gives support to their NGO - AFS in Battambang. <http://www.yejj.com/index.php>



*▲Sokunthea was looking up for her "new horizon" back in 2003, more in hope than expectation. Little did she know then that she would eventually become the Publicity Officer for Cambodia's most successful international sports league, and lead a dancing troupe performing in public. ▼
(See CNVLD and EpicArts below)*



Co-operation with Other Organizations

We have adopted at **NHS** an assertive approach to invite and embrace co-operation, rather than to compete or put distance between us and others. We aim to complement what others do. The relationship with our line ministry is crucial. We respect and appreciate national and local officials of the Ministry of Social Affairs to the extent that we have one on permanent attachment for the government to see what we do and to act as a liaison officer. We are flattered to have been described by the ministry as its choice for recommended best practice and value for money.

This compliment reflects the warm relationships with other organizations who provide enhanced benefits to our members and who help build our coalition for advocacy.

- **Cambodian National Volleyball League (Disabled) (CNVLD)**. We mention above our longstanding relationship providing excellent sports opportunities for many of our members, and where you can find one of our star beneficiaries – Sokunthea. <http://www.standupcambodia.org/>
- **EpicArts**, under the tutelage of Katie McCabe, has transformed the lives of so many disabled people who never imagined they could sing or dance in public with just as much accomplishment as everyone else. The **NHS** Child Advocacy Group has performed at national conferences. www.epicarts.org/
- **All-Ears**, provides free audiology services within **NHS**'s target areas using our premises and network for referrals and follow-up. www.allearsCambodia.org/
- **DDP-cambodia.org** is a foremost group for people with hearing and speech difficulties, assisting in training in “signing” language skills and co-producing a highly successful International Day for Deaf and Dumb People. advisors@ddp-cambodia.org
- **Cambodia Trust** provides prosthetic and orthotic services as well as sharing similar advocacy issues. <http://www.cambodiatrust.org.uk/index.htm>
- **Disability Development Services Pursat (DDSP)** in our neighbouring province has worked with us to develop community development tools and training conducive to participation by disabled people. They also provide “community-based rehabilitation” guidance. ([website](#), [follow link in DAC below](#))



NHS enjoys fruitful relationships across the entire range of disability, human rights, and development organizations to advance personal cases and common civil society goals. We are an active member of the Disability Action Council. <http://www.dac.org.kh/index.htm>

Origins of New Horizons Society, our Organization, and About Us.

NHS emerged as the successful implementation of a fore-sighted and innovative project begun in 2002 by UK Charity “Landmine Disability Support” (LMDS) which was generously funded by the UK-DfiD Challenge Fund and the Government of Ireland. It was the first to incorporate real delegated decision-making to beneficiaries from the outset, paving the way almost from Day 1 for what is now our own localized organization. Evidence of that power-dimension is that our early beneficiaries went against conventional “wisdom”. All the experts believed families had to be assisted out of poverty before they would have any real active interest in advocacy. So the livelihood improvement programme was expected to run one year ahead of the advocacy one. Our members though said *“We are used to being hungry; we can see advocacy can help us do something to solve our problems, we don’t want to wait!”* So we didn’t. Our first advocacy campaign, for disabled children to go to school, took place even before the first grant for the livelihood programme was received.

CBM gave us kindly that first grant for the livelihood programme. They have been followed by Australia with three awards from its community development and landmine victim funds. Australia gave another grant that opened up the small Computer Training Facility with 8

trainee placements that has been so successful, it has led to our creating “Life-changing Opportunities” programme”. Australia also placed a highly successful agricultural/entrepreneurial technical consultant. The Diana Fund became the second largest donor, after UK-DfID, in 2005.



From 2002 to 2008, the network built up to 109 self-help groups with 2,636 members when we “localized”. The period allowed us to develop and refine methodology which has been independently attested by external evaluators and auditors. Almost all our members have emerged from poverty or are in the process. We form the largest active membership of disabled people in the country, a powerful force for advocacy. We employ only participatory learner-centred methods in education and skills-training. Most sessions are now taken by peer-trainers, senior beneficiaries who were once an untapped source of talent.

NHS is committed to the very highest international standards of conduct and professional practice. Our tripartite structure is very rare. We have a secretariat that works with senior beneficiaries in charge of groups and the network implementing activities. They are accountable to the Governing Council, consisting of senior elected members, to determine policy and overall direction. Beneficiaries are in the majority, but we invite some external members who bring in expertise and balance. Governing Council members are almost all Cambodian. A Board of Trustees acts as a senior chamber of the Governing Council, with local dignitaries and international members. It fulfills a mainly monitoring and evaluation role, as an extra check and balance, and to assist in funding-raising, strategy, and complex technical issues. This Board has reserve powers to act if there is a serious risk of **NHS** not meeting its own standards.

NHS is strictly non-political and opposed to discrimination on the grounds of gender, ethnicity, class, etc. Members must declare party affiliations, so that it can be seen clearly not influence our work. **NHS** has advanced client care protection policies.

NHS Key Officers and Consultants are published separately as is its Charter and Bye-Laws.

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Dara to give details of GC Chairman, Secretary of GC??

Honorary Treasurer: Mr. Chann Savoueng. Administration and Finance Manager currently Vision Fund, formerly Ockenden International and Handicap International. A qualified accountant with international training and a disabled person himself.

Chairman Board of Trustees: Mr. Roger Biggs. Original designer and fund-raiser of the project in 2002. Currently Field manager of international NGO “Iris” operating eye-care programmes in Cambodia, Laos, Nepal, and Sri Lanka. Expert on UK and international disability issues

Acting Secretary-General: Mr. Yi Dara, Head of the LMDS Cambodia Programme, 2005-now) MA in Law and Human Rights, qualified teacher, also Education/Advocacy Officer LMDS, formerly Country Co-ordinator COSECAM (a coalition of counter human trafficking NGOs), Child Rights Officer Save the Children, Co-ordinator in Human Rights and Election Monitoring NGOs.

Consultant Advisor: Mr: John Lowrie, former Director LMDS 2002-5 (Nov), Country Representative Ockenden International (2005-8), Senior Consultant Advisor (paid/voluntary) with Cambodian Human Rights and Disability Sector NGOs (1998-now), former Country Director HelpAge International Rwanda (1996-7), Project Manager (DfiD/VSO) Malawi (1993-6), etc. Personnel manager by profession with 11 years in public service in the UK.

Mr: Andy Ming
Consultant Advisor: Mrs Ming Ming

1 Mr Andrew Little

Andrew also spent a decade in Cambodia and though now based in Berlin, Germany, he still does consultancy work through GTZ with the Council of Ministers. Andrew is an interpreter by profession with Indonesian his main but not only language. It has led on to him and his wife operating their own businesses, and with the “all-round skills” he has developed, he has undertaken many consultancy engagements in Cambodia with international and local NGOs. Andrew’s observable commitment to highest ethical standards enhanced the quality of much human rights work, especially in human trafficking, where he was one of the earliest architects of projects to end exploitation of women and children. Through that work and engagements with various INGOs and NGOs, Andrew has acquired a unique first-hand in-depth insight in to the strengths, weaknesses, opportunities and threats of local NGOs.