

EDF Policy Paper Development Cooperation And Disability

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"States should recognise the rights of organisations of persons with disabilities to represent persons with disabilities at national, regional and local levels. States should also recognise the advisory role of organisations of persons with disabilities in decision-making on disability matters."

Rule 18 of the United Nations Standard Rules on the Equalisation of Opportunities for Persons with Disabilities

DOC EDF 02/16 “EDF Policy Paper : Development Cooperation and Disability”

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Glossary and Abbreviations

- North:** this term refers to the group of countries that are also often referred to as ‘developed’ or ‘industrialised’. The terms ‘developed and developing’ have not been used because they imply a judgement based solely on economic criteria and ignore the huge degree of cultural development to be found in poorer countries. The term ‘north’ is a generalisation because the concept also includes Australia and New Zealand, to be found in the Southern hemisphere, so it should not be taken literally, but should be understood to refer to those countries who have substantial international power and resources. Other terms used are the ‘one third’ and ‘two third’s world, referring to the fact that the richer countries only have one third of the population, yet control over two thirds of the resources.
- South:** Likewise, this term refers to the larger number of countries in the world that are economically poorer and less powerful. It needs to be acknowledged though, that this vast range of countries are extremely diverse, and many of them have pockets of power and wealth, or are countries ‘in transition’ towards the market economy and democracy. The term South is best understood as referring to poor and less powerful populations, wherever they are (and many are also within the richer countries).

Impairment and Disability:

Strictly speaking, **impairment** refers to an actual physical loss or reduction of functioning in an individual, e.g. loss of vision, hearing, movement, speech, or ability to learn. **Disability** on the other hand, refers to the way in which an individual with an impairment is dis-abled by the society, through barriers to access, discrimination, exclusion etc. So it is accurate to speak of persons **with impairments**, or **disabled** people (not people with disabilities). But the term ‘disability’ is often used interchangeably with the less common term ‘impairment’, particularly outside the UK. So in this paper, various quotes use the term disability when referring to impairment. The important thing is to understand the underlying concepts, and not to be worried by the language.

CBR	Community Based Rehabilitation
DPO	Disabled Persons Organisation
DfID	Department for International Development, UK
EU	European Union
INGO	International non-government organisation
MEP	Member of the European Parliament
NORAD	Norwegian Agency for Development Cooperation
NGO	non-governmental organization
PRSP	Poverty Alleviation Strategy Papers (Required by the World Bank of donor recipient countries)
WHO	World Health Organisation

1 Introduction and Overview of Key Issues

Disabled people exist in every community throughout the world. Anyone can become disabled at any time, and as populations age, disability will be the experience of an increasing percentage of every society. Yet universally, disabled children, women and men lack access to basic human rights, and are marginalized, excluded and discriminated against.

Most disabled people (70% and 85% of disabled children) live in the economically poorer countries of the South where lack of access to human rights is first and foremost about the right to life, to food, water and shelter. Because poverty is both a cause and consequence of disability, some estimates state that as many as 1 in 5 poor people are disabled¹. This would mean that practically every family in a poor community would be directly affected by disability². Yet within development co-operation policy and practice aiming at poverty reduction, disabled people usually remain invisible and excluded.

Even when there is an awareness of the need to include disabled people in development co-operation activities, there is still a lot of misunderstanding and ignorance about what this means in practice. Many donors assume that it is a highly specialist area requiring lots of additional specialist resources. Yet the inclusion of disabled persons could progress a long way if projects just consulted with disabled people and paid attention to not putting up the barriers that exclude disabled people.

There are huge costs to society in not considering and including disabled persons that can only be estimated. Poverty reduction, universal primary education, employment and economic targets will never be met unless disabled persons are included. Reconstruction efforts in post-conflict situations need to realise the numbers of disabled children and adults increase as a result of conflict, and include them in the re-building of their society.

¹ Ann Elwan, *Poverty and Disability: A Survey of the Literature* World Bank Report, section 4.14

² Because many countries have an average family size of 6 people, and if 1 in 5 are disabled in very poor communities, that means that every family has a disabled member. (In practice some may have 2, and others none).

The topic of disability and development cooperation is a broad, complex and continuously evolving issue. Any attempt to provide an overview runs the risk of making sweeping generalisations that will not be practically helpful, and may even reinforce stereotypical assumptions about 'development', 'the South' and 'the situation of disabled people'.

On the other hand, over the last two decades in particular, there has been a vast amount of experience gained and knowledge shared between communities, local and international NGOs, disability organizations, governments and international agencies who in different ways and with a wide range of strategies, have tried to address the issue of disability in development cooperation. Knowledge has been gained, and lessons have been learnt, that can help make development cooperation more responsive to the situation of disabled persons.

Some of the relevant key issues are: the changing face of development cooperation, definitions, scale and nature of disability in different cultures and contexts, and the context of poverty and disability.

2. Background to Disability and Development

2.1 Development cooperation and the North-South divide

There has been a major shift in development rhetoric over the last few years, towards a strong focus on poverty alleviation and human rights (exemplified by the widely supported Millennium Development Goals, focusing on the alleviation of poverty by the year 2015). However, NGOs point out that in practice, the poorest of the poor (including disabled people) are continuing to be excluded. Another key change is the vast increase conflict and refugee situations, again directly affecting disabled people. 'South' and 'North' are terms that encompass a very diverse range of countries, yet the gross power imbalance between the rich one-third of the world, and the poor two-thirds of the world remains true.³

³ Christian Aid (2002) The G7 countries have 12% of the world's population yet hold 57% of the vote in the World Bank.

2.2. Defining Disability

Defining disability is problematic for many reasons that have been well documented elsewhere. It is important not to impose definitions developed in the 'North' on countries in the South. The UN Standard Rules provides a workable definition, yet the term 'handicap' is now largely considered to be stigmatising and is not really used in the English speaking world.

UN Standard Rules Definitions of Disability⁴:

The term "disability" summarizes a great number of different functional limitations occurring in any population in any country of the world. People may be disabled by physical, intellectual or sensory impairment, medical conditions or mental illness. Such impairments, conditions of illnesses may be permanent or transitory in nature.

The term "handicap" means the loss of limitation of opportunities to take part in the life of the community on an equal level with others. It describes the encounter between the person with a disability and the environment. The purpose of this term is to emphasize the focus on the shortcomings in the environment and in many organized activities in society, for example, information, communication and education, which prevent persons with disabilities from participating on equal terms⁵

2.3. Individual and Social Models of Disability

The 'Individual Model' of disability incorporates both the charity and the medical models. It perceives the disabled person as the problem, and does nothing to change society. This model is still prevalent in development cooperation and is supported by donors who want a quick and visible fix, such as building an institution or a special school whilst leaving society and the education system unchanged.

In the Social Model, disability is perceived as a relationship between the individual and society. It is consistent with the human rights approach. In development cooperation, it provides a sound basis for analysis and planning. Key questions are; what are the barriers that disabled people face, and keep them excluded from society? How can these barriers be overcome? Surveys should focus more on these barriers than on the types of impairment that people have. The Social Model does not deny or exclude the need for

⁴ UN Standard Rules, Introduction, para 21

⁵ Ibid paragraphs 17 and 18

appropriate rehabilitation and medical treatment, but it implies that the system should adapt to the person, not the person to the system.

2.4. The Scale and Nature of Disability in Economically Poorer Countries.

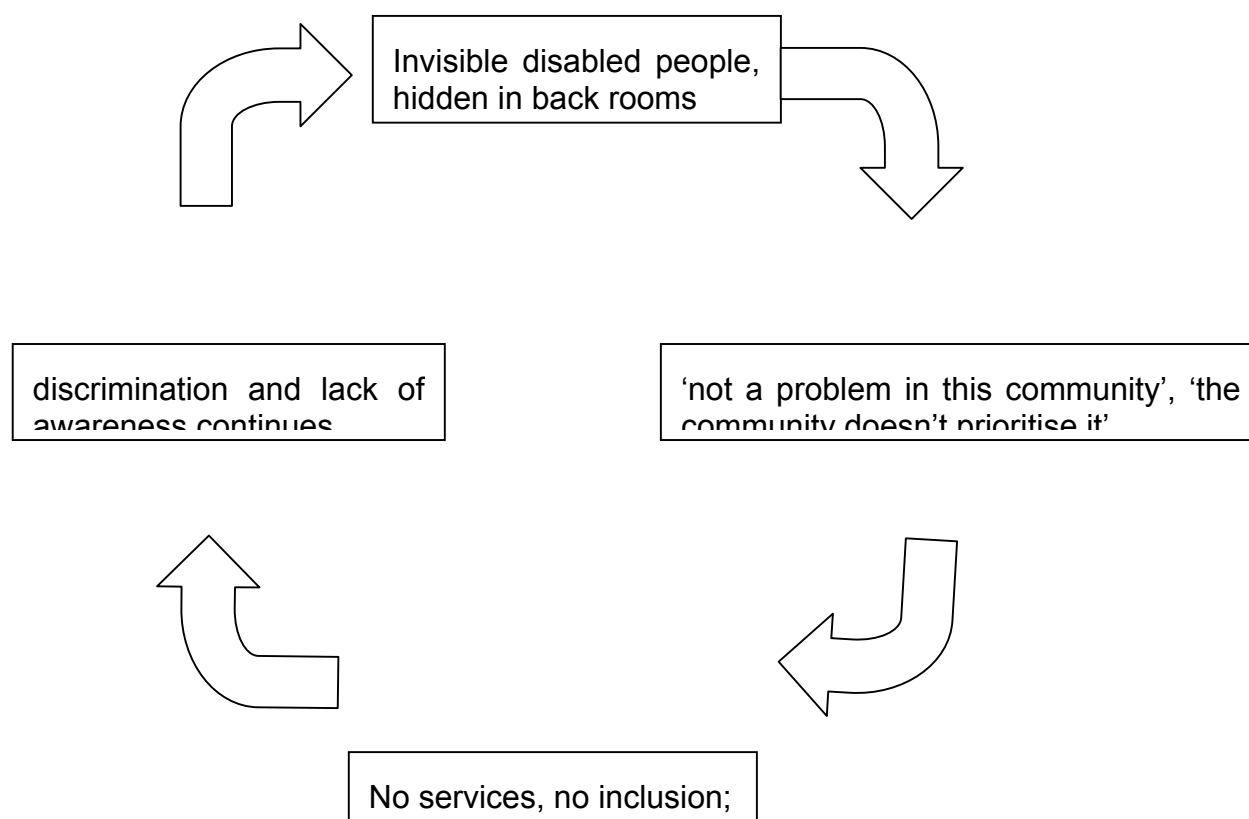
The Challenges of Data Collection and Reliability are problematical in relation to disability generally, but more so in the South, because

- Definitions and perceptions of disability vary greatly. There are different views on who should be included in the term disabled, particularly in relation to people with chronic health conditions.
- Surveys are not standardised and reflect a medical model.
- Visible impairments are easily surveyed, but ignorance about how to identify other impairments (deafness, intellectual impairment, epilepsy) means that a child could remain unidentified for years. This can result in worsening impairment and exclusion.

High Incidence, Low Prevalence

Incidence refers to the numbers of disabled people born or made disabled within a given period, whereas *prevalence* refers to disabled people who survive, and the percentage of a given population who are disabled. In poorer countries in the South and conflict situations, because more disabled people die (both babies and adults who become disabled), there is usually a big gap between incidence (which can be very high) and prevalence (which can be low).

Cycle of Invisibility



What the data DOES tell us

Despite the challenges, various UN and other agencies have collected a wide range of data over the years. Although precise figures are not possible, the rough estimates have been backed by experience and are useful for planning. The following is a summary of key points from this data⁶.

- **The South:** 70% of disabled people live in the South,
- **Disabled Children:** 87% of the world's disabled children live in the South
- **Impact on Family:** in a country with an average family size of 6 people, even if only 5% of the population is disabled, then over 25% of that community will be directly affected by disability. Given the role of extended families, then it could mean that half the population will have a disabled person within their extended family.
- **According to population growth forecasts,** numbers of disabled persons in the South will increase by over 120% in the next 30 years,

⁶ Helander, Prejudice and Dignity, 1999

whilst numbers of disabled persons in the North will increase by around 40%.

- **Disability and ageing:** the greatest increase in numbers of disabled persons in both South and North will be in the older age groups, particularly 65+, counteracted in many places by the impact of AIDs
- **10 per cent?** General estimates provide that 10% of the world's population are disabled persons including about 100 million people thought to be disabled as a result of malnutrition. Further research from different sources provide more specific data although it is subject to how disability is defined⁷.
- **Severity of Impairments:** In poorer countries, people with mild impairments may be severely disabled because of lack of opportunity for appropriate equipment or rehabilitation that can easily be rectified in richer countries (e.g. providing spectacles, cleft palate operations). So mild impairments are more visible and common. However, people with severe impairments who would receive extensive medical treatment in richer countries, are more likely to not survive.
- **Conditions such as HIV/AIDs,** mental health problems, tuberculosis, chronic malaria, female genital mutilation, psychological trauma in conflict and refugee situations can all give rise to permanent impairments that result in exclusion and discrimination. If these people are included, then the prevalence rates will be much higher.

Preventing impairment is not the same as including the disability dimension in development.

Preventing impairments through vaccinations, eliminating diseases that cause impairment and improving birth practices does nothing to improve the human rights of disabled persons already living. It is much more about creating the optimum level of health and safety in a society, rather than about including a disability dimension into development. As the term 'inclusion' becomes more popular, there is a tendency for agencies to claim that they are including disabled people in relation to any project that mentions disability. For example, the World Bank list of projects on 'Including Disabled People in development' lists many projects that are basically about preventing impairment, and is not about inclusive development.

⁷ Estimated prevalence of disability in 2000 (excluding milder impairments)
economically developed countries – 100 million adults; 5 million children
economically poorer countries – 234 million adults; 35 million children

2.5. Poverty and Disability

According to a World Bank study on Poverty and Disability, 16.7% of the poor are disabled as compared with a general average in the South of 4.8%.⁸

It is increasingly acknowledged that 'Disability is both a cause and a consequence of poverty'⁹ yet the relationship is complex and differs according to each country and context. In addition to different definitions of disability, there are different understandings and opinions as to what constitutes poverty. 'Poverty is not only about rates of income but also about social exclusion and powerlessness'¹⁰. There is a large amount of literature that analyses and defines poverty produced by development agencies. One comprehensive document that also specifically includes a disability dimension is produced by the UK DfID: Poverty: Bridging the Gap (2001). Although disabled people are disproportionately represented amongst the poor in all countries and contexts, in relation to development cooperation, the focus will be on those living in absolute poverty. In concrete terms, this means lacking access to basic survival needs; food, clean water, clothing, shelter etc. Poverty and disability can form a vicious circle that is difficult to break – poverty increasing disability, and disability in turn leading to increased poverty.

⁸ Poverty and Disability' A Survey of the Literature, Anne Elwan, World Bank, December 1999

⁹ DfID Issues Paper on Poverty, Disability and Development p1 and 2

¹⁰ Yeo, R 2001, Chronic Poverty and Disability p 9

3. Why mainstream disability and how can it be done?

‘A Society which is good for disabled people is a better society for all’¹¹

3.1 Human Rights

Rights are Universal: Disability has increasingly been given specific mention in human rights instruments, and the universal human right to non-discrimination has also increasingly been understood to include disability. Moreover, the UN General Assembly has produced a Recommendation (November 2001) to consider proposals for a UN Convention on the rights of disabled people which is currently being prepared by a UN adhoc Committee in cooperation with the international disability NGOs including EDF.

In relation to developing countries, the ‘second generation’ human rights such as right to life, food etc, are a particular priority for disabled persons in poor communities, but need to be seen as closely linked to civil and political rights. From a human rights perspective, development programmes can no longer make excuses for not addressing disability. To intentionally exclude disability would be a violation of human rights expressed in several legal instruments that States have ratified.

Rights are Indivisible: With regard to mainstreaming, the important issue is that human rights are indivisible, and although a rehabilitation centre might help a disabled person realise their right to rehabilitation, if they are still excluded from schools and jobs, their human rights are being violated. Just supporting disability-specific projects within development cooperation does not fully respect human rights, because discrimination and exclusion is still being perpetuated within mainstream systems. There are fundamental principles which provide an extremely strong basis for the mainstreaming approach. These include;

¹¹ Statement made by Dr Lisa Kauppinen, President of World Federation of the Deaf at the closing of the Copenhagen Summit

- Equal worth and dignity of each human being
- Non-discrimination: discrimination is widely recognised as a major violation of human rights. This includes discrimination within mainstream services and structures within society
- Right of access – to environments, services, structures
- Right to live in one's community and with one's family
- Right to social integration and full participation in society
- Right to participate in political life, and to vote
- Right to freedom of association

3.2 Economics

The cost of NOT including disabled persons: If disabled persons were not included in development cooperation, this would mean costs related to

- Loss of income the disabled person, for carers and other family members due to stigma
- Loss of education for the disabled person, for siblings who are carers and for other family members due to stigma
- Social exclusion and stigma leading to loss of land rights, no access to credit schemes
- Long term loss of productive potential of disabled person due to lack of appropriate rehabilitation and opportunities. It has been calculated that one disabled child who does not receive appropriate rehabilitation and inclusion may 'place a burden on the community up to 6 times that caused by diarrhoeal disease'¹². This illustrates the point that although diarrhoea is much more common than disability, disability has life-long implications.
- Additional costs to the family, community and State in caring for the disabled person who could have become independent,
- Additional medical costs that could have been avoided in basic exercises or rehabilitation that prevents impairments becoming worse had been available. E.g. corrective surgery for contractures due to cerebral palsy or post-polio paralysis which could have been avoided with exercises.

The costs to the community as a whole: A service or system that excludes disabled people often excludes other vulnerable groups as well such as children, mothers with young children and elderly people. The system of extended families means that a large percentage of the community is affected, not just the individual disabled persons. To not address disability in poverty alleviation programmes is like pouring water into a bucket with a hole in it. "the

¹² D Werner 1986 Arguments for Including Disabled Children in Primary Health Care

elimination of poverty cannot be achieved without strategies for integrating the rights of minority groups”¹³

3.3 Responding to common arguments against including disability

Some common arguments¹⁴:

- Disability is not a priority; it is a luxury in poor communities
- Disability is too specialist – it is unrealistic to expect ordinary people to be able to develop sufficient knowledge and skills to deal with disability
- Addressing disability would be too costly; expensive aids and equipment, medical care, and the huge cost of adapting buildings, making materials accessible etc
- Funding for disabled persons is a waste of resources better spent on prevention; disabled persons cannot make much contribution to society, so better to put all resources into preventing impairments in the first place

Responding to these arguments:

- Disability has to be a priority: Communities who are consulted about their priorities are unlikely to spontaneously prioritise disability for the following reasons; a) the cycle of invisibility (discussed earlier), b) a fatalistic assumption that nothing can be done about disability and so there is no point mentioning it, c) consultation is usually made with non-disabled representatives who themselves are subject to negative attitudes. However, in reality disability HAS to be a priority if poverty alleviation and whole-community development is to happen, because of the costs and scale outlined above.
- Disability is not a specialist issue: it is a human rights issue. Disabled people’s priorities are for food, shelter, family life, clothing, income and full participation just the same as anyone else. The so-called ‘specialist’ aspects refer to the needs that SOME disabled persons have for aids, equipment and particular rehabilitation exercises. It has clearly demonstrated that ordinary people and local communities can develop the appropriate knowledge and skills to meet the rehabilitation needs of at least 80% of disabled persons, using existing local resources¹⁵. There is a wealth of appropriate technology techniques such as APT (appropriate paper technology to make seating and equipment for disabled children) that can be utilised very

¹³ Clare Short, in DfID 2001, Poverty, Bridging the Gap – Guidance Notes, p123

¹⁴ adapted from D Werner, op cit

¹⁵ The World Health Organisation (CBR Manuals); ‘Disabled Village Children and Nothing About Us Without Us’ David Werner

effectively. A key issue here is enabling disabled people themselves and their families to create their own appropriate solutions.

- Addressing disability saves costs long-term: the long-term costs of not including disability have been highlighted above. For many disabled persons, particularly in poorer countries where the majority of disabled persons have a mild impairment, there are no additional direct costs. Often a change in attitude and policy can create inclusion. Making services, environments and transport accessible from inception is less costly than adapting these services etc once they have been established. Some disabled persons do need some extra support in order to be able to fully participate, but again, the long-term benefits of enabling this person to become productive offset these costs. In implementing mainstreaming, there will of course be initial costs in training, awareness-raising etc. But again, these costs will be offset by the long-term benefits.
- The importance of mainstreaming: in poor communities, sometimes donors have showered resources onto a small minority of disabled persons – operations abroad, individual sponsorship, highly resourced special schools for an elite few. This has reinforced the belief that addressing disability is very expensive and specialist and leaves the majority of disabled persons not even accessing basic rights. Ideally, a blind child may need to learn Braille equipment and training, but to begin with, when the community is poor and the school does not even have a decent building or any books, then the priority is that the community makes even this education inclusive to all, and the blind child can be with their peers, and learn alongside them as best they can. When resources increase for the whole community, then more specialist resources can be obtained for disabled persons.
- Addressing disability is important in addition to prevention: Donors often feel that it is 'more important' to put resources into prevention than to focus on people who are already disabled. The mistaken belief is that disability could somehow be eradicated through focusing on prevention, but in fact it is intrinsic to being human, and we are all vulnerable to becoming disabled. If removing disabling barriers and supporting disabled people are not resourced, then the abuse of human rights and waste of human potential will continue.

3.4 Benefits and Impact of Mainstreaming

Different approaches to addressing disability.

In development cooperation, disability may be addressed via a number of strategies;

- a) **Disability-specific projects:** some of which are based on a medical model and promote segregation and target elite groups, and others which promote inclusion and empowerment of disabled persons. Examples of appropriate disability-specific projects are outlined below.
- b) **Components added on to mainstream:** the example of special units attached to mainstream schools illustrates the dangers of the 'component' model. Great care must be taken to assess whether the component will really lead to inclusion.
- c) **Mainstreaming:** this term is often interchanged with terms such as 'integration' and 'inclusion'. Human rights instruments and the social model analysis can be used to develop appropriate indicators of quality mainstreaming. The key issue is that the system/environment/service/legislation should respond to, acknowledge and adapt to diversity, including disability, not vice versa. Expecting disabled persons to adapt to the system, or physical presence alone is not mainstreaming, but is assimilation.

Impact of Scale: The scale of disability has been discussed earlier. In poor communities the majority of families could be affected by disability. Whatever the statistics, the key issue is that disability does exist and will continue to exist within all communities throughout the world. A key benefit of mainstreaming is that it can have an impact on ALL disabled people within the community. Specific disability projects will NEVER be able to reach all disabled persons. The cost of removing disabling barriers for ALL disabled persons is also much more sustainable than providing expensive facilities for an elite few.

Quality: For mainstreaming to have an impact in terms of quality, the mainstreaming has to be real, and not just assimilation, as discussed above. Real mainstreaming takes a social model and rights-based approach and will ultimately ensure the realisation of full human rights for disabled persons, and inclusive societies for all. A key impact of making programmes and society inclusive, is that it creates a higher quality society for everyone, not just disabled people; as society that embraces diversity, promotes community solidarity, enables people's potential and protects those who are vulnerable.

Ad hoc disability-specific approaches tend to leave mainstream society as it is; exclusionary, oppressive and intolerant.

See Annex A for examples of arguments/ statements from key agencies and governments

3.5 The importance of a Twin-track approach

Inclusion is both a goal and a process. The benefits of mainstreaming have been highlighted, together with the limitations of only using a disability-specific approach. However, in order for mainstreaming to be REAL mainstreaming, and not just assimilation, a twin-track approach that also includes some appropriate disability-specific approaches, is needed. 'The twin-track approach is not just an option – it is a necessity'¹⁶.

Appropriate disability-specific strategies are needed to make mainstreaming effective. A disabled child who cannot toilet themselves and is lying rigid with contractures in a back room cannot benefit from education even if the school is fully accessible, has well-trained teachers and a child-centred, flexible curriculum. A disabled adult who is illiterate, has low self-esteem, hardly any life-experience and no access to essential assistive devices (callipers, crutches) cannot take part in discussions that the World Bank has convened to gain civil society input into the national Poverty Alleviation Strategy Papers, even if they have been invited, which is unlikely. If the PRSP documents have been produced in Braille, but the blind members of the community have never been introduced to Braille, they cannot participate. So basically, mainstreaming cannot be effective unless at the same time, measures are taken to

- Provide basic rehabilitation, prevention of impairments worsening, necessary assistive devices, aids and equipment
- Capacity build grass-roots organizations of disabled persons to enable them to develop life-skills, self esteem, and an understanding of their rights

¹⁶ B. Venkatesh speaking of working with poor disabled persons in India.

3.6 How to Mainstream Disability in Development Co-operation

“It’s a matter of attitudes, political will and
practical know-how”¹⁷

The Twin-track approach is essential in order to make mainstreaming effective. This means that as well as removing barriers within the mainstream, there should also be a specific focus on disability. So at the level of **Policy**, disability should be mainstreamed into general development policy, into gender, poverty-alleviation, health and education policies. There should also be specific disability policy (rights-based and promoting inclusion) that goes into more detail. In relation to **Strategy**, barriers (e.g. access) should be identified and removed in the mainstream, and in addition, disabled people should be empowered to participate through strengthening DPOs, and creating access to appropriate rehabilitation and aids and equipment. **Structurally**, ‘Disability needs to be approached vertically and horizontally within aid agencies.’¹⁸ This means that aid agencies need to raise awareness amongst ALL their staff, but also appoint people with specific disability responsibility, to ensure the issue does not get lost. In relation to **Budgets**, mainstreaming needs to be supported by appropriate funding, this could be by allocating a certain percentage of every mainstream budget to disability (The Indian government allocates 3%). In addition, a specific budget is required for activities such as training and awareness raising across the board, providing they exist in order to promote mainstreaming, and not to fund inappropriate ‘vertical’ projects that promote segregation.

The donor organization - structure and ethos; The donor agency needs put into practice what it is recommending in its development cooperation. This includes:

- a) consulting with and employing disabled persons at all levels, including top management.
- b) Creating a disability-friendly accessible environment and accessible communications on all issues, not just disability issues.
- c) Establishing disability training and awareness-raising for existing and new staff.

¹⁷ Final report from Copenhagen Conference, 2000. ‘Inclusion of the Disability Dimension in Nordic Development Cooperation’, title page.

¹⁸ Communication from Jerry Mindes, IWGDD Coordinator

- d) Appointing persons with specific responsibility for focusing on disability inclusion who have authority to influence decisions and budgets (not just advisors)
- e) Providing specific training to staff who are responsible for assessing funding applications, and developing funding proposal assessment criteria.
- f) All research, data collection, monitoring and evaluation in relation to development programmes should disaggregate the data not just according to gender, but also in relation to disability and age.

Examples of practical guidelines and good practice in relation to mainstreaming are provided in Annexes C and D

4 Recommendations for the European Union to include the disability dimension in development cooperation.

4.1 What makes a good policy?

Policy on mainstreaming disability is very much an emerging area and continues to evolve. It needs to take into account both the rapidly changing understandings of development cooperation, together with deeper understandings of disability as a human rights issue within the context of poor communities in hugely different cultures and contexts. So 'good practice' is a relative term – in the final analysis, a policy is only as good as the impact of its implementation. To what extent does it really offer the basis for increased realisation of the rights of disabled persons, and for their full participation in the development of their communities?

Policy needs to have teeth: Another key consideration is the difference between formal policy that is legally binding, and the range of 'discussion', 'concept', 'strategy', 'consultation' and 'issues' papers that are produced often, but not always, in addition to policy. These can be very influential, providing that lobbyists use them effectively. A strength is that they can often go more deeply into complex issues, and can help ensure that the spirit rather than the letter of the law applies. Although there are real distinctions to be made between the status and aim of each of these types of document, in the following overview, it is the *content* that is highlighted and assessed.

Key ingredients of a good policy statement

- a) **Mainstreamed Policy:** a policy statement on disability and development cooperation should be an integral part of the general mainstream development policy at EU level and in the development cooperation policies of the Member States themselves. It must be fully integrated into its goals and objectives, even if there is a specific disability policy statement.
- b) **'Nothing about us without us'** Consultation with organizations of disabled persons, particularly those from partner countries in the South and with particular attention to involvement of poor disabled people, disabled women and children, groups representing those who are particularly vulnerable to exclusion; deaf persons, intellectually impaired persons, people with mental health problems, parent groups etc.
- c) **Society for All:** policy needs to state clearly the goal of an inclusive society for all that tolerates and celebrates diversity and promotes equity and social justice, a society within which disabled persons have a key role to play.
- d) **Human rights approach to disability:** reference to the UN Standard Rules, and to binding legal human rights instruments that apply to all human beings. In addition, a need to reflect the discussions underway in the preparation for a UN Convention on the rights of persons with Disabilities. Policy should reflect an understanding of the indivisibility of human rights, and reflect the whole continuum of rights from survival and development to civil and political rights.
- e) **Social model analysis:** Policy should reflect an understanding of disability as relationship between a person and the society, which discriminates, excludes and marginalizes them. It should focus on the barriers to participation and inclusion that disabled persons face, and state clearly the need for these to be prevented and removed
- f) **Poverty and Disability;** Policy should clearly state the inter-relationship between poverty and disability, and the importance of including a disability dimension in poverty alleviation strategies.
- g) **Twin-track approach:** the policy should stress the need for both disability-specific programmes (e.g. capacity building for disabled persons organizations) together with mainstreaming into all key development sectors. There are also stages between these two approaches, for example where a disability component is added on to a mainstream programme. However, some of these can be tokenistic and can even promote exclusion rather than inclusion – caution is needed.
- h) **Appropriate practical strategies:** the policy should refer to examples of good strategies that have worked in the local contexts, and not 'export' strategies from the North. These include community-based approaches and inclusive education that is broader than formal schooling.
- i) **Particularly Vulnerable Situations and groups:** Policy should make specific mention of disabled persons in conflict, emergency and

refugee situations, and those in situations where institutionalisation is promoted. These situations are increasingly common rather than exceptional. It should also emphasise that disabled persons are not a homogenous group, and some groups are particularly vulnerable to marginalisation; people with profound/multiple impairments, deaf persons, people with mental health problems, and those with multiple discrimination e.g. disabled children, women, people from ethnic minorities.

- j) **Accessibility:** Policy should emphasise accessibility in terms of information, communication, (e.g. sign language, Braille), environment and mainstream services.
- k) **Responsibility and Resources:** Persons within key sectors need to be allocated responsibility for mainstreaming disability. Budgets need to take specific account of mainstreaming disability; 'trickle-down' should NOT be assumed.

All these main ingredients are relevant to both EU level policy formulation as well as that of the Member States themselves.

See Annex B **for examples of Policy on Disability and Development cooperation**

4.2. How the EU can develop good policy

- a) Use Examples of Good Practice from EU Member and Recipient Countries (see Annexes B, D)
- b) Make specific mention of disabled women, children and men in any reference to discriminated against, marginalized, minority, vulnerable or excluded groups, recognising that without specific mention, disabled people subject to invisibility and will be ignored.
- c) Continue to integrate disability issues into all relevant resolutions on development cooperation policy, particularly in the Social sector, (e.g. the Resolution on Public Health¹⁹)
- d) Issue a Communication (policy memorandum) on Disability and Older people in Development Cooperation, as called for by the Resolution on disability and older people ACP-EU 3313/01.

¹⁹ RESOLUTION on health issues, young people, the elderly and people living with disabilities - *The ACP-EU Joint Parliamentary Assembly*, ACP-EU 3398/02/fin.

- e) Work towards adopting a Council Regulation on mainstreaming the disability dimension in development cooperation, as has been done in relation to gender issues (Council Regulation number 2836/98). This Regulation could focus on the issue of discrimination as a whole, but with very specific reference to disability amongst other issues such as older people and children.
- f) Other issues of diversity and discrimination such as older people, the children's agenda in development, gender issues, linguistic and ethnic minorities etc have much in common with challenges of mainstreaming disability. Rather than creating a large list of issues that are all integrated separately, maximum use should be made of addressing the commonality of discrimination/diversity within development cooperation. Issues should be linked wherever possible but also making sure that issues unique to disability are not lost.
- g) Integrate the Recommendations in the UN Standard Rules into all development cooperation guidelines
- h) Actively promote the position presented by the European Commission on a UN Convention on the Rights of People with Disabilities
- i) Make use of other key Human Rights Instruments particularly those promoting universal rights and non-discrimination, the UN Convention on the Rights of the Child, the Salamanca Statement and Framework for Action, the Beijing Declaration, the Copenhagen Declaration on Social Development, and the Convention to Ban Landmines.

4.3 Practical Strategies

Consultation with Disabled Persons :

- **Ensure consultation with disabled persons and their families** in relation to ALL development cooperation policy and programme development, in recognition of the fact that all development policy and programme development will concern disabled people who are part of all communities, and in line with paragraph D of the Resolution.
- **The EU should seek to recruit disabled people at all levels in the EU.** In departments relevant to development cooperation, disabled persons from the South or with experience in development cooperation should be prioritised.
- **Strategies to promote civil society participation including disabled persons,** need to be accessible (in terms of communication and environment) to disabled persons, and need to be take into account the time and support needed in order for disabled persons to realistically participate.

Awareness-Raising :

- **Use disability and development specialists (either as consultants or appointed as EU staff)** to carry out disability-awareness training throughout all levels and all sectors in the EU. The EU needs to develop 'in-house expertise' on disability and development cooperation, as mainstreaming is not a one-off event, but a process requiring on-going tailor made responses to each opportunity for mainstreaming.
- **Ensure that staff who assess funding proposals** are able to assess development cooperation proposals in relation to mainstreaming disability, extent of consultation with disabled persons, and what constitutes a quality disability-specific programme
- **Awareness-raising should use a human rights-based social model of disability** and draw attention to the ways in which disabled persons are excluded and discriminated against, and to the results of poverty and lack of access to information.
- **Awareness-raising should also acknowledge the different individual needs of disabled persons;** people with different impairments and degree of impairment may or may not have a need for rehabilitation or assistive devices. There are particular groups of disabled people who are even more vulnerable and in danger of being excluded – these groups should be actively taken into account
- **Different contexts should be acknowledged;** the 'South' embraces a very wide range of cultures and context, which result in different issues and priorities for disabled persons. In addition, there are particular situations; conflict, refugee, natural disasters, high levels of institutionalisation, countries with high levels of HIV/AIDs which also need to be taken into account. It is always the best policy to consult directly with representative DPOs on the ground.

Collaboration with Other Agencies :

- **Work with the World Bank to develop disability into the Poverty Reduction Strategy Paper (PRSP) process.** Information about disabled people should be required within the PRSP assessment guidelines. Civil society participation processes need to reach out to include disabled persons and make processes accessible.
- **UN agencies:** The EU should work closely with the UN.

This is particularly crucial in light of the work to prepare a consideration of proposals for a UN Convention on the rights of disabled people which is currently being prepared by a UN adhoc Committee.

This effort is also most relevant in light of the European Commission communication on this UN Convention and the European Commission proposals in the Communication on EU-UN Relations.

EU closer working practices are needed particularly with UN agencies and departments with experience in disability and development issues: WHO Disability and Rehabilitation Unit (promoting CBR), UNESCO Section for Combating Exclusion through Education, UNHCR, UN Special Rapporteur on Disability, ILO and UN Monitoring Committee on the Convention on the Rights of the Child.

- ***International NGOs;** Much EU aid and three quarters of its humanitarian aid is channelled through international NGOs. EU needs to encourage and insist that INGOs also mainstream disability issues. The EU can also learn from examples of good practice in INGOs that have made progress in integrating disability. Networks and umbrella organizations such as the IDDC and EDF plus networks of mainstream development NGOs should be collaborated with.*

Monitoring, Evaluation and Research :

- **Disaggregate all data according to disability** along with other criteria such as gender and geography
- **Develop impact indicators** using a human rights and social model approach to disability, integrally linked to poverty reduction indicators.
- **Involve disabled persons themselves in the processes of monitoring, evaluation and research**

Programming:

- **Ensure that a twin-track approach to programming is implemented**
- **Mainstreaming disability** by removing disabling barriers and inclusive planning should be prioritised, but appropriate disability-specific programmes need to be supported in order for mainstreaming to happen. Performance criteria in contracts need to include disability.
- **Disability-specific programmes should focus on support to DPOs and Parents Organisations**, and on the development of appropriate rehabilitation (low-cost assistive devices, person-centred therapies). Good practice in community-based and participatory approaches should be utilised.
- **Social sectors (education, health and employment) and poverty alleviation should be priorities** for mainstreaming, as stated by Commissioner Nielson in April 2001. Examples of good practice in integrating disability into health (some CBR programmes), Inclusive

Education in economically poorer communities, and integrated vocational training, employment and credit initiatives

- **Programmes focusing on prevention of impairment** should address poverty, social and environmental issues and be fully integrated into promoting basic health access for all. Prevention of impairment initiatives should not be considered as disability programmes.

Promote Accessibility :

- **Accessibility is a key issue in mainstreaming disability;** it should be considered as a cross-cutting issue and understood in reference to communication, participation, transport and environment
- **Accessible communication for poor disabled persons** is related to lack of literacy, lack of life experience, lack of opportunities to learn Sign language or Braille. So to include poor disabled persons, communication methods need to make use of creative, person-centred approaches such as theatre, storytelling, drawings, puppets; methods that are tried and tested with poor communities globally
- **Sign language interpretation, Braille, tape, large print** all need to be available in order to enable disabled persons who are able to use these methods to access information and to participate in consultation relating to EU programmes
- **Accessibility in poor countries** is closely linked to poverty factors, lack of infrastructure, harsh environments, lack of access to food and clean water etc. Disabled persons need to be included in measures to make environments and transport accessible for all and to access basic needs.

Funding :

- **Develop Criteria** for assessing disabled person's inclusion and participation in general development programme proposals
- **Develop Criteria** for assessing the quality of disability-specific programmes. E.g the difference between proposals that promote inclusion, full human rights, and use the social model, and proposals that are based on a medical or charity model.
- **Consider allocating a percentage of budgets** (3% is used by the Indian government) for poverty reduction programmes to include disabled persons.
- **Continue to add specific mention of disability in all budget lines, as**

Make Poverty Reduction effective and inclusive :

- **Key reforms are needed within the EU in order for poverty reduction to work in practice.** The EU will be unable to protect the rights of disabled persons without implementing these general reforms that have been highlighted by international NGOs and the EU's own monitoring process. 'If poverty alleviation takes place, inclusion becomes possible'²⁰
- **EU members must work towards the recommended 0.7% of their GNP to be allocated to development cooperation.** This budget must include increased proportion of funding to promote the inclusion of disabled persons
- **EU Member governments must work towards the 20-20 initiative,** ensuring that 20% of both member and participating government's budgets are earmarked for the Social Sector. Within the social sector, funding should support inclusive, non-discriminatory education, health, and employment programming, together with support for disability-specific programmes.

Make use of the European Year of Disabled Persons :

- **Focus on Development Cooperation:** the activities relating to the European Year of Disabled Persons (2003) should include a focus on disability and development cooperation issues
- **EU Conference on Disability and Development** should be convened in order to bring key players and governments together on the issue of disability and development cooperation. The Copenhagen Conference on the Disability Dimension in Development Cooperation was a successful and very productive event that brought together 4 Nordic countries, and provided a basis for these countries to develop practical action plans. The strengths of this conference could be build upon and used to raise awareness in other EU countries.

²⁰ B. Venkatesh, personal communication, 30.5.02

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ANNEXES

Annex A:

Why Mainstream? Examples of arguments from Key International Agencies and Governments

Annex B:

Policy on Mainstreaming Disability: Some Examples

Annex C:

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Monitoring and Evaluating Impact – Examples of Reports

ANNEX A – Why Mainstream? Examples of arguments from Key International Agencies and Governments

1. The UN

UN Standard Rules; Introduction

26. Persons with disabilities are members of society and have the right to remain within their local communities. They should receive the support they need within the ordinary structures of education, health, employment and social services

27. As persons with disabilities achieve equal rights, they should also have equal obligations. As those rights are being achieved, societies should raise their expectations of persons with disabilities. As part of the process of equal opportunities, provision should be made to assist persons with disabilities to assume their full responsibility as members of society.

UNESCO Salamanca Statement and Framework for Action 1994

'Regular schools with this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system' (Article 2)

2. The World Bank

The World Bank: 'there are economic and social benefits to increasing the participation of and opportunities for persons with disabilities in society... Including persons with disabilities in development strategies and projects has been broadly perceived as a human rights issue, whereas the human capital and poverty dimensions of disability – have largely been ignored. These dimensions are equally important and are central to the World Bank's mission.'²¹

²¹ The World Bank and Disability: Including People with Disabilities web page.

3. National Governments

Nordic Development Cooperation (Norway, Denmark, Sweden and Finland): Copenhagen conference report

Communique from the Ministers:

The ministers stress that human rights are universal. However, some groups are more exposed to discrimination than others. One such group is persons with disabilities. In order for all disabled persons to enjoy their rights, special measures are needed to create accessibility and participation in society.

In all societies, there is a risk of persons with disabilities being excluded, made invisible and objectified. Such risks can be counteracted through deliberate strategies for securing participation in the democratic processes, accessibility to the community and special measures to improve the living conditions of disabled persons. The Ministers stress that this work should continue to be guided by the UN Standard Rules on the Equalisation of Opportunities for Persons with Disabilities.

The Ministers find the inclusion of disability in development co-operation to be in accordance with the overarching objective of combating poverty, thus recognising that the elimination of world poverty is unlikely to be achieved unless the rights and needs of people with disabilities are taken into consideration. Persons with disabilities most often belonged to the poorest of the poor - the primary target group of development co-operation.

The Nordic Disabled Persons Organisations recommended the production of national strategies for the inclusion of persons within development cooperation. The aim of this objective was to;

Achieve overall recognition of the basic human rights and freedoms for persons with disabilities

Address poverty and unfair distribution of resources and ensure adequate resource flows to disability concerns.

Include disability concerns in all social development efforts, ensuring persons with disabilities access to health and education services, to job opportunities and to information.

The UK Department for International Development: Strengthening disability work through the 'twin track' (*mainstreaming plus specific focus approach used in gender work*) approach should help provide an enabling environment for people with disabilities to achieve greater livelihood, security, greater equality, full participation in the life of the community, and more independence and self-determination.... Benefits are likely to be greater when services for people with disabilities are provided within existing social educational, health and labour structures in society, and where procedures are established to permit effective participation of persons with disabilities in decision-making processes²²

USAID: "The U.S. Agency for International Development (USAID) is committed to the inclusion of people who have physical and mental disabilities and those who advocate and offer services on behalf of people with disabilities. This commitment extends from the design and implementation of USAID programming to advocacy for and outreach to people with disabilities. USAID's policy on disability is as follows: To avoid discrimination against people with disabilities in programs which USAID funds and to stimulate an engagement of host country counterparts, governments, implementing organizations and other donors in promoting a climate of non-discrimination against and equal opportunity for people with disabilities."

ACFOA (Australian Council for Overseas Aid) Policy Statement

- Sustainable development can only be achieved with the active participation of all members of the community, including people with disabilities
- providing equal rights and equal access to resources and opportunities to people with disabilities is integral to the goal of reducing poverty, illiteracy and disease which is an important development goal in itself.

²² DfID Issues Paper p11, 12

4. Non-Governmental Organisations

MIUSA (Mobility International USA)

- ***Inclusive development*** makes use of the strengths and potential of **ALL** members of the communities, as partners and contributors as well as beneficiaries. Include people with disabilities at every level of the program.
- ***Outreach*** is essential. **ALL** development programs and projects must target people with disabilities in their outreach strategies.
- ***Universal Design*** benefits the whole community. Designing all programs from the start to include **ALL** members of the communities – including people with disabilities – is more efficient and cost-effective than making adaptations later!

ANNEX B: Examples of Policy on Mainstreaming Disability

1. UN Standard Rules

The Rules have been used by many government and UN agencies to provide the framework for policies on mainstreaming. The specific references to mainstreaming in the Rules are as follows:

UN Standard Rules

Equalisation of Opportunities (Introduction)

24. The term “equalisation of opportunities” means the process through which the various systems of society and the environment, such as services, activities, information and documentation, are made available to all, particularly to persons with disabilities.
25. The principle of equal rights implies that the needs of each and every individual are of equal importance, that those needs must be made the basis for the planning of societies and that all resources must be employed in such a way as to ensure that every individual has equal opportunity for participation.
26. Persons with disabilities are members of society and have the right to remain within their local communities. They should receive the support they need within the ordinary structures of education, health, employment and social services
27. As persons with disabilities achieve equal rights, they should also have equal obligations. As those rights are being achieved, societies should raise their expectations of persons with disabilities. As part of the process of equal opportunities, provision should be made to assist persons with disabilities to assume their full responsibility as members of society.

Examples from specific Rules

- **Environment:** States should initiate measures to remove the obstacles to participation in the physical environment... housing, buildings, public transport, streets and other outdoor environments
- **Education:** States should ensure that the education of persons with disabilities is an integral part of the educational system (Rule 6)
- **Employment:** States should support the integration of persons with disabilities into open employment (Rule 7)
- **Family:** Persons with disabilities should be enabled to live with their families.. laws should not discriminate with respect to sexual relationships, marriage and parenthood (Rule 9)
- **Culture:** States will ensure that persons with disabilities are integrated into and can participate in cultural activities on an equal basis. (Rule 10)

- **Policy Making:** the needs and concerns of persons with disabilities should be incorporated into general development plans and not treated separately (Rule 14)
- **Budgets:** States should include disability in the regular budgets of all national, regional and local government bodies. (Rule 16)
- **Disabled Persons Organisations:** States should establish ongoing communication with organizations of persons with disabilities and ensure their participation in the development of government policies (Rule 18)
- **Development Co-operation:** Measures to achieve the equalisation of opportunities of persons with disabilities, including refugees with disabilities, should be integrated into general development programmes. Such measures should be integrated into all forms of technical and economic cooperation, bilateral and multilateral, governmental and non-governmental. (Rule 21)

2. European Union Member policies and statements

The UK: "Disability, Poverty and Development", The Department for International Development Issues Paper (2000)

Strengths:

- In the development of this paper, there was good consultation with international non-governmental organizations including disabled person's organizations focusing on disability and development cooperation.
- Integrally linked to DfID's overall development cooperation policy, and the International Development Targets.
- Strong focus on poverty and disability and the necessity of mainstreaming disability in order to reach the poverty reduction targets.
- Uses and explains a rights-based approach and the social model.
- Advocates the twin-track approach
- Provides critical accounts of current approaches and 'good practice' such as community-based rehabilitation and inclusive education

Weaknesses:

- It is not a formal policy paper. It is called an 'Issues Paper' and can be very influential as a lobbying tool but has no real teeth.



Nordic Countries Collaboration. Disability NGOs in the four Nordic countries (Norway, Denmark, Finland and Sweden), have been collaborating for many years on disability and development. Preparations beginning in 1991 resulted in a conference in Copenhagen in 2000, for Development Cooperation /Foreign ministers and disability organisations from these countries to promote the inclusion of the disability dimension into Nordic development cooperation. The process involved disabled persons from both South and North. The final report identified 7 steps to take this issue forward;

'Inclusion of the Disability Dimension in Nordic Development Cooperation'

- i) Establish national strategies for including the disability dimension in development cooperation. Focusing on; human rights, mainstreaming within poverty alleviation programmes, and including disability in social development efforts through a combination of specific programmes, components and mainstreaming.
- ii) Strengthening the capacity and involvement of DPOs, recognising disabled persons as partners in the development process
- iii) *Increasing knowledge about disability and development cooperation; integrating disability into data collection, censuses, surveys, development indexes. Making information accessible. Researching the costs and effects of NOT including disabled persons.*
- iv) Increasing collaboration; between UN agencies, bi-laterals, governments and DPOs in the North and South. Promoting local ownership and coordination in South countries. Involvement of stakeholders from the South and disabled persons North and South.
- v) Develop a Joint Nordic Platform to influence multi-laterals; To influence the World Bank to include disability in PRSP handbooks amongst many other objectives. To promote disability within all UN agencies and the EU, recognising that UN agencies have marginalized and under-funded disability units. To push disability within the human rights system.
- vi) Promoting the African Decade on Disability through direct support and influencing other donor agencies.
- vii) To monitor and evaluate the plans from this conference through another South-based conference in three years time

There are many strengths to the documents produced from the Nordic conferences. But it still requires the individual countries to turn these statements into action plans and to implement them. So far, Norway (a non-EU country) has made the most progress by producing an action plan for the Inclusion of Disability in Norwegian Development Cooperation, which will be discussed in a later section.

Sweden: 'SIDA's Development cooperation for children and adults with disabilities' Department for Democracy and Social Development, 1999

This paper was produced before the Copenhagen conference in 1999 by the Swedish International Development Cooperation agency in order to 'summarise previous experience, describe current international policy issues within development cooperation and establish a basis for Sida's future planning in this field.'

Strengths

- Uses human rights approach and strong focus on UN Standard Rules
- Emphasises participation of disabled persons themselves
- Prioritises mainstreaming, but acknowledges the need for disability specific approaches

Sweden has not yet produced its own action plan following on from the Copenhagen conference.

Denmark

i) 'From Charity towards Inclusion: The Way Forward for Disability Support through Danish NGOs.' Study commissioned by the Ministry of Foreign Affairs, DANIDA, in cooperation with the Danish Council of Organisations of Disabled People, 2000.

This paper focuses on the activities of Danish disability non-governmental organizations in supporting disability organizations in the South, using funds from DANIDA. It resulted in 13 recommendations for DANIDA's criteria for future disability support. These recommendations advocate;

- Using the UN Standard Rules and rights-based approach
- Prioritising the capacity building of democratic, decentralised and rights-orientated DPOs in the South, with focus on including particularly marginalized groups such as women, children, very poor people etc.
- Supporting projects that can be sustainable, are of good technical quality, are properly monitored and are developmental.
- The paper provides an in-depth discussion of the questions that need to be considered when supporting disability organizations. It highlights 4 key themes that need to be considered
 - i) Moving from charity to demanding equal rights
 - ii) Mobilising disabled persons
 - iii) Synergy, cooperation and coordination
 - iv) Direct support and service programmes (there are differences of opinion between Danish disability NGOs and DANIDA on this issue)

The Danish NGOs are requesting DANIDA to support the organization of a big conference on Inclusive Development during 2003, the European Year of Disabled Persons.

ii) 'Education: Danida Sector Policy, August 2001' This policy paper focusing on education draws heavily on the Dakar Framework for Action (2000) produced at the global Education for All conference. Therefore it has a strong focus on gender. In relation to disabled children, it states that a promising avenue to address the issue of vulnerable groups who are denied access is 'the inclusive school for the large numbers of mildly disabled children'²³. Later in the document, a section on Special Needs Education again refers to inclusive education and states that

'Denmark may consider supporting inclusive education programmes when they aim at the development of low-cost and affordable systems for the integration of a maximum number of children with special needs as integral part of school systems. For severely disabled children Danish assistance will encourage private domestic resource mobilisation, and it may support the development of effective referral systems and specialised institutions, but mainly through Technical Assistance channelled via Danish NGOs'²⁴

DANIDA has provided extensive funding in East Africa for the 'small unit' approach to education of disabled children which is not the same as inclusion and is not mentioned in this document. Its support of inclusion is conditional on affordability, and special institutions are still supported.

Finland. Finland is preparing a disability and development policy that will be ready at the end of 2002.

Netherlands. The Netherlands Development Co-operation Review emphasises poverty reduction and the International Development Targets²⁵, but has no specific mention of disability. It supports 'country-owned strategies' such as PRSPs.

Germany. The German Action Plan has a strong focus on 'the fight against poverty'. It supports participation by poor people. It recognises that poor people are not an homogenous group, and that gender inequality and discrimination are important factors. It mentions disabled people (p25) as an important target group in relation to enhancing 'social security'.

²³ Danida (2001) Education: Danida Sector Policy. P12

²⁴ *ibid* p 24

²⁵ Development Cooperation Review: The Netherlands. DAC Journal, Volume 2, no 3 OECD

Belgium. The legal framework on development co-operation 'defines a sector-based, thematic concentration: from now on, bilateral cooperation is limited to five sectors (basic health care, education and training, agriculture and food security, basic infrastructure, consolidation of society including by conflict prevention) and three cross-sectoral themes (equal opportunities, environment, social economy).'

3. Non- EU Governments

Norway. Following on from the Copenhagen conference, the Norwegian Agency for Development Cooperation (NORAD) has produced detailed guidelines on Planning and Monitoring for the Inclusion of Disability Issues in Mainstream Development Activities (2002) that has been adopted by the Norwegian Ministry for Foreign Affairs. This document also builds on the Norwegian Ministry's Plan that was endorsed in November 1999. A key strength is that as well as providing an overview of key issues it has a very practical section on how to include the disability dimension in development cooperation programme and project cycle management.

The initial Plan for inclusion of disabled persons (1999) highlighted the following **4 priority areas for inclusion**

1. The disability dimension in public services, access, health, education, employment, organization, culture, democratisation and co-determination
2. Focus on the *poorest*, and inclusion of disability in poverty alleviation, in acknowledgement that disabled people are estimated to form 1/6th of poor populations
3. Making *existing* services accessible
4. Focus on the right to life, and therefore prevention in primary health care, and access to health/medical care

There is a strong UN Standard Rules and other Human Rights instruments focus. It is integrated into general Norwegian development goals and particular focus on poverty alleviation. Norway has a six-pronged strategy on poverty alleviation, and states that disability must be included in all six areas.

The **6 areas for poverty alleviation** (p6) are;

- Social development
- Economic development
- Peace, democracy and human rights
- Environment and natural resource management
- Humanitarian assistance (conflicts and natural disasters)
- Women and gender equality

In addition to Human Rights and Poverty alleviation, the Norwegian Development Cooperation Priority areas are **HIV/AIDS** and focus on **children**. The close links between HIV/AIDS and disability are acknowledged, and the lack of access to education for disabled children is highlighted. It has a clear **social model** approach identifying specific barriers;

- Environmental and access barriers
- Legal and institutional barriers
- Attitudinal barriers

There is a strong emphasis on **mainstreaming disability**, together with a recognition to also have disability-specific, and disability component approaches, but mainstreaming is the priority strategy. There is a strong focus on **accessibility**, and making services, information, environments accessible. There is a strong focus on **consultation and partnership** with disabled persons

NORAD (p5)

‘An inclusive strategy focuses on the society, local community and interpersonal relations in which the persons with disabilities are, or have the right to become, members and participants. Accordingly, an inclusive strategy aims at promoting access to the community and to an active and responsible social life for all its members. If groups are excluded, focus will be on mechanisms for exclusion, and the barriers to access.

Australia. In 2001, the Australian Council for Overseas Aid Disabilities Network produced a package on including the disability dimension in development cooperation. This very comprehensive document has many of the ‘key ingredients’ mentioned above. It outlines 6 guiding principles:

Information Package concerning the Inclusion of People with Disabilities as Participants and Beneficiaries in Overseas Development Aid Activities. ACFOA Disabilities Network²⁶

Australia’s aid policy in relation to people with disabilities is based on a social model of disability and supports a rights-based approach to sustainable development. As such, it aims to promote practical approaches to the inclusion of people with disabilities as participants and beneficiaries in all development activities implemented in partnership with developing countries, other donors and international development agencies.

This policy is based on the following guiding principles:

²⁶ ACFOA, the Australian Council for Overseas Aid, was formed in 1965 to “create a vehicle to enable government to relate to the NGO community more easily”. Today, ACFOA acts as the body through which the aid sector regulates itself more stringently. It has established a Code of Conduct for Non-Government Organisations (NGOs) which is now a requirement for any NGO seeking AusAID funding.

The Australian aid program recognises that:

- i) sustainable development can only be achieved with the active participation of all members of the community, including people with disabilities.
- ii) providing equal rights and equal access to resources and opportunities to people with disabilities is integral to the goal of reducing poverty, illiteracy and disease and is an important development goal in itself.
- iii) people with disabilities and their carers should have access to the widest possible range of resources and opportunities and should participate fully in determining the services they need.
- iv) much disability is preventable and, in many cases, the incidence of disability can be reduced through relatively simple, low-cost interventions.
- v) goals and priorities for dealing with the rights and needs of people with disabilities will vary from country to country. They should be developed with sensitivity to the specific priorities of Australia's aid program partners.
- vi) Australia's assistance should actively contribute towards ensuring participation of people with disabilities in all development activities through, but not limited to social services, access, participation and independence.

It also includes useful practical tools for inclusive programme design and a step by step guide to implementation, monitoring and evaluation. This will be outlined in the next chapter.

However, one rather bizarre and arguably 'bad' policy statement is that it 'recognises that *most* (my italics) people with disabilities are or will be dependent or partially dependent on others for their physical, psychological, social and economic welfare'²⁷. There are two points to make about this;

- a) every human being is dependent on other human beings for all of these aspects – we need each other to survive.
- b) disabled persons who require intensive personal support for their survival are a small minority, particularly in countries of the South where the majority of disabled persons have mild or moderate impairment. This is not to deny the equal rights of those who do require substantial additional support.

USA: The US Agency for International Development (USAID) Policy Paper on Disability (1997)

²⁷ ACFOA Disabilities Network Information Package, page 10

This is an official policy paper applying to the use of Agency programme funds.

USAID's Policy on Disability is:

'To avoid discrimination against people with disabilities in programmes with USAID funds and to stimulate and engagement of host country counterparts, governments, implementing orgs and other donors in promoting a climate of non-discrimination against and equal opportunity for people with disabilities. The USAID policy on disability is to promote the inclusion of people with disabilities both within USAID programmes and in host countries where USAID has programmes.

Policy objectives;

- a) To enhance the attainment of US foreign assistance program goals by promoting the participation and equalization of opportunities of individuals with disability in USAID policy, country and sector strategies, activity designs and implementation
- b) to increase awareness of issues of people with disabilities both within USAID programmes in host countries
- c) to engage other US government agencies, etc.. in fostering a climate of non-discrimination against people with disabilities
- d) to support international advocacy for people with disabilities

The Policy Framework gives a bit more detail. It advocates

- a balance between prevention, rehabilitation and equal opportunities (World Programme of Action, reinforced in UN Standard Rules).
- It states that 'minor modifications' could enable disabled persons to be integrated into mainstream services,
- It advocates that economic growth activities should promote equal access.
- Infrastructure projects can be designed to ensure 'barrier-free access'.
- It makes specific mention of disabled persons in post-conflict and disaster situations, and acknowledges the role of landmines in disabling people
- It condemns the 'warehousing' of disabled persons and promotes listening to disabled persons in the 'young democracies'
- It promotes inclusion of disabled persons in the collaboration between North and South-based NGOs (called PVOs – private voluntary organizations).
- It acknowledges that partner country governments are responsible for creating the regulatory environment, assuring quality standards and promoting sustainability.
- It advocates consultation with disabled persons and disability organizations

- It states that USAID employees and contractors need to be trained in disability awareness.
- Key areas to be considered in USAID programmes include; Children, Women, ECD, Education, Basic infrastructure, Small scale industry, Urban or rural community , development, Health care, education and family planning, Career development and job placement, income generation, Democracy and good governance, Human rights

The first annual report on the implementation of the policy states:

'we have found no particular resistance to the principle of inclusion... we have seen that where people with disabilities are included in our efforts, our impact is strengthened'. (p8)

Whilst it lacks the detail of other government's papers, it is actually very succinct and covers most key areas. But the lack of detail means that there is a danger that 'implementation' will be covered by an ad hoc range of disability-specific projects, rather than real mainstreaming into key sectors of USAID's work.

"A 1991 GAO report on "Assistance to Disabled Persons in Developing Countries" characterizes U.S. assistance as "sporadic." As of 1999, this assessment remains accurate.

USAID missions and partners have been involved in strengthening organizations of PWDs to advocate for their human rights. However, while several USAID organizations have included PWDs in their development programs with great success, others still deny any potential linkage between disability and development issues.

USAID has been deeply involved in humanitarian and remediation efforts around this year's disasters. Again, sensitivity to PWDs is inconsistent. While many are disabled as a result of these large disasters and those already disabled are disproportionately affected, USAID and its partners are unprepared to focus on their special needs. In Central America, for example, it was reported that humanitarian assistance to PWDs was provided solely by their own organizations from within existing budgets"(USAID Second annual report,2000,. P2)

4. Multi-lateral agency policies

The World Bank. In recent years, the World Bank has slowly but increasingly taking disability into account. Increased focus on disability is evidenced by the commissioning of several reports;

- 'Poverty and Disability – A Survey of the Literature' Ann Elwan, 1999
- Including Persons with Disabilities – A Directory of World Bank Projects (1999)
- 'Disability Issues, Trends and Recommendations for the World Bank' Robert Metts, 2000

There is also a disability unit which has been working to improve the Bank's focus on disability.

The Bank's most recent statement on its webpage 'The World Bank and Disability' promotes an economic approach. It also states that it has a portfolio of disability projects, and that increasing the quality of these projects is a high priority. It has established a working group to help create a more disability-friendly environment for Bank staff, partners and clients with disabilities. Poverty Reduction Strategy Papers (PRSPs) are the main tool that the Bank promotes and requires from its partner countries that require debt relief and further loans. They describe a country's 'macroeconomic, structural and social policies and programmes to promote growth and reduce poverty, as well as associated external financing needs.'²⁸ However, despite extensive rhetoric about civil society participation, research by many international NGOs shows that 'the involvement of poor people in drawing up policies and writing PRSPs has been minimal and superficial'²⁹ The issue of disabled people's participation is not specifically required in the PRSP assessment guidelines, although disaggregation by regions, demographic groups and gender is required.

Although the controversial 'user-financed' approach to health care is now officially discouraged by the Bank as it has led to a deterioration in health status and the poorest of the poor dropping through the safety nets, the user-fee system is still being operated with disastrous consequences for disabled people.³⁰ There is still much work that needs to be done just on the policy level in the Bank, but this will be worthless if the practical processes of PRSP development do not include disabled people and their issues.

The United Nations: The importance of the UN Standard Rules, World Programme of Action, and the different decades on disability has already been discussed. Specific UN agencies also have a range of policies that in general are good examples, but the issue is raising awareness of these and implementing them. Particular examples include:

- UNESCO: Salamanca Statement and Framework for Action (on inclusive education)
- Joint Position Paper on Community Based Rehabilitation by UNESCO, ILO, WHO and UNICEF (produced in 1994 and revised in 2002). The purpose of the paper clearly states that these 4 UN agencies wish to 'promote and support CBR and its objectives as part of the ongoing efforts

²⁸ <http://www.worldbank.org/poverty/strategies/>

²⁹ Christian Aid policy briefing: Ignoring the Experts – Poor People's Exclusion from PRSPs

³⁰ D Werner, 2002, Consultancy report on Community Based Disability Intervention in Andhra Pradesh, India

that are needed to achieve social inclusion and equalisation of opportunities for people with disabilities...’ It’s ‘increased emphasis on human rights and community participation helps to clarify the essential elements and approaches for implementing this strategy’

- ILO Convention 159 and Recommendation 168 concerning the Vocational Rehabilitation and Employment of Disabled Persons have also been mentioned in earlier chapters.
- UNHCR guidelines on disabled refugees – but rarely implemented.
- WHO is currently finalising a disability policy.

5. Partner Country Policy

South Africa; The White Paper on an Integrated National Disability Strategy. South Africa disability policy is an example of successful lobbying by disabled people resulting initially in the inclusion of disability in the equality section of the Constitution. The national Strategy was developed in 1997. In the year 2000 the Department of Education published a **White Paper on building an inclusive education and training system**, which has a very strong and clear statement on inclusion. The Integrated Disability Strategy (1997) has the following features;

- It was developed as a result of a very participatory process
- It represents a paradigm shift from seeing disability as a health/welfare issue to a rights issue
- It emphasises the importance of transformation of attitudes and behaviour
- It focuses on disability as an issue of exclusion – in relation to poverty, unemployment and in legislation
- It focuses on particularly vulnerable groups; black disabled women, children, people with severe intellectual or mental disabilities, elderly people, people living in remote areas, youth, people displaced by violence and war, people with AIDS, people with multiple disability
- It presents a social model of causes of disability; poverty, war, violence, lack of information, failure of medical services, unhealthy lifestyles, environmental factors, accidents and social environment.
- Key policy areas identified are; prevention, health care, rehabilitation, public education, barrier-free access, transport, communications, data collection and research, education, employment, human resource development, social welfare and community development, social security, housing and sport and recreation.

“The Integrated National Disability Strategy provides a blueprint for integration and inclusion of disability into every aspect of governance”³¹.

³¹ McClain, C V (2001) Governance and Legislation in South Africa: a contemporary overview.

Uganda

The Uganda national constitution has a section entitled; Uganda Constitution and Disability (Specific Provisions on Disability) 1995. As well as affirming general human rights for disabled persons, it includes the following points

- Promoting sign language for the deaf as one of the national languages
- Promoting affirmative action to address imbalances
- Disabled person's right to vote and accessible voting, plus procedures for disabled people without hands to use other parts of the body
- Women and disabled persons representation in parliament

The policy in Uganda was heavily influenced by the political action of Nudipu (National Union of Disabled Persons of Uganda) which now has a structure right the way through the political system, with disabled people represented at all levels. Nudipu has been strongly supported by Nordic development cooperation. However, leaders of Nudipu are aware that a strong focus on the political agenda may over ride the development objectives. They are also aware of the dangers of donor dependency. 'Emphasis should be on 'donor fuelling' and not 'donor driving' – for the latter is neither empowering nor sustainable.'³²

³² Ndeezi, A (2002) Disability and Development: A Success Story from Uganda Paper presented at the conference on Disability and Development, May 2002, Germany

ANNEX C: How to Mainstream - Examples of Guidelines

1. STAKES (1996): The Disability Dimension in Development Action: Manual on Inclusive Planning. STAKES, United Nations

This comprehensive manual has been a key reference in the development of the Nordic policies and strategies on including the disability dimension in development cooperation. It gives the following guidelines on how to mainstream:

Guidelines for developing Disability-Sensitive Development Co-operation Policies :

- Use Rule 21 in UN Standard Rules as a basis
- Consult with DPOs and create formal contract with DPOs
- Acknowledge that disabled persons exist within ANY TARGET GROUP
- Use a combination of strategies;
 - a) Promote full mainstreaming within particular sectors
 - b) Adding a disability component within other mainstream sectors
 - c) Support disability-specific projects
 - d) establish concrete mechanisms in relation to
 - partnership, formal agreement with disability community
 - training and awareness raising of all levels of staff
 - monitoring with advisory groups of disabled persons,
 - employment of disabled persons within the donor agency,
 - ear-marking agreed proportion of funds for DPOs
 - threshold criteria (minimum standards)
 - checking and auditing (no project that ignores the disability dimension will be funded)
 - dissemination of guidelines to staff and partners
 - cross-sectoral collaboration

Rapid Disability Analysis: (a practical tool to help at project identification and planning stages)

- i) Are there disability-relevant activities/projects within the programme?.
- ii) What is the degree of disability relevance?

STAKES Manual Assessment scale of disability relevance

- a) Non-disability relevant: very few, but projects that do not target people or environment
- b) Disability relevant: e.g any project related to whole population or a community or to environment; buildings etc
- c) Highly disability-relevant: e.g. social, health and education sector programmes, or identified group of disabled persons in the target group
- d) Disability-specific; e.g. capacity building of DPOs

- iii) Have primary stakeholders been identified and involved?
- iv) Are objectives in line with international conventions, regulations etc
- v) Can disabled people participate equally? Accessible environments, accessible communication etc
- vi) Risk assessment – has this taken account of disability?
- vii) Involvement of disabled people – is it enough considering disability relevance?
- viii) Does the project result in sustainable improvements for disabled persons?
- ix) Has the whole planning process been sensitive to disability issues (non-discriminatory)
- x) Are monitoring and evaluation arrangements sensitive to disability?

2. DfID Issues Paper; The Role of Development Co-operation and Areas for Action. The UK DfID proposed the following approaches to mainstreaming;

- **Development of better data**, including gender analysis will help in both policy and measuring impact Support for researching gaps in knowledge; e.g. sexual exploitation of disabled children, violence against disabled women
- **Integration of disability into existing social, educational, health and labour** structures. Successful examples from Inclusion Education should be used.
- **Effective participation** of disabled persons in decision-making processes. Use local and international guidelines for infrastructures
- **Access:** Ensuring buildings are accessible and taking account of transport needs
- **Training Materials** Acknowledgment of disabled persons in all training materials
- **Information:** Ensuring disabled persons and their families have access to information (information needs to be in accessible formats)
- **Evaluation and Impact:** Assessment of impact on disabled persons/families in evaluation
- **Women:** Reproductive health and disabled women; ensure accessible information and involve disabled women in health education
- **Conflict and humanitarian assistance;** wider stakeholder participation is needed, disabled people should be involved, not seen as passive victims
- **Responding to different vulnerabilities**, e.g. deaf persons and information need attention
- **Capacity building of disability movement**
- **Media and communications should be fully utilised**, including local participatory forms of communication such as theatre, poetry, storytelling

3. Guidelines from Mobility International USA (MISUSA). The following ‘hot tips’ present many practical approaches to mainstreaming;

- **Make your projects accessible:** buildings, materials and resources, communication procedures (sign interpreters etc), transport
- **Go TO people with disabilities:** invite disabled persons to your meetings, provide information sessions, hold your meetings where disabled people meet, form partnerships, link services
- **Support creative funding approaches to pay for disability-related costs:** conditional grant linked to accessibility, fund proposals that include disability-related items – sign interpreters, adapted bicycles etc, fund business ventures run by disabled people
- **Fund programmes led by disabled persons and programmes that help disabled persons to help themselves;** micro-credit programmes that include disabled women, literacy, health, peer support, community-based rehabilitation etc
- **Support capacity building of Disabled Persons Organisations;** help with setting up offices, leadership training particularly for women, matching funds, seed grants
- **Make your OWN organization inclusive:** find out about current participation of disabled persons, hire disabled women and men at all levels, include disabled persons on advisory councils and Board of Directors, provide disability awareness training to all staff, seek technical assistance from disabled persons to assess inclusiveness and promote accessibility
- **Include disabled persons in dialogue and policy formulation on development co-operation and human rights;** invite disabled persons to contribute their perspectives, provide support for disabled persons to participate in regional and international conferences, facilitate coalition building between disabled persons and other marginalized groups
- **Include disabled women and girls at every level;** in trainings, hire disabled women, reach out to disabled women, provide support such as training in technology, literacy, business skills etc, fund and support projects focusing on and including disabled women.

4. ACFOA (Australia) Information Package.

This package provides a useful tool for screening various projects for the extent to which they include disabled persons:

ACFOA Guiding Principles Questionnaire

1. How are/will people with disabilities (in recipient countries) be involved in the design and management of development activities?

2. Does the recipient government currently have any policies/strategies which seek to involve and incorporate people with disabilities into development activities?
3. How will local family members and community networks be involved in the development and implementation of development activities which seek to involve and incorporate people with disabilities?
4. What follow up/support arrangements are/will be in place to assist people with disabilities to participate in and benefit from the development activity?
5. What arrangements are in place for monitoring and evaluation against the guiding principles and how will people with disabilities be involved in these arrangements?
6. Are there any other NGOs or organisations currently implementing development activities which seek to involve and incorporate people with disabilities in the same geographical area? Give details of these development activities, including the likely impact on the implementation of the proposed development activity.
7. What future plans/activities are being considered to ensure long-term sustainability of the inclusion of people with disabilities in the development activity (eg vocational training, micro-credit)?
8. What awareness raising training concerning the rights and needs of people with disabilities for program/project staff, partner agencies staff and the community generally is planned?
9. What capacity building training concerning the inclusion of people with disabilities as participants and beneficiaries for program/project staff and partner agency staff is planned?

There is also a useful questionnaire that was circulated to NGOs to ascertain their levels of awareness of and inclusion of disabled persons in their development cooperation work. This questionnaire is in Annex ...

5. NORAD (Norway). The NORAD planning and monitoring paper devotes part 2 to Practical Guidelines. These consist of i) goals, principles, main priority areas and mechanisms, ii) checklist for inclusion of disability issues in programme cycle management, and iii) indicators for the inclusion of disability issues. 3 mechanisms were highlighted;

- Increase accessibility
- Increase stakeholders influence
- Increase awareness and knowledge

The checklists covered the following areas:

NORAD Checklists for the Inclusion of Disability Issues (some examples):

- Are disabled people represented in dialogue with partners?
- Has accessibility been addressed? (buildings, transport, information)
- Has disability relevance been studied?
- Have disabled persons been acknowledged as existing within ALL human target groups?
- Has full use been made of international instruments[?]?
- Are vulnerable groups taken account of?
- Is the programme non-discriminatory?

Many more checkpoints are given in relation to different stages of the programme cycle.

Of particular interest are the indicators for inclusion of disability:

Examples of defining indicators related to NORAD strategy

Strategic area	Objective	Strategies, shown in programmes	Suggested indicators
SOCIAL DEVELOPMENT	<p>Promote higher quality of social services</p> <p>Improve access to services for poor and marginalized groups</p>	<p>SWAP (national level): Develop quality standards of facilities and training of PHC personnel. Include disability issues.</p> <p>Local level: Construct, manage accessible health facility</p>	<ul style="list-style-type: none"> • Number/proportion disabled of total population within catchment area of health station. • Access to particular facility - and Proportion of facilities accessible • Proportion of skilled personnel per facility • Proportion of facilities with at least 1 skilled person • Proportion/number of disabled received PHC • Proportion/number of disabled referred to special

			<p>assessment/treatment</p> <ul style="list-style-type: none"> • Proportion/number of disabled children enrolled in school
ECONOMIC DEVELOPMENT	Develop employment policy which include disabled	<p>Support to income generation projects</p> <p>Support to quota programme for the inclusion of disabled in civil service</p>	<ul style="list-style-type: none"> • Number/proportion disabled of total included in project. • Average income of disabled in project compared to average income of others in project • Number/proportion of disabled total in public service employment
PEACE, DEMOCRACY AND HUMAN RIGHTS	Include vulnerable groups in democratic community development	Support to the development of local government where disabled are represented	<ul style="list-style-type: none"> • Number/proportion of disabled in community health committees. • Number/proportion of disabled in decision making village committees
ENVIRONMENT AND NATURAL RESOURCE MANAGEMENT	Promotion of safe and pollution free environment	<p>Support to the development and monitoring of work safety and environmental protection laws and regulations</p> <p>Support to clean water supply and sanitation initiatives</p> <p>Support to improved physical accessibility to infrastructure by disabled persons</p>	<ul style="list-style-type: none"> • Existence of work safety and environmental protection laws and regulations • Existence and/effectiveness of agencies to monitor work safety and environmental protection laws and regulations • Number/proportion of disabilities by cause (work-related, communicable diseases, environmental pollution) • Number/proportion of public buildings (e.g. schools, health centers, banks...) and water and

			sanitation facilities with provision for physical access by disabled persons
HUMANITARIAN ASSISTANCE IN THE EVENT OF CONFLICTS AND NATURAL DISASTERS	Promote humanitarian assistance on the basis of human rights	Support to health and education in IDP camps, with focus on access and the needs of disabled	<ul style="list-style-type: none"> • Number/proportion of disabled in camp • Number/proportion of disabled enrolled in education. • Number/proportion of disabled served by health facilities
WOMEN AND GENDER EQUALITY	Promote development projects that strengthen the position of women in society	<p>Skills training for women</p> <p>Revolving funds for income generation</p> <p>Support of community development that includes women</p>	<ul style="list-style-type: none"> • Number(proportion of women with disabilities involved in the project

ANNEX D: Good Practice in Disability and Development Cooperation – Some Examples

1. Capacity Building of DPOs

As discussed throughout this paper, for mainstreaming to be effective, disabled people need to be enabled to make use of information, to develop skills to participate, to campaign for their rights, to organise and to take leadership and decision-making roles. Therefore donors need to support capacity building of rights-based DPOs.

Danish NGO support to DPOs in the South:

DANIDA has been funding disabled persons in the South in 20 countries, via 14 Danish DPOs. Its recent review 'From Charity towards Inclusion' shared many lessons learnt and recommendations for the way forward. In Uganda, NUPIDU, the umbrella DPO has become a role model in terms of a DPO whose capacity has been developed appropriately. Through NUPIDU, there are 5 disabled MPs and a country-wide network has been established that has raised awareness on disability throughout the country. DSI, the umbrella organization of Danish DPOs makes many recommendations to DANIDA based on its experience, including;

- Supporting DPOs based on the UN Standard Rules framework
- Funding should be prioritised for projects that promote strong, democratic and rights-orientated disability movements
- Decentralisation, long term partnerships, prioritisation of particularly vulnerable groups should be encouraged
- Funding of service-delivery by DPOs should only be given when there is a clear organisational development perspective.

B. Venkatesh highlights the importance of encouraging a real poverty focus and engagement in wider development issues by DPOs. He proposes the following criteria to be used as objectives for DPO development and for funding DPOs

Criteria used in funding DPOs – B.Venkatesh (disabled activist in rural India)

1. what is their understanding of poverty and development in their context
2. do they participate in campaigns on issues affecting poor people – are there linkages to mainstream development?
3. membership – are there different levels, e.g. village level, squatter camp level, are they involved in decision making
4. are they prepared to take on issues of poverty on behalf of disabled people, eg access to clean drinking water.
5. are their activities, structures etc sustainable

2. Inclusive Education

There is a vast amount of documentation and examples of successful inclusive education in poorer countries, much of which is available through the **Enabling Education Network**, itself an example of a structure specifically established to promote sharing of information on good practice and the inclusion of marginalized groups in education, particularly in poor countries. **The UNESCO Salamanca Framework for Action** provides concrete 'guidelines for action' to promote inclusion covering the following different levels and issues; a) policy and organization, b) school factors, c) recruitment, training and education personnel, d) external support services, e) priority areas (early childhood education, girls education etc) f) community perspectives and g) resource requirements.

Key lessons have been learnt about promoting inclusion from the experience of international NGOs working in partnership with governments. Some of these are:

- **budget**; success is not dependent on a large budget, but depends on how the budget is used, and being able to sustain a minimum level of resources to promote development
- **Inclusive education is wider than inclusive schooling**; although 'IE' in countries of the North focuses entirely on schools, in the South, often more appropriate and better quality education happens in in-formal, non-formal and home situations. The issue is to ensure that all disabled children are included in educational strategy according to their learning needs, not according to the characteristics of their impairment.
- **all levels of personnel need training and awareness-raising**, including administrators
- **a whole school approach** should be used, requiring a whole school vision, commitment and shared responsibility
- **large class sizes and few resources do not prevent inclusion**; attitudinal barriers are the main ones to overcome
- **change needs to be managed** and should proceed in a participatory manner, and step by step so that it can be sustained

- **support is needed** – one-off trainings do not work. On-going support is needed for teachers, parents, children to problem-solve together and monitor their own success
- **Inclusion should change the system** not the child – the focus should be on enabling ALL children to participate and learn within the educational environment. Schools should change to respond to diversity. In South African policy this is termed ‘barrier free learning’
- **Partnership and collaboration** are essential with the community, development organizations, self-help groups of marginalized groups including DPOs and parents organizations. Cross-sectoral collaboration is also essential.

3. Parents Organisations

‘Inclusion starts in the family’ says B. Venkatesh, a disabled activist who works in poor rural communities. For disabled children, particularly those with intellectual impairments, Parents Organisations can be the means by which the disabled child accesses their rights. In Southern Africa, two parents were the founders of the Lesotho Society of Mentally Handicapped Persons (LSMHP)³³. They work closely with teachers in the Inclusive Education Programme, and are invited to give talks and share their experiences in teacher’s seminars. They also plan, share resources and exchange expertise with the national DPO and the CBR programme. Strong, rights-based parents organizations can work effectively at the grass roots level to promote inclusion in the home and community.

4. Community Based Rehabilitation

The UN agencies, led by WHO, are in the processes of evaluating CBR, one of the key strategies for promoting disabled person’s access to rehabilitation, but increasingly, a strategy that acts as a doorway to more comprehensive realisation of rights. CBR was launched by WHO over 20 years ago, and has been criticised by some disabled people for its emphasis on rehabilitation (rather than equal opportunities) and its control by non-disabled people. In practice, CBR programmes and projects cover an incredibly wide range of activities and approaches ranging from very rights-based and radical community initiatives, to rather narrow service delivery of certain aspects of rehabilitation. This wide range of interpretation makes it difficult to evaluate as a strategy. Its strength is that it has provided an inspiring framework that has undoubtedly been fully utilised in many poor communities, to develop real grass-roots disability programmes that have enabled disabled people access their rights.

Joint Position paper on CBR: ILO, UNESCO, UNICEF and WHO

³³ EENET Newsletter no 1. www.eenet.org.uk

(1994, revised 2002)

“CBR is a strategy within general community development for rehabilitation, equalization of opportunities and social inclusion of all children and adults with disabilities

CBR is implemented through the combined efforts of people with disabilities themselves, their families and communities, and the appropriate health, education, vocational and social services”

The revised position paper addresses earlier weaknesses by stating that an ‘Increasing emphasis on human rights and community participation helps clarify the essential elements and approaches for implementing this (CBR) strategy’ . It emphasises the importance of increased participation of disabled persons in the management of CBR programmes.

Some CBR programmes have been excellent as a catalyst to empower disabled persons, form their own organizations and support disabled persons in campaigning for their rights. More recently there are CBR programmes that are fully integrated into community development programmes:

‘Community Approaches to Handicap and Development (CAHD) is a programme in Bangladesh that has integrated the disability perspective into the work of CDO (Community Development Organisations). CDO has 25 projects and a staff of over 200 people, working in areas of fishing, credit, health, housing, legal aid, women’s justice etc. The approach to integration has included; awareness raising of all staff, creating a policy, advertising campaigns, including disability in induction for new staff, training project workers such as traditional birth attendants in the health projects. As well as mainstreaming, Community Disability Workers have been trained to provide appropriate rehabilitation where needed. It is noted that not all disabled persons require this service, for some, just having access to credit is sufficient. This is a good example of the ‘twin-track’ approach in practice. More recently, CAHD has introduced disability as a topic in meetings with the Ministry of Health.

5. Water and Sanitation. Access to clean water and sanitation is a key factor in integrating disability into development cooperation. The UK DfID has funded a 2 year programme at the Water, Engineering and Development Centre at Loughborough University, to carry out research with the aim of improving access for physically disabled persons to water and sanitation facilities. The Centre has appointed a disability and development specialist to manage this research

6. Credit and Savings. Increasingly international agencies are making efforts to enable disabled persons to access mainstream credit schemes.

Save the Children UK and Leonard Cheshire are two international NGOs who have carried out work in this area.

Save the Children Women's Credit and Savings Programme, Vietnam.³⁴

Research into existing micro-credit schemes demonstrated that although some disabled people were borrowing, many really poor families with disabled members were afraid to borrow because they could pay back the loans. An awareness-raising workshop was held with the Women's Union which resulted in the following improvements in access for disabled women and women with disabled children;

- Increase in disabled children receiving scholarships
- Increase in disabled children attending school
- Free essential treatment (cleft palate and eye treatments)
- Families with disabled members receiving assistance with their harvest

Inclusive Micro-Credit programme, Philippines – Leonard Cheshire International

In early 2001, Leonard Cheshire approved funding to AKAY to operate a group lending scheme with target groups of poor, women, disabled people and their family members. As well as financial support for the start up fund and some project staff, Leonard Cheshire has recruited a part time advisor who is providing technical advice and monitoring the impact of the programme.

Over the last 12 months loans have been disbursed to 869 borrowers in 31 centres around metro Manila. Eight percent (72) of the borrowers are disabled people and another 11% (97) are family members of disabled people. The target is that not less than 10% of the borrowers will be disabled people and this should be reached as further loans are disbursed in the coming months.

7. Voting and Disabled Persons. The International Foundation for Election Systems has a Disability Access Project funded by the Foreign Ministry of Finland. This has enabled it to analyse and try to overcome barriers to voting that disabled persons face in several countries including Kosovo and Bangladesh. This has included working with Disabled Peoples Organisations to promote voting, prioritising disabled persons in voting queues, arranging voting in home for severely disabled persons, and for residents in hospitals

³⁴ Jones, H in Disability and Development (1999) ed Emma Stone. Leeds: The Disability Press

and prisons to register their votes. In Bangladesh, 300 disabled persons were deployed as election observers.

8. Using strategies from mainstream development practice

Rather than importing mainstreaming strategies from countries of the North, some of the best strategies for promoting the mainstreaming of disability come from the wide range of strategies that have been developed to alleviate poverty and promote human development. These include:

- **Child-to-Child** – a well known strategy, is a non-formal educational programme in which children learn how to promote health and well being with each other. Child-to-Child has been used extensively to raise awareness on disability in communities, to promote inclusive education and as a component of CBR.
- **PLA (Participatory Learning and Action)** previously termed ‘PRA’ (participatory rural appraisal) is a ‘family of approaches and methods to enable local people to share, enhance and analyse their knowledge of life and conditions, to plan and to act’³⁵. Its suitability for use with people without literacy skills, and its ability to empower poor people to analyse and solve their own problems, together with its use of visual, tactile and highly creative methods, including puppetry and theatre, have made it a very popular approach for programme planning, monitoring and evaluation throughout the world. Disability is only recently being integrated into PLA approaches, and does need to be made more accessible to people with visual impairments, but has huge potential as a tool to facilitate inclusion.

9. Diversity, Discrimination and Disability.

There is an increasing number of issues of discrimination and diversity that are fighting, often in competition with each other, to be mainstreamed into the development agenda; gender, child focus, older people, race and ethnicity, indigenous peoples, HIV/AIDs. In addition there are issues of general concern such as the environment that are also prioritised to be ‘cross cutting issues’. Each donor agency has its own range of ‘cross-cutting issues’ but donors are unwilling to just keep adding issues, making the real monitoring and implementing of these issues impossible to manage. A more efficient approach is to address diversity and discrimination as a whole, with issue-specific aspects added. There are many commonalities such as cycles of oppression, exclusion, mechanisms of discrimination, production of stereotypes, importance of consultation with primary stakeholders, etc In addition the mechanisms for implementation all address the same issues; structures, levels, budgets, awareness-raising, training, developing impact indicators etc. There are vast numbers of manuals, particularly in relation to

³⁵ Chambers, R (1992) ‘Rural Appraisal: Rapid, Relaxed and Participatory’ Discussion Paper 311 Brighton: Institute for Development Studies. preface

gender, and each specialist agency is currently producing its own guidelines, often duplicating much of what is said by other agencies.

EDF and IDDC have already collaborated with HelpAge international to combine to produce a resolution on disability and ageing, and there is more potential for linking with other issues such as child focus. Save the Children UK carried out pioneering workshops in Ethiopia and Ivory Coast on 'Issues of Difference and Discrimination' and found that addressing discrimination and diversity holistically, before adding specific details about disability, gender, HIV etc, was efficient and effective. It is however, an approach which requires the releasing of competition between agencies and a real commitment to collaboration. At the grass roots level, for poor people to really be involved in poverty reduction programmes, solidarity between marginalized groups needs to be encouraged and built. Poverty is the strongest common denominator.

ANNEX E: Monitoring and Evaluating Impact – Examples of Reports

Examples of Monitoring Reports. Because Development Cooperation policies/statements on mainstreaming disability have mostly been drafted very recently, there are not many examples of reports that monitor impact. Lessons can however, be learnt from the examples that are available:

USAID Second Annual Report

“The goal must be to institutionalize inclusive behaviors and systems. Individual advocacy and random goodwill are not proving to be adequate to assure inclusion of this vast and still largely disenfranchised population.”

(out of 78 missions who were questioned about their implementation of the Disability policy, 24 were active) “In the remaining 24 Missions, disability was considered in a variety of activities. Fifteen missions reported having formal Disability Action Plans. Ten missions report specific Objectives in the area of prevention of disabilities with seven recognizing AIDS as a disability. Fifteen missions cite other specific disability activities.

Efforts at promoting the USAID Disability Policy have been disjointed and minimally effective. Strong words at the highest levels dissipate rapidly. Opportunities for personal contact with PWDs, while fruitful, have not been deemed a priority. And, a reward structure does not exist to promote adherence to this policy.

While the Disability Policy and the World Program of Action call for inclusion rather than distinct disability programming, feedback to Team members strongly suggests that in this time of conflicting priorities, specific funding must be attached to this target.

For USAID to become an instrument in the global trend toward inclusion, the USAID Disability Policy must become an Agency-wide effort, not merely the campaign of a small group, or even one person

Recommendation

Based upon these observations, the Agency Team for Disability Policy recommends that a new team be formed to analyze and recommend an ongoing strategy for implementation of the USAID Disability Policy. Specific issues to be addressed by the team should be:

- The Policy currently has no relevant home. More effective possibilities include: the Bureau for Program and Policy Coordination (PPC) and the Global Bureau, Office of Women in Development (G/WID), the office within the USAID with a distinct advocacy role.
- Upon establishing a home base for activities under the Policy, creation of expanded program support through securing additional direct hire or contracted support to follow-up plans for communication and training activities with bureaus and missions to include PWDs in program planning and activities.
- Potential Program funding mechanisms to promote this policy should be examined, with special emphasis upon establishing a fund for training to strengthen national NGOs formed by or serving PWDs and to link them better with USAID field missions and bureaus.
- Opportunities should be investigated and developed to explicitly incorporate language encouraging programs benefiting and including PWDs into application guidelines for various bureau "funds," such as the Africa Bureau's Education for Democracy and Development Initiative (EDDI) and E&E's planned support for partnership between non-governmental organizations in the U.S. and in Central and Eastern Europe. The BHR/PVC Matching Grants Program should be examined to determine whether programs to support inclusion of PWDs could be incorporated among the options to fulfill this NGO partner requirement

The 'Salamanca 5 years On' Review of UNESCO Activities 1999:

The review states that inclusive education has 'evolved as a movement to challenge exclusionary policies and practices and has gained support over the past decade'. It recognises that the current EFA (Education for All) strategies are inadequate in addressing the needs of particular marginalized groups such as disabled children. Over the last 5 years, UNESCO's efforts have resulted in more countries embracing inclusive education policy, and in pushing disability issues further up the mainstream EFA agenda.

The Review also provided further evidence to promote inclusion in its evaluation of the problems with segregated education:

"Notwithstanding the best intentions, it is conceded that all too often the result (of special programmes, specialised institutions, special educators) has been exclusion; differentiation becoming a form of discrimination, leaving children

with special needs outside the mainstream of school life and later, as adults, outside community social and cultural life in general” p10