Human Rights Based Approach at Sida

Compilation of Briefs on Persons with Disabilities

Briefs on Persons with Disabilities

Sub-Saharan Africa

1. Sub-Saharan Africa
2. Burkina Faso
3. Democratic Republic of Congo
4. Ethiopia
5. Kenya
6. Liberia
7. Mali
8. Mozambique
9. Rwanda
10. Somalia
11. Sudan and South Sudan
12. Tanzania
13. Uganda
14. Zambia
15. Zimbabwe

Middle East and North Africa

16. Middle East and North Africa
17. Palestine

South East Asia

18. South East Asia
19. Afghanistan
20. Bangladesh
21. Cambodia
22. Myanmar

Western Balkans

23. Western Balkans

Eastern Europe

24. Eastern Europe

Latin America

25. Colombia
26. Guatemala

Art.no.: sida61918en, urn:nbn:se:Sida-61918en

Sida

Introduction

Human Rights Based Approach at Sida

The Human Rights Based Approach (HRBA) is established in Swedish policy, where it is called the rights perspective. It is based on the UN Universal Declaration of Human Rights and adopted conventions, and is a central starting point for development cooperation. The integration and application of a HRBA in development cooperation is relevant in the analysis and management of operations and in the dialogue and cooperation with partners and other stakeholders.

For Sida, applying a HRBA implies both what to be achieved and how it can be done. A HRBA is primarily applied through the four principles of non-discrimination, participation, transparency and accountability. The main purpose of a HRBA is to empower boys, girls, men and women to claim their human rights (as rights holders) and to increase the capacity of those who are obliged to respect, promote, protect and fulfil those rights (as duty bearers).

Sida has developed methodological material on how to integrate a HRBA into development cooperation. The methodological material is intended to provide Sida staff with information, tools and inspiration to apply a HRBA. It includes a number of HRBA related information briefs on a range of issues. However, Sida partners and stakeholders have also found the material useful.

The methodological material includes guidance on practical application of a HRBA in various thematic areas, and addressing and including the human rights of children, Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) persons and persons with disabilities. The LGBTI and disability briefs are available for almost all countries and regions where Sida works.

Human Rights Based Approach and Persons with Disabilities

Promoting and increasing respect for the human rights of boys, girls, men and women with disabilities is a Swedish priority. This compilation includes 26 briefs with information and guidance on the application of a HRBA in relation to persons with disabilities. There are briefs for almost every country and/or region where Sweden is engaged in development cooperation. The briefs provide basic information about the situation of persons with disabilities and inspire discussions on what Sweden could do to better include disability rights in programmes and dialogue.

In addition, there are two other compilations of briefs available: one on information and guidance on the application of a HRBA in different thematic areas and one on information and guidance on the application of the HRBA in relation to LGBTI persons.

More information about the methodological material is available on:
http://www.sida.se/English/partners/resources-for-all-partners/methodological-materials/human-rights-based-approach-at-sida/

Disability Rights in Sub-Saharan Africa

January 2015

This brief gives an overview of disability rights in the Sub-Saharan region, with focus on Sida partner countries; DRC, Ethiopia, Kenya, Liberia, Mali, Mozambique, Rwanda, Somalia, Sudan and South Sudan, Tanzania, Uganda, Zambia and Zimbabwe.

The situation of persons with disabilities in Sub-Saharan Africa

Persons with disabilities do not make up a small, insignificant group. As much as one out of seven (15 per cent), or more than one billion women, men and children live with a disability according to the World Report on Disability, 2011. Most of them live in developing countries. In Sida partner countries in Sub Saharan Africa statistics indicate a prevalence of 5%- 17.6% (table below)

depending on the definitions and measurement tools used. The Convention of the Rights of Persons with Disabilities (CRPD) uses a broad definition of disability: "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others". Many countries still have narrower, medical definitions in their laws as these have not yet been adapted to the CRPD. These narrow definitions often refer to specific bodily limitations (such as "loss of function in more than two limbs" or "less than 10% of normal vision despite wearing glasses"). This means that 50-58 million persons with disabilities live in the Sida partner countries in Sub-Saharan Africa.

Country	Prevalence (%)	Number	Country	Prevalence (%)	Number
DRC	11%	7.4 million	Somalia	15%	1.5 million
Ethiopia	17.6%	16.5 million	Sudan and South Sudan	5%-15%	1.9-5.7 million 0.6-1.7 million
Kenya	8.6 %	3.8 million	Tanzania	7.8%	3.8 million
Liberia	16%	0.8 million	Uganda	16%	6 million
Mali	8.9% -11.7%	1.4-1.8 million	Zambia	13,3%	1.9 million
Mozambique	6%-15%	1.5-3.8 million	Zimbabwe	11%	1.5 million
Rwanda	5%-15%	0.5-1.7 million	**Total**		**50-58 million**

It is estimated that 82 per cent of persons with disabilities live below the poverty line. One in five of the worlds' poorest is a person with a disability. World Bank statistics show that 30 per cent of out of school children are children with disabilities. Only 3 per cent of persons with disabilities are literate, 1 per cent when it comes to women. People with disabilities have generally poorer health, lower education achievements, fewer economic opportunities and higher rates of poverty than people without disabilities. This is largely due to the lack of services available to them and the many obstacles they face in their everyday lives. In many countries, persons with disabilities are still prevented from rights such as being permitted to marry, opening a bank account, voting, working, having legal capacity, getting education, etc. – and are sometimes even denied the right to life. The World Report on Disability has published detailed provides examples about what works to overcome barriers to health care, rehabilitation, education, employment, and support services, and to create the environments which will enable people with disabilities to flourish. The report ends with a

concrete set of recommended actions for governments and their partners. Detailed disability and poverty studies have also been published by the World Bank for Burkina Faso, Ghana, Kenya, Malawi, Zambia, Zimbabwe.

Women with disabilities face significantly more difficulties - in both public and private spheres - in attaining access to adequate housing, health, education, vocational training and employment, and are more likely to be institutionalised. They also experience inequality in hiring, promotion rates and pay for equal work, access to training and retraining, credit and other productive resources, and rarely participate in economic decision-making. Women and girls with disabilities are at higher risk of gender-based violence, sexual abuse, neglect, maltreatment and exploitation. Every minute more than 30 women are seriously injured or disabled during labour and those 15-50 million women generally go unnoticed.

The prevalence of disability is increasing due to population ageing, the global increase in chronic health problems, but also negative impact on health from environment, road traffic accidents, natural disasters, conflicts, and unhealthy life style. In conflict areas, persons with disabilities are left behind when people flee, they have difficulty accessing food and shelter and their numbers increase as a result injuries from e.g. bombs, mines, small arms, rape.

Persons with various types of disabilities have very different levels of inclusion and support. Persons with mobility limitations are often prioritised in disability related programmes, especially in conflicts and disasters (aiming at surgeries, physical adaptations or assistive devices). Persons with visual impairments are second in line to be considered as their disability is also mainly seen as a practical limitation. When it comes to persons with hearing impairments, the measures taken are not consistent. Often hearing persons set the agenda and decide “what they need”. The claims of the deaf community for official acceptance and use of sign language and availability of interpreters, is often ignored. The situation of person with intellectual disabilities is of even lower priority as often persons with intellectual disabilities are considered to be “less productive”, although with support they could contribute to family income and daily life. Lack of support mechanisms leads to family poverty and many single mothers struggle to make ends meet (due to fathers leaving the tough situation). Persons with mental health conditions are often ignored and stigmatised, despite this type of disability being rather common, especially in countries where stress from conflict, disasters and poverty is high. Conditions in mental hospitals are often inhumane and in some African countries exorcism is a growing phenomenon as “treatment”.

Having a society, where everybody is protected and can participate and contribute is not only a human right but it is also good for economic growth and poverty reduction. Governments and donors increasingly recognise the rights of persons with disabilities and many have made commitments in policies and plans. Almost 160 countries have ratified the CRPD and started to reform legislation and policies. Still, very little is done in practice to address the rights violations of men, women and children with disabilities. The major barriers mentioned in the World Report on Disability are:

- Inadequate policies and standards
- Negative attitudes
- Lack of provision of services
- Problems of service delivery
- Inadequate funding
- Lack of accessibility
- Lack of consultation and involvement
- Lack of data and evidence.

Legal and policy frameworks

The countries in the Sub-Saharan region have taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. At the same time, significant legal and policy gaps remain. In terms of **international instruments**, the situation can be summarised as follows:

- Of the 14 Sida partner countries in Sub-Saharan Africa, all but Somalia and South Sudan have ratified the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD). (See the table below for more details). The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities.
- Only eight of the partner countries have signed the Optional Protocol to the CRPD, and six have ratified it. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities.
- All 14 partner countries have ratified the *Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction* (also known as the Ottawa Mine Ban Treaty). This convention, which is important instrument for reducing the incidence of disabilities, places an obligation on the governments in question to clear all known areas contaminated by anti-personnel mines within 10 years.
- All the partner countries (with the exception of South Sudan) are also state parties to the UN *Convention on the Rights of the Child* (CRC) and (with the exception of Somalia, Sudan and South Sudan) to the *Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). B*oth of these conventions make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

Country	CRPD		CRPD Optional Protocol		CRPD initial country report submitted	Ottawa Mine Ban Treaty	
	Signed	Ratified*	Signed	Ratified*		Signed	Ratified*
DRC	☐	☐					☐
Ethiopia	☐	☐				☐	☐
Kenya	☐	☐			☐		☐
Liberia	☐	☐	☐				☐
Mali	☐	☐	☐	☐		☐	☐
Mozambique	☐	☐		☐		☐	☐
Rwanda		☐	☐	☐		☐	☐
Somalia	☐	☐					☐
South Sudan	☐						☐
Sudan	☐	☐	☐	☐	☐	☐	☐
Tanzania	☐	☐				☐	☐
Uganda	☐	☐	☐	☐	☐		☐
Zambia	☐	☐	☐			☐	☐
Zimbabwe		☐		☐		☐	☐

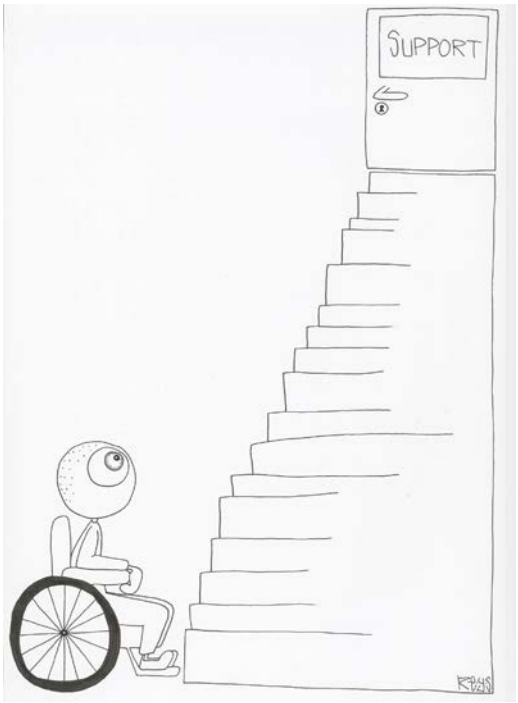
At the **regional level**, the following policy tools are important to note with reference to disability rights.

In November 2012, the African Union Conference of Ministers of Social Development (CAMSD) adopted a "Disability Architecture" (AUDA). The AUDA has 3 components:

- A Legal Component, a Protocol on the Rights of Persons with Disabilities as an additional Protocol to the African Charter on Human and People's Rights, adopted in 1981. The African Commission on Human and People's Rights (ACHPR), through its Working Group on the Rights of Older Persons and Persons with Disabilities, is developing the Protocol. It was released for comment in April 2014 and once finalised, is likely to become part of the regional policy framework for advancing disability rights.
- A Programmatic Component, the Continental Plan of Action (CPoA) for the Extended African Decade of Persons with Disabilities (2010-2019). The CPoA outlines 8 strategic thematic areas for implementation at national level to achieve the goals of the Decade. The AU Commission (AUC), through its Department of Social Affairs (DSA) has the primary mandate to coordinate, monitor and evaluate the implementation of AUC policies and programs on disability, particularly the CPoA.
- A Technical Component, an African Union Disability Institute (the restructured African Rehabilitation Institute), to support Member States' efforts to ensure disability rights and promote disability inclusive development. The new AU Disability Institute (AUDI) will promote and assist national implementation of the CPoA, and will facilitate implementation of AUC policies and programs in the area of disability, including the provisions of the Protocol on the Rights of Persons with Disabilities.

Other important upcoming tools in 2014 are the CRPD Toolkit for Africa, the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development and the Continental Plan of Action Handbook, with detailed recommendations to governments.

Commitments are increasingly being made by African Governments in PRSPs, acts, policies and plans to address the situation of persons with disabilities, as it is acknowledged that the poverty and education targets cannot be reached otherwise. Despite these promises and developments the situation for the majority of persons with disabilities remains unchanged. Very little is implemented in practice. Although economists can show that assisting persons with disabilities to become active, contributing members of their families and communities is highly cost-effective, investments in such empowering or supportive measures are still considered "expensive" and something that can be done "later when the country is not so poor", omitting to consider the catalytic effect.



Implementing Agencies

At regional level, the new AU Disability Institute (AUDI) is expected to take on the role of supporting governments to fulfil their commitments. It has so far no capacity or expertise in this area. At national level almost all Sub Saharan countries have established National Disability Councils with representatives from relevant ministries and CSOs. These councils are responsible for coordination and monitoring of the implementation of the CRPD and national disability laws and policies. However, the Councils are often linked to low priority and under financed Social Welfare Ministries and have difficulties in getting sufficient mandate. Some Councils have been given their own implementation budgets, sometimes removing the responsibility from the various Ministries to include persons with disabilities in mainstream programmes. There have also been corruption cases where budgets allocated for cash transfers or organisational support has been misused (e.g. Kenya). Many governments need capacity development support in terms of developing implementation and monitoring systems. There is a need for both specific, targeted empowerment initiatives and mainstreaming in regular programmes. There are great similarities with strategies used to promote gender equality.

A number of Ministries of Education and Social Welfare (and a few Ministries of Health) have started to take measures to include persons with disabilities, but struggle with negative attitudes and lack of sufficient knowledge and capacity – especially in the decentralised settings. Service providing charities are doing some important gap filling, but this is not always helpful to the long term objectives of local ownership and accountability. The most practiced strategy has been Community Based Rehabilitation (CBR), now changing its name to Community Based Inclusive Development (CBID), introduced originally by WHO. There is an African CBR Network which has worked on development of the methodology from the African perspective. It will hold a conference in 2015 to identify evidence of good practices and lessons learnt as well as remaining gaps and challenges including emerging issues and priorities for the future, with particular emphasis on post-2015 MDGs, to advance the inclusion of persons with disabilities in all development sectors.

Some of the most important international organisations and agencies active in supporting disability organisations and disability rights development in Sub-Saharan Africa are:

Nordic DPOs which have developed partnerships with peer organisations in developing countries. Some of these relationships go back 30 years in time and have contributed to the survival and development of disability movements in several countries. These organisations are Atlas Alliance (Norway), DPOD (Denmark), Disability Partnership Finland and Abilis Foundation (Finland) and My Right (Sweden).

Other important supporters are the CSO members of the ***International Disability and Development Consortium***. This is a global consortium of **25** disability and development non-governmental organisations (NGOs), mainstream development NGOs and disabled people's organisations (DPOs) supporting disability and development work in more than 100 countries around the world. The aim of IDDC is to promote inclusive development internationally, with a special focus on promoting the full and effective enjoyment of human rights by all persons with disabilities living in economically poor communities in lower and middle-income countries.

Among bilateral donors to disability related initiatives, some of the most prominent are Australia, Finland, Norway, UK, Canada, Japan, Germany and US. EU has also made policy commitments to the rights of persons with disabilities, but implementation is weak on the ground. The policy level commitments made by these bilateral agencies could be called on in country level joint donor programming.

UNICEF, Save the Children and Plan have increasingly included children with disabilities in programmes. Since 2011, there is a *Global Partnership on Children with Disabilities* (GPcwd) which is a network of more than 240 organisations, including international NGOs, national and local NGOs, Disabled People's Organizations (DPOs), governments, academia and the private sector, working to advance the rights of children with disabilities at the global, regional and country levels. With a rights-based approach, the Partnership provides a platform for advocacy and collective action to ensure the rights of children with disabilities are included and prioritised by both the Disability and Child Rights Movement. There is also a Global partnership for education, which promotes and supports development of inclusive school systems.

The World Bank has engaged in disability rights for many years. They have commissioned a range of studies, especially on the link between poverty and disability. At the UN High-Level Meeting of the General Assembly on Disability and Development in September 2013, the World Bank reiterated its commitments. Unfortunately, at country level, representatives are not always informed on these commitments.

Within the UN, there is a Partnership to Promote the Rights of Persons with Disabilities (UNPRPD) which is a collaborative effort that brings together UN entities, governments, Disabled People's Organizations (DPOs) and the broader civil society to advance disability rights around the world. In particular, the UNPRPD supports coalition building and capacity-development at country level to facilitate the full implementation of the Convention on the Rights of Persons with Disabilities (CRPD). In doing so, it contributes to the realisation of a "society for all" in the 21st century. The UN entities participating in the UNPRPD are the International Labour Organization (ILO), the Office of the High Commissioner for Human Rights (OHCHR), the United Nations Department for Economic and Social Affairs (UNDESA), the United Nations Development Programme (UNDP), the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO). The UNDP Poverty Group serves as the Technical Secretariat for the Partnership. A Trust Fund has been set up in support of the Partnership, where Sweden is a major contributor. Countries in Sub-Saharan Africa benefitting (or about to benefit) from the Trust Fund are; Ethiopia, Mozambique, Sudan, South Africa, Toga and Uganda.

Accountability mechanisms

Most countries in Sub Saharan Africa have established some kind of Human Rights Institutions or Commission (some are independent - others are not). Most of these commissions are gradually developing their capacities and mandates. However, they have seldom or never engaged in promotion or protection of the rights of persons with disabilities, especially not the deprivation of rights of persons with intellectual and psychosocial disabilities. Disability is often not even mentioned as a mandate of many Commissions, especially not in conflict areas.

Legal aid programmes exist in most Sub-Saharan countries, but they have seldom or never taken on cases of children with disabilities denied access to school, persons with disabilities denied opening a bank account, denied the right to vote etc.

There is great opportunity the strengthen National Human Rights Institutions and legal aid programmes in this respect.

Disability Rights Promotion International is supporting DPOs to monitor and report on disability rights. It has an African focal point located in Addis Ababa, Ethiopia. So far support has been provided to Cameroon, Kenya and Tanzania.

Main Civil Society Actors at the regional level

African Disability Alliance (ADA) – formerly the African Decade Secretariat – is a technical agency with a mandate to facilitate the implementation of the Continental Plan of Action for Persons with Disabilities, the CRPD and the Millennium Development Goals (and the post millennium agenda). All major continental disability organisations are represented in its board. The Secretariat has head offices in South Africa and regional offices in Senegal and Ethiopia. The African Decade Secretariat has been heavily supported by Sweden (Sida global). ADA is trying to find its role in relation to ADF (below).

African Disability Forum (ADF), formed in November 2014, aims to unify and amplify the voice of Africans with disabilities, their families and their organisations in advocating for their rights and inclusion in all aspects of development and society at Pan African, sub-regional and national levels. The ADF is an initiative of Mr. Shuaib Chalklen, the former UN Special Rapporteur on Disability of the Commission for Social Development. ADF still has no web page and is not yet a member of the International Disability Alliance (IDA).

Pan African Federation of Organisations of Persons with Disabilities (PAFOD) is an African Network for National Federations or Unions of Associations of persons with disabilities, established in April 1990 (Mauretania) and formally constituted in October 1994 in Lusaka, Zambia. Its mission is to work towards achieving the promotion and the actual enforcement of the rights of persons with disabilities in Africa, as stated in the Convention on the Rights of Persons with Disabilities through the mobilisation and unification of Disabled Persons Organizations, all categories put together at national, regional and continental levels, the building of their institutional and operational capacities in the field. PAFOD never managed to secure a mandate from all continental disability organisations and is now one of the members of ADF.

African Union of the Blind (AFUB) is an umbrella organisation of 57 member organisations of and for blind and partially sighted persons in 51 African countries. AFUB is an active a member of the World Blind Union (WBU), and enjoy observer status with the African Union. It has been heavily supported by the Norwegian and Danish organisations of the Blind. Its headquarters are based in Nairobi, Kenya. AFUB is a member of the newly formed ADF.

Inclusion Africa (IA) is a pan-African, regional federation of family-based organisations advocating for the human rights and full inclusion of persons with intellectual disabilities and families throughout Africa. IA was registered in Nairobi, Kenya in 2012, but has been operating even before that. Inclusion has been heavily supported by the Norwegian Association of Persons with Intellectual disabilities (NFU). Member countries include Benin, Burkina Faso, Ethiopia, Ghana, Kenya, Lesotho, Malawi, Mauritius, Mozambique, Namibia, South Africa, Swaziland, Tanzania, Togo, Uganda, Zambia, Zanzibar and Zimbabwe. Inclusion Africa also functions as the regional body to Inclusion International. Inclusion Africa is a member of the newly formed ADF.

African Union of the Deaf, possibly with a base in Uganda, seems to have a low visibility presently. It has no web page. The World Federation of the Deaf (WFD) has two African Secretariats, one for West and Central Africa in the Gambia and one for Eastern and Southern Africa based in South Africa (used to be in Kenya). WFD has 34 Sub-Saharan organisations as members. The African Union of the Deaf is a member of the newly formed ADF.

The African Youth with Disabilities Network (AYWDN) was founded in 2011 to unite Africa's diverse Youth Disability groups, their families, friends and supporters. Youth Disability groups include those with Physical Disabilities, Sensory Disabilities, Intellectual Disabilities, Psychosocial Disabilities and Developmental Disabilities. The role of the Network is to be a continental and effective voice for change – culturally, economically, politically and socially through supporting the implementation of the United Nations Convention on the Rights of Persons with

Disabilities and influencing regional policies to address the challenges faced by Youth with Disabilities. HQ are based in Nairobi, Kenya. AYWDN is a member of the newly formed ADF.

Pan African Network of Users and Survivors of Psychiatry (PANUSP) was formed in 2011. Members or allies consist of Mind Freedom Ghana, Mental Health Users and Survivors of Psychiatry of Kenya (USPK), Mental Health Society of Ghana (MEHSOG) Users and Carers Association of Malawi (MeHCAM), Tanzanian Users and Survivors of Psychiatry (TUSPO), Mental Health Care Users Network of Zambia (MHUNZA), Ubuntu South Africa, National Organization of Users and Survivors of Rwanda (NOUSPR) and Mental Health Uganda. PANUSP Head Quarters are based in South Africa. The network is supported by among others the Mental Disability Advocacy Centre that has produced reports on the situation in Kenya, Uganda, Zambia and South Africa. PANUSP is a member of the newly formed ADF.

Disabled Women in Africa (DIWA) was founded in Dar - es - Salaam in 2002. Due to lack of support, DIWA remained stagnant for some years. Then in 2005, the Southern Africa Federation of the Disabled (SAFOD) resolved to support the further development of DIWA. In September 2007 in Lilongwe, Malawi a Pan-African conference was organised and roles and strategies of DIWA agreed upon. Since March 2009 DIWA has employed her first full time employee who is based in Bulawayo, where the DIWA office is accommodated within the premises of SAFOD. DIWA is a member of the newly formed ADF.

African Down Syndrome Network (ADSN) is a network without a web page. Its President is based in Mauritius. Down Syndrome South Africa has played a significant role in the region and its president sits on the International Disability Alliance board. Down Syndrome International has country level member organisations from many African countries. African Down Syndrome Network is a member of the newly formed ADF.

African Federation of the Deaf Blind (AFDB) has members from 12 African countries namely Malawi, Cote d'Ívoire, Congo Brazzaville, Mali, Ethiopia, Zambia, Nigeria, Kenya, Tanzania, South Africa, Burkina Faso and Uganda. It does not have a web page. South Africa and Kenya seems to be the most active network members. AFDB is a member of the newly formed ADF.

Pan African Alliance for People with Albinism - the organisation has no web page. It is a member of the newly formed ADF.

African Organisation of People Affected by Leprosy - the organisation has no web page. It is a member of the newly formed ADF.

Federation of African Associations of Persons with Short Stature - the organisation has no web page.

The African Regional Committee of the International Bureau for Epilepsy (IBE) has 19 national member organisations and is hosted by the Epilepsy Association of Zambia. It has no web page, but reports can be found on the Internet.

Why Sweden needs to do more to include persons with disabilities

Sweden is obliged by article 32 in the Convention, ratified by Sweden, to include persons with disabilities in all development cooperation programmes. It states that State Parties involved in international cooperation have a responsibility to undertake appropriate and effective measures such as:

a) Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;

b) Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;

c) Facilitating cooperation in research and access to scientific and technical knowledge;

d) Providing, as appropriate, technical and economic assistance, including by facilitating

access to and sharing of accessible and assistive technologies, and through the transfer of technologies.

2. All Swedish support is to be based on the perspectives of the poor and a human rights perspective (meaning that the principles of accountability, transparency, participation and non-discrimination should be applied to processes and programme design).

What Sweden could do – 8 questions to discuss

Within its mandate and strategies for Sub-Saharan Africa, Sweden has a range of opportunities to include persons with disabilities in a more deliberate manner. Questions to discuss:

- Could Sweden do more to stay updated on the situation of persons with disabilities in the region and the measures initiated by AU and regional bodies to address the rights of persons with disabilities (e.g. the disability architecture AUDA and the post millennium agenda)? Could the regional office do more to support Embassies in this regard?
- Many countries lack data on the situation of persons with disabilities. Sweden is already providing support to "Health Economics and HIV and AIDS Research Division (HEARD)" at the University of KwaZulu Natal in South Africa, which has launched a "Disability, Health and Livelihoods Think Tank" and undertakes research on "disability and HIV". Could Sweden do more to promote regional research in the area of disability?
- Could Sweden do more to systematically include disability rights as an explicit part of its support to regional accountability mechanisms, efforts to establish independent human rights institutions, election monitoring and watchdog organisations? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure that women, men and children with disabilities (and mental health conditions) are systematically included and even prioritised in emergency relief and humanitarian aid efforts? E.g. refer to
  - ✓ Manual on the design and building of barrier-free emergency shelters here
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden do more to include DPOs in regional networking and programmes that seek to strengthen civil society organisations and networks to influence policies and monitor the implementation of policy commitments? E.g. the East African Community Policy on persons with Disabilities (2012) outlining joint policy commitments in line with the CRPD and country level recommendations?
- Could Sweden do more to ensure that women with disabilities are included in regional programmes aiming to advance women's rights and gender equality? To include women with disabilities in SRHR and GBV programmes?
- Could Sweden do more to ensure that regional programmes focussing on private sector development, micro financing and economic integration are accessible and inclusive of women and men with various disabilities? Examples of tools can be found here.
- Could Sweden do more to build strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the regional offices need to take such initiative? Guide to Disability in development here.

Useful links and references

1. African CBR Network http://www.afri-can.org/
2. Disability and Statistics, Disability-inclusive design, planning, monitoring and evaluation, disability perspective in national census/data/statistics: http://www.un.org/disabilities/default.asp?navid=13&pid=1515
3. EENET is an important resource in inclusive education is http://www.eenet.org.uk/
4. EU Guidance note for EU Staff on Disability Inclusive Development Cooperation http://capacity4dev.ec.europa.eu/disability-and-development-network/blog/updated-guidance-note-eu-staff-disability-inclusive-development-cooperation
5. Disability Rights Promotion International http://drpi.research.yorku.ca/
6. D.R.P.I.'s Tools to Monitor the Rights of Persons with Disabilities, by Disability Rights Promotion International (DRPI), a collaborative project working to establish a monitoring system to address disability discrimination globally: http://www.yorku.ca/drpi/files/UseOfDRPIsMonitTools.pdf
7. Global Partnership on children with disabilities http://www.gpcwd.org/
8. Make Development Inclusive: How to include the perspectives of persons with disabilities in the project cycle management guidelines of the EC, an on-line manual from International Disability and Development Consortium (IDDC) project financed by the European Commission to break the cycle of Poverty and Disability in developing countries: http://www.make-development-inclusive.org/
9. Open Budget Index, by International Budget Partnership (IBP) Administration: http://internationalbudget.org/budget-analysis/sectors-issues-demographic/people-disabilities/
10. Oslo Conference on Disability in Conflicts and Emergencies "Reaching the most vulnerable", 30-31 May, 2011 - Thon Hotel Opera, Oslo, Norway: http://www.oslodisability2011.org/
11. Sida action plan to promote the rights of persons with disabilities - evaluation: http://www.sida.se/Svenska/Publikationer-och-bilder/Publikationer/2013/oktober/Human-rights-for-persons-with-disabilities-an-evaluation-of-the-work-plan---Final-Report/
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22. USAID tools on inclusion of disability: http://www.usaid.gov/what-we-do/democracy-human-rights-and-governance/protecting-human-rights/disability
23. World Health Organization on Community Based Rehabilitation: http://www.who.int/disabilities/cbr/en/index.html
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The human rights of persons with disabilities are a Swedish government priority since 2009. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Sida

Disability Rights in Burkina Faso

September 2012

Disability Rights in Burkina Faso

According to the National Institute of Statistics and Demography (NSID) 168,094 persons out of Burkina Faso's 14,017,262 inhabitants are living with a physical, sensory or mental disability. The numbers are questioned as the effort to collect in-depth statistics has not been great. Furthermore, much of the statistics is only collected in more densely populated provinces and towns and not in smaller rural communities. Handicap International (HI) estimates that the number is as high as 7 per cent.

On daily basis persons with disabilities in Burkina Faso face a number of challenges, ranging from lack of transport, access, support and income to stigmatisation, prejudice and social exclusion. Generally it means living in absolute poverty, as people with disabilities throughout the world belong to the poorest of the poor.

Basic education is denied many persons with disability from social exclusion or simply lack of physical access, non-accessible information or lack of sign language and specialized teachers. This limits the possibilities for employment and the ability to provide sustainable income for themselves and their family.

Government attitude

The Constitution guarantees civil and political rights as well as economic, social and cultural rights to all citizens. Burkina Faso has signed and ratified the UN Convention on the Rights for Persons with Disabilities (CRPD) including the optional protocol. In 2010 a law on promotion and protection of the rights of PWD was adopted, followed by a 3-year Program Budget and an Action Plan covering 2010–2012.

Disability is the overall responsibility of the Ministry of Social Action and National Solidarity, which also oversees the welfare of the family, children and youth, poor and disadvantaged. Mainstreaming of disability in state policies, strategies and programs is by principle the responsibility of different ministries but practically treated as a social welfare issue managed by this one Ministry.

The National Committee for Reintegration of persons with disability coordinates all disability related activities of the government. The Committee, under the Ministry of Social Action and National Solidarity, has been involved in different programs, including rehabilitation, capacity building of disabled people's organisations, income generation and sensitization campaigns addressing the general public.

Burkina Faso does not take an active part in the African Decade of Persons with Disabilities 1999–2009, extended to 2019. However, attention was given to the initiative as Burkina Faso ratified the International Labour Organization Convention on vocational training and employment for PWD in November 2008.

The first Poverty Reduction Strategy for 2000–2010, with its Prioritised Action Plan, recognizes the rights of men and women with disability and specifically mentions disability in a few places, e.g. as one of the main causes of poverty, followed by the Strategy for Accelerated Growth and Sustainable Development 2011–2015. However, concrete and rights based plans for interventions beyond distribution of wheelchairs and prosthesis remains absent. Disabled People's Organisation's (DPOs) were consulted in the process of preparing the Poverty Reduction Strategy, which unfortunately did not lead to much reflection of the rights of persons with disabilities.

In order to promote and protect human rights of its citizens there is a Ministry for Human Rights, including a special section with the responsibility to oversee social exclusion of citizens. These bodies are important allies, when addressing disability issues.

In 2006, Burkina Faso completed its decentralization program, enabling more local participation in politics. Increasingly decisions and budgets have been decentralised, which is a new challenge for disability organisations and other human rights advocates that work for change. Transparency is limited. On the open budget Index for 2010 Burkina Faso has scored 5 out of 100 possible points.

Thanks to a special gender quota law passed in 2009 more than one third of the approximately 18,000 local councillors elected are women. The number of men and women with disability among the councillors is unknown.

According to the International Labour Organization (ILO) 82 per cent of all persons with disabilities in developing countries live in rural areas and of those more than one third are unemployed. In times of climate change and disasters, transient and/or marginal living and working environments combined with limited assets and social security make poor people with disabilities more vulnerable than others.

Education

According to UNESCO the national literacy rate of Burkina Faso was 36.68 per cent for men and 21.58 per cent for women in 2007. Almost 2 per cent of all girls and boys with disabilities never attend school and the country has the worst literacy rates among persons with disabilities in the world, according to UK's DFID. Of the children that do go to school only a few will pass the required tests, if at all remain enrolled. According to the World Bank literacy among women with disability is as low as 1 per cent.

"Education for All" is prioritized by the government of Burkina Faso, which has set themselves the goals of reaching an enrolment rate of 70 per cent by the year 2010, and education for all by 2015. So far, the results are far from reaching these targets, despite many efforts by civil society to supplement the government program, especially Handicap International (HI), Oxfam and Action for Disability in Development (ADD International).

Health

Only 2 per cent of men and women with disabilities in developing countries have access to healthcare, according to a UNESCO report from 2004. In Burkina Faso, it is known that for each maternal death, 20 to 30 women suffer from pregnancy-related disabilities.

Burkina Faso has demonstrated a high level of political commitment to scaling up care and treatment for HIV/AIDS. The National AIDS Council is responsible for implementing and coordinating the multi-sectoral response and is supported by decentralized committees at provincial and district levels. Burkina Faso has a declining HIV infection rate, estimated by WHO, UNAIDS and UNICEF to be less than 2 per cent in 2007. The exact prevalence among persons with disabilities is not known, but studies made in developing countries indicate that persons with disabilities are more prone to become HIV infected for a number of reasons, including limited access to information. UNAIDS, WHO and Office for the High Commissioner for Human Rights (OHCHR) therefore strongly recommends that action be taken by all stakeholders.

Organisations active in the field of disability

The umbrella-like organisation Federation Burkinabe des Associations pour la Promotion des Personnes Handicapees (FEMPA) represents persons with disability and was founded in 1992. With its 350 member organisations it is regularly consulted by the Government on disability issues along with other significant disabled people's organisation's (DPOs), like Handicap Solidaire. FEMPA's work has been challenged and limited by internal disagreement over the past years, and the Ministry of Social Action and National Solidarity has provided assistance in order to solve the problems.

FEMPA took an active part in the elaboration of the law for promotion and protection of rights for PWD that was adopted in 2010. Other significant DPOs are the organisation of deaf persons: Centre d'Education et Formation Intégrée de Sourds (CEFISE), the organisation of visually impaired persons: L'Union Nationale des Associations Burkinabé pour la Promotion des Aveugles et Malvoyants (L'ABPAM), and the organisation of families of persons with intellectual disabilities: Association des Parent Et Enfants (L'APEE), all of them globally recognised as national mouthpieces of these disability groups.

No Nordic DPOs are engaged in direct support to the disability movement, which to a large extent relies on support from French, British and Canadian partners, including Handicap International (HI), and Action for Disability in Development (ADD International) and UNICEF.

Swedish Diakonia supports a few civil society organisations in the country, and has been successful in assisting two organisations with monitoring the state budgets. They could potentially be interested to include the rights of people with disabilities in their portfolio.

Addressing Disability within the Cooperation Strategy

Coherent with the country strategy and Swedish cooperation with Burkina Faso, Sida could consider the following:

- Monitor the new poverty reduction strategy (2011–2015) to see how disability is covered and promote inclusion of a few disability disaggregated indicators in the monitoring mechanisms.
- Propose budget tracking of the national and district budget allocations for people with disabilities.
- Raise questions regarding access to primary school for children with disabilities and request disability disaggregated indicators to monitor progress. Proper assessment of children and quality teacher training are preconditions for successful inclusion and learning of children with various disabilities.
- Follow up on the results of the new legislation and action plan for persons with disabilities adopted in 2010.
- Raise questions about the role and responsibilities of The National Committee for Reintegration of Persons with Disabilities and consider supporting capacity building of the Committee.
- As part of the support to the National Democratic Institute ensure that women with disabilities are included in general women initiatives and that organisations of persons with disabilities are invited to be part of human rights and civil society networks.
- Work with other donors (Handicap International and ADD International) to strengthen the capacity of FEMPA in order to be a vibrant civil society actor with ability to address the present fragmentation of the disability movement. Capacity building in relation to budget monitoring and disability auditing could be prioritised to strengthen monitoring of public expenses at national and district levels.
- Raise the need for increased focus on disability within research in general and for reliable and timely baseline data on women, men, girls and boys with disabilities.
- In case of continued support to the water initiatives, raise questions about accessibility for persons with disability, in particular women with disability, to safe water and sanitation.
- Emphasise the need for more focus on the rights of women, men and youth of both sexes with disabilities in supported HIV/AIDS prevention and care training of health staff. Special focus on disability could also be proposed in relation to HIV/AIDS activities of the IPC/AIDS Alliance, supported by Sida and in particular programs targeting the youth.
- Promote the inclusion of girls and boys with disabilities in dialogue with co-donors in World Bank/IDA Education for all program.
- In order for staff to feel comfortable in discussions and promoting disability issues it is also recommended that trainings are organised for staff on disability rights. Local disabled people's organisations could be engaged as resource persons.

Disability organisations in Burkina Faso

Association des Parent Et Enfants (L'APEE): http://www.apee.bf/

Centre d'Education et Formation Intégrée de Sourds (CEFISE): http://cefise.org/

Federation Burkinabe des Associations pour la Promotion des Personnes Handicapees (FEMPA)
http://febah.bf

L'Union Nationale des Associations Burkinabé pour la Promotion des Aveugles et Malvoyants (L'ABPAM)
http://www.un-abpam.bf/

Other organisations according to Mobility International USA (MIUSA), search enginge for disability organisations
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Action for Disability in Development (ADD International): http://www.add.org.uk/west-africa

Diakonia: http://www.diakonia.se/sa/node.asp?node=3694

Handicap International (HI): http://www.handicap-international.org.uk/where_we_work/africa/burkina_faso

Handicap Solidaire: http://www.handicapsolidaire.ch/

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National Social Security Fund: http://www.cnss.bf/

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http://www.hiproweb.org/fileadmin/cdroms/Education/BF15EN.pdf

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http://www.sida.se/disabilityrights

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http://sidapublications.citat.se/interface/stream/mabstream.asp?filetype=1&orderlistmainid=294&printfileid=294&filex=413825492388

Sida: Country Team Mali and Burkina Faso 5113 Rev2, Context Analysis for Strategic Direction and Priority (2009-2011)

Social Security Programs Throughout the World, US Social Security Administration
http://www.ssa.gov/policy/docs/progdesc/ssptw/2010-2011/africa/burkinafaso.html

This brief aims at providing Sida country teams with brief information on the situation of persons with disabilities in Burkina Faso as well as concrete advice on how disability issues can be included in dialogue and programming. This follows the Sida 3-year Action Plan on Human Rights for Persons with Disabilities, adopted in December 2009.

Disability Rights in Dem Rep of Congo

December 2014

The situation of persons with disabilities

No official reliable data on disability exist in DRC. Based on studies in sample districts, the disability federation estimates a prevalence of around 11 per cent or around 7.4 million persons. According to the disability federation, 90 per cent of persons with disabilities (PWD) are illiterate and 96 per cent live in inhuman and degrading conditions. Given DRC's general condition with the lowest position in the UNDP's Human Development Index (HDI), the second lowest per capita income in the world, high corruption levels and a seemingly never-ending cycle of violence in the eastern part of the country, the Democratic Republic of Congo may be one of the world's most challenging places for people with disabilities to live.

The main causes of disability are: poor hygiene; improper medication; insufficient vaccination programmes; parents' lack of knowledge about common diseases and their treatment; landmines; psychological stress from armed conflict; and traffic accidents (which seem to be overrepresented as a cause of disability in DRC). Leprosy has also increased and the civil wars caused many new cases of disability.

Persons with disabilities face widespread and deeply rooted prejudices resulting in structural discrimination. They often are accused of witchcraft. The belief that children with a psychosocial or intellectual disability are possessed many times lead to applied exorcism and/or rejection by the family. As much as 70 per cent of children living in the streets have been accused of witchcraft according to some figures. Discrimination against persons with albinism is widespread and limits their access to employment, health care, and education and even to marriage. Persons with albinism are frequently ostracised by their families and communities.

Women with disabilities are facing double discrimination, and are often completely excluded from decision-making and development initiatives at all levels, including those specifically designed to address gender inequality and gender based violence. Given the country's context of civil war, organised sexual abuse and rape of women as part of the armed conflicts, it can be assumed that many women get a disability as a result of this abuse and many women with disabilities become victims because they are more vulnerable. Experiences from other countries show that women with disabilities are more frequently victims of sexual violence, trafficking and prostitution. A Human Rights Watch report from Uganda "As if we weren't human" (2010) illustrates this.

Legal and policy frameworks

The Democratic Republic of the Congo has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of binding **international commitments**, these steps include:

- Signing and ratifying (in 2014) the United Nations Convention on the Rights of Persons with Disabilities (CRPD), as well as its Optional Protocol. The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. www.un.org/disabilities/convention/conventionfull.shtml
- Signing and ratifying (2002) the Mine Ban Treaty on 2 May 2002 and enacting legislation to implement its provisions (2011).
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against Women – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of DRC's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

Disability is specifically mentioned in Article 49 of the Constitution, which is stating that persons with disabilities should be represented in decision-making institutions on all administrative levels. It also states that persons with disabilities and elderly people are entitled to special protection by society. Discrimination on grounds of disability is not permitted according to the constitution. There is however, no clear definition of disability. Persons with disabilities are referred to in vague medical terms, often with derogatory undertones and are not yet considered as rights-holders.

DRC has a national disability policy named "Programme National de l'integration et de Rehabilitation des Personnes Handicapées" (PNIR/PH) established in 2010. The policy outlines the rights of persons with disabilities to:

- free healthcare;
- the right to education;
- discounts on travels and tax reduction
- initiation of a CBR programme

A committee (Comité National d'intégration et de réhabilitation des Personnes handicapées) with the responsibility for the policy's coordination, funding and monitoring was established in 2010. Steps have also been taken to initiate a national legislation on disability rights.

In 2011 Law 11/007 was adopted, which prohibits the development, manufacture, production, acquisition, stockpiling, conservation, supply, sale, import, export, transfer, and use of antipersonnel mines or their components and also prohibits assistance, encouragement, or inducement in these activities. The law also contains provisions on victim assistance.

Article 135 of the "Code du Travaille" of 2002 explicitly indicates that disability is no obstacle to employment.

While, DRC's Poverty Reduction Strategy (PRS) 2008-12 explicitly introduces measures to strengthen the rights of persons with disabilities to education, employment and child protection, the new PRS (2013) does not include any such measures. It entirely focuses on building infrastructure and central government.

In general the legal and policy commitments made by the government have not yet affected people's lives. It is estimated that up to 80 per cent of persons with disabilities are involved in begging to make a living. Persons with disabilities are otherwise self-employed in agriculture and handicraft, but a few are to be found employed in special education for children with disabilities. Thanks to tax reductions for persons with disabilities, some groups in border towns are involved in trade with neighbouring countries, although this often leads to involvement in smuggling and drugs. Many are falling victim to trafficking and prostitution.

Implementing agencies

Although the approach to disability is medical, DRC seems to make it multi-sectorial. Several ministries are defined as responsible for the area. The Ministry for Social Affairs, the Ministry for Health, the Ministry for Gender and Family, the Ministry for Youth and Sports and the Ministry for Education are all responsible for issues relating to persons with disabilities.

The Ministry of Social Affaires allocates around 5% of its budget to disability grants. It also heads the Comité National d'intégration et de réhabilitation des Personnes handicapées.

The **health care system** is to 43 per cent financed by fees and 34 per cent by international donors. The government only contributes 23 per cent. This indicates the vulnerability of the system and that health care mostly is provided to people who can

afford it. The policy of free health care for persons with disabilities is meeting many challenges.

In the Plan National de Développement Sanitaire (PNDS) 2011–2015, no specific reference to persons with disabilities is made. There are indications that persons with disabilities in some parts of the country are paying reduced fees for health care, up to an 80 per cent discount, but this information is not confirmed. When references to persons with disabilities in relation to healthcare are made, they usually mean people with mobility impairments only.

Government, civil society organisations (CSOs), disabled people's organisations (DPOs), churches and international donors are all involved in disability prevention. The Government makes investments in vaccination programmes and a blindness prevention programme called "Programme National des maladies oculaires". In terms of rehabilitation, physiotherapy, vocational training and assistive devices for persons with disabilities it seems that such services are very limited and mostly carried out by CSOs, DPOs and the private sector. Since most persons with disabilities cannot afford the costs and live far off this leads to unavailability for large groups.

There is some evidence that persons with disabilities who manage to get in contact with sponsors can solve their needs of assistive devices temporarily. Trade in assistive devices is wide spread, and devices donated by CSOs and international donors are sold in the street.

HIV/AIDS prevalence in DRC was estimated at 1.1 per cent of the adult population aged 15 to 49 by UNAIDS in 2012. However, an antenatal Surveillance Survey from 2008 demonstrated a prevalence of 4.3% among pregnant women attending antenatal care, with prevalence as high as 8.7% in urban Kisangani (Oriental Province) and 16.3% in rural Kasumbalesa (Katanga Province). No data seem to exist on the prevalence of HIV/AIDS among persons with disabilities.

The country's Strategy on development of **primary, secondary and tertiary education**, (2010–2015), gives one reference to children with disabilities as "children in a difficult situation". It also states that children with disabilities generally have a very low level of education. Through support from UKAid, Handicap International (HI) and Christoffel Blindenmission (CBM) the government is piloting inclusive education in a few schools. However, in a situation where about 66 per cent of the total population is illiterate, children with disabilities are not seen as a priority. Given the UN estimate that 95 per cent of children with disabilities do not get even primary education in developing countries, it is highly probable the percentage in DRC is close to that figure or higher.

Special education is mainly organised by churches and CSO service providers, with a striking concentration in Kinshasa. Education is not free of charge and school fees are a big obstacle for families. Out of 71 schools for children with disabilities, 29 are located in Kinshasa. There exists a special school for blind children named Institut National des Aveugles (UNAV) and deaf children may be enrolled at a centre called Village Bondeko. The government has made some investments in training centres for inclusion of persons with disabilities such as the Centre National Des Personnes Vivant Avec et Intégré Handicap (CENAPHI).

Besides the above-mentioned circumstances, most children with disabilities do not get access to primary education since the families are too poor to give priority to their children with disabilities when it comes to paying school fees and transports. The teachers are inadequately trained, underpaid and unmotivated and they also lack knowledge about the pedagogical needs of children with disabilities. Furthermore, children with disabilities are not able to enter public schools due to inaccessible physical environment, inaccessible public transport and prejudice.

Accountability measures

DRC has a National Human Rights Commission which was established in 2013. It has so far been busy mainly with war crimes, but has a wider mandate. It has the potential to monitor also disability rights violations.

The Comité National d'intégration et de réhabilitation des Personnes handicapées has a formal mandate to monitor and evaluate the national disability policy. It has yet to fulfil its role as such.

Main civil society actors

The disability movement is fragmented and many new DPOs are appearing on the arena due to disgruntlements with the old established organisations. This situation leads to confusion over representativeness and legitimacy of the DPOs.

The most important organisations in the disability field are (according to informants at Handicap International) L'Union Nationale des Associations des Personnes Handicapées du Congo (UNHACO) with its six member DPO organisations:

- L'Association Nationale des personnes Handicapées Motrices du Congo (ANHAMCO);
- L'Association Nationale des Lépreux du Congo (ASL);
- L'Association Nationale des Personnes Handicapées Mentales du Congo (ANPHMC)
- L'Association Nationale des Aveugles et Déficients Visuels du Congo (ANADVC)
- L'Association Nationale des Sourds et Déficients Auditifs du Congo (ANSDACO)
- L'Association Nationale des Femmes Handicapées du Congo (ANAFHCO)

The Union also has some affiliates: Groupe d'Intégration des Personnes Handicapées de la Cuvette-Ouest (GIPHCO); L'Association des Enfants Albinos du Congo (ASEALCO); Handicap 3 (H-3); and Handicap - Secours du Congo (HASECO).

The other large organisation is Fédération Nationale des Associations des personnes vivant avec du Handicap DR Congo (FENAPHACO). It is a platform of 266 organisations working to promote the rights of persons with disabilities and their inclusion in society. In January 2012 they proposed a three year action plan where the government is challenged to take 13 steps including ratification of the CRPD, adoption of a disability legislation (as drafted by FENAPHACO), development of a national strategy and a plan of action and implementation of Article 49 of the Constitution which ensures persons with disabilities positions in political and administrative bodies.

Other smaller organisations working for the rights of women with disabilities are l'Association congolaise pour la libération et développement de la maman handicapée (ACOLDEMHA), le Centre de Promotion Maman Efinole des Femmes Handicapées (CEPROMEFHA), PAROUSIA and le Collectif pour la Réinsertion des Personnes vivant avec Handicap (COREPH).

Village Bondeko in Kinshasa is a collective of 15 centres providing educational support for children living with disabilities in Kinshasa in rehabilitation of the deaf, physically and psychosocial disabilities. It is estimated to have about 1,000 members.

Handicap International and CBM (besides medical projects) work on inclusion of persons with disabilities in society through CBR and inclusive education programs. None of the Swedish organisations e.g. Diakonia, Kvinna till Kvinna have yet included a specific disability dimension.

What Sweden can do – 8 questions to discuss

In line with the upcoming results strategy for DRC, focussing on SRHR, gender based violence, women's economic empowerment and vocational skills training, and empowerment of rights holders to claim rights, Sweden has great opportunities to include the rights of persons with disabilities. Some questions to discuss:

- Women and children with disabilities are more vulnerable to violence and sexual abuse. Could Sweden do more to include these groups in programs aiming at combatting sexual violence and abuse?
- Landmines, arms and rape cause thousands of disabilities annually. Disarmament and de-mining is effective disability prevention. Compensating and supporting the victims, with both physical and mental health impairments, is part of the peace process and reduces risk of sustained violence. Could Sweden do more to include persons with disabilities and their organisations in peace building and emergency efforts? Examples of tools can be found at the IDDC web site here. Other tools are:
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden do more to include women with disabilities (for example L'Association Nationale des Femmes Handicapées du Congo (ANAFHCO) in women networks and economic empowerment initiatives? Could Sweden do more to include organisations of women with disabilities in civil society and human rights initiatives?
- Women with disabilities are often not considered as legal persons and therefore excluded from legal processes. Could Sweden do more to include women with disabilities in programs supporting women for improved land rights, inheritance rights and access to property?
- Could Sweden do more to ensure that private sector, micro-finance and skills training programmes are accessible to persons with disabilities, and especially women? Examples of tools can be found here.
- Could Sweden do more to include disability organisations, especially the UNHACO and its members, in social and professional networks and capacity building efforts for human rights organisations?
- Could Sweden do more to support the government to collect reliable statistical data on disability as part of national statistics (in cooperation with the UN or World Bank)?
- Could Sweden do more to support establishment of accountability mechanisms in the area of disability as advocated by FENAPHACO (e.g. adoption of laws, strategies and action plans and establishment of an independent disability desk at the national human rights commission)? Examples of monitoring tools can be downloaded here.

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Diakonia: http://www.diakonia.se/congo

Handicap International (HI): http://www.handicapinternational.be/en/democratic-republic-of-congo

International Committee of the Red Cross (ICRC):
https://www.icrc.org/en/where-we-work/africa/democratic-republic-congo

Kvinna till Kvinna (KtK): http://kvinnatillkvinna.se/en/dr-congo

Liliane Foundation: http://www.lilianefonds.org/index.php

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Ethiopia

September 2014

The situation of persons with disabilities

The *World Report on Disability*, published jointly by the World Bank and WHO in 2011, estimated that there were 15 million persons with disabilities in Ethiopia, representing 17.6% of the total population at the time. According to the Ministry of Labour and Social Affairs, 95% of persons with disabilities in the country live in poverty - the vast of majority in rural areas, where basic services are limited and the chances of accessing rehabilitative or support services are remote.

According to Handicap International, only 3% of Ethiopia's estimated 2.4 to 4.8 million children with disabilities go to school, due to stigma among parents and educators, inaccessibility, rigid teaching practices, poorly trained teachers and the lack of adapted learning resources. A survey conducted by the African Child Policy Forum in 2011 found that only 29% of children with disabilities were registered at birth. The survey also found that (often preventable) illness and complications during birth were the main causes of disability amongst children.

There are no reliable, up-to-date national statistics available on disability in Ethiopia. The most recent national census in 2007 found only 805,492 persons with disabilities in Ethiopia, merely 1.09% of the total population of 86 million. Commentators in the disability arena inside and outside Ethiopia generally regard the census data to be skewed by under-reporting, due to the way the census questions were formulated, lack of disability-related knowledge among those involved in census data gathering and analysis and the fact that a narrow definition of disability was applied.

The legal and policy frameworks

The government of Ethiopia has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2010) the United Nations Convention on the Rights of Persons with Disabilities (CRPD), the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against Women, and the Beijing Platform for Action – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Ethiopia's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

- Article 41(5) of the 1995 Constitution sets out the state's responsibility for the provision of necessary rehabilitation and support services to 'the physically and mentally disabled'. The wording of the article is out-dated and reflects a narrow, medical understanding of disability. However, under Article 9(4) and Article 13(2) of the Constitution, all international agreements ratified by the Ethiopian government automatically become part of the law of the

land. The state is therefore obliged to ensure the rights of persons with disabilities as prescribed in the CRPD.

- The Proclamation 568/2008 Concerning the Rights of Disabled Persons to Employment, which aims to protect and promote the rights of persons with disabilities to appropriate training, employment opportunities and salaries, and to prevent workplace discrimination.
- The Developmental Social Welfare Policy of 1997, which makes reference to the inclusion, participation and independence of persons with disabilities, including children. Implementation strategies include creating accessible physical environments, promoting positive attitudes towards disability, and assisting NGOs working on the issue.
- The Ethiopian Building Proclamation of 2009 makes it mandatory for public buildings to be physically accessible for persons with disabilities.
- The National Plan of Action for the Inclusion of Persons with Disabilities 2012 – 2021 is an ambitious policy framework that aims to mainstream disability issues in all fields of society. It makes provision for comprehensive rehabilitation services, equal opportunities for persons with disabilities in education, skills training and work, as well as full participation in the lives of their families, communities and the nation.
- Ethiopia's Growth and Transformation Plan (2010-2015) identifies disability as a crosscutting development issue. This is the third, 5-year term Poverty Reduction Strategy Paper formulated by Ethiopia since 2000, and it is the first to expressly address disability. It focuses on education and training, rehabilitation and equal access to services and opportunities for persons with disabilities, as well as strategies to prevent disability.

In spite of the policy advances above, formal commitment has not yet sufficiently manifested in action (Yibeltal 2013). There are still legislative and policy gaps. For example, Ethiopia has not signed the Optional Protocol to the CRPD, which would allow persons with disabilities whose rights have been violated to bring individual complaints to the Committee on the Rights of People with Disabilities. Several domestic laws still have to be harmonised with the CRPD, as required by article 4 of the treaty. In addition, monitoring of disability policy implementation, especially in rural areas, remains weak. In recent years, some restrictive policies and legal frameworks that impede activities of disabled peoples' organisations (DPOs) and other civil society organisations in Ethiopia have been adopted (Wakene 2011). The Charities and Societies Proclamation of 2009 requires all non-governmental organisations working on rights-based advocacy to generate 90% their operational funding *only* from local sources and not from international collaborations of any sort.

Implementing agencies

Lead responsibility for advancing the rights of persons with disabilities in Ethiopia is vested in the Ministry of Labour and Social Affairs (MOLSA). Within the ministry, the Department of Rehabilitation Affairs has the mandate to coordinate disability issues at the federal level, provide policy guidance and technical support to other organs of state. In each of the 11 regions, there is a Bureau for Labour and Social Affairs (BOLSA) that is responsible to implement national disability policies and promote the integration of persons with disabilities at the regional level.

Besides MOLSA, the other main ministries involved in disability policy and programme implementation are the Ministries of Health and Education:

- The Ministry of Education is responsible to implement Ethiopia's mainstreaming approach to education for children with disabilities. There is some indication that a greater percentage of children with disabilities are attending school in Ethiopia than in a number of other African countries (ACPF 2011). However, it is not clear whether children attending school are in fact participating fully in the educational process and/or receiving special educational support when required. A significant number of children with disabilities reportedly drop out by Grade 5 because their schools would not allow them to progress further, due to their disability (ACPF 2011).
- While the Ministry of Health is responsible to provide general health services to persons

with disabilities along with the rest of the population, there appears to be little specific focus on disability within health policies. For example, in the Ministry's Annual Performance Report for 2012/13 (EFY2005), there are only two oblique references to disability.

- Per a law passed in 2010 (Proclamation No. 691/2010: Definitions of Power of the Executive Organs of the Federal Democratic Republic of Ethiopia), other ministries are also required to take responsibility for mainstreaming disability into their respective areas of work.

Despite these government arrangements, civil society is still playing a major role in the financing and delivering of services for persons with disabilities within all areas of social welfare. According to the ACPF survey, specialised health care services for children with disabilities in Ethiopia, and in particular rehabilitation, were predominantly offered by NGOs. For example, NGOs provided 87% of community-based rehabilitation services, 65% of specialised rehabilitation services, and 88% of occupational therapist services.

Accountability measures

Despite all the legal provisions and institutional arrangements in place, the attainment of the rights of persons with disabilities remains a major concern. At a broad level, the Ethiopian Human Rights Commission and the Institution of the Ombudsman have the mandate to monitor the protection and advancement of human rights in the country. In addition, a National Implementation Monitoring Coordinating Committee (NIMCC) was created under the chairmanship of MOLSA, with representation from key ministries and civil society, including DPOs. The NIMCC is responsible to monitor and report on the implementation of national laws and policies on disability, as well as the CRPD. Equivalent structures have been formed at regional levels. However, government capacity and technical expertise to monitor implementation is generally inadequate, and DPOs often have weak structures and synergy, especially at regional and district levels. The role of non-governmental actors in monitoring and advocating for the advancement of disability rights has also been limited by the 2009 NGO Proclamation. At the international level, Ethiopia submitted its first report to the UN Committee on the CRPD in 2013. To monitor the continued process at the Committee, visit http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx.

Main civil society actors

As far as organisations of people with disabilities (DPOs) are concerned, the main actors in Ethiopia are:

- The **Federation of Ethiopian National Associations of People with Disabilities** (FENAPD) is an umbrella body that promotes the human rights of persons with disabilities and advance their well-being. It focuses mainly on awareness-raising, capacity-building and resource mobilisation. Its member organisations include: Ethiopian National Association of the Deaf; Ethiopian National Association of Persons Affected by Leprosy; Ethiopian National Association on Persons with Intellectual Disabilities; Ethiopian National Association of the Deaf-Blind; Ethiopian National Association of the Blind; and Ethiopian National Association of the Physically Handicapped.
- The **Ethiopian Women with Disabilities National Association (EWDNA)** is a membership-based organisation promoting the rights of women with disabilities nationwide.
- The **Ethiopia National Disability Action Network** (ENDAN) is another umbrella organisation, formerly known as the Ethiopian National Disability Forum. Its members include DPOs, as well as local and international organisations working in the disability terrain. It aims to support the exchange of information amongst organisations working on disability issues and to coordinate their efforts.
- **The Ethiopian Centre for Disability and Development (**ECDD) is a membership-based organisation of mostly prominent individuals reflecting different professions and aspects of society, the majority being persons with disabilities, and at least 50% women. It is active in the fields of rural and urban development, inclusive education and health services, as well as programmes aimed at children and youth. As of 2013, the female

lawyer and poet, Yetnebersh Nigussie is serving as Executive Director of ECDD.

Several international organisations are active in the disability movement in Ethiopia, including Oxfam, Save the Children, World Vision, UNICEF Ethiopia, Light of the World, the Steve Sinnot Foundation and Inclusion International. Other organisations playing a key role in awareness-raising, advocacy and service provision include (but are not limited to); The Cheshire Services Ethiopia, Cheshire Foundation, Handicap International, The International Labour Organisation, The Community-based Rehabilitation Network, The Tigray Disabled Veterans Association and the Secretariat of the African Decade of People with Disabilities (now the African Disability Alliance), which is working in Addis Ababa to influence the African Union, recently in the area of programmes related to conflicts and disasters.

What Sweden can do: 9 questions to discuss

- Could Sweden do more to systematically include disability rights as an explicit part in its support to accountability mechanisms, human rights institutions and watchdog organisations? Monitoring tools can be downloaded here.
- Could Swedish civil society support modalities become more inclusive of DPOs and strengthen their capacity to raise awareness around disability rights and engage in monitoring of the implementation of legal and policy commitments?
- Could Sweden do more to include and enable DPOs and persons with disabilities to participate in its professional networks, academic engagements and in social and cultural events?
- Could Sweden do more to ensure that women with disabilities are included in programmes focussing on SRHR - in particular in gender-based violence and women's empowerment initiatives?
- Could Sweden do more to promote inclusions of disability rights in access to justice programmes, for example efforts to assist children with disabilities to be registered and access their educational rights?
- Could Sweden do more to ensure that the supported entrepreneurship and private sector programmes are accessible to and inclusive of persons with various disabilities? Examples of tools can be found here.
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the embassy need to take such initiative?
- Could Sweden do more to encourage and support base line studies and participatory research on disability in Ethiopia so as to address the absence of reliable data? Could Sweden make better use of local disability researchers and experts – also as team leaders?
- Could Sweden do more to keep up to date on the situation and rights of persons with disabilities in Ethiopia and of the Swedish position on these rights?

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Kenya

December 2014

The situation of persons with disabilities in Kenya

According to the National Survey on disability from 2008, about 4.6 % of men and women are living with a disability in Kenya. Disability Rights Promotion International (DRPI) estimates that 10 % of the Kenyans are living with a disability (2007). The World Health Survey (2011), suggests that the prevalence among the working age population is 8.6%, with 11.6 % in rural areas and 4.4 % in urban areas. Based on these estimates around 3.8 million men and women are living with a disability in Kenya. 80 % of them live in slum areas, informal settlements at the edge of cities, or under very poor conditions in rural areas.

The World Health Survey also shows that disability in Kenya is related to negative economic outcomes in a number of areas. At the individual level, persons with disabilities have lower primary education completion rates and higher rates of multidimensional poverty than persons without disabilities. Households with disabilities have a lower mean asset ownership index than other households, as well as higher rates of deprivation in several important living conditions. Approximately 50 per cent of households with disabilities fall below the US$1.25 a day poverty line, compared to 38 per cent of other households.

In its report “From Norm to Practice – a Status Report on the implementation of the rights of persons with disabilities in Kenya” (July 2014), the National Human Rights Commission reports that:

- The inclusion policy in education though advocated for and recognised from human rights based approach; it is yet to be implemented. The implementation framework of the National Policy on Special Needs Education Policy of 2009 has not been developed.
- The educational outcomes for children and adults with disabilities are still low. Illiteracy rates for persons with disabilities and for school age disabled children are much higher than the general population.
- Sexual abuse of Learners with disabilities was also reported and girls with intellectual disability were reported to be at higher risk compared to their counterparts, thus resulting in high dropout rate of girls.
- Most public buildings are inaccessible for wheel chair users and sign language interpretation services are scarce. Although some institutions, such as hospitals and special schools had however made efforts to improve physical access; washrooms though, remain inaccessible for many.
- Public transport is completely inaccessible to persons with disabilities.
- Very few persons with disabilities had joined formal employment, due high formal qualification demands, stigmatisation and assumption by employers on capacity of persons with disabilities.
- The government commendably instituted mechanisms to ensure social security for persons with disabilities through legislations like the Social Assistance Act 2013 and policies on cash transfer system which targets persons with severe disabilities, but it reaches only a limited number of persons.
- Persons with disabilities continue to face a lot challenges when seeking justice with key obstacles being inaccessibility and exercise of legal capacity especially for persons with intellectual disability.

In conclusion, the report notes that while there are positive milestones made, the country still lags behind with implementation of CRPD.

Persons with psychosocial disabilities (mental health problems) are still stigmatised and exposed to torture and ill treatment as reported by the Mental Disability Advocacy Centre (2014). This group is yet to be included in ongoing legal reforms and programmes.

There is a major disconnect between the human rights rhetoric and the realities that exist in the country. Significant gaps in access to infrastructure, health services, education, work and employment and political participation are stark realities that persons with disabilities continue to experience.

Legal and policy framework

The government of Kenya has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2008) the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the optional protocol, the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against *Women* – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.
- Committing to the East African Policy on persons with Disabilities (2012) outlining joint policy commitments in line with the CRPD and country level recommendations.
- A National Plan of Action for the African Decade has been adopted and a Co-ordination Office and a Steering Committee are established. A strategy has also been developed to ensure mainstreaming of disability in all bilateral co-operation activities of the country.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Kenya's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

- A new Constitution was adopted in August 2010. It explicitly prohibits discrimination on the grounds of health status and disability (article 27) and obliges the state to fulfil citizens' social and economic rights (article 43).
- Actions are still guided by the 2003 People with Disabilities Act but so far only minor parts of this Act have been implemented. The government has "gazetted" several remaining sections, such as accessibility to public buildings and transport and income tax exemption for people with disabilities, but progress is slow. The Act is currently under review to align it with the CRPD.
- In its endeavour to mainstream issues of disability in national development plans, the government in 2009 introduced Disability Mainstreaming Indicator for the Public Sector Performance Contracting Guidelines
- There are also regulations that provide for the persons with disabilities "access compliance" for all buildings in the next five years and for all public vehicles with effect from January 2010
- The Children's Act No. 8 of 2001 and the Employment Act of 2007 both of which outlaw discrimination against persons with disabilities.

- The Sexual Offences Act of 2006 extends special protection to persons with disabilities.
- The Education Act of 2013 has resulted in allocation of Ksh. 500 million to set up special needs institutions, disbursement of over two billion Kenya Shillings grants to institutions of special needs for subsidised school meals, training of over 10,000 teachers to teach in special needs institutions and disbursement of 400 million shillings to top up grants for the procurement of special devices. The Act is criticised because it has a focus on special education rather than inclusive education for children with disabilities.

Implementing Agencies

A National Council for People with Disabilities was established in 2004. It is a semi-autonomous Government Agency under the Ministry Labour, Social Security and Services with a mission to "*mainstream disability issues in all aspects of socio-cultural, economic and political development"*. Its 21 members represent various disability organisations and government ministries. The Council is also engaged in administration of educational grants and cash transfer schemes, in awareness raising and in monitoring and evaluation. It is overseeing the implementation of the action plan of the African Decade of persons with disabilities 1999–2009, extended until 2019. The Council has established the National Development Fund for Persons with Disabilities, provided for in the 2003 People with Disabilities Act. The fund supports organisations of and for persons with disabilities.

The Ministry of education is responsible for implementation of the 2013 Education Act, which stipulates that all children have right to education and the Special Needs Education (SNE) Policy which was adopted in 2009, which outlines how to support children with special educational needs. Both these documents focus on "special education" and "special schools/units" rather than on making regular schools inclusive. Since 2003, the government has prioritised "Education for All", including free primary education and small grants to students with disabilities. The Kenya Institute for Special Education (KISE) was set up in 1986 to train teachers for "special needs" students and Education Assessment Resource Centres (EARCs) were established in 72 out of 149 districts to facilitate the identification, assessment; referrals and placement of children with disabilities (with support from Danida). Unfortunately in most cases these centres have failed to reach the children and to assist them correctly, according to a study by the University of Oslo, Norway.

The government has also established 1,882 primary and 15 secondary schools that are accessible for students with disabilities. However, this number seems too small when there are over 70,000 schools from pre-school to university level education in Kenya (Kenya School Report, 2013). This means that despite these efforts, so far few children with disabilities access education. According to the Kenya report tor UNCRPD there are 50,744 disabled students enrolled in school, and as many as 24,000 of them are in special schools. This would mean around 4.2 per cent of the estimated 1.2 million children with disabilities in Kenya. Other studies (UNESCO) indicate a lower figure (1.7%). According to the Kenya Disability Survey (2008) reports that among children with disabilities who have no limitations in participating in education (e.g. walking difficulties or albinism), only 31% go to school, while among those with substantial limitations 4.8% attend school. However, many children are classified by the Survey as "unable" to attend schools.

The Ministry of Health is responsible for provision of health services. The system offers a number of specialised services for persons with disabilities including assistive devices, occupational therapy and physiotherapy through the Division of Rehabilitative Health Services. However, accessibility to these services is limited for poor and for men and women with particularly severe disabilities. The 2007 baseline survey and a report from Handicap International both indicate that the ignorance and insensitivity of health service is a major obstacle. Management and development of health services have been decentralised – as most other government services - in order to provide more locally appropriate services ensuring the

rights of the most disadvantaged groups, including persons with disabilities, although not specifically mentioned in Kenya Essential Package for Health, the KEPH.

However, the new devolved government structure has rather had an adverse effect for persons with disabilities, as the funding now comes from district level governments where disability is not often a priority, where district governments are struggling with their new roles especially with regard to funding and where disability organisations are weak in monitoring and advocacy.

Accountability Mechanisms

In April 2011, the Kenyan National Commission on Human Rights (KNCHR) was designated as the national agency responsible for monitoring progress and ensuring disabled people are able to enjoy their rights under the UNCRPD, the Constitution, and the Persons with Disabilities Act (2003). Currently, the disability movement is well represented in the Commission with three leading and experienced representatives specialised in advocacy and law – and formerly involved in the drafting of the CRPD. The Commission submitted its first report on the CRPD in July 2014. It can serve as a basis for future action.

The National Council for Persons with Disabilities (NCPWD) mentioned above also has the responsibility to monitor the application of and compliance with the Constitution of Kenya 2010, United Nations Convention on the Rights for Persons with Disabilities, Persons with Disabilities Act No. 14 of 2003, Policies on Disabilities and other national, regional and international treaties for the benefit of Persons with Disabilities.

The exact division of responsibility between the Commission and the Council is not clear. However, the Commission has a broader human rights mandate, while the Council is disability specific and also involved in coordination, funding and implementation of programmes.

Kenya has 12 members of parliament with a disability out of 349 seats (3.4%).

Main Civil Society Organisations

The disability movement in Kenya has quite a long history and human rights actions by disabled people's organisations (DPOs) began in the late 1950's. The first DPO was established in 1959 was the Kenya Union of the Blind (KUB). In the 1980's Kenya National Association of the Deaf (KNAD), Kenya Society of the Physically Handicapped (KSPH), and the parents' organisations Kenya Society for the Mentally Handicapped (KSMH) and Kenya Association for Intellectually Handicapped (KAIH) and a few others were established. Sweden, via Shia (now MyRight), has been key supporters of KUB, KNAD and KAIH over many years and has contributed to their present status.

Traditionally many of the organisations have been charity based and the medical rehabilitation model with homes and centres for people with disabilities has to a large extent dominated the scene (one of the most prominent being Kenya Association for the physically disabled, Kenya Society for the Blind and Kenya Society for Deaf Children. However, there has been a shift towards a more human rights based movement in recent years, with self-advocacy organisations coming to the forefront.

In 1989, the national umbrella organisation United Disabled Persons of Kenya (UDPK) was formed by national and community based DPOs. UDPK is made up of 194 organisations and aims to address disability equality concerns through legislation, advocacy and raising awareness. Over the past years UDPK has worked closely with the Government in policy review, planning and evaluation. However, the strength of the organisation and the strength of many of the individual organisations are heavily challenged by internal conflicts and power struggles, making the disability movement appear rather fragile and fragmented. The UDPK does not even have a webpage (2014),

There are some international non-governmental organisations, like Handicap International, CBM, Sight Savers International, Mental Disabilities Advocacy Centre and Leonard Cheshire International, present in Kenya supporting projects, organisations and providing services to persons with disabilities.

Sweden has adopted a human rights based approach to its work in Kenya and has already started to include persons with disabilities as target groups in Agriculture and Road Construction programs. It is important that these initiatives are monitored and lessons learned.

What Sweden can do – 8 questions to discuss

Within the broader context of the Swedish results strategy for Kenya, with particular focus on strengthening of civil society capacity, respect for civil and political rights and access to social security, Sweden has a great opportunity to include issues related to the rights of persons with disabilities. Questions to discuss:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights and follow up on the UN comments to the county's CRPD report?
- Could Swedish civil society support modalities become more inclusive of DPOs and strengthen their capacity to raise awareness around disability rights and engage in monitoring of the implementation of legal and policy commitments?
- Could Sweden do more to include and enable DPOs and persons with disabilities to participate in its professional networks, academic engagements and in social and cultural events?
- Could Sweden do more to support development of accountability mechanisms in the area of disability (e.g. reform of laws, access to legal aid, adoption of action plans and monitoring methods in synergy with the global Swedish support to Disability Rights Promotion International)? Monitoring tools can be downloaded here .
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the embassy need to take such initiative?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to promote inclusion of persons with disabilities and their families in the supported social security systems and initiatives? E.g. Inclusion Made Easy - a quick programme guide to disability in development here.
- Could Sweden do more to include women with disabilities in women networks, SRHR/GBV and economic empowerment initiatives?

Links to organisations

Kenya Association for Intellectually Handicapped (KAIH) http://kaihid.org/

Kenya National Association of the Deaf (KNAD) http://www.knad.org/

Kenya Union of the Blind (KUB) http://www.kub.or.ke/

Kenya Society of the Physically Handicapped (KSPH)

Kenya Society for the Mentally Handicapped (KSMH)

Kenya Association for the physically disabled http://www.apdk.org

Kenya Society for the Blind http://www.ksblind.org/

Kenya Society for Deaf Children http://deafchildrensociety-kenya.org/

National Council for People with Disabilities, established in 2004 and a semi-autonomous Government Agency: http://ncpwd.go.ke/

Kenya National Commission on Human Rights (KNHCR) http://www.knchr.org/

National Development Fund for Persons with Disabilities: http://ncpwd.go.ke/national-development-fund-for-persons-with-disabilities/

Sight Savers International: http://www.sightsavers.org/our_work/around_the_world/east_africa/kenya/default.html

Leonard Cheshire International: http://www.leonardcheshire.org/international/where-we-work/east-and-north-africa#.VLFB3hA5Cjs

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Kenya Essential Package for Health: http://www.scribd.com/doc/38868430/9/The-Kenya-Essential-Package-for-Health-KEPH-System

Mental Disability Advocacy Centre, Kenya research http://www.mdac.info/en/kenya

National Council for People with Disabilities: http://ncpwd.go.ke/

National Survey on disability, 2008: http://www.afri-can.org/CBR Information/KNSPWD Prelim Report - Revised.pdf

Objects of Pity or Individuals with Rights: The Right to Education for Children with Disabilities, Kenya National Commission on Human Rights (KNCHR) 2007: http://www.knchr.org/dmdocuments/Occassional_Paper.pdf

People with Disabilities Act, 2003: http://www.kenyalaw.org/kenyalaw/klr_app/frames.php

Performance Contracting Guidelines on the Vision 2030 Project Indicators: http://www.vision2030.go.ke/cms/vds/PC_GUIDELINES_2012-20131.pdf

Sida's tools on disability: Disability as a human rights issue – conducting dialogue, http://www.sida.se/Svenska/Publikationer-och-bilder/publikationer/2012/juni/disability-as-a-human-rights-issue-conducting-a-dialogue/

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Studies on education for children with disabilities in Kenya http://www.educationinnovations.org/blog/education-perspectives-kenya-achieving-inclusive-education#sthash.OLdVHB3L.dpuf and https://www.academia.edu/7721659/Education_for_All_Right_to_Education_for_Children_with_Disabilities_in_Kenya

Women with disabilities and sexual violence in Kenya, by Monica Mbaru-Mwangi, 2006, pambazuka.org: http://www.pambazuka.org/en/category/features/34364

Education for deaf students at the University http://kenya.cbm.org/Deaf-role-models-in-Africa-Kenya-chapter-documentary-469926.php

There is also a Kenya disability web portal which was updated until 2012 and probably lost funding after that http://www.kenyadisability.or.ke/index.php/home

The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Liberia

December 2014

The situation of persons with disabilities

Exact statistics on persons with disabilities is lacking, but available data from a UNICEF study from 1997 show that 16 per cent of the population have a disability. Of these 61 per cent have a mobility disability, 24 per cent are visually impaired, 7 per cent are deaf and 8 per cent have an intellectual or psychosocial disability. The disability prevalence is probably closer to 20 per cent due to the effects of the civil war, meaning around 800 000 persons.

The civil war greatly has exacerbated the sufferings of persons with disabilities and made huge numbers of people disabled. In addition, the Ebola outbreak in 2014 has taken almost all the attention of donors and authorities in the past year. Persons with disabilities are generally perceived to constitute a liability to the public, and are excluded from public debate. Discrimination is a structural problem, caused by stereotypes, negative and hostile attitudes, particularly with regard to persons with intellectual disabilities and mental health difficulties.

The 14-year civil war caused thousands of cases of psychological trauma both among former soldiers and civilians. People with diagnoses such as schizophrenia and depression are stigmatised and accused of witchcraft, or the disability is believed to be the divine punishment for cruel deeds they committed.

Disabled people's organisations (DPOs) estimate that 99 per cent of persons with disabilities live in extreme poverty, mainly due to exclusion from education, skills training, work and income generation opportunities. This can be compared to the 48 per cent of the Liberian population that according to UN live in extreme poverty.

The Agenda for Transformation 2012-17 (PRS) conclude that "There are cultural biases against persons with disabilities, as well as many physical and logistical barriers to their accessing economic, social, cultural, medical, and educational facilities and opportunities. Their views are not reflected in national policies and there is a lack of adequate data on them. Families of persons with disabilities have difficulty improving their life chances and are limited by above-average rates of illiteracy, unemployment and underemployment, and below-average occupational mobility, nutritional status, and immunisation coverage. The lack of access to information and resources, and the social marginalisation of persons with disabilities reflect the social, cultural and economic barriers against them."

Legal and policy frameworks

Liberia has taken some legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of binding **international commitments**, these steps include:

- Signing and ratifying (in 2012) the UN Convention on the Rights of Persons with Disabilities (CRPD) - but is yet to ratify the Optional Protocol. The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. Read the Convention at www.un.org/disabilities/convention/conventionfull.shtml
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against Women – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Liberia's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

The 1986 Constitution is under review. According to the Constitutional Review Committee, the new Constitution will specifically address the rights of persons as indicated in a reply on its Facebook page (December 2014):

- *The Committee ensured that the revised Constitution of Liberia be Human Right Based in line with the UNCRPD, other Treaties and International Documents to which Liberia is signatory;*
- *That a specific Chapter addresses issues that concern the well-being of persons with disabilities within the revised Constitution;*
- *That Article 63 and 64 in the present Constitution be clearly modified to protect persons with disabilities against discriminations;*
- *That Chapter 3, which has to do with Fundamental Rights be revised to include Articles on 'Education' for persons with disabilities as "Fundamental Rights";*
- *That Constituencies / Seats provisions for the Representation of persons with disabilities at the level of Parliament be consider in the revised Constitution;*
- *That a Claim Court be established to address issues of violations;*
- *That all persons with disabilities should obtained a National Social Security ID Card;*
- *That Disability be defined in the revised Constitution.*

However, the constitutional and legal protection of persons with disabilities is still weak. There are some exceptions, in the area of labour where there are a few provisions, e.g. a disability pension for insured workers, targets of a 4% employment quota for persons with disabilities and tax incentives to businesses that hire someone who has a disability. The Law on Sexual abuse and Rape offers special protection to persons with disabilities.

The disability movement calls for a range of legal reforms, for example:

- The Educational Reform Act (August 2011) needs to be reformed to establish an Inclusive Education Bureau and to amend Article 4.4.1, C), iv, which states that "A school may exempt a child entirely, partially or conditionally from free and compulsory school attendance if it is in the best interest of the child, especially those with disabilities".
- The National Health and Social Welfare Policy and Plan 2011-2021 needs to be reviewed order to include essential medical, rehabilitation and habilitation services for persons with disabilities through Community Based Disability Inclusive approaches and strategies.
- The Labour law needs to be reviewed to allow reasonable accommodation for persons with disabilities and to set up a permanent desk to deal with disability issues with the participation of representatives of MoHSW, MoE, NCD and NUOD.

The Agenda for Transformation 2012-17 is providing overall guidance for development efforts and priorities in Liberia. It identifies disability as an important cross cutting issue and has a specific chapter (12.3) where the direction and objectives are presented. Although not sufficiently mainstreamed across the five pillars, there are a number of important directives. The aim is "to ensure multi-stakeholder ownership of a coherent and comprehensive national policy and strategies for persons with disabilities, to improve their access to basic social services and skill development, to protect children and women with disabilities from exploitation, violence and abuse and to improve society's perceptions of persons with disabilities."

Priority areas mentioned are;

- to conduct a comprehensive review of national legislation, including the National Commission on Disabilities Act and ensure the application of the UN Convention on the Rights of Persons with Disabilities in the national legal framework and
- to strengthen government capacity to collect, analyse and disseminate national- and county-level data on the situation of persons with disabilities
- to establish a National Accessibility Plan with clear targets, including preferential treatment for access to public places and transportation
- to develop awareness raising programs to educate the public on the rights of persons with disabilities and the responsibilities of society. Persons with disabilities are often verbally and physically abused, subjected to torture- like "treatments" and women and girls with disabilities are at a much higher risk of being sexually abused.
- to develop guidelines to ensure that persons with disabilities have access to enterprise and skills development as well as social services such as healthcare.
- to assure adequate training on community-based rehabilitation (CBR) strategies and programs of professionals in the social welfare and health system, and the incorporation of persons with disabilities in the CBR teams in rural areas etc.

Processes to establish a new National Human Rights Action Plan and a National Disability Action Plan have been already initiated. These processes will be supported by a research project on poverty and disability carried **o**ut by the Leonard Cheshire Disability and Inclusive Development Centre.

Implementing Agencies

The Ministry of Gender, Children and Social Protection has the overall responsibility for promoting and monitoring disability rights and for mainstreaming disability into its activities. However, this has yet to be translated into practice. Mostly services are implemented by civil society and international organisations.

The Ministry of Education is responsible for education of all children, including children with disabilities. No policy or plan of action exist on how to include boys and girls with disabilities in the education system, except for the vague objectives in the AfT; "Ensure equitable access to free basic education for all children and youth, including girls and the disabled, with improved outcomes". In 2009 only about 4 per cent of the total budget for public education was allocated to children with disabilities. Yet it is estimated that around 92 000 out of the 600 0000 school age children have disabilities. Special schools exist for visually impaired children and children who are deaf, but they basically only reach a small portion of the urban population. Information from disabled peoples' organisations show that only 36 children with disabilities attended public schools, all levels, in 2009.

Ministry of Health is responsible for provision of health services. However, they are poorly developed, especially in rural areas and are mostly not accessible to persons with disabilities. Malnutrition and related diseases lead to increased numbers of disabilities such as blindness, deafness, mobility disabilities and intellectual disabilities.

In terms of disability prevention a National Eye Care Program has been established and an Anti-Polio Campaign conducted. Other actions relating to disability prevention are an Anti-Malaria program and the adoption of an environmental health policy. The National Health Care policy mentions disability prevention, but the low level of disability awareness among the implementing staff is a huge problem as well as the lack of essential medication and rehabilitation services. Cash transfers have been piloted in two districts as a model to improve living conditions for the poorest families.

Liberia has been chosen by UNAIDS as a pilot country in the fight against HIV/AIDS in the Agenda for accelerating Country Action on Women, Girls, gender Equality and HIV. This opens for interesting perspectives from 2012 and onwards.

No statistics is available on the prevalence of HIV/AIDS among persons with disabilities. It is well known, though, that the prevalence of the virus is higher in this group, particularly among young

women, than in the average population. According to disabled peoples' organisations 25 youths with visual impairment have been trained and empowered as Peer Educators to carry out sensitisation on the prevalence of HIV/AIDS and prevention methods among persons with disabilities in their home communities.

Liberia adopted a National Gender Policy in 2009 with the Ministry of Gender responsible for the implementation. It aims to mainstream gender into all national development processes. 12 priority areas are addressed. One is to eradicate the prevalent gender based violence. The policy refers to women with disabilities only in general terms and does not suggest any measures focusing on them. This has been rectified in the AfT. However, the capacity of the County Gender Officers to address issues related to women and children with disabilities at national and local level is still an obstacle.

Accountability measures

Liberia set up an Independent National Commission on Human Rights in 2010 after substantial delays. It has still to develop its role and methods. A National Human Rights Action Plan was presented in November 2013.

A National Commission on Disabilities was established in 2005 with the mandate to handle the general welfare and education of persons with disabilities and with an interim management. In 2011 the President appointed three permanent officers. It has not yet committed itself to its task in a significant way, mostly due to inadequate budgetary support from the government and the delay in getting it operational. It has, though, ensured the partial implementation of a disability policy and provided development funds to DPOs, schools and rehabilitation centres.

Liberia has a Human Rights and Disability Task Force comprising 11 civil society organisations (CSOs). It has examined and influenced key issues for the protection and promotion of the rights of persons with disabilities in the Agenda for Transformation. Its activities encompass organisations and persons with disabilities in all 15 counties.

The state was allocating less than 1 per cent of the total budget for disability related issues in 2009.

Main civil society actors

The National Union of the Disabled (NUOD) has 20 DPOs as members and was founded in 2009. It has become an important advocacy organisation, participating in the effort to include disability in the Agenda for Transformation. NUOD reacted in 2011 on the inaccessibility of voting places in the presidential election and in 2013 took several actions to compel the 53rd Legislature to repeal the highly discriminatory law that discriminate and deny children with disabilities the right to be included and to freely participate in obtaining education. Other important organisations are the Association of Disabled Females International-Liberia (ADFI), Organisation for the Social Integration of the Liberian Deaf (OSILD), Liberia National Association of the Blind (LNAB), and Christian Association of the Blind-Liberia (CAB)

Italian Association Amici di Raoul Follereau (AIFO), the above mentioned OSILD, the Sustainable Agriculture of Liberian Association for Economic Achievement and the Group of 77, Nimba District, have an on-going cooperation over income generating activities for persons with disabilities. Handicap International (HI) has set up a rehabilitation centre in Monrovia and provides support to DPOs to develop advocacy skills. The Leonard Cheshire Foundation also works with support to DPOs and has among other things promoted the project Young voices, encouraging young persons with disabilities to take action on their rights in relation to politicians and authorities. The Carter Centre supports monitoring of the rights of persons with psychosocial disabilities. In terms of legal advice and legal services the Catholic Justice and Peace Commission provides legal services to a few persons with disabilities in urban regions. USAID has adopted a very strong disability policy and the World Bank has conducted studies of disability in post conflict countries in Africa which could be useful.

What Sweden could do: 10 questions to discuss

In line with the upcoming results strategy for Liberia, focussing on; a) democratic governance and empowerment of rights holders to claim rights, b) right to education (possibly) and/or SRHR and gender based violence; c) women and youth economic empowerment, vocational skills training and entrepreneurship, Sweden has great opportunities to include the rights of persons with disabilities. Questions to discuss:

- Could Sweden do more to include disability organisations in social and professional networks and capacity building efforts for human rights and civil society organisations?
- Could Sweden do more to support development of accountability mechanisms in the area of disability (e.g. reform of laws, adoption of action plans and establishment of an independent disability desk at the national human rights commission)? Monitoring tools can be downloaded here.
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies (AfT consultations), taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the embassy need to take such initiative? E.g. Inclusion Made Easy - a quick programme guide to disability in development here.
- Could Sweden do more to promoting inclusion of children and youth with various disabilities in education and skills training programmes at all levels (with quality and retention)? Resources and tools can be found here.
- When working for increased transparency and accountability of public budgets, could Sweden do more to promote visibility of the specific funding set aside to enhance inclusion of persons with disabilities in various sectors?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to ensure that programmes included in the New Deal are accessible to men and women with disabilities and use disability organisations as resources? E.g. refer to:
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
- Could Sweden do more to include women with disabilities (e.g. through the Association of Disabled Females International - ADFI) in women networks, SRHR and economic empowerment initiatives?
- Women with disabilities are often not considered as legal persons and therefore excluded from legal processes. Could Sweden do more to include women with disabilities in programs supporting women for improved land rights, inheritance rights and access to property?
- In supporting the restoration of infrastructure, could Sweden do more to ensure accessibility for persons with disabilities as a prerequisite in pre-planning, tenders, construction and evaluation of infrastructure projects?
- Due to prejudice and absent support systems, persons with disabilities are often the least prioritised in times of emergencies. Could Sweden do more to call on disability expertise from the Inter-Agency Network for Education in Emergencies (INEE), the Swedish Civil Contingencies Agency (MSB), Handicap International (HI) and other resources to assist? Examples of tools can be found here.

Links to disability organisations in Liberia

Association of Disabled Females International (ADFI): https://www.uri.org/cooperation_circles/detail/adfi

Catholic Justice and Peace Commission provides legal services to persons with disabilities in urban regions: http://www.un.org/africa/osaa/ngodirectory/dest/countries/Liberia.htm

Christian Association of the Blind-Liberia (CAB): http://www.cabliberia.org/

CBM, Cristoffel Blindenmission in Liberia, http://www.cbm.org/Heads-of-state-meet-disability-activists-in-Liberia-378844.php

National Union of Organizations of the Disabled (NUOD): http://www.cabliberia.org/rich_text_4.html

Organization for the Social Integration of the Liberian Deaf (OSILD)

Carter Centre supports monitoring of the rights of persons with psychosocial disabilities: http://www.cartercenter.org/resources/pdfs/factsheets/mental-health-liberia-facts.pdf

Handicap International provides support to disabled persons' organisations to develop advocacy skills: http://www.handicap-international.org.uk/where_we_work/africa/liberia

Inter-Agency Network for Education in Emergencies (INEE): http://www.ineesite.org/

Italian Association Amici di Raoul Follereau (AIFO), income-generating activities for persons with disabilities: http://english.aifo.it/

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"Demographic and Health Survey", 2007, Liberia Institute of Statistics and Geo-information services (LISGIS)

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National Gender Policy, 2009: http://mogdliberia.com/images/stories/pdf/national_gender_policy_abridged.pdf

Report from the centre for rehabilitation of the injured and disabled, 1997,

Sida's tools on disability: Disability as a human rights issue – conducting dialogue, http://www.sida.se/English/publications/Publication_database/publications-by-year1/2012/june/disability-as-a-human-rights-issue-conducting-a-dialogue/

The Leonard Cheshire Disability and Inclusive Development Centre; http://www.ucl.ac.uk/lc-ccr/projects/esrcliberia. The research project will investigate multidimensional poverty and well being among individuals with disabilities and their families in Liberia.

Universal Periodic Review Liberia, 2010 http://lib.ohchr.org/HRBodies/UPR/Documents/session9/LR/UNCT_UnitedNationsCountryTeam_JS.pdf

Liberia Ad hoc Disability Committee report 2012, http://www.theniapeleproject.org/files/Resolutions_final_21-03-12.pdf

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Disability Rights in Mali

January 2015

The situation of persons with disabilities

There are no official statistics on disability prevalence in Mali. However, a WHO study from neighbouring Burkina Faso conducted in 2013 revealed a prevalence rate of severe functional limitation among adults at 8.9 % of the population. When moderate limitations were included, the prevalence rose to 11.7%. WHO's World Report on Disability (2011) puts the average disability prevalence rate at 15% (global prevalence). Based on these numbers it's likely that more than 2 million Malians are currently living with a disability. The definition of disability according to the UN Convention on the Rights of persons with disabilities is "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others".

The current socio-economic situation in Mali is very precarious. Mali ranks 182 out of 187 countries on the UN's Human Development Index (2012) and according to UNDP has a poverty rate of 46.3% (surveyed just prior to the conflict in 2012). Increased poverty is inherently linked to less access to clean water, sanitation, food and other basic necessities.

The recent armed conflict in the north has contributed to the further worsening of the general poverty and security situation and created a new humanitarian emergency. Some areas in the north have been contaminated by explosive ordinances and conventional weapons are widely available.[1] The conflict has not only led directly to an increase in mortality, but also to injuries and permanent disabilities. Indirect consequences of the conflict including psychosocial stress, gender based violence, food insecurity, loss of land and economic opportunities and a deterioration of health conditions and available services have also likely contributed to increased morbidity and disability. Additionally, some socio-cultural practices like forced and early marriage, female genital mutation, and aversion to family planning put young girls and women at added risk for long-term disability.

People with disability in Mali are extremely vulnerable in this uncertain and potentially volatile environment, as they are more likely to be jobless, suffering from extreme poverty, lacking access to basic services (including school, health care) and susceptible to violence and exploitation. [2] According to the results of a small-scale research by Handicap International in the Segou region in 2007, 80% of children with disability had never attended school and only 9% were literate. Additionally, the results found that most people with disability relied on their family members or neighbours for financial and food support (79%) in absence of income generating activities for themselves.

Despite its limited resources and its on-going focus towards mitigating the risk of climate-related emergencies (namely severe drought) and ethno-political crisis, the government of Mali has shown its willingness to undertake and develop a number of important reforms and policies related to the rights of persons with disabilities. Unfortunately, however, the legal framework and policies have not been accompanied by sufficient work plans, human/financial resources or monitoring mechanisms to ensure their effective implementation. Additionally, while the government has engaged with disabled people's organisations (DPOs) to facilitate these development discussions and processes, there is as of yet no

[1] Conflict Armament Research and Small Arms Survey. 2013. "Rebel Forces in Northern Mali: Documented Weapons, Ammunition, and Related Materiel Conflict Armament Research". London-Geneva.

[2] WHO, World Report on Disability, 2011

specific national strategy or dedicated resources allocated to increasing disability awareness and improving government capacity related to disability issues.

Legal and Policy Framework

Some of the legislative and policy steps the government of Mali has taken in terms of integrating **international instruments** include:

- Signing and ratifying (in 2008) the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the optional protocol, the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against Women – all of which make some reference to protecting the rights of persons with disabilities as they relate to fair treatment, appropriate care, inclusion and full participation in society.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Mali's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which are part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

The Malian Constitution, adopted in 1992, guarantees civil and political rights as well as economic, social and cultural rights to all citizens, but does not mention persons with disabilities specifically.

There is a "Persons with Disabilities Bill" which was adopted in 2009. Among other things this bill includes;

- special measures to promote access to justice for persons with disabilities, including the possibility to use a sign language interpreter in court,
- a disability card for reduced health care costs or free medical care, provisions for tax reduction / exemption for persons with disabilities,
- employment quota or priority access for persons with disabilities in businesses and / or in the civil service.

The Labour Code institutes the principle of non-discrimination in employment and clearly states that disability cannot be a factor in refusal of employment.

Education law (articles 46 and 47), prescribes that children with disabilities should have access to education. The PRODESS III (Health and Social sector plan) and the PRODEC (Education sector plan) both explicitly highlight the need to mainstream disability issues into development of these sectors.

In the Poverty Reduction Strategy Paper (PRSP) for 2008–2011 the government stated that it would be "necessary to highlight the rights of women, children and handicapped persons". The Mali Strategy Framework for Growth and Poverty Reduction (CSCRP) 2012- 2017 mainstreams disability more profoundly mentioning disability as a key crosscutting issue within all components of development. Due to the recent and on-going conflict, the United Nations Multidimensional Integrated Stabilization Mission in Mali (MINUSMA) was established by Security Council resolution 2100 of 25 April 2013 to support political processes in Mali and to mandate a number of

security-related tasks. The Mission was asked to support the transitional authorities of Mali in the stabilisation of the country and implementation of the transitional roadmap. By unanimously adopting resolution 2164 of 25 June 2014, the Council further decided that the Mission will focus on duties, such as ensuring security, stabilisation and protection of civilians; supporting national political dialogue and reconciliation; assisting the re-establishment of State authority, the rebuilding of the security sector and the promotion and protection of human rights in Mali. None of these UN plans have specifically included men, women and children with disabilities, although areas such as the re-establishment of the State and the promotion and protection of human rights are well suited as fertile strategic areas for disability mainstreaming.

Implementing Agencies and Actions

Disability issues are mainly coordinated by the Ministry of Social Development, Solidarity, and the Elderly, while the Ministry of Education, Health and Labour are responsible for various measures within their respective mandates.

In the area of education, most children with disabilities are still out of school. They are either not sent, or they drop out when teachers are unable to support the diversity of learners due to a lack of awareness, training and support. Additionally, although education is free according to government policy, in practice, informal fees and school-related costs often mean parents are forced to make financial decisions which often prevent children with disabilities (especially girls) from accessing education. There are specialised schools for persons with visual impairments, hearing impairments and learning difficulties which are operated by NGOs, but they are limited in number and capacity. These schools are mostly located in Bamako and the regional towns, but are able to support collectively less than a few thousand students and only provide education up to the 9th grade.

In addition to specialised schools, enrolment of children with disabilities in public schools has increased due to the implementation of governmental programs (supported by various donors). Within the Ministry of Education there is a department of Special Education, which is responsible for implementing inclusive education, however, its capacity and reach remains under-developed. None-the-less, it does run a project teaching a limited amount of secondary school teachers Braille. These programmes still need to be systematically developed and properly resourced.

In terms of health services, the government runs several physical rehabilitation centres throughout the country and some specialised services do exist at regional hospitals (although audiology, speech therapy and psychological services are extremely limited or non-existent). That said a number of barriers remain for people with disability including associated costs, inaccessible transportation, inaccessible buildings, prejudice/lack of awareness of health workers, etc.

As a result of the employment quota provisions, government ministries practice affirmative action to hire people with disabilities and encourage them to take the entrance exam for civil servant employment. The Ministry of Social Welfare, Solidarity and the Elderly has been particularly proactive in hiring people with disabilities. Through this scheme some 150 persons with disabilities have secured employment.

The government also receives support from a number of international organisations to support the implementation of its development strategies. For example, Handicap International (HI) has been working with the Malian government, civil society and people with disability since 1996 to address some of these issues. They have sent an emergency weapons clearance team to the north and worked with the World Food Programme and UNICEF to ensure that disabled people are included in humanitarian relief efforts. HI also works closely with disabled peoples organisations and a number of government and non-government partners to ensure that persons with disabilities and disability issues are included in development efforts from education to health. UKAid is financing various kinds of development projects (inclusive of

persons with disabilities) aiming at poverty reduction, education, awareness raising, capacity building, clean water and sanitation. The organisation, Water Aid has supported water and sanitation programs since 2000, which have considered accessibility for persons with disabilities. This is seen as a model of good practice.

Accountability Measures

The National Human Rights Commission, which was re-established in 2014, has the mandate to monitor and report on human rights violations in Mali. The Commission is among others, supported by the Danish Institute for Human Rights, in the areas of - capacity building, human rights and family law, human rights and security and human rights documentation and education. It has yet to engage with violation of rights of persons with disabilities.

Main Civil Society Actors

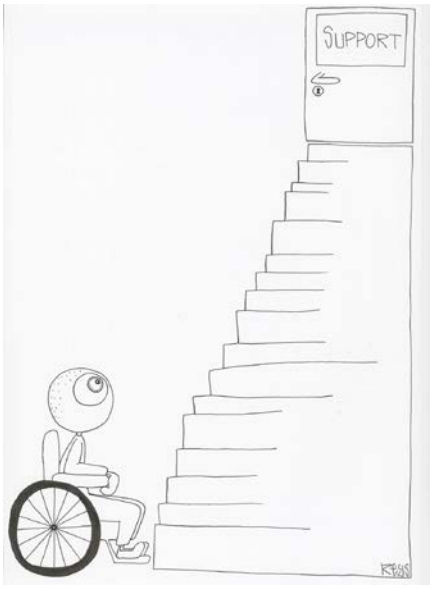
The disability movement is rather well organised and dynamic, but are confronted with organisational and institutional difficulties that weaken their internal governance and democratic processes, and thus limit their actions in advocacy, resource mobilisation and profiting from their experience. It is in response to this situation a capacity building project has been initiated by four (4) organisations, namely; International Service, SightSavers, Handicap International and the Mali Federation of Associations of Disabled Persons/Fédération Maliènne des Associations de Personnes Handicapées (FEMAPH) for the benefit of seven (7) grassroots member organisations of FEMAPH in the Bamako district. The overall objective is "to contribute to the Empowerment of the Disabled People's Organizations in order to support their capacity and autonomy and their full participation in the process of the socio-economic development of Mali"

FEMAPH currently comprises of seventeen (17) national associations in Bamako, eight (8) regional federations and fifty-one (51) local federations of disabled people's associations (FELAPH). In total they support over 32,000 members.

FEMAPH has represented its members in the different government policy processes as an effective advocacy actor. FEMAPH counts on an excellent network among high-ranking politicians for their advocacy work. There is great variance in the capacity and strength of the national/regional/local organisations. Some of the stronger actors are: the Association of Handicapped Women of Mali/Association Malienne des Femmes Handicapées (AMAFH), an organisation for women with disabilities; the Union Malienne des Aveugles, the organisation of blind persons; the Mali Association of the Deaf (A.MA.Sourds); the Malian Association for Persons with Intellectual Disability (AMALDEPE) and the organisation of deaf persons. There is also a Disability Sports Association.

The organisations are relying on member fees, and donations from charity organisations and private persons to carry out their activities. Their main activities are income generating projects and advocacy work for disability rights and inclusion of persons with disabilities in development programs.

West African Federation of Disabled Persons (WAFOD) is a non-governmental organisation made up of the national federations of people with disabilities from the 16 countries of West Africa. FEMAPH is a member.



What Sweden can do – 7 questions to discuss

In line with the intentions of the existing Swedish strategies for Mali and in an attempt to respond to areas of greatest need, the following could be discussed:

- Could Sweden do more to support human rights institutions, organisations and accountability mechanisms in Mali to include disability on their agenda and to develop their capacity to address the rights of persons with disabilities (in collaboration with disabled people's organisations)? Examples of monitoring tools can be downloaded here.
- Could Sweden do more to make civil society capacity development programmes inclusive of disabled people's organisations? Could Sweden do more to include these organisations in its professional and social networks?
- Could Sweden do more to include women with disabilities in programmes aiming at gender equality, women empowerment and combatting of gender based violence? Could the organisation of women with disabilities (AMAFH) play a role in such efforts?
- Could Sweden do more to influence the larger UN programmes (and other joint donor arrangements) to become inclusive of persons with disabilities? E.g. are programmes focussing on basic social services, education, water and sanitation, peace building and security, economic empowerment, Sexual Reproductive Health and Rights (SRHR), elections, etc. designed to be accessible to persons with disabilities? Are there explicit measures taken to include this group? Are there disaggregated monitoring indicators? Some inspiration could be found in the programme guide to disability in development here.
- Could Sweden do more to influence the cooperation with Mali in the area of national statistics to make them include data on disability?
- Could Sweden do more to ensure that persons with disabilities are included in humanitarian, reconstruction and peace building efforts? E.g. using tools as:
  - ✓ Manual on the design and building of barrier-free emergency shelters here
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden do more to keep updated on disability rights in Mali and to raise awareness of staff? E.g. local disabled people's organisations could be engaged as resource persons in staff seminars.

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http://www.handicap-international.org.uk/where_we_work/africa/mali

http://www.irinnews.org/report/90808/mali-disabled-seek-jobs-not-charity

http://www.sightsavers.net/our_work/around_the_world/west_africa/mali/default.html

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http://www.thecollaboratoryonline.org/wiki/Africa_WASH_and_Disabilities_Study

General references:

World Report on Disability, 2011 http://www.who.int/disabilities/world_report/2011/en/

Guidance note for EU staff on Disability Inclusive Development Cooperation
http://capacity4dev.ec.europa.eu/disability-and-development-network/blog/updated-guidance-note-eu-staff-disability-inclusive-development-cooperation

Almost 150 countries have ratified the Convention on the Rights of Persons with Disabilities (read more on the UN website http://www.un.org/disabilities/). The reports to and comments of the UN Committee on the Rights of Persons with Disabilities can be found here
http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx

Gender equality and the rights of women with disabilities
http://www.un.org/disabilities/default.asp?navid=13&pid=1514

The situation of person with intellectual disabilities is of even lower priority http://inclusion-international.org/who-we-are/ as often persons with intellectual disabilities are considered to be “less productive”, although with support they could contribute to family income and daily life.

Persons with mental health conditions are often ignored and stigmatised, despite being a common condition, especially in countries where stress from conflict, disasters and poverty is high.
http://www.un.org/disabilities/default.asp?id=1545

http://www.irinnews.org/report/90808/mali-disabled-seek-jobs-not-charity

http://www.unicef.org/infobycountry/mali_69546.html

Disability prevalence among adults: estimates for 54 countries and progress towards a global estimate, Sophie Mitra, Fordham University and Usha Sambamoorthi, West Virginia University

The human rights of persons with disabilities are a Swedish government priority. As a service to staff, guidance notes have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Mozambique

December 2014

The situation of persons with disabilities

There are no reliable data on the number of persons living with a disability in Mozambique. In the data collection from 2007 (III RGPH), it was calculated that approximately 500,000 persons were living with a disability, certainly a gross underestimate. According to a livelihood study carried out by the Norwegian SINTEF in 2009, almost one-third (26 per cent) of the households have one or more members with functional limitation while 6 per cent of the individuals in the study had a functional limitation. This would mean around 1.5 million persons with disabilities. According to a UNICEF mapping (2013), 14 per cent of school age children have a disability. The National Statistics Institute (INE), an independent branch of the Ministry of Planning and Development, has no specific instructions or funding to collect information regarding disability. The different results of various studies reflect the absence of a commonly agreed definition of disability and poor data collection methods.

The education level for persons with disabilities is very low, especially in rural areas. According to a report made by the Secretariat of the African Decade in 2007, it was estimated that 80 per cent of children with disabilities don't go to school, although education is free and compulsory. In 2013, UNICEF embarked on a campaign to make the school system more inclusive.

Discrimination is common in employment, education, health care, and the provision of other state services. Despite economic growth, poverty reduction strategies and establishment of regional funds, persons with disabilities have had difficulties to access these programmes and funds targeting the poor. Persons with disabilities are often hindered by doubts on their own ability and negative attitudes of the service providers that often treat them as "objects of care".

Other challenges include the services for persons with mental health conditions. The country's only psychiatric hospital is overwhelmed with patients and lacks the means to guarantee basic nutrition, medicine, or shelter. Doctors at the hospital report that many families abandon members with disabilities. Mozambique has an estimated 0.04 psychiatrists per 100,000 individuals, and only 69 psychiatric nurses – representing 0.28 per 100,000 population. There are only eight psychiatrists operating in Mozambique who are Mozambican. If Mozambique wanted to meet the minimum WHO targets, they would need to train an additional 236 psychiatrists and 2,389 mental health nurses (WHO study, 2014).

More than 300,000 mines have been removed in Mozambique since 1992 and the country was expected to be declared mine-free by the end of 2014. However, these same minefields continue into Zimbabwe and continue to severely impact the lives of hundreds of thousands of Mozambicans and Zimbabweans alike. The mines have killed 2 500 persons many more have become disabled from mine injuries.

Legal and policy framework

The government of Mozambique has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:
Signing and ratifying (in 2012) the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol, the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml

- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against Women – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.
- Ratifying the Optional Protocol to the Convention against Torture (in 2014) which requires the government must establish a body independent from government to inspect all places of detention including mental health facilities.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Mozambique's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

The Constitution of Mozambique states that persons with disabilities shall fully enjoy the rights enshrined in the Constitution (art 37). The Constitution have a range of specific provisions for persons with disabilities, outlining their rights to special protection by family, society and the state (art 124 and 125) such as

- the state shall promote the creation of conditions for learning and developing sign language
- the state shall promote the creation of conditions necessary for the economic and social integration of the disabled
- the state shall promote, in co-operation with associations of the disabled and with private entities, a policy that will guarantee ***(a)*** the rehabilitation and integration of the disabled ***; (b)*** the creation of appropriate conditions to prevent them from becoming socially isolated and marginalised; (c) priority treatment of disabled citizens by public and private services ; and (d) easy access to public places
- the state shall encourage the establishment of associations of the disabled

Article 15 and 16 of the Constitution specifies how the state shall ensure the special protection of those who were disabled in the national liberation struggle, as well as the orphans and other dependants of those who died in this cause***.***

There is not yet a comprehensive disability law in Mozambique, but in 2014 the government put in place a technical committee to drive the process of developing such a law to be called "The Rights of Persons with Disabilities Bill". The new law aims at domesticising the UNCRPD. The government has also put in place clear Terms of Reference for the technical committee and a road map for its work. The present draft is considered to need substantial revision. Presently there are only pieces of legislation that is applicable for persons of disabilities such as the Education Law, the Labour Law, the Law on Assistance to demobilised combatants with a disability and their relatives or dependents, the Law creating a national disability council, the Electoral Law which provides for the needs of voters with disabilities in the polling booths, the Law on rights and duties of persons living with HIV and AIDS, including the rights of persons with disabilities to communication and civic education in a language or means that take into account their special needs.

There is also a national disability Strategy from 2009. The underlying principles and strategies are aiming to ensure people with disabilities' effective participation in every aspect of contemporary society. It outlines some specific rights for people with disabilities, including, but not limited to the right to independent living; the right to integration in the family and community; the right to rehabilitation and access to compensatory means; the right to formal, special or vocational education; the right to employment; and the right to social protection.

There is also a national action plan on disability for the period from 2012 to 2019 (PNAD), which is

informed by various national and international instruments and inputs from all stakeholders.

Despite all these provisions persons with disabilities continue to have limited access to livelihood opportunities, education and skills training, participation in public and political life; health care, justice, legal capacity etc.

Implementing Agencies

The National Disability Council has a coordinating and monitoring role in relation to the Strategy and Plan of Action (PNAD), although very little is reported on its functioning. All Ministries have the responsibility to develop their own guidelines and activities according to National Action Plan (PNAD).

At national level it seems that the *Ministry for Women and Social Action* (MMAS) takes the key responsibility to coordinate and monitor the implementation of policies aiming at persons with disabilities. The National Institute of Social Action (INAS) is a branch of the MMAS that implements the Ministry's activities for all vulnerable groups countrywide.

Mozambique´s *Ministry of Education and Culture* is primarily responsible for monitoring policies and implementing strategies to ensure that persons with disabilities have access to basic education and skills training. The legislation enunciates the right of children with disabilities to education and foresees special classes in mainstream schools ensuring the right of children with multiple or severe disabilities tailored to their capacities in a personalised manner. The Law also sets forth that vocational training shall be provided to children with disabilities in order to assist their integration into society and the labour market. However, children with disabilities still face huge difficulties in accessing their right to education.

The *Ministry of Health* (MISAU) is responsible for the design and implementation of policies that give PWD to access health care, rehabilitation and assistive devices. Rehabilitation services fall under the ambit of the Physical Medicine and Rehabilitation department (SMFR) that is responsible for the provincial rehabilitation centres. In many cases these are inaccessible to the country's dispersed rural population. The Ministry of Women and Social Action is responsible for coordinating psychosocial and economic reintegration activities, which include community-based rehabilitation. Therefore, some services are provided by both ministries.

The *Ministry of Labour*, through the Institute for Employment and Professional Training (INEFP) provides training which enables people with disabilities to acquire specific skills and thus become self-employed.

The *Ministry of Youth and Sports* has been working towards creating an enabling environment for young people to engage in sporting and recreational events, with specific provisions to promote the involvement and participation of youngsters with a disability. The government has established a Sports Federation for People with Disability.

The poverty reduction strategy, Plano de Acção para o Aumento da Produção e Produtividade 2010-2015 (PARPA III) aimed at making economic growth more inclusive and strengthen social safety nets. Disabled people's organisations (DPOs) participated actively in the strategy process supported by the Global Partnership for Disability and Development (GPDD). Despite this there are no concrete targets or indicators for persons with disabilities in the strategy. Disability is mentioned in a general way as an issue that needs to be addressed, while concrete actions are missing.

In late 2011, the United Nations Partnership to Promote the Rights of Persons with Disabilities was established to support joint programming at the country level for the effective implementation of the Convention on the Rights of Persons with Disabilities and the promotion of disability-inclusive internationally agreed development goals. A multi-donor trust fund was launched to support and manage resources to carry out the programmatic activities of the partnership, with the main sponsor being the Government of Australia. Since then, the Governments of Finland, Greece and Sweden have also committed resources to the fund. Mozambique was one of the first recipients in 2012. Since then UN agencies in Mozambique have increased their support to disability inclusive initiatives.

Accountability Mechanisms

The following accountability mechanisms are established:

The National Human Rights Commission was created by law in 2009, but only became operational in 2013. Its mandate is to promote and defend human rights and to ensure that human rights provisions of the Constitution and international treaties are followed. Its formal mandate is still weak and the commission has been criticised by the UN Human Rights Committee.

A Constitutional amendment from 2005 created the independent *Ombudsman* with a mandate to investigate abuses including human rights violations. It only started operating in 2012 and has still to develop its functions.

None of the above accountability mechanisms have so far engaged in monitoring of rights of persons with disabilities.

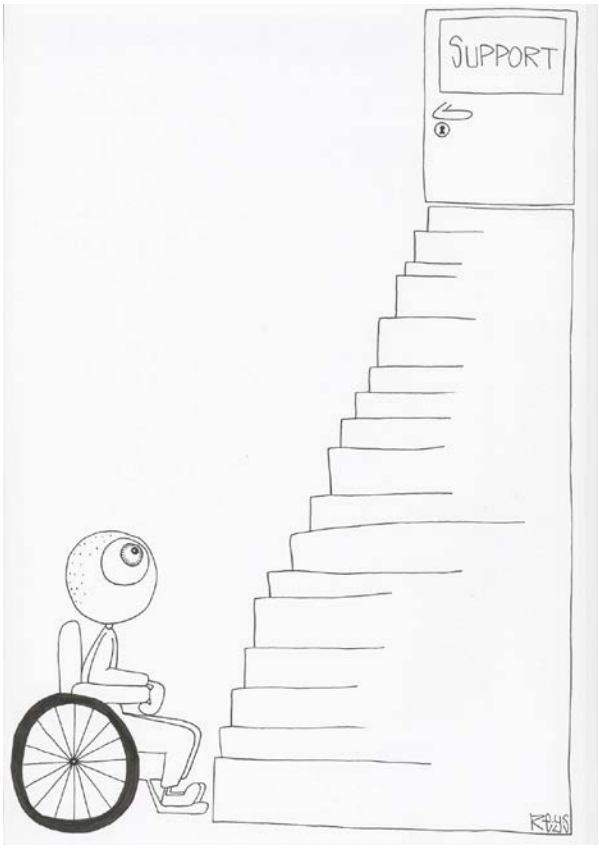
The *National Disability Council* also has a monitoring role.

Main civil society actors

Most civil society organisations (CSOs), including disabled people's organisations, have existed less than 20 years and are still weak and highly dependent on donor support. The G20 is a national CSO platform, comprising of more than 20 CSOs. It was founded in order to facilitate the participation of the civil society in the development process, implementation and monitoring of the PRS. One of the members is the Forum of the Mozambican Associations for the Disabled (FAMOD), an umbrella organisation composed of 17 associations of and for persons with disabilities. FAMOD has not yet got a strong structure and is heavily dependent on donor financing. A list of disability organisation is provided below. Mozambican Association of the Retired (APOSEMO) has been appointed by the MMAS to represent all vulnerable groups.

There are a number of international non-governmental organisations present in Mozambique that interacts with some disabled persons organisations. The Global Partnership for Disability and Development (GPDD) has supported capacity building in connection with the monitoring of the poverty reduction strategy. Other supporters are Helvetas, Switzerland, and Handicap International (supporting a Disability and HIV/AIDS mainstreaming program in Maputo, Sofala and Manica). There is also Finnish Disabled People's International Development Association (FIDIDA) and KEPA Service Centre for Development Cooperation, a Finnish NGO platform which has been an important partner for FAMOD and other disabled people's organisations. KEPA has played an important role in the formulation of the National Disability Policy and in the promotion of Human Rights of persons with disabilities. Swedish Diakonia has supported Mozambican Association of the Blind and Amblyopic People (ACAMO).

Since 2011, the UN has come aboard as a supporter of disability rights.



What Sweden can do – 10 questions to discuss

Coherent with the new results strategy for Mozambique with focus on human rights, rural development and livelihoods, women and youth economic empowerment entrepreneurship and employment and SRHR, Sweden has great opportunity to include persons with disabilities. Questions to discuss:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights?
- Could Sweden do more to build relations and include disability organisations in social and professional events and networks?
- Could Sweden do more to facilitate national and regional networking in the area of disability rights? Especially encouraging linkages between DPOs and general human rights organisations and initiatives?
- Could Sweden do more to include disability organisations in capacity building programmes/funding modalities for civil society/human rights organisations? Especially addressing issues of fragmentation and district level advocacy and monitoring capacities?
- Could Sweden do more to support the accountability mechanisms to develop capacity in the area of disability rights (e.g. capacity of Ombudsman and Human Rights Commission, law reforms, access to legal aid, reporting on the CRPD, monitoring of violations)? Monitoring tools can be downloaded here.
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so?
- What support and additional information would the embassy need to take such initiative to promote and support inclusion of disability aspects and indicators in the overall development agenda? E.g. Inclusion Made Easy - a quick programme guide to disability in development here
- Could Sweden do more to promote inclusion (with quality and retention) of children and youth with various disabilities in education, skills training and economic empowerment programmes at all levels? Resources and tools can be found here
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to include women with disabilities in women networks, economic empowerment and in SRHR/GBV initiatives?

Disability organisations in Mozambique

FAMOD	Forum das Associações Moçambicanas de Deficientes (umbrella)
ACAMO	Associação de Cegos e Amblíopes de Moçambique
ACRIDEME	Associação de pais e amigos de Crianças Deficientes Mentais
ADEMIMO	Associação de Deficientes Militares e Paramilitares de Moçambique
ADEMO	Associação dos Deficientes Moçambicanos
ADESU	Associação dos Deficiêntes do Ensino Superior
ADPPDCM	Associação de Desporto da Pessoa Portadora de Deficiência da Cidade de Maputo
ADPPDPM	Associação Desportiva para Pessoas com Deficiência da Provincia de Maputo
AJODEMO	Associação dos Jovens Deficiêntes de Moçambique
AMDV	Associação Moçambicana dos Deficientes Visuais
AMMD	Associação Moçambicana de Mulheres portadoras de Deficiência
AMOFAS	Associação Moçambicana dos Familiares e Amigos dos Surdos
ASUMO	Associação dos Surdos Moçambicanos
CERCI	Cooperativa para a Educação e a Reabilitação de Cidadões Inadaptados
CINFORTECNICA	Associação de Jovens Técnicos Portadores de Deficiência de Moçambique
CODDEFAM	Comité de Defesa dos Deficiêntes das Forças Armadas de Moçambique
CPM	Comité Paralimpico de Moçambique
NLHUVUKU	Grupo teatral
RAVIM	Rede para Assistência as Vitimas de Minas

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Metal Health in Mozambique http://www.healthallianceinternational.org/blog/post/mental-health-care-workers-in-mozambique

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Handicap International http://www.handicap-international.us/mozambique

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Rwanda

December 2014

The situation of persons with disabilities

According to a Census of persons with disabilities carried out 2010 by the Government of Rwanda in cooperation with the African Decade of Persons with Disabilities (draft), persons with disabilities (PWD) constitute 5.02 per cent of the population (263,928 females and 258,928 males). However, given Rwanda's history of conflict and development, a more realistic representation of persons with disabilities in Rwanda is closer to 1.5 million based on estimations by the World Health Organization (WHO) that 15% of any population is likely to be PWD.

On the policy level, Rwanda is one of the most progressive countries in Africa in terms of promoting the rights of persons with disabilities. Some examples:

- Persons with disabilities are included in the national development programmes such as Ubudehe Programme and Vision 2020 Umurenge Programme (VUP). VUP and Ubudehe are the programmes aiming to reduce poverty and accelerate development.
- Persons with disabilities are offered vocational training, participate in income generating activities and are encouraged to join cooperatives
- Affirmative action is used in institutions of higher learning
- Vulnerable persons with disabilities receive medical insurance free of charge and also benefit from housing programs for the most poor
- Persons with disabilities are represented in National Assembly and EALA (local)

Still persons with disabilities are among the poorest. Exclusion of the group is caused both by attitudinal and physical barriers. They are often excluded from inheritance of land and assets, removing the opportunity for them to lead independent lives. Main challenges include:

- Mind-set and social attitudes towards persons with disabilities. People with disabilities are seen as objects of charity. They are underestimated and overprotected, and their potential and abilities are not recognised. Children with disabilities are seen as a source of shame and often hidden away. Name-calling is common. Women with disabilities find it difficult to get married and are more vulnerable to sexual abuse. People with disabilities suffer discrimination in employment and health care.

  Negative attitudes are particularly strong towards those with severe disabilities, people with mental and psychosocial disabilities, blind and deaf people. These groups generally do not access information or services offered.
- Lack of self-esteem of persons with disabilities
- Lack of sufficient financial and human resources to execute the intended policies and programmes
- Many children with disabilities miss out on education because of the unawareness among parents and teachers

Whist the situation is changing due to campaigning of civil society and a change of attitude amongst government, stigma and negative perceptions still exist. Legislation and policies now exist to protect the rights of people with disabilities and to improve their quality of life but implementation is slow. A lot of effort has also gone in to introducing positive terminology in Kinyarwanda for people with disabilities who traditionally would be referred to as 'things', 'objects', 'broken pots'. Organisations of persons with disabilities have been lobbying hard to change to more positive and respectful terms.

Legal and policy frameworks

The government has a positive attitude to the rights of persons with disabilities and has taken a range of legislative and policy steps that indicate commitment

to advancing the rights of persons with disabilities. In terms of binding **international commitments**, these steps include:

- Signing and ratifying (in 2008) the UN Convention on the Rights of Persons with Disabilities (CRPD) and the Optional Protocol. The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. Rwanda has still not submitted its initial report. Read the Convention at www.un.org/disabilities/convention/conventionfull.shtml.
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against *Women* – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.
- Committing to the East African Community Policy on persons with Disabilities (2012) outlining joint policy commitments in line with the CRPD and country level recommendations.
- Signing the ambassadorial status with the Secretariat of African Decade of Persons with Disabilities (now African Disability Alliance) and adopting a National Plan of Action for the African Decade of Persons with Disabilities 2009-2019.
- Rwanda is represented in the East African Legislative Assembly. It is a legal requirement that among the Rwandan deputies elected to the assembly there is one representing persons with disabilities.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Rwanda's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

- *Rwanda Constitution of 2003* (amended 2010), which specifically mentions that "All Rwandans are born and remain free and equal in rights and duties. Discrimination of whatever kind based on, inter alia, ethnic origin, tribe, clan, colour, sex, region, social origin, religion or faith, opinion, economic status, culture, language, social status, physical or mental disability or any other form of discrimination is prohibited and punishable by law" (Art 11). The Constitution also stipulates that persons with disabilities are represented in National Assembly and EALA. In the amendment of the constitution of June 2010, the National Council of Persons with Disabilities (NCPD) was established as an independent public body. Its responsibilities, organisation and functioning is established by law.
- *The Rwanda Disability Law* No. 01/2007 which is protecting and promoting the rights of persons with disabilities.

Furthermore, the following policies are in place

- A national policy for Persons with disabilities
- Economic Development and Poverty Reduction Strategy (EDPRS): Persons with disabilities are included as a result of DPO advocacy at district and national level. Employers are encouraged to reserve a 5% quota of the work force to persons with disabilities.
- A social Protection Strategy: Persons with disabilities are included
- A comprehensive Policy of Special Needs Education has been developed and focuses on 'Inclusive Education' as an ideal educational model

Implementing Agencies

The National Council of Persons with Disabilities is a public and independent institution with legal personality and both financial and administrative autonomy. It is a forum for advocacy and social mobilisation on issues affecting persons with disabilities in order to build their capacity and ensure their participation in national development. The Council shall assist the Government to implement programs and policies that benefit persons with disabilities. Thus, it has an advocacy, implementing and monitoring role. The NCPD has elected representatives of persons with disabilities on all levels.

Disability issues on a national level are handled by the Ministry of Local Government, Good Governance, Community Development and Social Affairs. The ministry serves as a focal point for the National Council of Persons with Disabilities.

The Ministry of Education is responsible for implementing the policy on Inclusive Education. In 2011 the net enrolment rate in basic education was 95.9 per cent of children, according to official statistics. There are however no credible data on the nature and scale of disabilities amongst the in- and out-of-school population. Without further differentiation of non-existent data to unpack what 'disability' means, it is impossible to tailor a strategy to the different and often multiple special needs of excluded children. Children and youth with disabilities face many difficulties in getting proper education and it is likely that the out of school children to a large extent consist of children with disabilities. The main opportunities are still offered by special schools and centres, often run by philanthropists.

The Ministry of Health is responsible for providing health care services to persons with disabilities. In 2009, the Ministry adopted Guidelines on "Mainstreaming Disability into the Health System at Community Level". However, accessibility is still limited by long distances to the nearest health facility, insufficient number of health workers, negative attitudes and the cost involved. Especially women with disabilities have problems to access SRHR services.

There have been some efforts to tailor made HIV/AIDS awareness programmes to persons with disabilities, but no data exists on the prevalence in this group.

Accountability measures

The mission of the *National Commission for Human Rights* is to promote and protect the Human Rights as to install a culture of respect for the Human Rights and to reinforce the Rule of Law in Rwanda. It has been specifically entrusted to monitor the rights of persons with disabilities. The Disability Law of 2007 relating to protection of disabled persons, Article 10 states: "The National Commission for Human Rights shall provide special procedures of monitoring how rights of disabled persons are respected". It is unclear how it has fulfilled this role, but one report was found on the internet on the situation of students with disabilities in Universities.

The *National Council of Persons with Disabilities* is mainly an implementing body but also has monitoring functions in relation to the programmes implemented. It has for example produced reports on employment conditions for persons with disabilities.

Main civil society actors

The first attempts at creating a unifying structure came in the mid-2000s with the creation of a Federation of People with Disabilities (FENAPH), which was later enshrined in law. However, the ambiguous nature of this organisation – at once created by law, and therefore technically a government agency, but which also represented civil society – resulted in a lack of progress and an insufficient ownership by government. In 2010, after lobbying by civil society, the government of Rwanda agreed to amend the constitution of Rwanda and to create a National Council for People with Disabilities (in line with the National Council for Youth and for Women). This is a government agency with representative structure at all levels of government administration responsible for mainstreaming disability across government services and development programmes. In response, civil society organised itself into an umbrella organisation, National Union of Disability

Organizations of Rwanda (NUDOR) to serve as a coordinating and representative body for the movement and to build the capacity of member organisations. It currently has 8 members:

Association Générale des Handicapés du Rwanda (AGHR) is a cross disability organisation of disabled people which defends, protects and promotes the human rights and social and economic well-being of persons with disabilities. AGHR is Rwanda's oldest organisation for people with disabilities, created in December 1979.

Collectif Tubakunde advocates for children with intellectual impairments and focuses on improving standards of special education and health care for children with intellectual impairments. There are 38 schools and centres for children with intellectual impairments in 24 districts who are part of Collectif Tubakunde.

National Organisation of User and Survivors of Psychiatry in Rwanda (NOUSPR) was established in 2007 to provide a voice to all people with psychosocial disabilities in Rwanda. It is a part of a worldwide movement, called the World Network of Users and Survivors of Psychiatry, which advocates for the rights of people with psychosocial disabilities as provided for in the UN Convention on the rights of persons with disabilities.

The *National Paralympic Committee* (NPC) promotes and co-ordinates sports for people with disabilities. Founded in 2001, NPC is made up of associations and sport clubs with people with disabilities as members.

The *Rwanda Union of the Blind* (RUB) was established in 1994. There is very low education level and extreme poverty among Blind people in Rwanda; this is further exacerbated by prevailing social stigmas and cultural attitudes. RUB advocates on behalf of its members for equal rights for people with visual impairments. They have well-established branches in 26 districts out of 30 and over 50 local RUB branches. In 2014 RUB received an international reward for its work.

The *Rwanda National Association of Deaf Women* (RNADW) was created in 2005 by a group of Deaf women to advocate for their rights.

Rwanda National Union of the Deaf (RNUD) is bringing together all categories of Deaf people to address their social, economic, cultural and political needs. RNUD was established in 1989 by Deaf people with the aim of uniting themselves, raising awareness of the issues/concerns and how to address them.

Troup of Handicap Persons Twuzuzanye (THT) was formed by a group of persons with disabilities in September 2007 in order to advocate and communicate for changed behaviour towards disability through sport and socio-cultural activities.

Other important actors are Association of Landmine Survivors and Amputees of Rwanda (ALSAR), Association Centre pour la Paix des Jeunes non voyants-ACPJENV and Rwanda National Decade Steering Committee (RNDSC).

There are different international civil society organisations involved in supporting disability programs in Rwanda, either directly or indirectly through local partners. They include Handicap International (HI), Christoffel Blinden Mission (CBM), Rotary International, the Liliane Foundation and the Rhenanie Palatinat. Rwanda is a program country for the Swedish organisation My Rights.

What Sweden can do – 7 questions to discuss

Within the broader context of the Swedish results strategy for Rwanda, with particular focus on strengthening of civil society capacity, empowerment of rights holders, equality, rule of law, economic empowerment of women and youth, access to education and skills training - Sweden has a great opportunity to include issues related to the rights of persons with disabilities. Questions to discuss:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights in Rwanda? E.g. through for example the office of My Right?
- Could Swedish civil society support modalities become more inclusive of DPOs and strengthen their capacity to raise awareness around disability rights and engage in monitoring of the implementation of legal and policy commitments?
- Could Sweden do more to include and enable DPOs and persons with disabilities to participate in its professional networks, academic engagements and in social and cultural events?
- Could Sweden do more to support development of accountability mechanisms in the area of disability (e.g. access to legal aid, capacitating of HR institutions, systematising of monitoring methods)? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to include women with disabilities in women networks, economic empowerment and in SRHR/GBV initiatives?
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the embassy need to take such initiative? E.g. Inclusion Made Easy - a quick programme guide to disability in development here.

Links to organisations

Christoffel Blindenmission (CBM): http://www.cbm.org/Rwanda-253085.php

HI Rwanda http://www.handicap-international.org.uk/where_we_work/africa/rwanda

National Union of Disability Organisations in Rwanda http://nudor.org/ and https://www.facebook.com/NUDORRW

National Commission for Human Rights in Rwanda http://cndp.org.rw/

National Council of Persons with Disabilities http://www.ncpd.gov.rw/

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Report from University visit National Council of person with disabilities Rwanda http://www.ncpd.gov.rw/index.php?id=121&eID=dam_frontend_push&docID=82

Study on employment for persons with disabilities, human rights commission Rwanda http://www.ohchr.org/Documents/Issues/Disability/SubmissionWorkEmployment/CivilSociety/NationalCommissionHRRwanda.pdf

DRPI Rwanda http://drpi.research.yorku.ca/Africa/resources/EACDisabilityPolicy/Page2/Part2

Census of 2010 http://uphls.org/IMG/pdf/REPORT_CENSUS_PWD_01Janv11.pdf

Rwanda disability law 2007, http://www.africanchildforum.org/clr/Legislation%20Per%20Country/Rwanda/rwanda_disability_2007_en.pdf

UPR on disability rights, 2010 http://www.undp.org/content/dam/rwanda/docs/demgov/RW_UPR%20Report%20submitted%20by%20the%20GoR.pdf

VSO Disability programme in Rwanda http://www.vsointernational.org/Images/Rwanda-disability-overview-June-2012_tcm76-37209.pdf

Discrimination in the work place http://www.tuc.org.uk/international-issues/human-rights/promoting-rights-disabled-people-rwanda

Education for children with disabilities http://www.unicef.org/infobycountry/rwanda_61318.html and http://politicsreconsidered.net/2014/03/02/rwanda-disabilities/

Mainstreaming Disability into the Health System at Community Level – Guidelines 2009

The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Somalia

December 2014

The situation of persons with disabilities

There are no reliable statistics of prevalence of disabilities in the Somali population. Data deficiencies are particularly severe for the nomadic population, which constitutes about half the population. The on going civil war and extreme poverty are causing a substantial increase of the numbers. Landmines and Explosive Remnants of War (ERW) are causing some 7000 disabilities per year and children are especially vulnerable.

Moreover, the legacy of war is the collapse of a health care system making preventable and curable diseases such as polio and meningitis spread. In 2014, an increase of polio cases was reported. The poor assistance provided to pregnant women has resulted in many cases of children affected by cerebral palsy and congenital disabilities. Also the practice of female genital mutilation (FGM) leads to disabilities of many women due to fistula after childbirth or rape. Practices of amputation as punishment for criminal offences also add to the numbers.

It is likely that persons with disabilities in Somalia add up to as much as 15-20 per cent or more of the population (around 1.5 million). On average each family has at least one member with a disability.

Persons with disabilities and elderly have great difficulty in accessing humanitarian aid. Persons with disabilities remain excluded from the most essential services in emergencies and are left behind in refugee camps. There are however efforts by the international community to do something about this in the various clusters.

There is almost no psychosocial support compared to the significant need for such services as a result of the war related increase in mental health problems.

Persons with disabilities face widespread discrimination, particularly within the education sector, both by teachers and other students. It is common and condoned by the community for students to beat and harass fellow students with disabilities. Women with physical and intellectual disabilities are more vulnerable to sexual abuse, often with impunity, compared to non-disabled women. It is reported that Al-Shabaab has deliberately been recruiting persons with disabilities as fighters, prison guards and spies. By participating in the “holy war”, persons with disabilities have been offered power, recognition, respect and means of income.

During the past two years steps have been taken towards a federal state building, peace building and creation of human rights mechanisms. However, implementation has largely failed and the immediate humanitarian situation remains critical.

Despite the difficult context, the disability movement has been able to organise and mobilise to some extent. When the Federal Government of Somalia submitted its 2015 budget, no budget was allocated to the National Disability Council (see below). As a result, DPOs and others demonstrated in Mogadishu in December 2014 and also complained about the lack of legislation.

The legal and policy frameworks

Somalia has taken some legislative and policy steps that indicate commitment to advancing human rights but has but has not yet signed and ratified the UN Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). In terms of **international instruments**, the following steps have been taken:

- Signing and ratifying treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child (2015), the Convention on Economic, Social and Cultural rights and the African Charter on Human and People’s Rights – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.

- Signing and ratifying the Convention against Torture
- Accession to the Land Mine Ban Treaty (2012)
- Signing the UN Standard Rules for the Equalisation of Opportunities for persons with disabilities (not implemented at any level)

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Somalia's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national/federal laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

The provisional federal constitution (2012) provides equal rights before the law for persons with disabilities and prohibits the state from discriminating against persons with disabilities. Also the Somaliland Charter and the Puntland Charter prohibit discrimination against persons with disabilities.

These constitutional provisions have not yet been translated into legislation. However, the Federal Government Work Plan for 2014 refers to planned legislation; creating opportunities and a safety net for persons with disabilities, job placements; and training programming for 600 persons. None of these plans were achieved. The Work Plan also makes reference to centres for "vulnerable groups". This is not consistent with a rights based approach; but may be something useful at least in the short term (if in line with the priorities of persons with disabilities).

The Human Rights Road Map for Somalia also includes a commitment to disability. In paragraph 17 on "Rights of persons with disabilities", the following is said:

"*The Government has responsibility to protect the welfare of persons with disabilities. Due to the prolonged conflict, many people are physically or mentally disabled in Somalia. Most, if not all, of the disabled are faced with grave problems of life. For instance, the physically disabled mainly beg while the mentally ill are usually chained or imprisoned. The Government is not in a position to extend any meaningful assistance to its disabled citizens so as to alleviate their problems because of the lack of needed financial resources. However, it is committed to take measures including the adoption of appropriate legislative, administrative and other measures. It is the intention of the Government to ratify the Convention on the Rights of Persons with Disabilities."* The UN is presently supporting the Federal Government to develop an action plan.

In the absence of a national poverty reduction strategy, the United Nations Development Programme (UNDP) and the World Bank Joint Needs Assessment of Somalia provide guidelines concerning the opportunities and challenges of rural development operations in the country. Disability is only referred to in the listing of UN Human Rights documents that need to be signed and ratified,

Despite the conflict many of Somalia's development indicators have improved since 1991 as a result of increased international support for provision of essential social services to vulnerable communities. Across the country, increasing numbers of children are enrolling in schools, health clinics are opening, and the economy led by the agricultural, banking and telecom sectors is growing rapidly.

Implementing agencies

MOLSA is the lead ministry on disability (consistent with many countries). There is also a National Council on Disability, which is an umbrella platform with representatives from various disability groups, clans and regions (unclear if women are represented). It was established by the Federal Government in 2012 and has the role of mainstreaming disability into Government policy.

The Puntland Ministry of Education launched a Strategic Plan for 2011–2015 including a section on special education. In Somaliland the importance of including students with disabilities has been stressed in the conclusions from a Global Campaign on Education, run by the Ministry of Education and advocacy efforts have been made. The Red Cross

GB has supported teacher trainings for an inclusive friendly approach in both Puntland and Somaliland. ADRA and UNICEF are other donors engaged in support to child friendly and inclusive education.

In general however, education is carried out by a patchwork of institutions, including a traditional system of Koranic schools; public primary and secondary school systems financed by communities, foreign donors, and the Somaliland and Puntland administrations; Islamic charity-run schools; and a number of privately run primary and secondary schools and vocational training institutes. In many areas children did not have access to schools other than madrassas. Attendance rates for girls remained lower than for boys and children with disabilities have very limited access to any educational opportunities.

Health care is largely concentrated to the private or NGO sector, although the country's public health care system is in the process of reconstruction, and is overseen by the Ministries of Health of the three administrative regions. There is a great opportunity to ensure inclusion of persons with disabilities in this process.

Including accessibility and the rights of persons with disabilities at the start of state building is easier and cheaper than having it added on at a later stage.

Accountability mechanisms

A Ministry of Human Rights was established in August 2013. The central authorities concurrently inaugurated a National Human Rights Day, endorsed an official Human Rights Roadmap, and completed Somalia's first National Gender Policy. A Human Rights Task Force was also established in February 2013 following violations of media freedoms. It is not clear if it remains functional. Additionally, the federal government in December 2014 organised a public awareness campaign, passed a new 54-point national Child Protection Act, and initiated legislation on a Human Rights Commission bill (not yet adopted). According to the UN's Independent Human Rights Expert on Somalia, local human rights protection has gradually improved as government institutionalisation and legislative reform have taken root. According to other reports none of the mechanisms set up are working as intended and corruption and pressure on officials have led to the resigning of key officials.

The human rights of persons with disabilities have not been on the agenda even though this might be an area to start as it is not politically sensitive.

Main Civil Society Actors

There are no legal provisions mandating the representatives of persons with disabilities to participate in policy making or to work with governmental institutions. Disabled people's organisations are never consulted, when laws and regulations with a disability aspect are being prepared. Persons with disabilities participate to a very limited extent in political parties and civil society organisations. The Somalia NGO Consortium does not have any disabled persons organisations as members.

Just like the state of Somalia, disability organisations are fragmented. Some of the most important are:

Association of the Physically Disabled of Somalia is a member of Disabled People's International (DPI), located in Mogadishu.

The *Somali Association of the Blind* is a member of World Blind Union (WBU), located in Mogadishu.

Somali National Association of the Deaf is a member of World Federation of the Deaf (WFD).

HADF - Horn of Africa Disability Forum is a think-tank for the unification and strengthening disabled peoples organisations (DPOs), institutions, networks and individuals who are actively working with empowerment, education, employment, care, shelter, rehabilitation, health, advocacy and development programs in Somalia.

The Institute for Education of Disabled People in Somalia (IEDSOM) is a cross disability international non-governmental organisation, formed in 1993 and with offices in Mogadishu and Merca as well as in Nairobi, Kenya. It mainly provides welfare services. Somali Red Crescent runs a project in Puntland mainly focusing on rehabilitation of persons with mobility impairments.

In Somaliland there is the Disabilities Action Network (DAN), founded in 2002, a non-profit organisation created to meet the needs of persons with disabilities and is mainly focusing on rehabilitation.

The Somali Disability Empowerment Network (SODEN) located in Mogadishu is a non-profit, non-governmental organisation that assists the mobility challenged individuals to build better lives through social integration, skill development, and useful representation in all aspects of life.

There is also a Somalia Coalition to Ban Landmines (SOCBAL).

The Finnish organisation "Abilis" has a range of partnerships with organisations in Somalia and could be an important source of information about the actors in various regions.

What Sweden could do – 10 questions to discuss

Within the broader context of support to democracy, human rights, health, capacity development of local duty bearers, economic empowerment and gender equality in Somalia, Sweden has a great opportunity to include issues related to the rights of persons with disabilities. Questions to discuss include:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights?
- Could Sweden do more to advocate for Somalia to become a party to the Convention on the Rights of Persons with Disabilities?
- Could Sweden do more to include disability organisations in social and professional events and networks?
- Could Sweden do more to include disability organisations in capacity building programmes/funding modalities for civil society/human rights organisations? Especially addressing issues of fragmentation?
- Could Sweden do more to support development of accountability mechanisms in the area of disability (e.g. law reforms, access to legal aid, capacitating of HR institutions to include disability rights)? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure accessibility to services in the basic health system for men, women, girls and boys with various disabilities, including mental health (e.g. indicators and monitoring mechanisms that help in determining to what extent interventions and services are helpful to men, women, girls and boys with disabilities and their families) and linking it to CSO initiated community based inclusive development programmes? Download a Guide to Disability in development here.
- Could Sweden do more to include women with disabilities in women networks, economic empowerment and in SRHR/GBV initiatives?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to ensure that persons with disabilities are included in humanitarian, reconstruction and peace building efforts? E.g. using tools as:
  - ✓ Manual on the design and building of barrier-free emergency shelters here
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden do more to build strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support would staff need to take such initiative?

References

Disabilities Action Network (DAN)

Somali Disability Empowerment Network (SODEN)

The Finnish organisation "Abilis"

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Tools on disability rights in emergencies and peace building http://www.usip.org/publications/world-institute-disability-wid-working-paper-the-involvement-of-persons-disabilities-in and https://www.academia.edu/4086450/Seizing_Opportunities_Disability_and_the_Post-Conflict_Policy_Agenda and http://www.iddcconsortium.net/resources-tools/thematic-areas/conflict-emergencies

The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Sudan and South Sudan

December 2014

The situation of persons with disabilities in Sudan and South Sudan

In 2010, an extensive analysis of disability occurrence in Sudan was made. This research is presented on the website of the Central Bureau of Statistics of Sudan, and was done in the time when the Republic of Sudan and South Sudan were still united. According to this research disability prevalence in Sudan was 4.8% and in South Sudan 5.1%.

However, considering that global estimates of people with disabilities range from 10-15 per cent, and the likelihood of under reporting, this figure is probably more than double. This means that there are between 1.9 and 3.8 million persons with disabilities in Sudan and 0.6 to 1.2 million in South Sudan. The armed conflict, poverty and lack of health services contribute to increased numbers of persons with disability. While Sudan has taken a range of policy steps to promote the rights of persons with disabilities, South Sudan is yet to develop its policies.

The major challenges in Sudan are lack of awareness among decision makers and the public, negative social attitudes and as a consequence structural discrimination. Persons with disabilities have limited access to basic services such as education, health, water, information and communication. The situation in South Sudan is worsened by the general extreme poverty, lack of basic health services and low school completion rates. Maternal mortality is the highest in sub-Saharan Africa and disabilities due to complications during pregnancy and delivery are common. New cases of disabilities are also occurring as a consequence of landmines, widespread violence, sexual abuse and displacement of thousands of people.

Both Sudan and South Sudan have included disability rights in their respective constitutions.

Interesting steps were taken in South Sudan when the referendum for independence took place in 2011. The state Referendum Commission gave certain attention to accessibility of persons with disability to take part in the voting.

As in many other countries, women with disabilities are invisible both among those promoting the rights of persons with disabilities, and those promoting gender equality and the advancement of women's rights.

The legal and policy frameworks

Sudan and South Sudan have taken some legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. The concern for war veterans has been a driving force in recognising the rights of persons with disabilities in both countries. In terms of **international instruments**, the following steps have been taken:

- Sudan has signed and ratified the UN Convention on the Rights of People with Disabilities (CRPD) and the optional protocol (2009). CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml. Sudan submitted its initial report to the Commission, but so far it is not available in English.
- Sudan has also signed and ratified the Landmine Ban Treaty, the Convention against Torture and the Convention on the Rights of the Child – but not CEDAW.
- South Sudan has not yet signed or ratified any UN or international treaties.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely

to become part of Sudan and South Sudan policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities in **Sudan**:

The 1998 Constitution of Sudan recognises the rights of persons with disabilities. *'The Republic of Sudan shall guard justice and prompt social solidarity to establish a basic structure of society that provides the highest standard of living for every citizen and fairly distributes the national income, curtailing excesses and preventing the exploitation of the vulnerable, elderly and handicapped'.* A process has started to review this old Constitution to make it more human rights based. It is anticipated that there will be a consultative process that also includes disability organisations.

The 1992 General Education Act provides for equal opportunity in education for persons with disabilities. After effective lobbying by disabled people's organisations, the Government decided that all children with disabilities would be entitled to free education from 2002.

There is also a law concerning the Privilege of War Disabled, from1998.

A new Disability Act was passed in 2009. It is a revised/updated version of the 1984 *Act on Welfare and Rehabilitation of Disabled Persons*. The Act provides for the setting up of a National Council for Persons with Disabilities to oversee and coordinate its implementation and outlines a range of rights. There is also a disability policy which includes a situational analysis followed by policy objectives, a policy statement including its principles and action areas; the last section covers the proposed five year national strategy for disability.

There is also an Advisory Council for Human Rights in Sudan (National Human Rights Commission Act 2008), which is an advisory unit to the government. It includes different committees, and one of them is the Committee on the Rights of Persons with Disabilities. Its role is to raise awareness of the rights of persons with disabilities, make recommendations on existing laws and their suitability to persons with disabilities, and to provide research and studies on laws related to the group.

The Committee has achieved inclusion of persons with disabilities in the Health Insurance Law, the Civil Rights Law, and the Child Welfare law, as well as the passing of the Prosthetics and orthotics law. It has also been able to force the Sudanese government to guarantee a 2 per cent quota of positions in the public sector to PWD.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities in **South Sudan**:

The rights of persons with disabilities are incorporated in the South Sudanese Constitution. Under Article 29(I), the *Right to Education*, it states that "Education is a right for every citizen and all levels of government shall provide access to education without discrimination as to religion, race, ethnicity, health status including HIV/AIDS, gender of disability". Then, under Article 139 (1)(d), the *Basic Values and Guidelines for Civil Service*, it states that "The Civil Service shall be governed by, inter alia, the following values and principles: services shall be provided to all persons impartially, fairly, equitably and without bias or discrimination on the basis of religion, ethnicity, region, gender, health status or physical disability."

At the moment, there is no disability specific legislation and no clear general national policy in regards to disability in South Sudan.

Implementing agencies

The Sudanese Ministry of Social, Women and Children Affairs is the responsible governmental body for disability policy, monitoring, institutional capacity building and training and implementing on state level.

There is also the National Council for Persons with Disabilities which became functional in 2013. It

was established to support the realisation of existing laws and legislation, including the CRPD and the 2009 Disability Act.

In June 2013, a Situation Analysis on the Rights of Children with Disabilities was launched by the National Council of Persons with Disabilities with UNICEF support, outlining the major challenges facing the realisation of rights of and providing strong recommendations to ensuring rights are achieved. In November 2013, the Federal Ministry of Education, with support from UNICEF, launched the National Strategy on Education for Children with Disabilities for the period of 2013–2016, which was followed by the first National Conference on Education of Children with Disabilities, jointly supported by UNESCO, UNICEF, and Plan International.

The Federal Ministry of Health in collaboration with WHO is currently developing a national disability strategic plan (2014-2016) based on the health component of the Strategic Plan of the National Council of Persons with Disabilities (2012-2016) and in line with the National Health Strategic Plan (2012-2016). One of the main components of this preliminary strategic plan is the collaboration with the Ministry of Education in the detection and provision of medical and rehabilitation services to children with disabilities enrolled in the education system through mainstreaming disability in the current existing services and programs of the Ministry of Health.

There have also been efforts to establish community based rehabilitation programmes, but they have been scattered and NGO driven. Sudan is one of the countries targeted by the UN partnership to promote the rights of persons with disabilities.

In **South Sudan**, the ministries responsible for issues concerning disability are the Ministry of Health and the Ministry of Gender, Child and Social Welfare. The Ministry of Health, according to its mission statement, aims to improve the health status of the population and ensure a sector wide quality health care to all the people of Southern Sudan, especially the most vulnerable, women and children. The Ministry of Gender, Child and Social Welfare strives to promote gender equality and equity. The Ministry is committed to, among others, protect the rights of all people without any discrimination on the bases of gender, ethnicity, political or religious affiliation. It is also to monitor any violation of women, children and persons with disability rights.

In addition to these two ministries, a separate independent commission has been appointed named Southern Sudan National Commission for War Disabled, Widows and Orphans. This Commission exists to:

- Build and empower a society that respects human rights and participation of War Disabled, Widows and Orphans in the development.
- Establish and promote accessibility of War Disabled, Widows and Orphans to social services.

No reports have been written on the results and the effectiveness of this commission.

On the website of the Ministry of Gender, Child, Social Welfare, a number of activities are listed which can be regarded helpful in regards to disability. The list includes projects such as the planning of a Physical Rehabilitation Centre; a Rejab School of the Blind and Hearing Impaired Persons; a Gender Empowerment Project; and Drop-In Centres for Street Children. There are no reports on actual implementation.

Following a meeting in August 2010, the Khartoum Governor approved support to three national unions in Sudan: the Khartoum National Union of Deaf (KNUD), the Khartoum National Union of Physically Disabled (KNUPD) and the Khartoum National Union of the Blind (KNUB). The support includes means of transportation, monthly donations for activities and maintenance, provision of 300 income generating projects through the Ministry of Social Development, an increase from 2 per cent to 5 per cent of employment opportunities available to persons with disabilities, inclusion of 3,000 families with a family member with a disability in the current health insurance

provision, allocation of 300 community houses for members of disabled people's organisations and their families, and finally direction to the Ministry of Education to include El-Nour Institute for Blind Education in its 2011 budget. There are no reports on the implementation of these commitments.

Most disability related programmes are however implemented with support of donors such as ADD, Handicap International and UNICEF.

Accountability mechanisms

The Sudan National Human Rights Commission (SNHRC) was established by a presidential decree in 2012.It has been supported by UNDP to strengthen its capacity and to develop a National Human Rights Action Plan, especially in regards to responses to UPR recommendations. So far disability rights have not been on the agenda. The National Council for persons with disabilities also plays a monitoring role.

The South Sudan National Human Rights commission (SSHRC) is also in existence although its role and mandate is not clear. So far disability rights have not been on the agenda.

Main Civil Society Actors

DPOs in both Sudan and South Sudan seem to have taken a rather active advocacy role. In South Sudan DPOs engaged with accessibility of the election process and raised the claim that a 5 per cent representation of persons with disabilities in decision-making bodies should be part of the Constitution. A network of all DPOs across the ten states of South Sudan, the South Sudan Network for Persons with Disabilities, was also formed in November 2011. The South Sudan Association of the visually impaired (SSAVI) seems to be a very active organisation and has among other things involved in the fight against HIV/AIDS.

In Sudan, disability activists participated in development of the CRPD and there are several active national disabled people's organisations working to promote disability rights. Most organisations are funded by individuals and charity organisations. There is limited governmental funding of disabled people's organisations.

Sudanese disabled people's organisations claim that there is a need for a national umbrella organisation/federation to take on the responsibility of coordination between local and national organisations. Such an initiative is supported by ADD.

DPOs included in the ADD support in Sudan and South Sudan are:

- National Union of the Blind
- River Nile Union of the Blind
- Kassala Union of the Blind
- Khartoum Union of the Blind
- National Union of the Blind
- Nyala Union of the Blind
- National Union of the Deaf
- Kassala Union of the Deaf
- Wad Medani Union of the Deaf
- Red Sea Union of the Deaf
- Gadarif Union of the Deaf
- Khartoum Union of the Deaf
- Juba Union of the Deaf
- Nyala Union of the Deaf
- National Union of the Disabled
- Mayo Union of the Disabled
- Gash - Aroma Union of the Disabled
- River Nile Union of the Disabled

Other organisations specifically working in South Sudan (with web pages) are:

- Wao Cheshire service
- South Sudan Association of the Visually Impaired (SSAVI)
- Deng Foundation

Among international organisations involved in promoting disability rights are Save the Children Sweden, Plan International, Action on Disability and Development (ADD International), Handicap International, Light for the World, CBM, Ecumenical Disability Advocates Network (EDAN) and International Council for Education of People with Visual Impairment (ICEVI). The Swedish Red Cross is also active in Sudan, as well as the Red Crescent. An important initiative is the Victim Assistance for

Mine/ERW Survivors and persons with disabilities in Sudan. There is also EU support to the project "*Building the Capacities of Disability Rights Movement in Sudan for inclusive participation in development*" and the UN partnership to promote the rights of persons with disabilities.

What Sweden can do – 8 questions to discuss

Within the broader context of the Swedish cooperation with Sudan and South Sudan with focus on increasing the knowledge of human rights, gender equality, SRHR and increasing the capability of civil society to work for human rights, Sweden has a great opportunity to include issues related to the rights of persons with disabilities. Questions to discuss include:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights in Sudan and South Sudan?
- Could Sweden do more to include disability organisations in social and professional events and networks?
- Could Sweden do more to include disability organisations in capacity building programmes/funding modalities for civil society/human rights organisations?
- Could Sweden do more to support development of accountability mechanisms in the area of disability (e.g. law reforms, access to legal aid, capacitating of HR institutions)? Monitoring tools can be downloaded here.
- Could Sweden do more to include women with disabilities in women networks, economic empowerment and in SRHR/GBV initiatives?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to ensure that persons with disabilities are included in humanitarian, reconstruction and peace building efforts? E.g. using tools as:
  - ✓ Manual on the design and building of barrier-free emergency shelters here
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden be more active in seeking strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support would staff need to take such initiative? Guide to Disability in development is available here.

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Arab Resource Collective is a regional NGO that produces development resources in Arabic, provides capacity building to community workers & facilitates networking among Arab countries.

Disability and Rehabilitation Program Team of the World Health Organization works to enhance the quality of living and equal opportunities for all persons with disabilities.

Forum for Community Change and Development (FOFCOD) in South Sudan: http://www.fofcod.org/

Handicap International http://www.handicap-international.us/south_sudan

Light for the World http://www.light-for-the-world.org/south-sudan/

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Tanzania

December 2014

The situation of persons with disabilities

According to the national disability survey in 2008, 3.2 million Tanzanians (7.8%) of the population aged 7 years and above have some form of disability and up to 5.4 million (13.2%) are affected by disability. The Tanzania mainland has slightly higher prevalence of disability (13.3%) than Zanzibar (9.3%). The prevalence is also somewhat higher in the rural areas (8.3%) than in urban areas (6.36%).

Up to 72.3% of households headed by persons with disabilities depend on income from subsistence agriculture and 14.5% depend on self- employment compared to 65.0% and 21.3% respectively for those without. Only 3.1% of persons with disabilities receive income from paid employment. A survey conducted by the Comprehensive Community Rehabilitation in Tanzania (CCBRT) in Dar es Salaam region on employment informal sectors shows that only 0.7% of employees in all surveyed companies a disability of some kind – despite a law requiring a quota of 3%.

Other major challenges facing persons with disabilities are access to transport and information, negative attitudes of others at home, school and at work, inaccessibility to public services / premises, poverty and inadequate representation. Very few children with disabilities access education. The enrolment figures for children with disabilities in primary school range from 0.1% to10% depending on the source. The CCBRT Education study (2010) estimates that the enrolment rate in mainland Tanzania for children with disabilities range between 0.1 per cent and 0.5 per cent. Most children with disabilities attend special schools.

Due to widespread belief in witchcraft people with albinism are often killed, their body parts are believed to have supernatural powers. One very illustrative example of this was the killing of 45 persons with albinism in 2009 and is still on going 2014 as reported to the UN Committee on Human Rights. In order to stop the killings police and task forces in every region and district have been established as well as education of the community.

Poor accessibility makes it difficult for persons with disabilities to participate in elections. According to a survey conducted by CCBRT in the Dar es Salaam region on participation of PWD in the 2010 elections shows that most of the respondents (70 per cent) felt that they were not sufficiently involved.

Women with disabilities are subjected to additional hardships and are more likely to be subjected to sexual abuse and violence as well as being refused access to SRHR services and income generating activities.

Legal and policy framework

The government of Tanzania has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2009) the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the optional protocol, the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against *Women* – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.

- Committing to the East African Policy on persons with Disabilities (2012) outlining joint policy commitments in line with the CRPD and country level recommendations.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Tanzania's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

The 1977 Constitution and its amendments recognise the rights of persons with disabilities and prohibit all forms of discrimination. The new Draft Constitution (to be adopted 2015) has some disability specific provisions (para 44):

A person with disabilities has the right to:

- *be respected, recognised and treated in a way which does not lower his dignity;*
- *an education through special equipment and participate in social affairs;*
- *have infrastructure and environment which allow him to go wherever he pleases, use transport facilities and get information;*
- *use sign languages, written language by the aid of special machines or other methods that are appropriate;*
- *learn with persons without disabilities; and*
- *get a job and contest leadership posts in various sectors.*

The authority of the land shall specify procedure for enabling persons with disabilities to participate in representative activities.

These provisions do not correspond to the submissions made by the disability movement which required more specific writings on social security, language, voting and political participation. They also advocate for disability rights to be a union matter.

In 2010 a Disability Act was launched in Tanzania Mainland providing for health care, social support, accessibility, rehabilitation, education and vocational training, communication, employment, work protection and promotion of the basic rights of persons with disabilities.

According to Disability Act Ministers responsible for Community Development, Social welfare, Buildings, Local Government Authorities, Labour and Employment have to ensure that they prepare and publish plans outlining the measures to be undertaken by their respective ministries in favour of persons with disabilities.

The Act also gives provision for establishment of the National Disability Council. The Commissioner for Social Welfare forms the Secretariat for the council. The council has formed committees at regional and district level. Regional and district DPOs are still to be empowered to make effective use of the committees.

In Zanzibar a Disability Act was adopted already in 2006. There is a National Council on Disability, but its role is limited. Effectively the coordination is done by the Department of Disability Affaires of the President's Office.

Tanzania has signed the Plan of Action for the African Decade of Persons with Disabilities 1999–2009, extended to 2019. The Social Welfare Department under the Ministry for Health and Social Welfare is responsible for the implementation in consultation with an appointed Secretariat. There is a National Disability Mainstreaming Strategy (2010- 2015) for the implementation of the African Decade Plan of Action which was developed in 2011. Not much has been done in this area due to budgetary constraints and lack of political pressure.

National Strategy for Growth and Poverty Reduction, 2010- 2015 (MKUKUTA II) and the Zanzibar National Growth and Poverty Reduction Strategy, 2010- 2015 (MKUZA II) have limited provisions for persons with disabilities in contrast to the preceding 2005-2010 MKUKUTA, which even had disability specific indicators.

There is a Tanzania National Strategy on Inclusive Education 2009-17 which aims at

- Education policies and programmes are informed by inclusive values and practices
- Teaching and learning respond to the diverse needs of learners
- Educational support is available for all learners
- Professional capabilities for inclusive education are widened and strengthened
- Community ownership of and participation in inclusive education are enhanced

There is also a Zanzibar Education Policy: Transition Towards Inclusive Education of 2006.

The Health Policy guarantees free access to health services to elderly, children under five, pregnant women, those living with HIV/AIDS and/or affected by cancer and tuberculosis. It is legally unclear whether this regulation includes persons with disabilities.

The actual implementation of these adopted laws, policies, strategies and frameworks remains limited and institutional checks and balances are weak. The rather active civil society, the media and the parliament have not yet been able to challenge the current system.

Implementing Agencies

Ministry of Health and Social Welfare has the main responsibility for coordination and monitoring of disability rights in Mainland, being the secretariat of the National Disability Council. In Zanzibar this responsibility rests with the President's Office, Department of Disability Affaires. In Zanzibar there is a separate Ministry of Health. Ministries of Health are responsible for medical and rehabilitation measures. According to the 2008 Disability Survey, access to health information and services is a huge challenge for persons with disabilities, in particular women in relation to sexual and reproductive health services. According to research undertaken by Rebecca Elieza, disabled mothers are two or three times more likely to suffer from poor services, looking for pre-natal and ante-natal services and at the same time face discrimination.

UNAIDS/WHO estimated the general HIV prevalence in mainland Tanzania to around 5.7 per cent in 2011 compared to 9 per cent among persons with disabilities. Despite scaled up prevention efforts HIV initiatives have rarely targeted the disability group.

Ministries of Education and Vocational Training in Mainland and Zanzibar are responsible for educational outcomes. So far a very limited number of children with disabilities have been successfully included in regular schools due to attitudinal and system obstacles, although in Zanzibar enrolment rates have been a bit higher. The general school system is overstretched by big size classes and a generally dwindling quality of education in public schools, especially in Mainland. Both government and disability organisations therefore have prioritised a focus on special schools and units, which only benefit a few. There are presently 16 special schools and 159 special units integrated into regular schools. Obviously these cannot cater for many children with disabilities.

The Ministries of Labour (Youth Development and Sports), which are responsible for labour standards, employment, youth development as well as sports development. They have not been successful in promoting and monitoring the 3% quota for persons with disabilities.

Accountability measures

The Tanzania Commission for Human Rights and Good Governance, with a mandate to oversee the implementation of the United Republic of Tanzania's National Human Rights Action Plan (NHRAP) and to

- To promote the protection and the preservation of all human rights and the duties to the society in accordance with the Constitution and the laws of the land.
- To receive allegations and complaints in the violation of human rights.
- To conduct enquiries into matters involving the violation of human rights and the contravention of the principles of administrative justice.

- To conduct research into human rights, administrative justice and good governance issues and to educate the public about such issues.
- When necessary, to institute the proceedings in court designed to terminate activities involving the violation of human rights or redress the right or rights so violated, or the contravention of the principles administrative justice.

So far the commission seems to mainly have been engaged in the violations directed to persons with Albinism.

National Disability Council which is supposed to be operational at national, regional and district levels to implement and monitor the disability law and the There is a National Disability Mainstreaming Strategy; 2010- 2015.

Main Civil Society Actors

The disability movement is well established. The Tanzania Federation of Disabled People's Organizations (SHIVYAWATA) regularly takes part in discussions with the government. Official recognition of the federation has increased over the past years and recently led to the involvement of the organisation within the Coordination and steering of the Non-State Actors support programme. It supports development of a constructive dialogue between government, partners and civil society organisations (CSOs). The Federation brings together ten member-based national disabled persons organisations:

- Tanzania Albino Society (TAS) – View site
- Tanzania League of the Blind (TLB) – View site
- Tanzania Association of the Physically Handicap (CHAWATA) -
- Tanzania Association of the Deaf (CHAVITA) – View site
- Tanzania Association of the Deaf – Blind (TASODEB) – View site
- Tanzania Association for the Mentally Handicap (TAMH) – View site
- Kilimanjaro Association of Spinal cord Injuries (KASI) – View site
- Psoriasis Association of Tanzania (PSORATA) – View site
- Tanzania Users and Survivors of Psychiatric Organization (TUSPO) – View site
- Association of Spinal Bifida And Hydrocephalous of Tanzania (ASBAHT) – View site

In Zanzibar, the cross disability Association of Disabled Persons (UWZ) has played a central role in shaping policy and legislation, and the recently established Zanzibar Centre for Disability and Inclusive Development (ZACDID) contributes to improve the lives of persons with disabilities. There is also an active parent organisation (supported by Norway), Zanzibar Association of Parents with Developmental Disabilities.

Other important national and international CSOs are:

Action on Disability and Development (ADD International), Great Britain: http://www.add.org.uk/tanzania

Christoffel Blinden Mission (CBM): http://www.cbm.org/Tanzania-265836.php

Comprehensive Community Based Rehabilitation In Tanzania (CCBRT): http://www.ccbrt.or.tz/

Disabled Organization for Legal Affairs and Social Economic Development (DOLASED): http://www.aaionline.org/Alumni/AlumProfiles.aspx?alum=GidionMandesi

Handicap International http://www.handicap-international.us/tanzania

Information Centre on Disability (ICD): http://www.policyforum-tz.org/node/5212

Norwegian Association for Persons with Developmental Disabilities (NFU) http://www.nfunorge.org/no/Om-NFU/In-English/About-NFU-in-English/Our-international-solidarity-work/

My Right http://myright.se/myright-i-varlden/tanzania/

Legal Human Rights Centre, which performs litigations and monitors violations of human rights.

What Sweden can do – 9 questions to discuss

Within the broader context of the Swedish results strategy for Tanzania, with particular focus on strengthening civil society and public sector capacity, enhancing understanding of human rights and increasing access to education, work and sustainable livelihoods, Sweden has a great opportunity to include issues related to the rights of persons with disabilities.

Questions to discuss:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights?
- Could Sweden do more to include disability organisations in social and professional networks and in capacity building efforts for human rights and civil society organisations?
- Could Sweden do more to support development of the accountability mechanisms in the area of disability (e.g. promoting inclusion of disability aspects in law reforms, support to the human rights commission and LHRC and/or capacity development of the National disability council, disability indicators etc.)? Monitoring tools can be downloaded here.
- Could Sweden be more active in seeking strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support would staff need to take such initiative? Download a Guide to Disability in development here for inspiration.
- Could Sweden do more to promote inclusion (with quality and retention) of children and youth with various disabilities in education and skills training programmes at all levels? Resources and tools can be found here.
- Could Sweden do more to ensure accessibility for women and men with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes, literacy programs and entrepreneurship programmes - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to examine the implementation of the employment legislation stipulating a quota for persons with disabilities in bigger workplaces?
- Could Sweden do more to include women with disabilities in women networks, SRHR and economic empowerment initiatives?
- Could Sweden do more to promote transparent commitments to disability inclusion in state and district budgets and propose public expenditure tracking to pro-poor and pro-disability interventions?

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Uganda

December 2014

The situation of persons with disabilities

According to the official 2002 Uganda Population and Housing Census, disability prevalence was estimated at 4 per cent. Identification and measurement of disability prevalence was then based on a narrow, medical model.

In contrast, the Uganda National Household Survey of 2009/2010 estimated disability to be at 16 per cent of Uganda's then 30.7 million population. This Survey followed a functional limitation approach rather than an impairment based model to identify disability. The variation in data presentation illustrates how the definition of disability and the method of collecting data affect survey results. This means that there are around 5 million persons with disabilities in Uganda. 12 percent were reported to have "some difficulty" in at least one of the six functional domains while three percent had "a lot of difficulty" and about one percent were unable to perform at all using at least one of the six functional domains.

The Northern Uganda Survey of 2004 (Uganda bureau of statistics) estimated that about 80 per cent of people with disabilities live in conditions of long-term poverty with limited access to education, health facilities, sustainable housing and employment. A report from Human Rights Watch in 2010 describes frequent abuse and discrimination by strangers, neighbours, and even family members against women and girls with disabilities in the north. (*As if we weren't Human, 2010).* Such abuse is reported among women with disabilities in general and women with intellectual disabilities in particular.

While improvements in attitudes and services to persons with physical and sensory disabilities have somewhat improved in the past years, persons with psycho-social disabilities (mental health problems) are still stigmatised and exposed to torture and ill treatment, both in families and in hospitals, as shown in two reports released by Mental Health Uganda in 2014. Medication and proper treatment is inaccessible to most. Other specifically vulnerable disability groups are persons with intellectual disabilities and persons with albinism.

The 5-year National Development Plan for 2010/11–2004/15 was launched in April 2010. Persons with disabilities were neither involved, nor mentioned in the initial plan. However, they were briefly consulted in connection with the first revision and during preparation of the third version they were consulted via the NGO Forum in Uganda, allowing the movement to make a coordinated contribution.. The subsequent NDP and Vision 2040 have included disability aspects. The National Development Plan has some specific targets for PWD in the area of trade, education, health and social security. Furthermore, the Gender and Equity Budgeting initiative is an effort to make different sectors focus on issues related to equity - disability being one such issue.

Despite progressive legal instruments (except in mental health) and policy documents, Uganda shows limited progress for persons with disabilities, due to a significant implementation gap, according to studies by DFID, World Bank and others. This is also confirmed by Uganda's own reports to the UN (e.g. CRC and CRPD). Moreover monitoring and evaluation mechanisms and capacity is limited in the government and civil society organisations (CSOs). As decisions and budgets are decentralised to many districts, disability organisations and accountability mechanisms struggle to develop capacity to be able to raise awareness and monitor policy implementation at this level.

The general human rights situation in Uganda is also complex. Many laws have been passed in conflict with the Constitutional provisions, for example the Public Order Management Act, the Anti-Pornography Act, the Anti -Homosexuality Act the

NGO Ammendment Bill and the HIV and Aids control bill. The first infringe on freedom of expression and association and requires that groups of three or more people receive prior police approval before gathering to discuss any government actions, failures, or policies. In order to promote and monitor human rights Uganda Human Rights Commission was established in 1996. Despite this framework democracy and human rights are far from a reality.

Legal and policy framework

The government of Uganda has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2008) the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the optional protocol, the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml. An initial State party report to the UN Committee on the Rights of Persons with Disabilities was delivered by Uganda in 2013 (due in 2010), including a range of commitments for future action. The civil society has developed an alternative Report.
- Signing and ratifying the Mine Ban Treaty (2001)
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against *Women* – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.
- Committing to the East African Policy on persons with Disabilities (2012) outlining joint policy commitments in line with the CRPD and country level recommendations.
- Adopting a National Plan of Action for the African Decade of Persons with Disabilities already in 2005, with a budget of 1.8 million Uganda shillings.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Uganda's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

The Uganda Constitution of 1995 recognises the rights of persons with disabilities and outlines these rights in quite detail. It stipulates that the State shall promote the development of sign language for the deaf, provide education for all (art 20) and include and affirmative action representation of persons with disabilities in the Parliament (article 75).

It provides for equality and prohibits discrimination against all persons and specifically includes persons with disabilities (article 21). It further stipulates that the State shall take affirmative action in favour of marginalised groups (including persons with disabilities) and shall make laws for the fulfilment of this clause, including laws to establish and Equal Opportunities Commission (article 32).Furthermore it provides for the rights of persons with disabilities to respect and human dignity. It also imposes a duty on the state to make laws appropriate for the protection of persons with disabilities (article 35).

The Persons with Disability Act entered into force in 2006 ensures legal protection and equal opportunities of persons with disabilities, stating a rights-based approach. It also provides for representation of PWD in decision-making bodies (reserved seats) in all administrative levels, including local councils. The National Policy on Disability in Uganda 2006 was adopted to ensure that implementation of the Disability Act. In 2009 the

government tried to annul the 2006 Disability Act, as certain parts have costly implications allowing considerable tax reduction: 10 per cent to companies employing more than 15 persons with disabilities. The tax was reduced to 2 per cent and persons with disabilities given an annual special grant of 30 million for each district to support the socio-economic development and employment. In March 2012, civil society launched a comprehensive Proposal to Amendments of the Persons with Disabilities Act of 2006 in order to ensure full domestication of the CRPD. The proposal was spearheaded by the Uganda National Association of the Deaf (UNAD), Legal Action for Persons with Disabilities (LAPD) and Mental Health Uganda (MHU). The proposal is pending.

Other relevant laws and policies include:

- *The Mental Treatment Act* enacted in 1938 (revised in 1964) is still applicable.
- *The National Council for Disability Act*, 2003 establishes the National Council for Disability, its key function a national coordination body through which the needs, problems, concerns of persons with disabilities can be communicated to the government and its agencies.
- *The Employment Act*, 2006 provides for the protection and equality of all persons employed in the work place including persons with disabilities.
- *The Equal Opportunities Commission Act*: The Commission was appointed in 2009 with one of its five members being a woman with a disability. The Commission, with a fully-fledged secretariat, has embarked on its work of promoting equal opportunities for marginalised groups, persons with disabilities included.
- *The Business, Technical, Vocational Education and Training Act* 12 of 2008, promotes equitable access to education and training for all disadvantaged groups, including disabled people.
- *The Local Government Act*, 1997 provides for representation of disabled people at the various Local Council levels.
- *The Parliamentary Elections Statute*, 1996: Section 37 of the Parliamentary Elections Statute provides for five seats in parliament for representatives of persons with disabilities.
- *The Traffic and Road Safety Act*, 1998, prohibits the denial of a driving permit on the basis of disability.
- *The Uganda Communications Act*, 1998 provides for the promotion of research into the development and use of new communications techniques and technologies, including those which promote accessibility of hearing-impaired people to communication services.
- *The Uganda National Institute of Special Education Act*, 1998 provides for the establishment of the Kyambogo National Institute of Special Education, training of teachers for children with special needs as well as special education teachers.
- *The Workers' Compensation Act*, 2000, provides compensation to workers who are injured or disabled through industrial accidents.
- *The Equal Opportunity Act*, 2006 and the Employment Act 6 of 2006 both prohibit discrimination of persons in employment based on disability.
- *The Universities and Other Tertiary Institutions Act,* as amended, provides for affirmative action during admission of persons with disabilities to public tertiary institutions.
- *The Uganda National Policy on Disability* 2006, which provides the basis for national interventions and programmes in favour of persons with disabilities in all government departments and activities. The priority areas of focus are accessibility, participation, capacity building, awareness raising, prevention and management of disabilities, care and support, socio- economic security, research, communication (sign language, tactile and Braille literacy) and budgeting.

Implementing Agencies

Disability is the overall responsibility of the *Department of Disability and Elderly under the Ministry of Gender, Labour and Social Development*. The different sector ministries are responsible for mainstreaming of disability in their respective activities.

In order to promote, protect and monitor the rights of PWD a *National Council for Disability* was established in 2003. It holds wide-ranging power, but is reported to function ineffectively. For a long time it has concentrated on establishment of Disability Councils at district level, which means that today about one third of the districts has a council.

The Ministry of Education is responsible for education of children with disabilities as stipulated in the Disability Act. Currently, the Government uses a twin track approach to provision of education for people with disabilities that is promoting both inclusive education and special needs education. The draft Special Needs and Inclusive Education Policy (2011) provides for a number of approaches for delivering special needs education. These include home based care programs, special schools where children with severe and often multiple impairments receive specialised support in methodology, instructional materials and assistive devices. Others include Units/Annexes where children are integrated within regular schools but targeting learners with particular disabilities and inclusive schools where children with special needs including but not limited to children with disabilities study with other children. According to Ministry of Education and Sports official records, all the 21,000 schools in Uganda practice Inclusive Education by admitting learners with special education needs. In addition, there are 138 special education units in the country (49 for those with Hearing Impairments, 38 for those with Intellectual impairments, 8 for those with physical impairments and 43 for learners with visual impairments). In addition, the government has constructed four regional special needs education schools: one in Gulu for children with physical disabilities, Mukono for children with visual impairments and two secondary schools for the Deaf in Wakiso and Mbale Districts respectively.

Despite these efforts, very few children with disabilities access education and huge problems remain, including inappropriate teaching materials, unqualified teachers, stigma and discrimination in families and communities and lack of support to girls with disabilities to manage their personal hygiene. Although 40 000 children with disabilities are starting their first year in primary school every year, only 12 000 complete their primary education. Around 3 000 of them continue to secondary education and 800 complete these studies (Uganda Bureau of Statistics, 2010 figures). In October 2014, students in one of the schools for the deaf publicly protested against the appalling situation in their school.

The Uganda's National Development Plan (NDP), 2010/11-2014/15 indicates that 10% of school-going age children in Uganda have special needs thus requiring Special Needs Education (around 1.3 million children). However, the UNICEF (2012) Annual Report indicated that that only 5% of the children with disabilities are able to access education within an inclusive setting of the regular schools whereas 10% access education through special schools and annexes. This means a total of 15% of children with disabilities are attending school, which is confirmed by the Uganda bureau of statistics showing that a total of 218 000 children with special needs were enrolled in 2010. As mentioned above very few of these complete their studies.

The Disability Act of 2006 states that persons with disabilities shall enjoy the same rights as other members of the public. Government shall promote special health services required by persons with disabilities. *The Ministry of Health* has included management of disability as an essential part of the National Minimum Health Care Package. The disability management policies set out minimum levels for staffing services, equipment and supplies, management and support to enable districts to develop strategic plans. The policies are intended to streamline, strengthen and extend medical rehabilitation services to all districts in line with the National Health Policy of 2009. Still access to health services is limited for persons with disabilities, due to poverty, lack of accessible information and negative attitudes of health staff.

A *National Community Based Rehabilitation (CBR) program* was implemented in cooperation with Norwegian donors some ten years ago. It is still operational in some districts, where it has been taken over by the local authorities. The programme focuses on awareness, capacity building, livelihoods, access to basic services and inclusion in local development programmes. Currently it is being implemented in the districts of Mbarara, Bushenyi, Mbale, Kabale, Mukono, Iganga, Kamuli, Ntungamo, Rukungiri, Butaleja, Busia and Kayunga.

The National Landmine Victim's Assistance programme was launched in 2008 to raise awareness of Uganda's obligation as a state party to the Mine Ban Treaty and the CRPD. The plan provides for the establishment of a framework for rapid response to support landmine survivors and other persons with disabilities and older who are in emergency and conflict situations to enable them participate and re-integrate into the development process and raise awareness on Uganda's obligations.

The Income Tax Act and amendment from 2009 is giving a 2 per cent tax reduction for any company proving that at least 5 per cent of their full time staff are persons with disabilities. According to the commissioner of domestic taxes, no company has so far applied for the tax reduction, mainly because they are unaware of the possibility.

Accountability mechanisms

The National Human Rights Commission has the mandate to address all human rights violations including those relating to persons with disabilities. According to the Uganda Human Right Commission Act, the Commission has adjudicatory powers to investigate on its own initiative or by complaint made to it any alleged human rights violation. In October 2004, the Commission established the Vulnerable Persons Unit to address issues raised by vulnerable groups including people with disabilities. The Unit amongst its functions, monitors government compliance with its human right obligations to vulnerable persons. It was unclear whether the Commission has handled any cases relating to violations against persons with disabilities. However, the issues raised by people with disabilities for the attention of the Commission are centred on education, transport, employment and accessibility to basic services.

The Equal Opportunities Commission has the mandate to investigate and inquire into matters on its own initiative or by a complaint made to it by persons belonging to marginalised groups including persons with disabilities where discrimination in relation to opportunities has occurred.

The Inspectorate of Government does not specifically handle matters relating to persons with disabilities. Its primary functions involve the promotion of natural justice, fairness, efficiency and good governance in the administration of public offices. The Inspectorate could potentially be used by persons with disabilities.

The National Council for Disability is mandated to monitor and evaluate Government and non-Governmental organisations to ensure that policies and programs designed are offering quality service and promoting full participation of persons with disabilities. Research studies are commissioned to get deeper insights of the situation at hand. The Council produced a report on the access to education for woment with disabilities in Uganda to the 58th session of the CEDAW committee, 2014.

Main Civil Society Actors

The disability movement is one of the most vibrant in Africa, and has played a key role in the promotion of disability rights on the continent. The structure of the movement is rather complex though. The *National Union of Disabled Persons of Uganda (NUDIPU)* is an umbrella organisation representing the interests of all persons with disabilities. In 2014 it had presence in 112 districts and nine member organisations:

- *Uganda National Association of the Blind (UNAB),*
- *Uganda National Association of the Deaf (UNAD),*
- *Uganda National Action on Physical Disability (UNAPD),*
- *National Association of Deaf-blind persons in Uganda (NADBU), Epilepsy Support*
- *Association Uganda (ESAU),*
- *Mental Health Uganda (MHU),*

- *Uganda Albino Association (UAA),*
- *Little People of Uganda,* and
- *Uganda Parents of Persons with Intellectual Disabilities (UPPID).*

NUDIPU remains the most preferred channel through which government chooses to address disability issues. The organisation has struggled to find its role as a cross disability organisation for individuals in districts and as an umbrella of the various disability organisations. The politicisation of the organisation has also been an issue.

National Union of Women with Disabilities of Uganda (NUWODU) represents the interests of women with disabilities, but is not a member of NUDIPU. Other significant DPOs are *Uganda Parents of Children with Learning Disability UPACLED)* and *Spinal Injury Association (SIA).*

Several disabled people's organisations from Nordic countries, including the umbrella organisation *Atlas Alliance* of Norway and *Disables People's Organisations* of Denmark have provided substantial support to development of the disability movement in Uganda. Since 2012, the disability organisations have also been supported by *The Disability Rights Fund* (DRF), which is a collaboration between donors (UKAID, Open Society and philanthropists) and the disability community to advance the new UN Convention on the Rights of Persons with Disabilities (CRPD).

Other disability specific organisations working in Uganda are *Handicap International, Christoffel Blindenmission (CBM), Action on Disability and Development (ADD International)* and *Leonard Cheshire International.*

What Sweden can do – 8 questions to discuss

Within the broader context of the Swedish results strategy for Uganda, with particular focus on strengthening of civil society capacity, rule of law and access to justice, economic empowerment of women and youth, access to social security, basic health and SRHR services and combatting of gender based violence - Sweden has a great opportunity to include issues related to the rights of persons with disabilities. Questions to discuss:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights and follow up on the UN comments to the county's CRPD report?
- Could Sweden do more to include disability organisations in social and professional events and networks and in capacity building programmes for civil society/human rights organisations?
- Could Sweden do more to support development of accountability mechanisms in the area of disability (e.g. reform of laws, access to legal aid, capacitating of HR institutions, systematising of monitoring methods)? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure accessibility to services in the basic health system for men, women, girls and boys with various disabilities, including mental health?
- Could Sweden do more to promote inclusion of persons with disabilities and their families in the supported social security systems and initiatives? Especially in the development of social protection and safety nets for children?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to include women with disabilities in women networks, economic empowerment and in SRHR/GBV initiatives?
- Could Sweden do more to build strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support would staff need to take such initiative? Download a Guide to Disability in development for inspiration here.

Links to Disability organisations

Action on Disability and Development (ADD International): http://www.add.org.uk/uganda and http://www.add.org.uk/our-partners-uganda

Atlas Alliance: http://www.atlas-alliansen.no/English

Christoffel Blindenmission (CBM): http://www.cbm.org/Uganda-253091.php

Disabled Peoples Organisations – Denmark (DPOD): http://www.disability.dk/partner-countries/uganda

Disability Rights Fund (DRF) http://www.disabilityrightsfund.org/node/1495

Epilepsy Support Association Uganda (ESAU): http://www.epilepsy.org.ug/

Handicap International: http://www.handicap-international.org.uk/where_we_work/africa/uganda

Leonard Cheshire International: http://www.leonardcheshire.org/international/where-we-work/east-and-north-africa#.VLGtnRA5Cjs

Little People of Uganda https://www.facebook.com/littlepeopleinuganda

Mental Health Uganda (MHU)

Mental Disability Advocacy Centre http://www.mdac.info/en/en/uganda

National Association of Deaf-blind persons in Uganda (NADPU)

National Union of Disabled Persons of Uganda (NUDIPU): http://nudipu.org/

National Union of Women with Disabilities of Uganda (NUWODU)

NGO Forum in Uganda: http://www.ngoforum.or.ug/

Spinal Injury Association (SIA)

Uganda Albino Association (UAA)

Uganda National Action on Physical Disability (UNAPD): http://www.unapd.org/

Uganda National Association of the Blind (UNAB)

Uganda National Association of the Deaf (UNAD): http://www.unadeaf.org/ and https://www.facebook.com/unadug

Uganda Parents of Children with Learning Disability (UPACLED) http://www.upacled.org/

Uganda Parents of Persons with Intellectual Disabilities (UPPID)

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Freedom House country report: https://freedomhouse.org/report/freedom-world/2014/uganda#.VLKdLRA5Cjs

Human Rights Watch report (2010): http://www.hrw.org/reports/2010/08/24/if-we-weren-t-human

National Development Plan for Uganda: http://npa.ug/

The Northern Uganda Survey of 2004, Uganda Burea of Statistics

Uganda Human rights commission: http://www.uhrc.ug/

Sida's tools on disability: Disability as a human rights issue – conducting dialogue: http://www.sida.se/English/publications/Publication_database/publications-by-year1/2012/june/disability-as-a-human-rights-issue-conducting-a-dialogue/

DRPI East Africa Report: http://drpi.research.yorku.ca/Africa/resources/EACDisabilityPolicy/Page2/Part4

Situational Analysis on the Rights of Children with Disabilities in Uganda - UNICEF Uganda: http://capacity4dev.ec.europa.eu/disability-and-development-network/document/situational-analysis-rights-children-disabilities-uganda-unicef-uganda

African Disability Rights Yearbook, 2014; http://www.adry.up.ac.za/images/adry/volume2_2014/adry_2014_2_uganda.pdf

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Zambia

December 2014

The situation of persons with disabilities

According to the Zambia 2000 Population and Housing Census, which collected data on disability, 2.7 per cent of the population is living with a disability. The same Census says that more than 80 per cent are engaged in agriculture, making it by far the most common occupation. The census in 2010 did not collect data on disability.

In a study of 2006, made by the Norwegian SINTEF of living conditions of persons with disabilities (PWD), it was reported that the prevalence is much higher. It varied by province from 7.3 per cent in Luapula to 22.2 per cent in Western province, with an average national prevalence rate of 13.3 per cent, which sounds more realistic given the statistics worldwide. The World Bank report on disability 2011 estimates a disability prevalence of 9 per cent among the working age population (18-64 years) with substantially more women than men having a disability and more rural than urban population. The report also establishes that persons with disabilities have lower education and are significantly poorer than non-disabled. Extreme poverty (under USD 2 per day is more than twice as common among persons with disabilities. Persons with disabilities are more often self-employed, than non-disabled persons, but many remain dependent on family members.

An ILO study (2010) revealed that economic losses related to the exclusion of persons with disabilities from productive work are large and measurable ranging from between 3 and 7 per cent of GDP.

Legal and policy framework

The government of Zambia has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2010) the United Nations Convention on the Rights of Persons with Disabilities (CRPD), the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml. Zambia's initial report was due in 2012, but has not yet been submitted (2014). The UN Committee against Torture reviewed Zambia in 2008 but did not mention psychiatric facilities when addressing torture in places of detention, missing an opportunity to comment on the ill-treatment of people within Zambia's formal and informal mental health systems.
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against Women – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.
- Signing but not yet ratifying the optional protocols to the UN treaties on disability, and on women, which would allow for cases to be taken to the UN treaty monitoring bodies in Geneva once domestic remedies have been exhausted.
- Signing the Optional Protocol to the Convention against Torture (in 2010), but not yet ratifying it. Upon ratification the government must establish a body independent from government to inspect all places of detention including mental health facilities.
- Committing to the East African Policy on persons with Disabilities (2012) outlining joint policy commitments in line with the CRPD and country level recommendations.

The African Commission on Human and Peoples' Rights has drafted a Protocol on the Rights of Persons with Disabilities. It was released for comment in April 2014 and once finalised, is likely to become part of Zambia's policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

Since 2011, there has been a process of revising the Constitution (of 1996). A final draft was released in October 2014 but is still not adopted – and reports indicate that it may still be debated. The final draft has some positive provisions for persons with disabilities. The draft Constitution specifies that: A person with disability is entitled to the right to

a) education and facilities that integrate the person into society;

b) access to the physical environment, information, communications, public facilities and services, places and transportation;

c) access materials, facilities and assistive devices for persons with disability;
d) use sign language, Braille or other appropriate means of communication;
e) be addressed or referred to in an enactment or officially, publicly or privately, in a manner that is not demeaning, derogatory or discriminatory;
f) equal opportunities in the public service and cultural, political, economic and social activities;
g) tax free materials and assistive devices;
h) personal development and independent living;
i) social protection, as prescribed.

The Zambian legal system is based on the old English common law traditions and recognises customary laws that comply with the values of the Constitution. Several laws have been under revision since the September 2011 general election. Apart from the Constitution, this includes the Mental Disorders Act 1951. The Persons with Disabilities Act (PWDA) was passed in September 2012 and meets many of Zambia's obligations under the UN Convention on the Rights of Persons with Disabilities (CRPD). There is already a process of amending the Disability Act (2014).

A National Policy on Disability has been completed, approved by cabinet (2013) and is currently awaiting its launch. It is not yet public. The Ministry of Community Development Mother and Child Health is in the process of formulating a National Disability Implementation Plan of the Persons with Disabilities Act in which it is looking forward to the input of the Disabled People's Organizations.

A Mental Health Bill is yet to be finalised (2014). The draft Bill's preamble provides for respect, autonomy, non-discrimination and the right to self-determination for people with mental health issues. It sets out a community-based approach to mental health provision, establishes rights and responsibilities of patients, ensures that mental health services are available in prisons and establishes a National Mental Health Commission and a Mental Health Tribunal.

The sixth National Development Plan 2011–15 (SNDP) was launched in February 2011. It focuses on poverty reduction and improvements in the health and education sector. At the same time the national Aids Strategic Framework (NASF), the National Aids Commission Strategic plan (NACSP) and the National Health Strategic plan (NHSP) were adopted. These plans specifically mention persons with disabilities as an important target group and indicate that the government will increase its support through increased budgets, mainstreaming of policies and establishment/strengthening of effective institutions and systems.

Despite having all these legal and policy provisions, staring with legislation from 1969, the welfare of persons with disabilities has continued to deteriorate. Awareness of these pieces of legislation by persons with disabilities and the general public has been very minimal. Ignorance of the contents of the Acts has rendered persons with disabilities unable to demand their rights enshrined in the legal documents.

Implementing Agencies

The Ministry of Communication Development and Child Health (MCDMCH) is entrusted with formulating policy for persons with disabilities. *The Zambia Agency for Persons with Disabilities* (ZAPD), established by the 1996 disability law, has the responsibility to coordinate and implement the National Policy on Disability and act as an advisory body to the Ministry. The core functions of the Agency are to plan, promote, habilitate and rehabilitate, coordinate and administer services to all categories of persons with disabilities. The Agency also monitors and evaluates the provision of services to persons with disabilities. Its effectiveness is however questioned by the disability movement.

In 2013, the government established a *National Trust Fund for Persons with Disabilities* (NTFPD), with the aim of providing credits to persons with disabilities as they were excluded from most mainstream credits.

The *Ministry of Education, Science, Vocational Training and Early Education* (MESVTEE) has the responsibility for developing science and technology and for the provision of technical education and vocational training.

The government has worked since the mid 1980's to promote Education for All, including children with disabilities. Through various programs, schools have been constructed, teachers trained and methods and curricula developed. Support has been provided from the World Bank, multilateral and bilateral donors (but not Sweden). A comprehensive evaluation of the 25 years of efforts was published in January 2012 Basic Education for Children with Special Needs in Zambia: Progress and Challenges in the Translation of Policy into Practice. It tells a story of competing priorities, disagreements on methods and slow progress. Despite these challenges, estimates by the disability movement say that 40 per cent of children with disabilities manage to finish primary education. Around 40 per cent still do not attend school. Compared to other African countries (where the number of children with disabilities in primary education rarely reaches beyond 2–5 per cent) this is a good result. However, it does not match the heavy investment.

The *Technical Education, Vocational and Entrepreneurship Training Authority* (TEVETA) has the responsibility to improve technical education and vocational training, while linking them to the requirements of the employment sector.

The *Ministry of Health* is responsible for ensuring accessible, adequate health services to all citizens. Despite this, accessibility to basic health services is limited for persons with disabilities, due to attitudes, distances and costs. Specialised services for persons with disabilities are rare. The government regards disability as a non-life threatening condition and therefore it is not among the National Health priorities categorised under public health priorities and health system priorities. In the national health strategy disability is only mentioned in terms of prevention (of fistula and leprosy). However, improvement in mental health services is one of the national priorities.

Accountability mechanisms

Human Rights Commission of Zambia (HRC) has a mandate to investigate human rights violations, investigate maladministration of justice, propose effective measures to prevent human rights abuses, visit places of detention to ensure that treatment is in accordance with human rights standards, undertake research, education, information to enhance respect for and protection of human rights and facilitate rehabilitation of victims of abuse. The effectiveness of the Commission is not evident and no reports are found on engagement in disability rights.

Zambia Agency for Persons with Disabilities (ZAPD) has a mandate to monitor and evaluate the implementation of legal and policy provisions for persons with disabilities and for coordinating and overseeing implementation. At the same time it has implementation responsibilities of certain social security programmes.

Main civil society actors

Zambia has a large number of international, national and local civil society organisations (CSOs), of which several address the needs and/or rights of persons with disabilities. Some are providers of services, applying a charity approach, some are advocacy

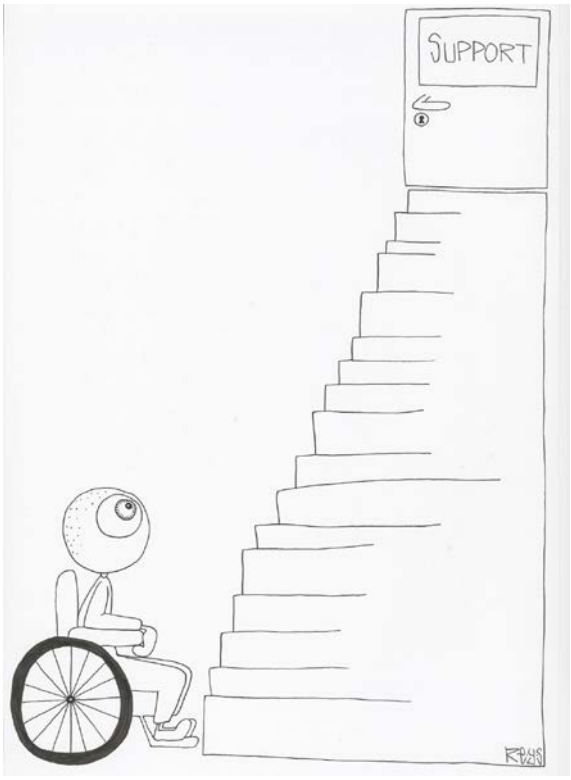
organisations controlled by persons with disabilities themselves. Many organisations have been established with the purpose to represent different groups of persons with disabilities nationally and locally. Most of them are dependent on foreign funding, at times even competing for donors.

The disability movement appears to a certain extent fragmented and uncoordinated. There has been some involvement on issues like the poverty reduction strategy and review of the national constitution – mainly through the umbrella Zambian Federation of Disability organisations (ZAFOD), and the professional advocacy organisation Disability Initiative Foundation (DIF) supported by UNDP. ZAFOD, officially registered in 1990, has 11 member organisations and is recognised as the mouthpiece of the disability movement. ZAFOD was running a court case against the Election Committee of Zambia in 2011. This was in order to point to that the majority of persons with disabilities were excluded from casting their ballot, due to inaccessible voting places and voting methods. ZAFOD is also part of the African Decade COPDAM project, aiming at mainstreaming disability and inclusive development as a crosscutting issue in national and regional policies in African society. The Zambian Association of the Deaf has some prominent leaders, who have become international advocates.

The members of ZAFOD are:

- Affiliated to the organisation Zambia National Association of the Deaf (ZNAD)
- Zambia National Association of the Partially Sighted (ZNAPS)
- Zambia Association for Children & Adults with Learning Disabilities (ZACALD)
- Zambia National Association of Disabled Women (ZNADWO)
- Zambia National Association of the Physically Disabled People (ZNAPD)
- Zambia National Association of the Hearing Impaired (ZNAHI)
- New Foundation of the Blind in Zambia (NEFOBZA)
- Parents Partnership Association for Children with Special Needs (PPACSN)
- Zambia Association on Employment for Persons with Disabilities (ZAEPD)
- Zambia Association of Parents for Children with Disabilities (ZAPCD)
- Zambia National Association of Sign Language Interpreters (ZNASLI)

Among others, ZAFOD is supported by the Finnish Embassy, Norwegian CSOs (Opportunity Zambia), UNICEF (for the Cash Transfers and Disability Research and Advocacy Project), the EU among others.



What Sweden can do – 9 questions to discuss

Within the broader context of support to democracy, human rights, health, economic empowerment and gender equality in Zambia, Sweden has a great opportunity to include issues related to the rights of persons with disabilities. Questions to discuss include:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights?
- Could Sweden do more to include disability organisations in social and professional events and networks?
- Could Sweden do more to include disability organisations in capacity building programmes/funding modalities for civil society/human rights organisations? Especially addressing issues of fragmentation and district level advocacy and monitoring capacities?
- Could Sweden do more to support development of accountability mechanisms in the area of disability (e.g. law reforms, access to legal aid, capacitating of HR institutions such as the Agency for Persons with Disabilities and the Human Rights Commission, reporting on the CRPD, promoting the UN "Handbook for Parliamentarians")? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure accessibility to services in the basic health system for men, women, girls and boys with various disabilities, including mental health (e.g. indicators and monitoring mechanisms that help in determining to what extent interventions and services reach men, women, girls and boys with disabilities and targeted support to develop capacity of health staff and decision makers) and linking it to CSO initiated community based inclusive development programmes?
- Could Sweden do more to include women with disabilities (e.g. via Zambia National Association of Disabled Women) in women networks, economic empowerment and in SRHR/GBV initiatives?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to seek strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support would staff need to take such initiative?
- Could Sweden do more to promote and support inclusion of disability aspects and indicators in the overall development agenda? Especially in promoting inclusion (with quality and retention) of children and youth with various disabilities in education and skills training programmes at all levels? Download a Guide to Disability in development here.

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The human rights of persons with disabilities are a Swedish government priority since 2009. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Zimbabwe

December 2014

The situation of persons with disabilities

Eleven per cent of working-age individuals in Zimbabwe have a disability. [1] Rates are higher in rural (12.9%) than urban (7.5%) areas. Disability prevalence for women is higher than that of men (12.9% versus 9%). Households and individuals with disabilities have lower levels of economic wellbeing and lower Per Capita Consumption Expenditure. Individuals with disabilities have lower rates of primary school completion and fewer mean years of education completed. Some surveys show that 34 per cent of girls with disability and 22 per cent of boys never attend school, compared with 12 and 8 per cent of non-disabled. Other surveys show that as much as 67 per cent of children with disabilities never access education, which is probably more accurate (UNICEF, Leonard Cheshire). Children with hearing, visual and intellectual impairments are significant more likely never to attend school compared to children with physical impairments. Households with disabilities have lower asset ownership scores and less access to high quality living conditions. Persons with disabilities in Zimbabwe are more likely to experience poverty and discrimination due to social and cultural norms, as well as problems with accessing health, education and employment.

Women with disabilities are more at risk of gender-based violence than non-disabled women. [2] Studies show that up to 87 per cent of women with disabilities are victims of sexual violence and as many as 29 per cent may have HIV/AIDS. Women with disabilities face alarming rates of illiteracy, economic dependency, and social exclusion. Domestic violence against women continues to be a serious problem crossing all racial, ethnic, and economic lines. A 2004 report by Save the Children Norway found that 87.4 per cent of girls with disabilities had been sexually abused. Approximately 48 per cent of them had an intellectual disability, 15.7 per cent had hearing impairments and 25.3 per cent had visible physical disabilities. 52.4 per cent tested positive for HIV. Professionals in health and education, employers and disabled people themselves remain largely unaware of the rights of persons with disabilities. The focus of donor and government funding of other urgent matters combined with Zimbabwe's fast declining national economy has meant that disabled people and their organisations have been left with little support. [3]

Zimbabwe was once a model country for disability rights in Africa with a high level disability advisor to the president and progressive legislation and policies. It was one of the first countries to adopt a disability legislation in 1992. Despite this law, the establishment of the National Disability Board and the appointment of a Presidential Advisor on disability issues, there has been no formal policies and implementation strategies in place to ensure the Act's enforcement (Choruma, 2007). Zimbabwe has a Disabled Persons' Act from 1992, but it is out-dated and most of the provisions have not been implemented. The Government of National Unity did not maintain earlier commitments in state support (monthly allowances) for persons with disabilities, and there is no disability policy. There are however, provisions in the new Constitution that address the rights of persons with disabilities. [4] In September 2013, Zimbabwe ratified the Convention on the Rights of Persons with Disabilities. These recent policy level developments could provide a basis for increased attention to the discrimination, abuses and poverty that affect women and men with disabilities.

[1] World Bank case studies, Mitra et al 2011

[2] Thematic study on the issue of violence against women and girls and disability, Office of the United Nations High Commissioner for Human Rights (March 2012)

[3] The Forgotten Tribe, People with Disabilites in Zimbabwe,Tsitsi Choruma, 2006

[4] COPAC Final Draft Constitution for referendum, February 2013

There are no legal provisions mandating persons with disabilities to participate in policy making or to work with governmental institutions, but disabled people's organisations (DPOs) have sometimes been consulted, when laws and regulations with a disability aspect are being prepared. DPOs were actively involved in the constitution-making process.

Legal and policy framework

The government of Zimbabwe has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in September 2013) the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the optional protocol, the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. Read more at www.un.org/disabilities/convention/conventionfull.shtml.
- Submitting a report on the Human Rights of persons with Disabilities (in October 2011), describing some progress in accessibility and the roles and responsibilities of the National Disability Board – in response to resolution 16/15
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child, the African Charter on Human and People's Rights, the Convention on the Elimination of All Forms of Discrimination against Women, and the Beijing Platform for Action – all of which make some reference to protecting the rights of persons with disabilities to fair treatment, appropriate care, inclusion and full participation in society.

A working group of the African Commission on Human and Peoples' Rights has drafted a "Protocol to the African Charter on Human and Peoples' Rights on the Rights of Persons with Disabilities in Africa ". It was released for comment in April 2014 and once finalised (expected in 2015), is likely to become part of the African policy framework for advancing disability rights. Other important upcoming tools in 2014 are the CRPD Toolkit for Africa and the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:
The new Constitution has several provisions that aim at ensuring the rights of persons with disabilities, for example[5]:

- Discrimination against any person with any form of disability is now unconstitutional. The new constitution recognises the inherent dignity and worth of each human being, equality of all human beings, gender equality and the rights of persons with disabilities. At the same time, the Constitution allows for discrimination, primarily against women, on the grounds of "customary law."
- Section 22, which says the state shall consider the specific requirements of persons with all forms of disability as one of the priorities in development plans
- Section 83, which contains a dedicated section on the rights of persons with disabilities. Under the section, the state has an obligation to take appropriate measures, *within the limit of resources available*, to enable persons with disabilities to become self-reliant, to live with their families and participate in social or recreational activities, to protect them from all forms of exploitation and abuse, to give them access to medical, psychological or functional treatment, to provide special facilities for their education and to provide state- funded education and training.
- The new constitution includes sign language as one of the official languages of Zimbabwe and stipulates that the state must take appropriate measures to ensure that buildings and

[5] Disability in Zimbabwe under the New Constitution: Demands and Gains of People with Disabilities, Jacob Mugumbate & Chamunogwa Nyoni, September 2013

amenities to which the public has access are accessible to persons with disabilities

- Section 155 on elections states that the state is now under a constitutional obligation to ensure that every citizen who is eligible to vote in an election or referendum has an opportunity to do so and the state must facilitate voting by persons with disabilities. Political representation of persons with disabilities has been clarified and concretised by the constitution which provides that the parliamentary senate shall consist of two representatives for persons with disabilities.

The Centre for Applied Legal Research (CALR) is currently (2014) providing technical legal research and advisory support for the reform of laws affecting persons with disabilities in Zimbabwe – to ensure that they are in line with the new Constitutional provisions. This initiative is being led by National Association of Non-Governmental Organisations (NANGO) and the National Council of Disabled Persons of Zimbabwe (NCDPZ) with financial support from United Nations Development Programme (UNDP).

Still it is the old "Disabled Persons' Act" from 1992 that is in force. DPOs and researchers point at the following policy priority areas for the future:

- Monitoring and evaluation mechanism must be put in place by the government to ensure that the constitutional provisions are actually implemented
- All sections of the constitution dealing with disability must use the all-embracing definition of disability
- Representatives of persons with disabilities in the senate or councils must be people living with disabilities
- It must be mandatory for each government department to have a disability policy
- Funding for disability research and innovation by the Research Council of Zimbabwe, universities and other research institutes.

Implementing agencies

The Ministry of Labour and Social Welfare is responsible for the rights and needs of people with disabilities, but has no budget at all for addressing the needs of the group. Together with the Ministry of Health and Child Welfare, the ministries are responsible for the provision of assistive devices to citizens with disabilities. Both Ministries fail to deliver according to their responsibilities. The Ministry of Youth Development, Gender, and Employment has not yet included women and girls with disabilities in its programs.

Health, medical care and independent living are guaranteed by law to persons with disabilities. The Disabled Persons' Act mandates a National Disability Board with responsibility to develop measures and policies on the rights and welfare of persons with disabilities; maintain a register of persons with disabilities and disability-related organisations; and advise government and non-governmental organisations on the welfare and rehabilitation of persons with disabilities.

The Ministry of Education, Culture and Sports is responsible for ensuring that all children can access free primary education. While every child in Zimbabwe is supposed to have the right to primary education some school (according to the Education Act and the new Constitution) requirements render it unavailable to a number of children, e.g. school fees that are imposed despite of the free education policy, costs of learning materials, inaccessible premises, teaching practices that are not child centred, inflexible curricula requirements etc. As well, there is no legislation that compels parents or the state to ensure that children are send to school. Zimbabwe opted for inclusive education when it accepted the provisions of The Convention of the Rights of the Child (1991) and the Convention on the Rights of Persons with Disabilities (2013). However, there is still no concrete plan of action or policy on inclusive education and segregated special schools are still the main option for children with disabilities. Very few teachers in ordinary schools have the necessary skills and preconditions to be able to constructively include pupils with special educational needs. Some disability organisations have therefore started to promote

segregated special, education as a better option. UNICEF and Leonard Cheshire International are the most active supporters of the government's efforts in the area of inclusive education. According to UNICEF there are 600 000 school age children with disabilities in Zimbabwe, most of them without access to education. This figure is probably an underestimate.

There are few donors in Zimbabwe that bring in disability aspects in their programmes, especially in the area of economic empowerment.

Accountability measures

The ***National Disability Board (NDB)*** falls under the Department of Social Welfare in the Ministry of Public Service, Labour and Social Welfare. According to the Disabled Persons' Act the Board should be serviced by a fully-fledged Secretariat, headed by a Director of Disability Affairs. However, since its inception, the Board has been manned by officers from the Department of Social Welfare who double up disability issues with their other responsibilities much to the detriment and neglect of disability issues. The National Disability Board has the following functions:

- Formulate and develop measures and policies designed to achieve equal opportunities for people with disabilities by ensuring that they obtain education and employment, participate in other academic activities and are afforded full access to community social services;
- Prevent discrimination against people with disabilities by encouraging and putting into operation schemes and projects for employment or income generating projects for disabled people who are unable to secure employment elsewhere; and
- Issue adjustment orders in a bid to attain accessibility to buildings, information and services.

There is a newly formed ***Zimbabwe Human Rights Commission (ZHRC***) which is established as an independent Commission under the new Constitution. The full operationalisation of the Commission has been pending for five years, but it finally started to operate in 2014. The capacity development of the commission is supported especially by Denmark and Norway. Linkages are being established with the South African Human Rights Commission and other commissions in the region. The South African Human Rights Commission has a special disability desk that deals with discrimination on grounds of disability.

There is a ***National Disability Advisor*** appointed by the President. His role and mandate in relation to the above mentioned accountability mechanisms are not sufficiently clarified. Some stakeholders report that there has been a disproportionate attention to persons with disabilities who are war veterans.

Main civil society actors

There is one national umbrella of disabled people's organisations, Federation of Disabled Persons of Zimbabwe (FODPZ), represented in the National Disability Board (NDB). The role of FODPZ is to advocate rights and improved services, mobilise persons with disabilities, provide services and promote and organise income-generating activities. The work of FODPZ, as well as its members, suffers from lack of financial and human resources although Nordic CSOs have been persistent supporters of some member organisations. The members of the Federation are:

- Association of the Deaf (ASSOD)
- Disabled Women Support Organization
- Epilepsy Foundation
- Muscular Dystrophy Association of Zimbabwe (MDAZ)
- National Council of Disabled People of Zimbabwe (NCDPZ)
- Quadriplegic Association of Zimbabwe (QUAPAZ)
- Zimbabwe Albino Association
- Zimbabwe Association of the Visually Handicapped (ZAVH)
- Zimbabwe Down's Syndrome Association (ZDSA)
- Zimbabwe National Association of the Deaf (ZIMNAD)
- Zimbabwe Parents of Handicapped Children Association (ZPHCA)
- Zimbabwe Sports of the Disabled Association (ZSAD)
- Zimbabwe Women with Disability in Development (ZWIDE)

Another national umbrella is the National Association of Societies for the Care of the Handicapped (NASCOH). NASCOH gathers both service providers and organisations of and for persons with disabilities, comprising 53 member organisations throughout the country. There is also the National Council of Disabled People of Zimbabwe (NCDPZ), a Bulawayo based competing umbrella organisation.

Southern Africa Federation Of the Disabled (SAFOD) is a regional network providing strategic leadership for the advancement of disability rights in 10 countries - Angola, Botswana, Lesotho, Malawi, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe with headquarters in Bulawayo, Zimbabwe.

The most visible donors in the disability field have been UNICEF, UNDP, DfID, OXFAM, Save the Children and Leonard Cheshire.

What Sweden could do – 8 questions to discuss

In line with the Swedish engagement for democracy, human rights and economic development in Zimbabwe, there is great opportunity to include persons with disabilities. Questions to discuss:

- Could Sweden do more to make supported UN programmes (and other joint donor arrangements) more inclusive of persons with disabilities? E.g. are programmes focussing on basic social services, education, water and sanitation, economic empowerment, SRHR, elections, culture etc. designed to be accessible to persons with disabilities? Are there explicit measures taken to include this group? Are there disaggregated monitoring indicators? Download a Guide to Disability in development here.
- Could Sweden do more to make civil society capacity development programmes inclusive of disabled people's organisations, e.g. FODPZ's and its members?
- Could Sweden do more to include these organisations in its professional and social networks?
- Could Sweden do more to support the accountability mechanisms (the National Disability Board and the Human Rights Commission) to develop their capacity to address the rights of persons with disabilities (in collaboration with disabled people's organisations)? Monitoring tools can be downloaded here.
- Could Sweden do more to include women with disabilities in programmes aiming at women empowerment and combatting of gender based violence?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Examples of tools can be found here.
- Could Sweden do more to encourage and support research on disability relevant topics?
- Could Sweden do more to seek strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support would staff need to take such initiative?
- Could Sweden do more to keep updated on disability rights in Zimbabwe and to raise awareness of staff?

REFERENCES AND LINKS

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National Association of Societies for the Care of the Handicapped (NASCOH): http://www.nascoh.org.zw/

Southern Africa Federation Of the Disabled (SAFOD): http://www.safod.net/

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in the Middle East & North Africa

December 2014

This brief gives an overview of disability rights in the MENA region, which is seen to include Algeria, Bahrain, Egypt, Iran, Iraq, Israel, Jordan, Kuwait, Lebanon, Libya, Morocco, Oman, Qatar, Saudi Arabia, Syria, Tunisia, United Arab Emirates, West Bank/Gaza, Western Sahara and Yemen. Where relevant, it also provides some more detailed information about the situation in Egypt, Lebanon and Tunisia.

The situation of persons with disabilities in the MENA region

There are no reliable, up-to-date statistics on disability across the MENA region. Existing data are based on projections, for example using the WHO/World Bank average prevalence rates, on country census figures or on sample surveys.

According to the United Nations' Economic and Social Commission of Western Asia (ESCWA), the disability prevalence rates reported by countries in the MENA region (as set out in the table below) are skewed by under-reporting. The variance in prevalence rates in the various studies depends on different definitions of disability used. The Convention of the Rights of Persons with Disabilities (CRPD) uses a broad definition of disability: "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others". Many countries still have narrower, medical definitions in their laws as these have not yet been adapted to the CRPD. These narrow definitions often refer to specific bodily limitations (such as "loss of function in more than two limbs" or "less than 10% of normal vision despite wearing glasses").

Its 2014 report, *Disability in the Arab Region*, presents data from 18 countries (of which 17 are covered by this brief) and shows prevalence rates ranging from 0.4% in Qatar to 4.6% in the West Bank and Gaza. These figures, which contrast sharply with those of other regions as well as with global averages, suggest that in measuring prevalence, the MENA countries made use of narrow definitions of disability.

Country	Prevalence (%)	Country	Prevalence (%)	Country	Prevalence (%)
West Bank/Gaza	**4.6**	Morocco	**2.3**	Kuwait	**1.1**
Oman	**3.2**	Lebanon	**2.0**	UAE	**0.8**
Libya	**2.9**	Yemen	**1.9**	Saudi Arabia	**0.8**
Bahrain	**2.9**	Jordan	**1.9**	Egypt	**0.7**
Iraq	**2.8**	Syria	**1.4**	Qatar	**0.4**
Algeria	**2.5**	Tunisia	**1.3**		

Source: ESCWA (2014).

More realistic projections based on the WHO's average prevalence rates of 15 % place the number of persons with disabilities in the MENA region at approximately 30 million people, many of whom experience discrimination and social exclusion (World Bank 2009). In a region dealing with on going challenges of war, unemployment, political instability and inequality, persons with disabilities are especially vulnerable.

In a survey undertaken in April 2014 by Handicap International "*Hidden victims of the Syrian crisis:disabled, injured and older refugees"*, it was found that one in five refugees is affected by physical, sensory or intellectual impairment; one in seven is affected by chronic disease; and one in 20 suffers from injury, with nearly 80 per cent of these injuries resulting directly from the conflict.

It is further estimated that 95% of children with disabilities in the MENA region are excluded from school at the primary level (Peters 2009). Adults with disabilities (and especially women with disabilities) have less access to employment opportunities than their peers without disabilities (ESCWA 2014). Besides physical impairments, disability studies in the MENA region have also found high prevalence of mental disorders, including depression, anxiety and post-traumatic stress (World Bank 2009).

The causes of disability in the MENA region are diverse and country-specific. In the poorer countries, under-nutrition and inadequate access to health services play a significant role. In those countries with large urban populations, road accidents are a major cause of disability. In countries experiencing conflict, many injuries result directly from warfare, offensives in civilian areas and landmines. Much of the disability in MENA region stems from preventable impairments, and could be mitigated through treatment, or alleviated through rehabilitation and other forms of care (Hakim & Jaganjac 2005).

According to WHO (2012), the main challenges relating to disability in the MENA region are:

- Variation in the definition of disability from one country to another;
- Lack of reliable data and information on different aspects of disability;
- The domination of a medical model of disability rather than a rights-based approach;
- Discrepancy between political commitment and the absence or weakness of corresponding action plans;
- Fragmentation of existing efforts and ineffective coordination mechanisms within and between sectors;
- Weak primary and secondary mechanisms for prevention and early detection of disabilities;
- Significant gaps in essential care and service provision to persons with disabilities.

In **Egypt**, while official statistics identify around half a million persons with disabilities in the country, alternative projections have ranged between 8.5 million and 12 million people (Elshami 2012; Plan International). Persons with disabilities are frequently stigmatised, hidden away by their families, denied work opportunities and ignored by political leaders (Elshami 2012). Most do not have access to appropriate services (CBM International).

In **Lebanon**, the rights of persons with disabilities are broadly infringed upon (Anderson 2013). Based on reports from the *Disability Monitor*, persons with disabilities experience discrimination when trying to access health services, public buildings and public transport, and when applying for bank loans and jobs. As most mainstream schools do not accommodate children with disabilities, they are often forced to attend residential state institutions or forego their right to education. In addition, growing numbers of Syrian and Palestinian refugees in Lebanon show high prevalence rates of anxiety, depression and post-traumatic stress (UNHCR).

In **Tunisia**, disability estimates range from the official count of around 140,000 persons with disabilities in 2009 to over 900,000 people (Hakim & Jaganjac 2005). Persons with disabilities are largely segregated from society, and are not able to exercise the same rights as ordinary citizens (Koné & Korzekwa 2014). Despite a supportive policy framework (see next section), access to inclusive education, rehabilitation and employment remains a challenge for most children and adults with disabilities.

Legal and policy frameworks

The countries in the MENA region have taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. At the same time, significant legal and policy gaps remain. In terms of **international instruments**, the situation can be summarised as follows:

- Of the 20 countries in the region, 14 have signed the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD) and 17 have ratified or acceded to it. (See the table on the following page for more details). The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The full text of the convention is available at www.un.org/disabilities/convention/conventionfull.shtml.

- Only seven of the MENA countries have signed the Optional Protocol to the CRPD, and five have ratified or acceded to it. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities.
- Five of the MENA countries have signed the *Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction* (also known as the Ottawa Mine Ban Treaty) – and eight countries have ratified or acceded to it. This convention, which is important instrument for reducing the incidence of disabilities, places an obligation on the governments in question to clear all known areas contaminated by anti-personnel mines within 10 years.
- Three MENA countries, namely Iraq, Lebanon and Tunisia have signed and ratified the *Convention on Cluster Munitions*, thereby agreeing to destroy all stockpiles of cluster munitions within eight years, clear all areas contaminated with cluster munitions remnants within 10 years, and provide assistance to and fulfil the rights of victims of cluster munitions.
- All the MENA countries (with the exception of Western Sahara) are also state parties to the UN *Convention on the Rights of the Child* (CRC) and (with the exception of Iran and Western Sahara) to the *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW). Both of these conventions make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

Country	CRPD		CRPD Optional Protocol		CRPD initial country report submitted	Ottawa Mine Ban Treaty	
	Signed	Ratified*	Signed	Ratified*		Signed	Ratified*
Algeria	☐	☐	☐			☐	☐
Bahrain	☐	☐					
Egypt	☐	☐					
Iran		☐			☐		
Iraq		☐					☐
Israel	☐	☐					
Jordan	☐	☐	☐		☐	☐	☐
Kuwait		☐					☐
Lebanon	☐		☐				
Libya	☐						
Morocco	☐	☐		☐			
Oman	☐	☐					☐
Qatar	☐	☐	☐			☐	☐
Saudi Arabia		☐		☐	☐		
Syria	☐	☐		☐			
Tunisia	☐	☐	☐	☐	☐	☐	☐
United Arab Emirates	☐	☐	☐		☐		
West Bank & Gaza		☐					
Western Sahara							
Yemen	☐	☐	☐	☐		☐	☐

* Ratified or acceded. **Sources**: ESCWA 2014; United Nations Treaty Collection; UN OHCHR

At the **regional level**, the following policies are important to note with reference to disability rights:

- The League of Arab States (21 member states) adopted the *Arab Charter on Human Rights* in 2004. The Charter entered into force in 2008, after receiving seven ratifications. It currently has 14 states parties – namely Algeria, Bahrain, Iraq, Jordan, Kuwait, Lebanon, Libya, Palestine, Qatar, Saudi Arabia, Sudan, Syria, the United Arab Emirates and Yemen. Besides Articles 3 and 34, which protect persons with disabilities (amongst others) from discrimination, the Charter contains a section – Article 40 – dedicated specifically to disability rights. It recognises the rights of persons with disabilities to a decent life, dignity, active participation in society, free social services including material support, health and rehabilitation, education and job opportunities.
- The Arab League furthermore declared 2004 to 2013 as the Arab Decade for Persons with Disabilities. According to ESCWA (2014), this decade marked a milestone for the Arab world, as it established for the first time a set of regionally agreed principles and objectives to guide national efforts on disability.

In terms of **national laws and policies** that impact most directly on the rights of persons with disabilities, the following overall trends can be observed (ESCWA 2014):

- The majority of MENA countries have included articles on disability in their constitutions.
- During the Arab Decade, most country governments in the region devised new laws, strategies and policies that reflect the changing understanding of disability and seek to bring national frameworks in line with the provisions of the CRPD.
- Half of the MENA countries reported that they had or were developing a national strategy or plan on disability.
- Legal provisions pertaining to the employment for persons with disabilities are prevalent throughout the MENA region. Several countries (including Egypt, Lebanon and Tunisia) have instituted employment quotas for persons with disabilities (ranging from 1 to 5%), mainly in the public sector, but also, increasingly, in the private sector.

Country	Provisions on disability in the Constitution	Overarching or general disability law	National disability strategy or plan
Algeria	☐	☐	
Bahrain	☐	☐	☐
Egypt	☐	☐	
Iran		☐	
Iraq	☐	☐	
Israel		☐	
Jordan	☐	☐	☐
Kuwait	☐	☐	
Lebanon		☐	Being developed
Libya			
Morocco	☐	☐	☐
Oman	☐	☐	Being developed
Qatar		☐	☐
Saudi Arabia	☐	☐	☐
Syria			☐

Tunisia	Being developed	☐	☐
United Arab Emirates		☐	
West Bank & Gaza	☐	☐	☐
Western Sahara			
Yemen	☐	☐	Being developed

Sources: ESCWA 2014;

- In **Egypt**, the national legal framework rests primarily on the *Rehabilitation of Disabled Persons Law*, passed in 1975. This law gives people with disabilities access to vocational training and employment, but it is based on an out dated understanding of disability and doesn't outlaw all forms of discrimination. A new disability law is being drafted to bring Egypt's legal framework more closely in line with the CRPD. Egypt has a 5% quota system for employing persons with disabilities in companies with more than 50 employees. According to most sources, however, this quota is not enforced (Elshami 2012).
- In **Lebanon**, the *Law 220* was adopted in 2000 after extensive lobbying by DPOs and others. While the law emphasises the rights of persons with disabilities to various social services and living conditions, it has been criticised for entrenching an approach based on specialised agencies that provide segregated services to persons with disabilities (Pineda 2011). Segregated psychiatric wards, live-in rehabilitation centres, and segregated schools continue to be promoted, in spite of evidence that these are out dated, ineffective strategies.
- In **Tunisia**, the constitution specifically recognises the right of persons with disabilities to be fully integrated into society. *Law No. 83*, passed in 2005, deals with the advancement and protection of persons with disabilities, including their protection, care and integration. Various orders have subsequently been passed to operationalize aspects of the legislation. Legal provisions exist to prevent discrimination against children with disabilities and to promote their right to education. Tunisia further has a quota system reserving 1% of jobs in the public and private sectors for persons with disabilities.

Implementing agencies

The disability laws and policies of the MENA states are implemented by the various country governments by means of different institutional arrangements. More than half of the countries in the region have established central coordinating bodies for disability-related programmes and services – typically referred to as a national disability council or commission. Persons with disabilities are represented or actively involved in many of these structures (ESCWA 2014). In most instances, the co-ordinating structure falls under the mandate of a given ministry, most often the ministry dealing with social affairs, social development or labour. The majority of services to persons with disabilities continue to be delivered by NGOs in the MENA region.

In **Egypt**, a National Council on Disability Affairs was established in 2012. It is responsible to ensure compliance with existing legislation, for example by lobbying public and private sector employers to abide by the employment quota for persons with disabilities. The council also has the duty to develop new policies and a national action plan to advance disability rights, as well as coordinating the roles of various ministries and agencies in service delivery. The board of the council includes representatives from the ministries of international cooperation, social affairs, education, higher education, finance, health, manpower and immigration, communications and local development, as well as DPOs, organisations working on disability issues and individual experts in the field. Plans include issuing smart cards to persons with disabilities to streamline service provision, training NGOs who work on disability issues, establishing new service centres for children to improve early detection of disabilities, treatment and rehabilitation (Kheir 2012).

In **Lebanon**, the National Committee for the Affairs of the Disabled has been in existence since 1993.

It falls under the mandate of the Ministry of Social Affairs and includes representation from persons with disabilities in their individual capacities, DPOs, service delivery organisations and relevant ministries. The National Social Development Strategy of Lebanon includes, amongst other goals, expanding coverage of health services to persons with disabilities, developing a disability insurance fund, eliminating discrimination in social protection schemes and employment opportunities, providing assistance to families to look after children in need of special care in their homes (thereby minimising placement in institutionalised care facilities), promoting awareness of disability rights, improving coordination of services to persons with disabilities and early intervention programs (Republic of Lebanon 2011),

In **Tunisia**, a Higher Council for Social Development and for the Welfare of Disabled Persons was created in 2010, under the mandate of the Prime Minister. Tunisia's initial report to the Committee on the CRPD makes reference to the establishment of provincial committees to coordinate disability programs and services in each of the 24 governorates. These committees include representation from the provincial health, education, training and social services departments, as well as medical professionals and organisations delivering disability-related services. The committees appear to play an advisory role as regards the granting of disability benefits, placements of children with disabilities in mainstream or special schools, and identifying appropriate care and services for persons with disabilities (Tunisia 2010).

At the regional level, the League of Arab States has adopted several institutional mechanisms to promote human rights, including the disability rights contained in the Arab Charter. These mechanisms include the Arab Human Rights Committee, the Legislative, Legal Affairs and Human Rights Committee, and the Permanent Arab Human Rights Committee at the Secretariat of the League of Arab States. However, according to the International Federation for Human Rights (IFHR 2014), there is little public knowledge about the Arab Charter on Human Rights and its protections, even in states that have become party, and public officials and judicial bodies do not frequently invoke the Charter, even though it constitutes binding law. Consequently, the protections of the Charter have so far gone largely unrealised.

Accountability measures

Despite the legal provisions and institutional arrangements that are in place, the attainment of the rights of persons with disabilities remains a concern across the MENA region. At international level, country governments are required to submit an initial report to the Committee on the CRPD two years after ratifying the convention, and every four years subsequently. Thus far, only six countries – namely Iran, Jordan, Tunisia, United Arab Emirates, Morocco and Qatar – have submitted their initial reports to the Committee on the CRPD. It should be noted that the Committee has no enforcement powers in relation to countries that fail to submit their reports. To monitor the continued work of the Committee and access its observations on the implementation of the CRPD in MENA countries, visit http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx.

In terms of the Arab Charter on Human Rights, it is the mandate of the Arab Human Rights Committee to oversee the progress made by member states in implementing the rights contained in the charter. Countries are supposed to submit an initial report to the Committee within one year of ratifying the charter, and then every three subsequent years. Since the Arab Human Rights Committee's first session in April 2009, only Jordan, Algeria, Bahrain and Qatar have submitted their initial reports. The Committee doesn't have the authority to receive and adjudicate individual complaints on violations of the Charter's rights. While it does review state reports, it has so far declined to meaningfully consider alternative reports, for example from civil society, regarding the human rights situation in member states (IFHR 2014).

At the national level, eight countries in the MENA region have national human rights institutions – namely Egypt, Morocco, Jordan, Qatar, West Bank/Gaza, Algeria, Tunisia and Iran. The first six of these have been accredited by the International Coordinating Committee as having an "A" status. In countries where such institutions exist, they should be expected to advance and protect disability rights and to monitor the implementation of legal and policy commitments to persons with

disabilities. Article 33(2) of the CRPD requires states to implement a framework to promote, protect and monitor the implementation of the convention, including an independent mechanism to exercise oversight. Therefore in countries without human rights institutions, states may be called upon by the Committee on the CRPD to establish independent monitoring bodies.

In **Egypt**, the National Council for Human Rights has the legal duty to monitor the application of all international human rights conventions in the country, including the CRPD. It has in the past been active in raising awareness and preparing reports on the situation of persons with disabilities. The political independence of the Council has however at times been questioned, as well as its ability to hold the executive to account.

Lebanon does not have a national human rights institution. While the National Committee for the Affairs of the Disabled is responsible to monitor the implementation of disability laws and policies, it is part of the executive and therefore not adequately independent to hold ministries to account. Informally, civil society organisations have made efforts to build monitoring capacity in order to track the progress of the CRPD.

In **Tunisia**, the government designated the Higher Committee for Human Rights and Fundamental Freedoms to act as the independent mechanism required by Article 33(2) of the CRPD. In its Concluding Observations in 2011 on Tunisia's Initial Report, the CRPD Committee recommended that a dedicated unit on disabilities be established within Tunisia's Higher Committee for Human Rights and Fundamental Freedoms in order to monitor implementation of the convention. It is unclear whether such a unit has since been established.

Main civil society actors

Political changes in the MENA region have been accompanied by the emergence and reinvigoration of civil society movements, including disabled peoples' organisations and coalitions. DPOs in the region have expressed concern about the lack of progress in implementing the CRPD in MENA countries, and the need for stronger regional alliances of DPOs to advocate for and monitor disability rights, and to report on the situation in the region to international fora, including the annual UN meeting of State Parties. The main DPOs working at the regional level in the MENA region include (but are not limited to):

- **Disabled Peoples' International** established a regional office in Beirut in 2013, based with a partner organisation, the **Lebanese Physical Handicapped Union**. DPI is a cross-disability, self-help, human rights organisation of persons with disabilities, which has been working to revive the disability movement in MENA countries. The first regional assembly of DPI-Arab Region was held in Egypt in 2014, where plans were discussed to strengthen and coordinate the work and advocacy of DPOs in the region.
- The **Arab Organisation of Persons with Disabilities** (AOPD) is an independent, non-profit, regional organisation founded in 1998 in Egypt. It is a coalition composed of DPOs operating in different MENA countries. AOPD's main objectives are to promote the rights of people with disabilities, to empower people with disabilities and to represent Arab people with disabilities in the world at large.
- The **Disability Monitor Initiative – Middle East** (DMI) is active in Lebanon, Egypt, West Bank/Gaza, Jordan, Syria, Iraq and Yemen. It was established by CBM and Handicap international, together with the Bethlehem Arab Society for Rehabilitation, Arab Organisation of Disabled People, Lebanese Physical Handicapped Union, Al Hussein Society for Habilitation/ Rehabilitation of the Physically Challenged, Advance and Atfaluna. DMI is an advocacy initiative that gathers and disseminates information on relevant disability topics, primarily through field research and consultations with persons with disabilities, service providers, members of civil society, government officials and local authorities.
- The World Federation of the Deaf has an interim regional office in Saudi Arabia, Inclusion International and Disabled Peoples international have regional representation in Beirut.

Several international organisations make important contributions to the disability movement in the MENA region, including CBM International, Handicap International, Leonard Cheshire Disability International, the International Disability

Alliance (Global level DPO umbrella), Perkins International, the Disability Rights Fund, Inclusion International, Save the Children, Plan International, CARITAS, CARE, UNICEF and WHO. Egypt, Tunisia and Palestine have been selected as partners to the joint UN multi-donor trust fund for implementation of the CRPD with a budget of 350 000 USD. Palestine is the only programme which has started so far. Other organisations playing a role in awareness-raising, advocacy and service provision include (but are not limited to):

- The **Stars of Hope Society** is a lead organisation run by women with disabilities, for women with disabilities. Based in Palestine, it also provides training and capacity building for women with disabilities in other MENA countries.
- **Diakonia** works with DPOs in Egypt, Israel, Jordan, Lebanon, West Bank and Gaza to coordinate a regional programme for community-based rehabilitation and inclusive education. Diakonia plays an important role alongside civil society and DPOs to advance the process of inclusion in the MENA region.
- The **Tunisian Organisation for the Promotion of the Rights of Persons with Disabilities** brings together young Tunisians with disabilities and parents of children with disabilities representing different disability constituencies. It is the first self-representative organisation of persons with disabilities in Tunisia which has a cross disability focus and which exercises a human rights based approach.
- The **Egyptian Federation of Organizations for People with Special Needs** is an associate member of Rehabilitation International and works for the rehabilitation and the equalisation of opportunities for persons with disabilities.
- The **Lebanese Association for Self-Advocacy** is the first self-advocacy organisation of persons with intellectual disabilities in Lebanon and the Arab world. The **Lebanese Physical Handicap Union** has been active since 1981 as a grassroots organisation of persons with different physical impairments. They have worked together to promote the rights of youth with disabilities to freedom of expression and raise awareness amongst adults with disabilities on the importance of voting.

Why Sweden needs to do more to include persons with disabilities

Sweden is obliged by article 32 in the Convention, ratified by Sweden, to include persons with disabilities in all development cooperation programmes. It states that State Parties involved in international cooperation have a responsibility to undertake appropriate and effective measures such as:

a) Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;

b) Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;

c) Facilitating cooperation in research and access to scientific and technical knowledge;

d) Providing, as appropriate, technical and economic assistance, including by facilitating access to and sharing of accessible and assistive technologies, and through the transfer of technologies.

2. All Swedish support is to be based on the perspectives of the poor and a human rights perspective (meaning that the principles of accountability, transparency, participation and non-discrimination should be applied to processes and programme design).

What Sweden can do – 9 questions to discuss

Within its mandate and strategy for the Mena region, Sweden has a range of opportunities to include persons with disabilities in a more deliberate manner. Questions to discuss:

- Could Sweden do more to stay updated on the situation of persons with disabilities in the region and the measures initiated by regional bodies to address the rights of persons with disabilities? Could the regional office do more to support Embassies in this regard?
- Many countries lack data on the situation of persons with disabilities. Could Sweden do more to promote regional research in the area of disability?
- Could Sweden do more to systematically include disability rights as an explicit part of its support to regional accountability mechanisms, efforts to establish independent human rights institutions, election monitoring and watchdog organisations? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure that women, men and children with disabilities (and mental health conditions) are systematically included and even prioritised in emergency relief and humanitarian aid efforts? E.g. refer to
  - ✓ Manual on the design and building of barrier-free emergency shelters here
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden do more to strengthen the capacity of government authorities in the MENA region to translate disabilities rights and commitments into effective programmes? E.g. Inclusion Made Easy - a quick programme guide to disability in development here
- Could Sweden do more to include DPOs in regional networking and programmes that seek to strengthen civil society organisations and networks to influence policies and monitor the implementation of policy commitments?
- Could the regional office do more to encourage inclusion of persons with disabilities and their organisations in human rights networks and social and cultural events?
- Could Sweden do more to ensure that women with disabilities are included in regional programmes aiming to advance women's rights and gender equality? To include women with disabilities in SRHR and GBV programmes?
- Could Sweden do more to build strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the regional office need to take such initiative?

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Palestine

December 2014

The situation of persons with disabilities

The prevalence of disability in the Palestine ranges between 2.7% and 7% of the total population, depending on whether a narrow or broad definition is used. This means that in 2011, of the estimated 4.2 million people in the Palestine, between 114, 000 and 300,000 lived with some kind of disability.

Amongst persons with disabilities aged fifteen years, more than a third (37.6%) had never enrolled in school, while an additional third (33.8%) had enrolled but dropped out. More than half of the disabled population were illiterate, 87% did not work, and around a third had never married (Palestine Central Bureau of Statistics/Ministry of Social Affairs 2011).

While attitudes to persons with disabilities appear to be improving somewhat, many still experience stigmatisation, degrading treatment and obstacles to social and economic participation (Norad 2012). Women with disabilities are often hidden and silent, their concerns unknown and their rights overlooked. Youth with disabilities also face prejudice. According to a report by the East Jerusalem YMCA, 73% of young disabled Palestinians had experienced discrimination in the last six months, most often when trying to access government services, including schooling and healthcare.

The challenges facing persons with disabilities in the Palestine are exacerbated by the on going occupation, the siege of Gaza and the following destabilisation of the region including wars with associated destruction of social infrastructure and basic services as consequences. The *World Report on Disability* (WHO/World Bank 2012) notes that the injuries and trauma experienced during armed conflict results in higher numbers of disabilities, both physical and mental health impairments. In Gaza in 2009, as many as half of the 5000 men, women, and children injured over the first three weeks of the conflict were found to be at risk of permanent impairments. The situation is aggravated by the restrictions and blockades that prevent rehabilitation workers from providing early interventions, and lead to catastrophic shortages in fuel and electricity, medical supplies and assistive devices. The 2012 and 2014 Israeli offensives in Gaza has further increased the number of people with disabilities and intensified their vulnerable condition. According to the Palestinian Ministry of Health, over 11,100 Palestinians, including 3,374 children, 2,088 women and 410 elderly were injured during the last war (OCHA Gaza Initial Rapid Assessment).

Legal and policy framework

The Palestinian National Authority (PNA) has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. Since being recognised as a non-member state with observer status in the United Nations general assembly, it has been able to sign and ratify a number of **international conventions**, including:

- In 2014, the United Nations Convention on the Rights of Persons with Disabilities (CRPD), the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Other treaties that advance the rights of people, including those with disabilities, for example the UN Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against *Women* – both of which make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

- Article 9 of the PNA's 2003 Basic Law recognises the right of all Palestinians to equality before the law and judiciary "without distinction based on race, sex, colour, religion, political views, or disability." Article 22 commits the National Authority to providing education services, health and social insurance to "the families of martyrs, prisoners of war, the injured and the disabled."
- The Law Number 4 Concerning the Rights of the Persons with Disabilities (hereafter referred to as Law No. 4) was welcomed as a progressive example of disability legislation when it was adopted by the Palestinian Legislative Council in 1999. It provides for, but is not limited to, the right of persons with disabilities to equality before the law and to non-discrimination, the right to housing, to health care, to travel and to work, the right to participate in cultural life and sport. However, implementation of Law No. 4 has been extremely slow, reportedly due to resource constraints. It is only since 2011 that real impetus can be observed in translating Law No.4 into sector-specific policies and programmes.
- A Presidential Decree was issued in 2004 calling for the establishment of a Higher Council for the Affairs of Persons with Disabilities, to oversee the implementation of the Law No.4, as well as other legal provisions relating to disability.
- A National Strategic Framework for Disability was formally adopted in 2012. It was developed collaboratively under the mandate of the Ministry of Social Affairs, with input from organisations of persons with disabilities (DPOs) and aid organisations active in the disability terrain, with Diakonia as a key supporter with Swedish funding. The strategy considers disability as a prime development issue, based on the principle that persons with disabilities are entitled to their rights on a par with all other citizens. It requires various government ministries to mainstream disability issues in their planning and programmes.
- The Palestinian National Development Plan for 2014 to 2016 includes, amongst its policy priorities, references to improving the social protection, security, access to justice and opportunities of persons with disabilities. It commits itself to providing "sustainable, high quality, rights-based, gender-sensitive social services" and specifically lists persons with disabilities amongst the intended beneficiaries.
- The Palestinian Ministry of Education and Higher Education's Development Strategy Plan for 2014 to 2019, titled "A Learning Nation", reiterates the government's commitment to inclusive education, which has been the general policy of the education sector since 1997. The Strategy Plan, which includes specific goals relating to students with special education needs, identifies the need for a more detailed and comprehensive policy pertaining to inclusive education for children with disabilities.

In spite of the policy commitments above, several legislative and policy gaps remain. Even with the existing laws and policies, disability remains a low priority for decision-makers and often disability programmes are constructed as short-term interventions with heavy reliance on external funding. They are not factored in national action plans and budgeting and therefore, policies and strategies remain unimplemented. A UN Partnership Programme to Promote the Rights of Persons with Disabilities is currently underway (2014), which aims amongst other things to review existing sector-specific legislation and policies (for example, in education, labour, health and transport) and propose amendments that bring them in line with the CRPD and Law No.4. The UN project joins the efforts of WHO, the International Labour Organization (ILO), United Nations Development Programme (UNDP), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Children's Fund (UNICEF) and the Office of the United Nations

Special Coordinator for the Middle East Peace Process (UNSCO), as coordinator. The project is supported by a special UN fund, the UN Partnership to Promote the Rights of Persons with Disabilities (UNPRPD). The proposal from Palestine was one of only eight joint UN proposals selected globally.

Implementing agencies

Programmes and services to advance the rights of persons with disabilities in Palestine rest on relatively complex and evolving institutional arrangements, involving government ministries, UN agencies, international development organisations, local development and human rights NGOs and DPOs. Responsibility for the welfare of persons with disabilities is vested in the Ministry of Social Affairs (MoSA). A Higher Council for Persons with Disabilities has been created under MoSA. Although the Council was nominally established by decree in 2004, it was only really activated in 2012. One of the mechanisms being planned is the establishment of a Disability Card, based on the basket of services that a person with disability is entitled to. MoSA lists as one of its six main programmes the rehabilitation of persons with disabilities. However, due to the appointment of a new Minister in 2013, the work towards the implementation of Law No.4 has stalled.

The vast majority of rehabilitation services in the Palestine are still offered by the CSO sector. There is a long-standing Rehabilitation Programme, jointly supported by Swedish Diakonia and the Norwegian Association of the Disabled, which provides (amongst other components) community-based rehabilitation to individuals with disabilities and their families. According to Norad (2012), the programme has a wide network of referral services, enjoys local ownership, is rights-based and embedded in the local implementing organisations. Currently efforts are underway to transfer responsibility for the community-based rehabilitation programme to local municipalities.

In terms of the National Strategic Framework for Disability, the ministries are expected to mainstream disability issues in their programmes going forward, but only a few are actually implementing; Ministry of Education and Higher Education, Ministry of Local Governance and Ministry of Social Affairs. In terms of the education and health sectors, the following is evident:

- The Ministry of Education and Higher Education is responsible to provide inclusive schooling to children with disabilities in the Palestine, together with the UN Relief and Work Agency (UNRWA) which is mandated to provide corresponding services to Palestinian refugees of school-going age. While in the West Bank 80% of schools are run by the Ministry (and 8% by UNRWA), in Gaza half the schools are run by the UNRWA and half by the Ministry. Yet the capacity of both Ministry and UNRWA schools to accommodate the education needs of students with disabilities remains limited. Effective inclusion of students with disabilities will require improvements in physical accessibility, training of teachers to better support students with disabilities in mainstream classes, and appropriate teaching aids.
- The Ministry of Health is responsible to provide general health services to persons with disabilities along with the rest of the population, while UNRWA provides equivalent services to Palestinian refugees. However, health services in Palestine are still mainly provided by (donor/private funded) civil society organisations and UNWRA. There are not yet government standards, systems or programmes that guarantee physical and mental health services to persons with disabilities in hospitals and primary care facilities. Supply of technical aids and support to community and home-based care is not yet coming through the Ministry of Health, but rather via some local governments and CSOs. Given the humanitarian crisis in Gaza, the need for emergency and longer-term health care for persons with disabilities continues to escalate.

Accountability measures

Despite all the legal provisions and institutional arrangements in place, the attainment of the rights of persons with disabilities remains a major concern. At a broad level, the Independent Commission for Human Rights has the duty to respond to violations of human rights of persons with disabilities as part of its mandate. It has started to fulfil its mandate (with Swedish funding) and has produced a report on the right to work (2014). It is unclear whether the Higher Council for Persons with Disability has any real power to hold government ministries and other role-players accountable for their progress in mainstreaming disability issues into their policies and programmes. In the past, resource constraints (and the occupation) have repeatedly been used as justifications for failing to implement disability rights. At the international level, the State of Palestine has not yet submitted its first report to the UN Committee on the CRPD. This may represent an opportunity for DPOs and others to advocate for more stringent monitoring and accountability measures.

Main civil society actors

As far as **organisations of people with disabilities** are concerned, the main role-players in the Palestine are:

- The **General Union of People with Disabilities** (GUPWD) is a grassroots organisation that advocates for the human rights of Palestinian persons with disabilities and endeavours to empower them through awareness raising and capacity-building. Established in 1991, the General Union has a membership of over 35,000 people, with offices in each of the sixteen governorates. The Union has been linked to the ruling faction of the Palestinian National Authority, which has sometimes been advantageous, but is also hampering its credibility and its ability to play an independent watchdog role.
- The **Stars of Hope Society** is a lead organisation run by women with disabilities, for women with disabilities. It has a woman-centred ethos and focuses on advocacy, networking, leadership development and public education. The Stars of Hope work to ensure that every woman with a disability has the opportunity for true involvement in every aspect of society. Stars of Hope is working to establish itself in Gaza as well.
- There is a **Union of the Deaf** which organises deaf clubs on the West Bank**.** The Union works for the recognition of sign language, as well as access to education and other services for persons with hearing impairments.

As the disability movement is rather fragmented and politicised, there are also a substantial number of smaller DPOs in Palestine. Some of these have been supported by Diakonia. Besides the international organisations already mentioned, several others contribute to promoting disability rights in the Palestine, including WHO, ILO, Oxfam, Save the Children, World Vision, UNICEF, CBM International and Individuell Människohjälp (IM). Other organisations playing a key role in awareness-raising, advocacy and service provision include (but are not limited to):

- The Palestinian Centre for Human Rights.
- Atfaluna Society for Deaf Children, Al-Amal Association for the Deaf, Future Society for Deaf Adults.
- Red Crescent Society.
- Handicap International.
- Gaza Community Mental Health Program.
- Care International and the YMCA East Jerusalem.
- Local committees in refugee camps, which engage in disability and rehabilitation with UNRWA support.

What Sweden could do – 7 questions to discuss

Within its mandate and strategy for Palestine, Sweden has a range of opportunities to include persons with disabilities. Questions to discuss:

- Could more be done to stay updated on the situation of persons with disabilities and follow up on the implementation of disability laws and policies adopted?
- Could more be done to include women with disabilities in programmes focussing on women's empowerment/equality and GBV, youth with disabilities in youth empowerment programmes and children with disabilities in child rights programmes? E.g. inviting disabled people's organisations to participate in planning and design of programmes and/or suggesting disaggregated monitoring indicators? Inclusion Made Easy - a quick programme guide to disability in development here.
- Could more be done to encourage human rights organisations and institutions to cooperate with DPOs and include disability rights in their mandates and portfolios? Monitoring tools can be downloaded here.
- Could more be done to strengthen organisations of persons with disabilities? Could they be included in civil society capacity development programmes, in support to human rights defenders or good governance programmes? Could they be invited to participate in professional human rights and civil society networks and in social and cultural events?
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies and facilitate/encourage synergies between the various donors and disability programmes (e.g. UN, Save the Children, Diakonia, Norwegian Aid etc.), especially in light of the on going UN efforts to strengthen the capacity of Palestinian authorities to translate disability rights and commitments into effective programmes?
- Could more be done to include persons with disabilities (and mental health conditions) more systematically in emergency relief and humanitarian aid efforts? Examples of tools can be found here.
- Could Sweden take a more proactive role in promoting accessibility in reconstruction work and inviting expertise in this area to join planning processes? E.g.
  - ✓ Manual on the design and building of barrier-free emergency shelters here
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here

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http://www.emro.who.int/pse/palestine-news/un-joins-palestinian-ministries-in-training-for-mainstreaming-disability-rights-may-2014.html , http://mptf.undp.org/factsheet/fund/RPD00

Sida's tools on disability: *Disability as a human rights issue – conducting dialogue*,
http://www.sida.se/English/publications/Publication_database/publications-by-year1/2012/june/disability-as-a-human-rights-issue-conducting-a-dialogue/

The human rights of persons with disabilities have been a Swedish government priority since 2009. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Southeast Asia

November 2014

This brief focuses on disability rights in the ASEAN countries, namely Brunei Darussalam, Cambodia, Indonesia, Lao People's Democratic Republic (PDR), Malaysia, Myanmar, the Philippines, Singapore, Thailand and Viet Nam.

The situation of persons with disabilities in the ASEAN countries

There are no reliable, up-to-date statistics on disability across the ASEAN region. Existing data are based on projections, for example using the WHO/World Bank average prevalence rates, or on sample surveys.

The variance in prevalence rates in the various studies depends on different definitions of disability used. The Convention of the Rights of Persons with Disabilities (CRPD) uses a broad definition of disability: "*Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others*". Many countries still have narrower, medical definitions in their laws as these have not yet been adapted to the CRPD. These narrow definitions often refer to specific bodily limitations (such as "loss of function in more than two limbs" or "less than 10% of normal vision despite wearing glasses").

According to *World Report on Disability*, the regional prevalence rate for disabilities in low- and middle-income countries in Southeast Asia is estimated at 16%, (WHO/World Bank 2011). The following table presents disability statistics for the ASEAN countries based on estimates gathered by the United Nations Economic & Social Commission for Asia & the Pacific (UNESCAP 2012a) and the *World Report on Disability* (WHO/World Bank 2011). Many of these percentages are assumed to be underestimated as most of the countries still use a narrow definition of disability (WHO South East Asia Regional Office 2013).

Country	**Total Population** (2011)	**Disability Prevalence (ESCAP) Disability survey 2011**		**Disability Prevalence (WHO/WB/National Surveys)**	
		Rate (%)	**No. of persons**	**Rate (%)**	**No. of persons**
Brunei Darussalam	401,890	1.1	4,421	Not available	Not available
Cambodia	14,701,717	1.4	205,824	8.1	1,190,781
Indonesia	245,613,043	1.4	3,438,583	21.3	52,315,578
Lao PDR	6,477,211	1	64,772	8	518,177
Malaysia	28,728,607	1.3	373,471	4.5	1,292,787
Myanmar	53,999,804	2.3	1,241,995	6.4	3,455,987
Philippines	101,833,938	1.2	1,222,007	28.8	29,328,974
Singapore	4,740,737	3	142,222	3	142,222
Thailand	66,720,153	2.9	1,934,884	2.9	1,934,884
Viet Nam	90,549,390	7.8	7,062,852	6.4	5,795,161
Total	**613,766,490**	**-**	**15,691,031**	**-**	**95,974,551**

The figures above suggest that there are at least 16 million persons with disabilities living in the ASEAN region, and using broader definitions of disability (as is done in the Convention of the Rights of Persons with Disabilities), the figure could be closer to 95 million. Persons with disabilities remain among the most marginalised people in Southeast Asia. Many lack access to basic services, as well as rehabilitative services and employment opportunities (Handicap

International). It is estimated that less than 10% of children with disabilities in the region attend school (UNICEF 2003). The prevalence of disabilities in the region is exacerbated by the presence of landmines and explosive devices (for example in Cambodia and Laos), high road accident rates, and poor access to maternal health services in many rural areas. Persons with disabilities are particularly vulnerable during and after natural disasters (such as the 2014 typhoon in the Philippines) and in refugee camps.

Legal and policy frameworks

The country governments of Southeast Asia, and the ASEAN region as a whole, have taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. At the same time, significant legal and policy gaps remain. In terms of **international instruments**, the situation can be summarised as follows:

- Nine out of the ten ASEAN countries have signed the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD) and eight have ratified it. (See the table below for more details). The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. However, only one ASEAN country, namely Cambodia, has signed the Optional Protocol to the CRPD, which allows persons with disabilities whose rights have been violated to bring complains to the Committee on the Rights of People with Disabilities. Read more www.un.org/disabilities/convention/conventionfull.shtml.
- Six of the ASEAN countries have signed and ratified the *Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction* (also known as the Ottawa Mine Ban Treaty) – an important instrument for reducing the incidence of disabilities. (See details in the table below). This treaty places an obligation on the governments in question to clear all known areas contaminated by anti-personnel mines within 10 years.
- Three of the ASEAN countries have signed the *Convention on Cluster Munitions*. However, only Lao PDR has ratified the convention, thereby agreeing to destroy all stockpiles of cluster munitions within eight years, clear all areas contaminated with cluster munitions remnants within 10 years, and provide assistance to and fulfil the rights of victims of cluster munitions.
- All of the ASEAN countries are also state parties to the UN *Convention on the Rights of the Child* (CRC) and the *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW) – both of which make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

Country	CRPD		CRPD Optional Protocol		Ottawa Mine Ban Treaty		Convention on Cluster Munitions	
	Signed	Ratified	Signed	Ratified	Signed	Ratified	Signed	Ratified
Brunei Darussalam	✓				✓	✓		
Cambodia	✓	✓	✓		✓	✓		
Indonesia	✓	✓			✓	✓	✓	
Lao PDR	✓	✓					✓	✓
Malaysia	✓	✓			✓	✓		
Myanmar		✓						
Philippines	✓	✓			✓	✓	✓	
Singapore	✓	✓						
Thailand	✓	✓			✓	✓		
Viet Nam	✓							

At the **regional** and **sub-regional level**, the following policies are important to note with reference to disability rights:

- All the ASEAN countries are signatories to the *Proclamation on the Full Participation and Equality of People with Disabilities in the Asia Pacific Region* and the *Biwako Plus Five Framework for Action Towards an Inclusive, Barrier Free and Rights Based Society for Persons with Disability*. Signatories pledge their commitment to developing effective policy and programmes at national, sub-regional and regional levels aimed at systematically improving the conditions of persons with disabilities and harnessing their full development potential.
- The ASEAN countries are also party to the UNESCAP's Incheon Strategy, titled *Make the Right Real*, which accompanies the new Asian and Pacific Decade of Persons with Disabilities (2013 - 2022). The Incheon Strategy provides the Asian and Pacific region (including the ASEAN countries) with the first set of regionally agreed disability-inclusive development goals, linked to implementation targets and indicators.
- Within the larger Asian and Pacific region, the ASEAN countries in 2011 adopted their own sub-regional disability policy framework, in the form of the *Bali Declaration on the Enhancement of the Role and Participation of Persons with Disabilities in the ASEAN Community*. The main aims are to encourage member states to ratify the CRPD, to bring domestic laws in line with the convention and to develop regional indicators to track implementation. It also calls for the effective participation of persons with disabilities in all aspects of decision-making, including elections, and the mainstreaming of disability perspectives in all ASEAN policies and programmes. The period 2011 to 2020 has been proclaimed the ASEAN Decade of Persons with Disabilities.
- With the 2013 *Declaration on Strengthening Social Protection*, the ASEAN countries furthermore recognised the right of persons with disabilities (amongst others) to social protection and undertook to advance the quality, coverage and sustainability of social protection in ASEAN member states. This included a commitment to allocate adequate financial resources to social protection in line with national targets (and subject to the circumstances and capacity of each government).
- The ASEAN also endorsed the 2011 *Busan Partnership for Effective Development Cooperation*, which, inter alia, recognises the importance of international commitments on disability as fundamental to development cooperation.

In terms of **national laws and policies** that impact most directly on the rights of persons with disabilities, the ASEAN countries have the following overall commitments in place:

- Seven of the ten countries – namely Cambodia, Indonesia, Lao PDR, Myanmar, Philippines, Thailand and Vietnam – have provisions in their Constitutions that either afford specific rights to persons with disabilities, or prohibit discrimination against persons with disabilities, amongst others. However, the references to disability are in most instances vague or limited and in some cases, are contradicted by other constitutional clauses. For example, the Constitution of Lao PDR recognises the right of persons with disabilities to assistance but also excludes persons with mental disorders from the right to vote.
- None of the ASEAN countries have a specific anti-discrimination law pertaining to persons with disabilities. Most have national laws that govern aspects of disability rights and/or address disability issues from a medical perspective. According to UNESCAP (2012a), only 5 of the 10 countries had comprehensive disability legislation in place – namely Cambodia, Malaysia, Philippines, Thailand and Vietnam.
- With the exception of Brunei Darussalam, all the ASEAN countries have active disability policies or plans of action that outline their current commitments and strategies for advancing the rights of persons with disabilities. Reports suggest that the government of Brunei Darussalam is in the

process of developing an Order on Persons with Disabilities in line with the CRPD.

Implementing agencies

The disability policies and actions plans of the ASEAN nations are implemented by the various country governments by means of different institutional arrangements. Seven of the ASEAN countries have a central coordinating body for disability-related programmes and services – typically referred to as a national disability council, commission, committee or coordinating team. In most instances, this structure falls under the mandate of a given ministry, most often the ministry dealing with social affairs, social development or labour.

Some aspects of the *Bali Declaration on the Enhancement of the Role and Participation of Persons with Disabilities* require cross-border implementation, for example, the development of regional indicators, the enhancement of information-sharing amongst countries and ensuring the participation of persons with disabilities in ASEAN's own structures and processes. At the sub-regional level, the ASEAN Secretariat has a division dealing with social development, women and labour issues. Disability rights fall broadly within the mandate of the ASEAN Socio-Cultural Community Council, which is comprised of government representatives from each member state, mostly Ministers of Social Development or equivalents (and other relevant ministries). There are also sectorial ministerial committees – most relevant is the ASEAN Ministerial Meeting on Social Welfare and Development.

Since 2011, an ASEAN Disability Forum has been convened on an annual basis, as a joint undertaking of ASEAN Member States, the ASEAN Secretariat, international development agencies, disabled people's organisations (DPOs), disability-related CSOs, media, the business sector and academic groups. These multi-stakeholder forums serve to review progress in implementing disability policies across the ASEAN countries and make recommendations to member states on strategies to improve and accelerate the delivery of disability rights

Accountability measures

Despite all the legal provisions and institutional arrangements in place, the attainment of the rights of persons with disabilities remains a concern in Southeast Asia. At international level, country governments are required to submit an initial report to the Committee on the CRPD two years after ratifying the convention, and every four years subsequently. Thus far, only Thailand has submitted its initial report to the Committee on the CRPD and the committee has no enforcement powers in relation to countries that fail to submit their reports. To monitor the continued work of the Committee and access its observations on the implementation of the CRPD in Southeast Asian countries, visit the OHCRR web site.

At the sub-regional level, the ASEAN Inter-governmental Commission on Human Rights (AICHR) could be expected to play a key role in holding member states to account for their progress in advancing the rights of persons with disabilities. However, the mandate of the AICHR is currently limited to promoting (rather than enforcing) human rights. It has no authority to exercise oversight over country governments in terms of the CRPD or to receive and investigate complaints of disability rights violations. The Terms of Reference of the AICHR are under review in 2014 and many human rights organisations are advocating for the AICHR to adopt a stronger oversight role in the future. The ASEAN Commission on the Promotion and Protection of the Rights of Women and Children (ACWC) is tasked with upholding rights contained in the CEDAW and CRC in the Southeast Asian sub-region. These include the rights of women and children with disabilities.

At the national level, five of the ASEAN countries – namely the Philippines, Indonesia, Malaysia, Myanmar and Thailand - have a National Human Rights Institution (NHRI), which should be expected to advance and promote human rights including the rights of persons with disabilities in their respective countries.

The UN agency ESCAP is actively monitoring and supporting disability rights initiatives in the region.

It is an important resource and coordination mechanism.

Main civil society actors

According to the online platform, *Human Rights in ASEAN*, the formal ASEAN structures have generally adopted a conservative and unclear approach to engagement with CSOs. There are many DPOs and CSOs in each of the ASEAN countries working to advance the rights of persons with disabilities and to deliver vital services to them. The main DPOs working at the regional level and/or focusing on Southeast Asia as a whole include:

- **Disabled Peoples' International Asia-Pacific** (DPI-AP) is one of the convening organisations of the ASEAN Disability Forums, which have taken place annually since 2011. With its regional development office in Bangkok, DPI-AP is a cross-disability, self-help, human rights organisation of persons with disabilities. It promotes full participation and equal opportunities for persons with disabilities and has worked extensively with international organisations and UN agencies to advance the disability movement in Asia and the Pacific. Most countries in the region also have their national level DPI organisations, e.g. Singapore and Indonesia.
- The **Asia-Pacific Development Centre on Disability** facilitates collaboration amongst organisations of persons with disabilities in the Asia-Pacific region to promote their empowerment and an inclusive, barrier-free and rights-based society. From its base in Bangkok, APCD brings people together from different parts of the region to share their expertise in disability-related areas, such as strengthening of self-help organisations and implementing community-based rehabilitation services. It believes that persons with disabilities are the most effective catalysts to support their peers in neighbouring countries.
- The **ASEAN Autism Network** works with other stakeholders to support, assist, facilitate and enhance autism-related family support groups in the ASEAN region and globally. One of its main objectives is to educate, develop and strengthen autism-related family support groups in each member country so that they can progress towards achieving global standards with reference to the CRPD and other international and regional instruments related to autism.

Several international organisations make important contributions to the disability movement in Southeast Asia, including the Abilis Foundation, Save the Children, CBM International, Handicap International, Helen Keller Foundation, Leonard Cheshire Disability International, World Vision, ADD International, UNICEF and WHO. Other organisations playing a key role in awareness-raising, advocacy and service provision include (but are not limited to):

- The **ASEAN General Election Network for Disability Access** (AGENDA) is a consortium led by the International Foundation for Electoral Systems. It aims to improve access to political and electoral life for persons with disabilities throughout Southeast Asia. It assists DPOs to develop tools and regional partnerships so they can monitor and raise awareness about electoral access for persons with disabilities.
- The **CBR Asia-Pacific Network** was established by the WHO to promote and strengthen community-based rehabilitation across the region and to support network members in 36 countries. The aim is further to mobilise resources and facilitate information exchange. CBR Asia-Pacific Network promotes disability-inclusive development and works in line with the CRPD and the Incheon Strategy of UNESCAP.
- The **Institute on Disability and Public Policy** is a network of universities and NGOs that promote the analysis and understanding of public policies for persons with disabilities in the ASEAN region. It offers study fellowships, conducts policy research and undertakes public education and capacity-building to realise the vision of an ASEAN region that is inclusive, barrier-free, and rights-based, where persons with disabilities are leaders in the determination of their own destinies.

Why Sweden needs to do more to include persons with disabilities

Sweden is obliged by article 32 in the Convention, ratified by Sweden, to include persons with disabilities in all development cooperation programmes. It states that State Parties involved in international cooperation have a responsibility to undertake appropriate and effective measures such as:

- *a) Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;*
- *b) Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;*
- *c) Facilitating cooperation in research and access to scientific and technical knowledge;*
- *d) Providing, as appropriate, technical and economic assistance, including by facilitating access to and sharing of accessible and assistive technologies, and through the transfer of technologies.*

All Swedish support is to be based on the perspectives of the poor and a human rights perspective (meaning that the principles of accountability, transparency, participation and non-discrimination should be applied to processes and programme design).

What Sweden can do - Seven questions to discuss

Within its mandate and strategy for the ASEAN region, Sweden has a range of opportunities to include persons with disabilities in a more deliberate manner. Questions to discuss:

- Could Sweden do more to stay updated on the situation of persons with disabilities in the region and the measures initiated by regional bodies to address the rights of persons with disabilities? Could the regional office do more to support Embassies in this regard? E.g. Inclusion Made Easy - a quick programme guide to disability in development here
- Many countries lack data on the situation of persons with disabilities. Could Sweden do more to promote regional research in the area of disability?
- Could Sweden do more to systematically include disability rights as an explicit part of its support to regional accountability mechanisms, efforts to establish independent human rights institutions, election monitoring and watch dog organisations? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure that women, men and children with disabilities (and mental health conditions) are systematically included and even prioritised in emergency relief and humanitarian aid efforts? E.g. refer to
  - ✓ Manual on the design and building of barrier-free emergency shelters here
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden do more to include the perspectives of persons with disabilities in the field of integrated urban planning in Southeast Asia and in efforts to improve the access of vulnerable groups to basic, sustainable infrastructure? E.g. making infrastructure accessible to persons with disabilities, by including this already at the planning stage as it will be more expensive to adjust these things later.
- Could Sweden do more to include DPOs in regional networking and programmes that seek to strengthen civil society organisations and networks to influence policies and monitor the implementation of policy commitments?

- Could Sweden do more to ensure that women with disabilities are included in regional programmes aiming to advance women's rights and gender equality? To include women with disabilities in SRHR and GBV programmes? Women with disabilities are heavily overrepresented in GBV.
- Could Sweden do more to build strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the regional office need to take such initiative?

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Afghanistan

September 2014

The situation of persons with disabilities

The most recent statistics on disability in Afghanistan derive from a National Disability Survey, jointly conducted by the Government of Afghanistan and Handicap International in 2005. The survey found a general prevalence rate of 2.7% for severe disabilities and 4.7% when less severe disabilities were taken into account. This translates into between 660,000 and 1.2 million persons with disabilities. One in five households is estimated to have a person with a disability. Around three-quarters of persons with disabilities live in rural and poor semi-urban settings (Norad 2012). Most are illiterate, unemployed or lack access to health services, education and other opportunities (National Disability Survey 2005).

In absolute figures, the largest numbers of persons with disabilities are located in Kabul and Herat province. The Southern area has a relatively higher proportion of persons with disability, probably due the on going conflict, poorer access to health services than elsewhere in the country, and the lowest level of literacy and access to education, especially for girls (Norad 2012).

The vast majority of the estimated 200,000 children with disabilities in Afghanistan do not go to school. The National Disability Survey found that over 72% of persons with disabilities over six years old had not received any education. Women and girls with disabilities are living in extremely difficult situations being discriminated both as females and as persons with disabilities e.g. legal and economic obstacles, exclusion and stigmatisation.

An important factor contributing to disabilities in Afghanistan is the presence of landmines and explosive devices, which kill and maim hundreds of people every year. According to the Mine Action Programme of Afghanistan (MAPA), there are 4,681 minefields and 192 battlefield areas that threaten the lives and livelihoods of 1,655 Afghan communities in the country.

Legal and policy frameworks

The government of Afghanistan has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2012) the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD), as well as its Optional Protocol. The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Signing the *Proclamation on the Full Participation and Equality of People with Disabilities in the Asia Pacific Region* and the *Biwako Millennium Framework for Action Towards an Inclusive, Barrier Free and Rights Based Society for Persons with Disability*. Signatories pledge their commitment to developing effective policy and programmes at national, sub-regional and regional levels aimed at systematically improving the conditions of persons with disabilities and harnessing their full development potential.
- Signing and acceding (in 2002) to the *Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction* (also known as the Ottawa Mine Ban Treaty). This placed an obligation on the government to clear all known areas contaminated by anti-personnel mines within 10 years. In 2012, the Afghan Government successfully requested a ten-year extension to the treaty to meet its obligations.

- Signing and acceding (in 2011) to the *Convention on Cluster Munitions*, thereby agreeing to destroy all stockpiles of cluster munitions within eight years, clear all areas contaminated with cluster munitions remnants within 10 years, and provide assistance to and fulfil the rights of victims of cluster munitions.
- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN *Convention on the Rights of the Child* and the *Convention on the Elimination of All Forms of Discrimination against* Women – both of which make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

- The 2004 *Constitution* of Afghanistan promotes the integration of people with disabilities into public and social life. Article 22 prohibits any form of discrimination between Afghan citizens. Article 53 provides for financial aid to persons with disabilities and guarantees their "active participation and re-integration into society." Article 84 makes provision for two persons with disabilities to be appointed by the President as Members of Parliament in the House of Elders.
- A *National Policy for Persons with Disabilities* was developed in 2004 with input from multiple stakeholders including disabled people's organisations (DPOs). It was coupled with the revised *Afghanistan National Disability Action Plan* (ANDAP) 2008-2011, which included strategies to improve access to education, employment, justice, protection, care, social insurance and social assistance for persons with disabilities.
- Since, the ANDAP has been replaced by the *National Law of Rights and Benefits of People with Disabilities*. It provides for economic, social, political, cultural, educational and rehabilitation support to women, men and children with disabilities, the protection of their rights and their active participation in society. The law also states that 3% of jobs in government and the private sector are to be reserved for persons with disabilities. The law has however been criticised for not being adequately rights-based and for favouring war victims over other persons with disabilities (Afghan Landmine Survivors' Organisation, Undated).
- A *National Strategy for Disability and Rehabilitation 2013-2016* has been developed with support from EU and the UN Afghanistan Disability Support Programme. It is supposed to be accompanied by an Action Plan, which is not available on the Internet. The Strategy has a strong bias towards physical disabilities and rehabilitation services for this group. Intellectual disabilities are not dealt with at all.
- Afghanistan's *National Development Strategy* further identifies disability as an important crosscutting issue and seeks to advance the rights of persons with disabilities across various sectors. Since 2007, a number of development programmes have included disability indicators.

Implementing agencies

Lead responsibility for advancing the rights of persons with disabilities in Afghanistan is vested in the Ministry of Labour, Social Affairs, Martyrs and Disabled (MoLSAMD). The goals of the ministry include:

- Enhancing the social inclusion of marginalised groups, amongst them persons with disabilities;
- Imparting training in skills development, with priority given to persons with disabilities amongst others.
- Creating legislation to empower persons with disabilities; and
- Subscribing to all international conventions advancing the rights of persons with disabilities.

MoLSAMD is also responsible to coordinate the implementation of the National Strategy and to support other ministries. The policy framework makes provision for the creation of a National Disability Commission, linked to the Office of the Deputy President, which has the duty to advance

the development of a disability-friendly environment. The commission is also meant to collaborate with national and international bodies, including DPOs, to monitor the implementation of the policy. However, such a commission was never established and the MoLSAMD continues to coordinate all matters relating to disability.

Besides MoLSAMD and the commission, the main other state institutions mandated with disability policy and programme implementation are the Ministries of Health and Education:

- The Ministry of Education has adopted an inclusive strategy for scholars with disabilities. It is responsible for training school teachers in inclusive education practices, raising awareness amongst children with disabilities and their parents on the benefits and goals of inclusive education, and ensuring that access to primary and secondary education is improved.
- The Ministry of Public Health has a *Disability and Physical Rehabilitation Strategy* that seeks to prioritise disability and rehabilitation programmes within the ministry. Its goals include improving the social inclusion of persons with disabilities, enhancing the provision of early treatment to children with severe disabilities and increasing prevention measures that target avoidable causes of disability.

While state institutions have increased their efforts to advance disability rights, the vast majority of services for people with disabilities continue to be provided by international and non-government organisations, such as the large-scale rehabilitation programmes run by the International Committee of the Red Cross and the Swedish Committee for Afghanistan - SCA (see the next page for more information on these organisations). Special and in inclusive education programmes for children with disabilities are also run by organisations like the SCA.

Accountability measures

Despite all the legal provisions and institutional arrangements in place, the attainment of the rights of persons with disabilities remains a major concern. At a broad level, the Afghan Independent Human Rights Commission has the mandate to monitor the protection and advancement of human rights in the country. It has a department dedicated to disability rights that is reported to be quite active (Norad 2012). In addition, the two persons with disabilities who serve as parliamentarians are in theory well placed to keep disability issues on the political agenda. As a National Disability Commission has not been established, there is no active multi-stakeholder body monitoring the implementation of disability policies. Generally, government structures have inadequate capacity and technical expertise to monitor disability rights effectively and DPOs often have weak structures, especially at regional and district levels. At the international level, Afghanistan has not yet submitted its first report to the UN Committee on the CRPD. To monitor the continued work of the Committee and access its observations on the implementation of the CRPD in Afghanistan, visit http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx.

Main civil society actors

There is no unanimously recognised umbrella organisation for persons with disabilities in Afghanistan. As far as DPOs are concerned, the main role-players are:

- The **Accessibility Organisation for Afghan Disabled** was established by persons with disabilities and works for persons with disabilities and other vulnerable groups. AOAD networks with schools, communities, government authorities and the private sector to advocate for the equalisation of persons with disabilities, inclusivity in education, accessible environments and social inclusion.
- The **Afghan Landmine Survivors' Organisation** seeks to advance the rights of all persons with disabilities by advocating for the implementation of the CRPD, as well as national laws and policies pertaining to disability in Afghanistan. It also provides peer support, education, health and rehabilitation services to persons with disabilities and promotes their inclusion in all aspects of community life.
- The **Development and Ability Organisation** has an active Board of Directors entirely comprised of people with disabilities. DAO

promotes an inclusive, barrier-free and rights based society for persons with disabilities in Afghanistan. It advocates for the protection of disability rights, conducts training on disability rights and awareness, and also runs a rehabilitation centre in the province of Kunar.

- The **Afghanistan Association of the Blind** offers services and training to blind and visually impaired Afghans, including lessons in Braille, vocational skills, navigation techniques and life skills. With offices in Kabul, Balkh, Nangarhar, Herat and Peshawar-Pakistan, the association has been supported by the Norwegian Association of Blind and Partially sighted since 1998.
- The **Afghan National Association for the Deaf**, which provides education services to deaf children and teacher training in sign language.

Several international organisations play a role in supporting the disability movement in Afghanistan, including Diakonia, Save the Children, UNESCO, World Vision, UNICEF, WHO, CBM International, GIX (via regional programme), BRAC and War Child (Holland). The UN-supported Mine Action Coordination Centre of Afghanistan takes the lead in the clearance of landmines. Other organisations playing a key role in awareness-raising, advocacy and service provision include (but are not limited to):

- The **International Committee of the Red Cross** (funded by Norad in Afghanistan) and the **Afghan Red Crescent Society**, which run several physical rehabilitation centres in the country and provide training to orthopaedic technicians.
- The **Swedish Committee for Afghanistan**, which coordinates a well-established community-based programme called Rehabilitation of Afghans with Disabilities in 13 provinces. The programme includes community mobilisation and advocacy, employment support for persons with disabilities, special and inclusive education, physical rehabilitation services and capacity development.
- **Handicap International**, which works to improve access to rehabilitation services, social inclusion of persons with disabilities and prevention programmes to reduce the prevalence of landmine accidents.
- **Digni** (a Norwegian umbrella body of faith-based CSOs), which undertakes the daily running of the Physiotherapy Institute in Kabul, amongst other health and rehabilitation facilities.
- **Serve Afghanistan**, which runs programmes aimed at blindness prevention, training of the deaf and hearing impaired, advocacy, mobilisation and empowerment of persons with disabilities.

What Sweden can do: Eight questions to discuss

The work of Sida and the Embassy is directed by the results strategy for Afghanistan 2014-2019. It does not specifically mention persons with disabilities as a target group, but this aspect is relevant for all focus areas in the Strategy and could be more systematically included in dialogue, analysis, planning and programming. Questions to discuss:

- Could Sweden do more to include disability rights as an explicit part in the support to accountability mechanisms, human rights institutions and watchdog organisations? Monitoring tools can be downloaded here.
- What can be done, in addition to and in synergy with the Swedish Committee for Afghanistan, to strengthen the capacity of DPOs in Afghanistan so that they can raise awareness around disability rights and monitor implementation of legal and policy commitments?
- Could Sweden do more to include and enable persons with disabilities and their organisations to participate in human rights networks and social and cultural events?
- Could Sweden do more to ensure that women with disabilities are included in programmes focussing women's rights and protection – especially gender based violence?

- Could Sweden do more to promote inclusion (with quality and retention) of children and youth with various disabilities in education and skills training programmes at all levels? Resources and tools can be found here.
- Could Sweden do more to ensure that programmes focussing on employment, rural and private sector development, micro financing and economic integration are accessible and inclusive of women and men with various disabilities? Resources and tools can be found here.
- Could Sweden do more to ensure that women, men and children with disabilities (and mental health conditions) are systematically included and even prioritised in emergency relief and post conflict efforts? E.g. refer to
  - ✓ Manual on mainstreaming disability in disaster risk reduction here, Disability Inclusive Disaster Risk Management: Good Practices here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so and that other Nordic donors are also interested in this? What support and additional information would the embassy need to take such initiative? E.g. Inclusion Made Easy - a quick programme guide to disability in development here.

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Bangladesh

November 2014

The situation of persons with disabilities

There are no reliable, up-to-date, nationwide statistics on disability in Bangladesh. Existing data are based on projections, for example using the WHO/World Bank average prevalence rates for developing countries, or on sample surveys. The Bangladesh Bureau of Statistics (BBS) has published a Household Income & Expenditure Survey (HIES) in 2010, which found a disability prevalence rate of 9.07%. But the 2011 National Census found only 1.7%. Earlier in 2005, NFOWD and Handicap International jointly found a prevalence rate of 5.6%. The Department of Social Services (DSS) is currently (2014) performing a nationwide door-to-door survey. Riddled with a plethora of shortfalls, this is coming up with a rate of about 2%. A 2011 World Bank case study on disabilities in Bangladesh estimated that 16.2% of working age people had some kind of disability. This represents more than 24 million individuals. Using an expanded measure of disability, the prevalence rate amongst adults was seen to be as high as 19.6%. The study also found a noteworthy gender imbalance in disability. Of all persons with disabilities, 69 out of every 100 were female. The prevalence of disability was higher in rural areas (17.3%) than in urban areas (13%). Persons with disabilities, on average, had completed only 2 years of schooling and were more likely than those without disabilities to be unemployed and to experience multiple dimensions of poverty (Mitra et al 2011). The confusion is most likely a result of different interpretations and definitions of disability.

A 2008 survey with women with disabilities in Bangladesh found that 50% had never married, 72% lived with their parents or a sibling and 40% reported sometimes being mistreated by their families. The vast majority were unaware of any government or NGO services for persons with disabilities, and 80% said they were unaware of any law or policy pertaining to disability in the country (Hussain 2008).

Information on children with disabilities in Bangladesh is inadequate. In 2009, the Disability Rights Watch Group estimated that there were around 1.6 million children with disabilities in the primary school age cohort, of whom only 4% had access to education. The Child Sight Foundation reports that about 2% of children live with severe disabilities in Bangladesh.

The sheer number of people with disabilities in Bangladesh is high enough to merit special attention (Hussain 2008). The clear need for more reliable, comprehensive and detailed disability data has been identified as a priority by organisations of people with disabilities (DPOs) and by the government. A broad national survey on disabilities has been underway since 2011. At the time of writing, the results were not yet available.

Legal and policy frameworks

The government of Bangladesh has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2007) the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD), as well as its Optional Protocol (in 2008). The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities. Read the Convention at www.un.org/disabilities/convention/conventionfull.shtml.
- Signing the *Proclamation on the Full Participation and Equality of People with Disabilities in the Asia Pacific Region* and the *Biwako Millennium Framework for Action Towards an Inclusive, Barrier Free and Rights Based Society for*

Persons with Disability. Signatories pledge their commitment to developing effective policy and programmes at national, sub-regional and regional levels aimed at systematically improving the conditions of persons with disabilities and harnessing their full development potential.

- Signing and ratifying other treaties that advance the rights of people, including those with disabilities, for example the UN *Convention on the Rights of the Child* and the *Convention on the Elimination of All Forms of Discrimination against* Women – both of which make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.
- Ratifying the *Dhaka Declaration on Autism and Neurodevelopment Disabilities*, which recognises the need for concerted and coordinated actions, both regionally and globally, to promote accessibility to quality mental health services.

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

- The 1972 *Constitution of the People's Republic of Bangladesh* guarantees the basic human rights of every citizen of the country and prohibits any form of discrimination between social groups, including persons with disabilities. Article 15(d) secures the right to social security for persons with disabilities.
- Bangladesh passed the *Rights & Protection of Persons with Disabilities Act* in 2013. It approaches disability from a human rights perspective and provides for inclusive education, the reservation of seats on all forms of public transport, accessibility provisions for all public places, equal opportunities in employment and the protection of inherited property rights. The law requires persons with disabilities to register for identity cards to track their enrolment in educational institutions and access to jobs.
- Also in 2013, the *Neuro-Development Disability Protection Trust Act* was passed by Parliament, providing for the care, security and rehabilitation of persons with autism.
- The first *National Policy for the Disabled* was adopted in 1995, with the aim of mainstreaming disability into the country's development agenda. It gives guidelines for prevention, identification, rehabilitation, education, research and accessibility, among other things. It was followed by a Disability Welfare Act in 2001 and a National Action Plan in 2006, involving 17 different ministries. Since the adoption of the new Disabilities Act in 2013, the policy has been revitalised and coupled with new institutional arrangements and action plans.
- The *National Child Policy* of 2011 recognises the equal rights of all children, including those with disabilities. It provides for the dignified treatment of children with disabilities, their inclusion and participation in all aspects of society, including education. It also states that special education should be provided to children with disabilities who are unable to attend mainstream schools.
- The *National Building Code* of 2008 defines accessibility requirements for persons with disabilities. Further specifications are contained in the Disabilities Act of 2103, including sanctions in the event of non-compliance.
- The *Information and Technology Policy* of 2010 and the *Women Development Advancement Policy* of 2011 specifically refer to improving access and opportunities for persons with disabilities.
- Bangladesh has a complex *Social Safety Net*, which includes cash allowances for "financially insolvent" persons with disabilities and injured freedom fighters, stipends for students with disabilities, grants for special schools and the subsidisation of Service and Assistance Centres for persons with disabilities (see the next page for more information).

Implementing agencies

The *Rights of Persons with Disabilities Act* of 2013 calls for a 27-member National Coordination Committee to be mandated with coordinating the activities of all governmental and non-governmental role-players in order to fulfil the objectives of the law. In terms of government

agencies, the responsibility for advancing the rights of persons with disabilities in Bangladesh is vested in the Ministry of Social Welfare. Within the ministry, there is a National Foundation for the Development of Disabled Persons (Jatiyo Protibondhi Unnyan Foundation or JPUF). The activities of the foundation include:

- Raising awareness about the rights of persons with disabilities;
- Providing and co-ordinating diagnostic, rehabilitative, therapeutic and education services to persons with disabilities and their families;
- Running a number of facilities, including schools for children with special needs, an autism resource centre, handicraft training centre and a hostel for jobseekers with disabilities; and
- Disbursing grants and loans to persons with disabilities, to disability-related projects and programmes of NGOs and to self-help organisations of persons with disabilities.

Service and Assistance Centres for persons with disabilities have been established in all 64 districts of Bangladesh, providing free access to professional staff including doctors, physiotherapists, clinical speech and language therapists. The centres promote early identification of disabilities, while also providing a variety of rehabilitation and education services. According to Bangladesh's 2012 report to the Committee on the Rights of the Child, around one million people including children with disabilities had by then received services through these centres.

Rehabilitation services for persons with disabilities are therefore channelled primarily through the centres and not through the general health care system. Besides the JPUF, the other main state institutions mandated with disability policy and programme implementation are the Ministry of Primary and Mass Education, and the Ministry of Education (which oversees secondary and tertiary education). A Gender and Inclusive Education Action Plan is being implemented to improve access to and participation in school activities for girls with disabilities. The construction of all new schools includes ramps and toilet facilities that are accessible to children with physical disabilities. However, efforts to advance inclusive education in government schools have been inadequate and more progress towards inclusivity has been in the vast non-formal education sector, notably in those schools run by the NGO BRAC (Disability Rights Watch Group 2009).

While state institutions have increased their efforts to advance disability rights, NGOs continue to play a critical role in providing services to people with disabilities in Bangladesh.

Accountability measures

Following the ratification of the CRPD and its Optional Protocol, the Government of Bangladesh created a formal mechanism to monitor the progress. 46 Disability Focal Points (FPs) were created, in as many ministries & departments in 2008. A National Monitoring Committee was also launched, chaired by the Secretary of the Ministry of Social Welfare (MOSW). Besides the FPs, the Chairperson of the National Human Rights Commission, and a few other recognised Human Rights promoters were included in this committee. The *National Forum of Organisations Working with the Disabled* (*NFOWD*) president was the only representative in this committee from the disability sector. The committee almost regularly convenes on a quarterly basis. The CRPD has been translated into Bangla. There is an official version, a popular version, and a child-friendly version of the CRPD in Bangla. The official version is also available in accessible formats.

At a broad level, the National Human Rights Commission of Bangladesh has the mandate to monitor the protection and advancement of human rights in the country. However, there are reservations about the impartiality and capacity of the commission amongst some civil society actors. Following the government's ratification of the CRPD, the National Forum of Organisations Working with the Disabled (NFOWD), which is the apex federating body of NGOs working in the disability development sector in Bangladesh, decided in 2009 to form a Disability Rights Watch Group comprised of leading civil society experts and disability advocates. Since 2009, there has also been a Parliamentarians' Caucus on Disability. The 2013 *Rights & Protection of Persons with Disabilities Act*, which was drafted largely by NFOWD with input form the Parliamentarians' Caucus, makes provision for the creation of committees (with compulsory

representation from DPOs) at national, district and upazila levels to protect the rights of persons with disabilities. It remains to be seen how much capacity and authority these committees will have to monitor implementation of disability policies or hold implementing agencies to account.

At the international level, in spite of being one of the first countries to ratify the convention, Bangladesh has not yet submitted a report to the UN Committee on the CRPD. In 2010, a report was drafted for submission, but it was not sent. The process has been initiated again, and it is reported that the report will be sent by the end of December 2014. To monitor the continued work of the Committee and access its observations on the implementation of the CRPD in Bangladesh, visit http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx.

Despite all the legal provisions and institutional arrangements in place, the attainment of the rights of persons with disabilities remains a major concern.

Main civil society actors

There are an estimated 30, 000 NGOs active in Bangladesh, and amongst these around 300 that focus on disability rights to a greater or lesser extent (Handicap International).

The largest umbrella body is the **National Forum of Organisations Working with the Disabled** which is made up of both DPOs and other service providing organisations. NFOWD is well established and works to realise the rights of all people with disabilities through awareness raising, advocacy and networking to establish an influential base in society. Bangladesh also has a network of self-help organisation of persons with disabilities at the local level (often referred to as Disabled Peoples' Organisations to Development). As far as DPOs at the national level are concerned, some of the role-players include:

- **Bangladesh Protibandhi Kallyan Somity** (BPKS), a national cross-disabilities organisation working for people with disability and run by people with disabilities. BPKS aims to establish a society where all individuals including people with disabilities enjoy their human rights. It promotes the active participation of persons with disabilities in every step of achieving this goal.
- The **National Grassroots Disability Organisation**, which works to build the capacity of DPOs to advocate for the full implementation of the CRPD.
- The **National Fellowship for the Advancement of the Visually Handicapped**, which runs various programmes involving persons with visual disabilities.
- **Bangladesh National Federation of the Deaf**, which advances the rights of deaf and hearing impaired persons.
- The **National Council of Disabled Women**, which aims to create national awareness of the rights of women with disabilities through advocacy, legal action and supporting grassroots organisations of women with disabilities.

Several international organisations play a role in the disability movement in Bangladesh, including ActionAid, Save the Children, World Bank, CBM International, Handicap International, Sight Savers International, Helen Keller, World Vision, UNICEF and WHO. Other organisations playing a key role in awareness-raising, advocacy and service provision include (but are not limited to):

- The **Centre for Disability in Development**, which works to support and empower persons with disabilities to participate fully in all aspects of society, while simultaneously educating the community on how to be more inclusive.
- **ADD International** in Bangladesh, which works through a network of DPOs in 25 districts, providing skills training to persons with disabilities, funding and promoting accessible water and sanitation facilities, as well as lobbying banks to provide credit and employers to provide job opportunities to persons with disabilities.
- **BRAC**, which specifically targets the inclusion of children with special needs in the pre-primary and primary education services they provide through non-formal schools in Bangladesh.

What Sweden can do: 8 questions to discuss

- Could Sweden do more to systematically include disability rights as an explicit part of its support to regional accountability mechanisms, efforts to establish independent human rights institutions, election monitoring and watchdog organisations? Monitoring tools can be downloaded here.
- Could Sweden do more to strengthen the capacity of DPOs to raise awareness around disability rights and to monitor the implementation of legal and policy commitments? E.g. extending targeted calls for proposals to DPOs and inviting DPOs to participate in civil society capacity development programmes.
- Could Sweden be more proactive in ensuring that women with disabilities are included in programmes focussing on SRHR - in particular in gender-based violence and women's empowerment initiatives? E.g. by supporting deliberate, explicit measures and efforts to include women and men with various disabilities in the supported programmes and by promoting disaggregated monitoring indicators. Women with disabilities are heavily overrepresented in GBV.
- Could Sweden be more proactive in ensuring that programmes related to labour market, entrepreneurship and private sector inclusive of persons with various disabilities? Examples of tools can be found here.
- Could the embassy do more to bring existing knowledge and research on inclusion of persons with disabilities into resilience programmes? Examples of tools can be found here.
- Could Sweden do more to promote a disability perspective in joint donor planning meetings, taking into consideration that article 32 of the CRPD requires donors to do so and that other Nordic donors are also interested in this? ? What support and additional information would the regional office need to take such initiative? Inclusion Made Easy - a quick programme guide to disability in development **here**
- Could Sweden consider inviting persons with disabilities and their organisations to participate in their human rights networks and social and cultural events? This could open doors for the disability organisations and their issues.
- Could Sweden do more to stay informed on the situation and rights of persons with disabilities in Bangladesh and to keep updated of the Swedish position on these rights? E.g. appointing a designated person for this.

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Disability Rights in Cambodia

January 2015

The situation of persons with disabilities in Cambodia

Estimates of the number of persons with disabilities in Cambodia vary significantly, depending on the definitions used. A Census of the National Institute of Statistics in 2004 showed a prevalence rate of 4.7 per cent, while figures from the 2008 Census reached a prevalence of 8.1 per cent of the country's population. The World Health Organisation (WHO) and World Bank's *World Report on Disability* (2011) estimates that 15 per cent of the world's population have a disability, of whom 2.2 per cent have very significant difficulties functioning. Extrapolating this figure to Cambodia would mean there are over 2 million people with disability and over 320,000 of whom have very significant difficulties functioning.

As a post-conflict country, Cambodia has a number of risk factors which can lead to high prevalence of psychosocial impairments and prevalence of post-traumatic stress disorder is substantially higher than global averages. Little appears to be being done to address this challenge with just 0.2 per cent of the total health budget spent on mental health and no planning for psychologists and social workers in health sector human resource planning (in addition to psychiatrists and psychiatric nurses). The lack of availability of appropriate and free medication for those who require them is a significant challenge.

The lack of access to appropriate and affordable health, rehabilitation and disability services has a significant impact on the well-being and participation of people with disability in Cambodia. Persons with disabilities are significantly poorer than non-disabled persons. The 2004 Cambodia Socio-Economic Survey (CSES) found that rural persons with disabilities who are heads of households earn one-third the GDP per capita (average income level). It also showed that persons with disabilities are twice as likely to be landless.

Although adults with disability are often marginalised and vulnerable, children with disability are even more so. Issues preventing children with disabilities attending school include social discrimination, lack of transport, assistive devices, physical barriers, teachers' lack of skills in appropriate teaching methodologies and the need for children to help with housework. A UNICEF study showed that as many as 10.1 per cent of children have disabilities, with cognitive and speech impairments the most common. Children with intellectual disability and their families face significant stigma and discrimination, with very few organisations providing services and support.

Persons who are deaf or have a hearing impairment are particularly marginalised. The word 'deaf' translates into Khmer to mean' cannot speak', indicating a lack of understanding of the concept of deafness (loss of hearing). Many people who are deaf are often misdiagnosed as having an intellectual disability. It is established there are over 50,000 people who are deaf in Cambodia and 500,000 with hearing impairment, however just 1,800 people who are deaf have been taught sign language.

Women with disability face the triple burden of discrimination. Recent research found that when compared to their peers without disability, women with disability:

- Experienced significantly higher rates of emotional, physical and sexual violence by household members (other than partners) compared to women without disability;
- Were considered less valuable and more burdensome within the household;
- Were 2.5 times more likely to require permission from a partner to seek healthcare; and,
- Experience higher rates of psychological distress (as a result of partner violence) and are less able to disclose family violence or seek appropriate support (often because communities/NGOs do not seek to include them in prevention/support programs).

The government has shown great commitment towards improving the situation of persons with disabilities by adopting legislation and policies and by ratifying the UN Convention on the Rights of Persons with Disabilities in 2012. The first steps towards support of people with disability in Cambodia came as a result of the legacy of landmines and other Unexploded Ordnance (UXO) and the Asia and the Pacific (UNESCAP) decade for persons with disability '*Full Participation and Equality of Disabled Persons in the Asian and Pacific Region*'; (1993 – 2002). The Prime Minister Hun Sen, who has a visual impairment himself, has also spoken out about discrimination against people with disabilities. This positive attitude has helped policy development, although implementation still lags behind.

To support the Cambodian government in its efforts, the Australian Government and the United Nations Development Program (UNDP), the World Health Organisation (WHO) and the United Nations Children's Fund (UNICEF) have entered into an agreement on a joint development programme "Disability Rights Initiative Cambodia" (DRIC). It is a 5-year program (2014-2018) funded by Department of Foreign Affairs and Trade (DFAT) of Australian government with a projected budget of AUD$13.1 million.

Legal and policy frameworks

The government of Cambodia has taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of **international instruments**, these steps include:

- Signing and ratifying (in 2012) the *United Nations Convention on the Rights of Persons with Disabilities (CRPD)*, as well as its Optional Protocol. The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities. Read the Convention at www.un.org/disabilities/convention/conventionfull.shtml.
- Cambodia has signed most of the UN Human Rights documents, including the *Anti-Personnel Mine Ban Treaty* (also known as the Ottawa Convention) in 1999, the *UN Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women* – both of which make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.
- Signing the *Proclamation on the Full Participation and Equality of People with Disabilities in the Asia Pacific Region* and the *Biwako Millennium Framework for Action Towards an Inclusive, Barrier Free and Rights Based Society for Persons with Disability*.

In terms of **national laws and policies**, the following laws, cabinet resolutions, regulations and policies pertaining to persons with disabilities are the most important.

- The constitution of 1993, amended in 1999, recognises fundamental human rights for all citizens.
- The Law on the Protection and the Promotion of the Rights of People with Disabilities of 2009 outlines the ambitions of the government and provides a legal framework for the functioning of the Disability Action Council (DAC) and for the National Acton Plan.
- A National Plan of Action for Persons with Disabilities, including landmine/ERW Survivors (NPA) was also finalised in 2009. To support coordination and implementation of the NPA, a National Disability Coordination Committee (NDCC) was established, comprising largely the same membership as the DAC.
- A number of Decrees were adopted in 2010-2013 for example: Sub-Decrees on the establishment and functioning of Disability Action Council (DAC). Sub-Decree on Organisation and Functioning of the Persons with Disabilities Foundation; Sub-

Decree on Employment Quota System for persons with disabilities; Sub-Decree on disability pension for poor persons with disabilities and the inter-ministerial Prakas (MoSVY and MoH) on the Classification of Disability.

- National Education Law (2008) aims at promoting lifelong education as a means of contributing to personal development and society as a whole. In addition, it recognises the fundamental human rights of students with disabilities on an equal basis with other students.

Implementing agencies

Compared with other countries in the region, Cambodia has a relatively complex governmental structure focused on people with disability. This includes two inter-Ministerial, multi-stakeholder coordination bodies (the DAC and NDCC), three government institution; the DAC Secretariat, the Department of Welfare of Persons and the Persons with Disabilities Foundation - all linked to the Ministry of Social Affairs Veterans and Youth Rehabilitation (MoSVY). In addition there are numerous overlapping committees, sub-committees and working groups. As most of these bodies do not meet regularly, their effectiveness is questionable. Also, the overlap of functions between different institutions results in unclear accountabilities.

The ***Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)*** has the overall responsibility for: '*Strengthen and Expand Welfare and Rehabilitation Services for People with Disabilities' –* as outlined in its Work Platform 2008-2013. This includes implementation of international conventions, national laws and policies, promoting Braille and sign-language and their use, enhancing efforts to provide economic empowerment, employment, social security, skills training, community-based rehabilitation (CBR)/organising self-help groups, and expanding sports and arts movements for persons with disabilities. The Work Platform does not specify which institution should lead.

The ***Department of Welfare of Persons with Disabilities*** has an overall responsibility for; 1) Promoting, monitoring, inspecting and enforcing policies, laws etc. on disability (including preparing cases for court and instituting fines for non-compliance); 2) Being a 'law consultant' to people with disability and public and private sector institutions; and 3) arbitrating conflict regarding the *Disability Law.* It has six sub-entities:

- Statistics and Communication Office;
- Rehabilitation Affairs Office;
- Vocation Training, Job and Conflict Resolution for People with Disability Office;
- Technical Office for Coordinating Disability, Braille and Sign Language;
- Women and Girls with Disabilities, Art and Sport of People with Disability Office; and,
- Disability Rights Administration.

The ***Disability Action Council (DAC)*** was established in 1997 as the national coordination and advisory mechanism on disability issues. Its mandate has since been developed and clarified in the Law on the Protection and the Promotion of the Rights of Persons with Disabilities (2009) and in subsequent decrees. The Disability Action Council (DAC) provides a forum to bring together all stakeholders in the sector. The governing board comprises representatives from the leading government ministries, DPOs, NGOs, donors and the business community. DAC is responsible for providing technical advice on disability and rehabilitation, assisting Ministries and other institutions to development policies and plans related to disability and rehabilitation, promoting implementation of those policies, monitoring/evaluating those polices and communicating with relevant national/international communities for the purpose of information exchange and mobilising resources. A permanent DAC secretariat is established within the Ministry of Social Affairs. The major challenges of DAC are:

- Lack of a functioning monitoring mechanism to track activities;
- Limited data on disability and service provision;
- Limited financial, human and technical resources; and,
- Limited coordination and collaboration between stakeholders.

The Persons with Disabilities Foundation is a public administration institution that is responsible for; 1) Funding programs and institutions which assist persons with disability; 2) enhancing the welfare of people with disability, in particular those who are poor and who do not receive services/supports elsewhere, and 3) to provide loans and credits for reasonable accommodation. The Sub-Decree further elaborates the roles and responsibilities of the Fund as follows:

- Provide and manage rehabilitation services and centres;
- Fund implementation of programs providing services for people with disability including in heath, rehabilitation and education etc.;
- Promote improved the welfare of and integrate people with disability into the community;
- Collect fines from institutions that do not comply with the *Disability Law*;

The ***National Disability Coordination Committee (NDCC)*** was established in 2009 to support coordination, implementation and monitoring of the National Plan of Action for Persons with Disabilities, including Landmine/Explosive Remnants of War (ERW) Survivors (NPA). The committee comprises of largely the same membership as the DAC and has similar advisory and coordinating functions.
The NDCC has also worked with the National Strategic Development Plan (NSDP) processes to promote inclusion of disability aspects and indicators.

There is also the ***Cambodian Mine Action and Victim Assistance Authority (CMAA),*** which is responsible for mine clearance, mine risk education, survivor assistance, and related mine action activities.

In 2008 the ***Ministry of Education, Youth and Sports*** (MOEYS) presented the Policy on Education for Children with Disabilities. A master plan for the implementation was launched in 2009 to ensure the right of all children with disabilities to an education equal with other children. The Cambodian education sector program is supported by a range of donors, including UNICEF, World Bank and Sida. It is reported by many donors to be one of the best examples of an inclusive education program. It can be viewed on YouTube and on various donor sites. The Ministry has started to maintain statistics on children with disabilities through the Education Management Information System that monitors the progress.

Despite the good efforts, a survey by Cambodia Disabled People's Organisation (CDPO) and published 2009 in their '*Report on Current Situation of Education for Children with Disabilities'*, showed that some of the information gaps are larger than the Ministry is aware of. There is a need for more effective channels of communication between the Ministry officials and the schools, and the officials' appreciation of the issues experienced by the children themselves. The survey also revealed a lack of appropriate resources for both children and teachers. Overall, schools seem to be inadequately equipped to handle the needs of children with disabilities.

In 2014 a ***"Disability Rights Initiative Cambodia" (DRIC)*** was launched by UN agencies and the AusAID to support the government efforts. It is a 5-year programme that aims to build capacity of duty bearers and rights holders. It is a broad initiative aiming to significantly enhance an enabling environment for persons with disabilities in Cambodia. The programme consists of the following four components:

Component 1 - Supporting Government implementation of the Convention on the Rights of Persons with Disabilities: UNDP will support the Disability Action Council (DAC) to effectively coordinate implementation of the National Disability Strategic Plan (NDSP).

Component 2 - Supporting Disabled People's Organisations to raise the voice and protect the rights of people with disability: UNDP will support and strengthen the capacity of the Cambodian Disabled People's Organisation (CDPO) develop its capacity and functioning.

Component 3 - Supporting rehabilitation systems strengthening: WHO support capacity building of key rehabilitation sector stakeholders, in particular MoSVY and Persons with Disabilities Foundation.

Component 4 - Inclusive governance and inclusive community development: UNICEF support capacity development for subnational government including Provincial Governors, provincial, district and commune decision-makers to implement disability inclusive development.

Accountability measures

The following accountability measures are available to hold the government to account to its commitments:

Disability Action Council (DAC) has both a coordinating and a monitoring role. The council has 22 government representatives, 5 representatives from disabled people's organisations (DPOs), and one NGO representative (disability service provider). Its monitoring tools are still weak and because of its composition it is not able to independently comment on government performance.

The Cambodian human rights committee (functional in its present form from 2014) - The committee receives complaints and reports on UN conventions. In its recent report on the convent on civil and political rights the rights of children with disabilities to education and the rights of disabled people to vote was touched upon. It is also responsible to respond to the UPR recommendations.

Main civil society actors

Cambodia has a relatively large civil society community focused on people with disability. This is largely result of the landmine legacy, which led to the influx and high levels of support of International NGOs (INGO) in the 1990's.

The major disability organisation is the Cambodian Disabled People's Organisation (CDPO), established in 1994. It is a cross disability organisation with around 10,000 members. CDPO has subnational DPO members in all 23 provinces with a member structure as follows:

- CDPO – Phnom Penh office
- Provincial DPOs and Women with Disabilities Forums
- District Federations, formed by several Self-Help Groups (SHG)
- Village-level SHG

CDPO has three areas of focus: advocacy and rights monitoring (which includes research), communication and awareness raising and DPO development. Over recent years, CDPO has been working to increase capacity for informed advocacy based on research and analysis. CDPO has been undergoing an extensive period of restructuring. It is still not considered to be an "umbrella" organisation - as other national DPOs are not members. Most of its members organise only persons with mobility impairments.

The Association of the Blind in Cambodia (ABC) is for the most part, the only other national DPO. Established in 2000, it is a member of the World Blind Union. It mainly engages in service provision to the blind community.

There is no DPO for people who are deaf or hearing impaired. NGOs like the Maryknoll Deaf Development Program and Krousar Thmey have been working to support establishment of such a DPO for many years. One of the key constraints is that there are just 15 Cambodian adults who are deaf and know sign language and can read and write. The two main organisations working with people who are deaf and hearing impaired (Krousar Thmey and the Maryknoll Deaf Development Program) have recently agreed to work together to develop a common Khmer Sign Language, which will also assist in the development of DPO for people who are deaf/hearing impaired. (As a school and with no Khmer Sign Language, Krousar Thmey used American Sign Language).

There is a Parents Association of Children with Intellectual Disability (PACHID) in Phnom Penh and several groups supported by NGOs like Komar Pikar Foundation. There are no DPOs/SHG's comprising only people with intellectual and psychosocial disability.

Women are generally invisible in the disability movement, especially as leaders, and there is no specific women DPO.

Apart from DPOs, there are several NGOs and INGOs that provide services to and/or advocate on behalf of persons with disabilities. There is also an NGO Forum, which is the focal point for all CSOs, which has been supportive in terms of promoting disability aspects and indicators in the NSDP process.

A challenge facing the disability-focused civil society sector is lack of clarity regarding the differing roles and responsibilities of DPOs and NGOs. For many years, it was NGOs (often INGOs) that defined the priority agenda for civil society efforts on disability and provided support for DPOs to participate.

INGOs which play an important role in the disability sector are e.g. World Vision, Handicap International and Veterans International. The UK based Action on Disability and Development (ADD International) has organised self-help groups in many districts. Other active donors in the area of disability are USAID, EU, AusAID, DFID, CIDA, UNICEF, UN Development Programme.

What Sweden could do: 7 questions to discuss

Coherent with the new results strategy for Cambodia, focussing on democracy, human rights, gender equality and economic empowerment, Sweden could discuss the following:

- Could Sweden do more to keep up-dated with the developments within the area of disability rights and make more deliberate efforts to work inclusive? Examples of resources and tools are
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Inclusion Made Easy - a quick programme guide to disability in development **here**
- Could Sweden do more to include disability organisations in capacity building programmes/funding modalities for civil society/human rights organisations? In social and professional events and networks?
- Could Sweden do more to promote inclusion of disability rights monitoring and reporting in the support to human rights institutions and organisations? Especially in relation to follow up on the results of the new legislation and action plans for persons with disabilities and the reporting to the Committee on the rights of persons with disabilities (due in 2015). Monitoring tools can be downloaded here.
- Could Sweden do more to ensure that supported education and skills development programmes are accessible and inclusive of girls and boys with various disabilities, including mental health and linking it to community based inclusive development programmes? Could Sweden do more to promote quality and retention of children and youth with various disabilities in education and skills training programmes at all levels? Resources and tools can be found here.
- Could Sweden do more to seek strategic alliances and synergies with other donors and international organisations that have disability as a key interest? Especially the on going joint UN/AusAID programme, but also CIDA, Japan and the World Bank?
- Could Sweden do more to include women with disabilities in women networks, economic empowerment and in SRHR/GBV initiatives?
- Could Sweden do more to ensure accessibility for persons with various disabilities to economic empowerment programmes such as micro-credits, loans, vocational/skills training, agricultural and rural livelihood programmes and literacy programs - particularly for women and youth with disabilities? Resources and tools can be found here.

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Myanmar

December 2014

The situation of persons with disabilities

Myanmar has a population of 60 million people, of which 70 per cent are living in rural areas. The First Myanmar National Disability Survey conducted by the Department of Social Welfare and the Leprosy Mission International in 2010, indicated that a total of 2.3% of Myanmar's population have some form of disability, translating to approximately 1.3 million persons living with disability. The World report on Disability (2011) estimated a 6.4 % prevalence rate as more realistic (3.8 million persons). Of this, 68.2% are persons with physical impairment, 13.3% are persons with visual impairment, 10.4% are persons with hearing impairment and 8.1% have some form of intellectual disability. Landmine Monitor has identified over 3,450 landmine casualties in Myanmar/Burma from 1999 through the end of 2013. When compared to previous years, landmine casualties in Myanmar during 2013 and early 2014 have decreased. The decrease in landmine casualties is directly linked to less armed conflict within the country since the beginning of national ceasefire negotiations. When compared to other countries, Myanmar has produced the third largest number of known casualties due to antipersonnel landmines, globally, over the past eight years (International Campaign to Ban Landmines).

The socio economic status of people living with disabilities is considerably lower than the national average, only 15 per cent reporting any current livelihood, with less than 10 per cent attending high school or having access to health care. People living with disability also have limited opportunities to participate in community life and activities, and are excluded from the benefits of programmes which could improve their quality of life. The government has in the past five years increased their policy level efforts in the area of disability rights and joined regional and UN agreements and programmes. In 2014, new draft disability legislation is expected along with a new disability policy, a first report to the UN Committee on the rights of persons with disabilities is being prepared and a new census is planned to gain further knowledge on the situation for persons with disabilities. According to reports, access to medical and rehabilitative assistance to mine survivors, and other persons with disabilities, in Myanmar increased significantly during 2013 and early 2014, but remains inadequate.

Also during 2014, a Council of Persons with Disabilities was established to work towards adoption and implementation of laws, policies and programmes in line with the UN Convention on the Rights of Persons with Disabilities.

Legal and policy frameworks

The government of Myanmar has taken some legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. In terms of international instruments, these steps include:

Myanmar has ratified some of the UN Human Rights treaties, including the CRC in 1991, CEDAW in 1997 and the UN Convention on the Rights of Persons with Disabilities (CRPD) in December 2011. The country has still to ratify the Optional Protocol of the CRPD which would allow persons with disabilities whose rights have been violated to bring complains to the Committee on the Rights of People with Disabilities. The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities.

Myanmar has not yet ratified the Mine Ban Treaty and its optional Protocol. In April 2014, the UN Special Rapporteur on the situation of human rights in Myanmar again called on the government of Myanmar to accede to the Mine Ban Treaty and noted that the, "use of landmines has decreased significantly, although there has been limited progress in mine surveying and clearance, marking or fencing." However, Myanmar continued to abstain from voting on the annual UN General Assembly (UNGA) Resolution which calls for universalisation of

the Mine Ban Treaty. It has abstained each year regarding this annual UNGA resolution since 1997.

Signing *Bali Declaration on The Enhancement of The Role and Participation of The Persons with Disabilities in ASEAN Community* (2011-2020). Signatories pledge their commitment to developing effective policy and programmes at national, sub-regional and regional levels aimed at systematically improving the conditions of persons with disabilities and harnessing their full development potential.

Myanmar is also aiming at achieving the targets set in the Biwako Millennium Framework for Action and Biwako Plus Five: Towards an Inclusive, Barrier-free and Rights-based Society for Persons with Disabilities in Asia and Pacific (2003-2012). Both of them form regional policy guidelines for the Asian and Pacific Decade of Disabled Persons, which in June 2012 was extended to 2022.

In terms of **national laws and policies** pertaining to persons with disabilities, the following are the most important:

- The new constitution (2008) stipulates that the Union shall "a) care for mothers and children, orphans, fallen Defence Services personnel's children, the aged and the disabled; b) ensure disabled ex-Servicemen a decent living and free occupational training." The Constitution also Myanmar stipulates the right to education for all children.
- The Child Law from 1993 stipulates that children with "mental or physical disabilities" have a right to free primary education or vocational training and a right so special care and assistance from the state.
- A law on Rehabilitation and Employment of persons with disabilities was first enacted in 1958, and has since been revised and amended.
- However, most laws and policies are still not adapted to the CRPD, but there have been on going processes since 2011 to address these gaps. A new comprehensive, "Persons with Disability Rights Law" is expected to be presented by end of 2014. Several operational constraints have been identified, including the limited capacity of agencies, particularly given the "extreme" needs, lack of financial resources, few employment opportunities for people with a disability and the limited number of agencies willing to focus on disability issues in Myanmar.
- A National Plan of Action for Persons with Disabilities (2010-2012) was launched in 2010 with the objective to improve opportunities for persons with disabilities to contribute to the country's development. This Plan of Action contains a nationwide focus on persons with disabilities. Its main goals are to increase mobility, accessibility and opportunities for persons with disabilities in order to render them able to enjoy equal rights and to actively contribute to the economic and social development of the state as "responsible citizens". A part of the strategy is dedicated to inclusive disaster prevention and preparedness. A new Plan of action is being drafted in 2014. On the government web site, there is a summary in English of the government position and its cooperation with other actors in the disability field.

Implementing agencies

The Ministry for Social Affairs Relief and Resettlement is the governmental coordinating body for disability issues. The objectives for its disability efforts are:

- To protect the rights of persons with disabilities;
- To alleviate the discrimination based on the ground of disability;
- To promote dignity, ability, and capability the Persons with Disabilities;
  To enhance equal and full participation of the Persons with Disabilities in the national development task;
- To upgrade the socio economy of Persons with Disabilities

Within the Ministry, the Department of Social Welfare is responsible for "medical rehabilitation, social rehabilitation, and vocational rehabilitation for persons with disabilities and for rendering relief and resettlement services to victims of natural disasters such as earthquakes, storms, floods and fire

disasters". Among other things, the Department has implemented a project on "Supporting Social Welfare Administration - Promotion of Social Participation of the Deaf Community", with support of the Japan International Cooperation Agency (JICA). In Phase 1 of the project (2008-2010), Standardizing Myanmar Sign Language, Distribution of Basic Myanmar Sign Language Conversation Book and Sign Language Awareness Programmes was carried out. Training of trainers for Myanmar Sign Language and Trainings for Sign Language Supporters is on going 2011-13. The Department has also initiated community-based initiatives in collaboration with the Leprosy Mission International (Myanmar) and others.

The Ministry of Education is responsible for the implementation of the "Education for all National Action Plan, 2003-2015". It is an ambitious plan with the overall objective to introduce Inclusive Education, although with a lot of difficulties to overcome: Lack of skilled teachers, of tutorial materials and awareness in general. There are a few special schools and vocational training centres for different kinds of disabilities, most of them located in urban areas. The Ministry is also working with some of the NGOs to develop inclusive education pilot projects (e.g. Myanmar Independent Living Initiative). Mostly children with disabilities are still enrolled in special schools or institutions. According to the Ministry of Education report from 2010-11, "there were 801 disabled children in formal schools, 1450 children in special schools for the blind and the deaf, 30 disabled students in universities and colleges and 6 disabled students in master degree courses". This is a very small number as the population of school age children with disabilities is estimated at 460 000 according to government figures (2.32 %) and even more if using the World Disability Report figures.

The Ministry of Health is mainly responsible for prevention of disabilities, such as mother and child health care and vaccinations. The Ministry of health is however also engaged in the running of some rehabilitation centres and in health aspects of community rehabilitation projects.

The division of responsibilities between the Department of Social Welfare and the Ministries of Health and Education concerning persons with disabilities does not seem very clear. Also it is not clear how other on going development processes should link up with the community based disability inclusive development initiatives, for example:

- The Rural Development and Poverty Reduction Strategy, in which the target of reducing poverty levels to 16 per cent by 2015. In the area off socioeconomic reforms, priority is given to education, health, transportation, safe drinking water and irrigation. However, persons with disabilities are not specifically mentioned or targeted in the PRS, despite that they and their families make out a significant proportion to people living in poverty. There are no indicators related to disability in the Myanmar Millennium Goals or the PRS.
- The national multi-sectorial strategy to respond to HIV 2011-2015 is focusing on populations at risk and their sexual partners. Persons with disabilities are not specifically included, although it well known that women with disabilities are severely exposed to sexual abuse.

In 2014, a Council of Persons with Disabilities was established to work towards adoption and implementation of laws and policies in line with the UN Convention on the Rights of Persons with Disabilities. The council consists of both government and NGO representatives. The formal mandate in terms of its powers is not clearly spelt out in the documents reviewed.

Accountability measures

The most important accountability mechanism in Myanmar is the ***National Human Rights Commission*** http://www.mnhrc.org.mm/en/, which is being supported by Swedish Raoul Wallenberg Institute (with Swedish funding). So far a workshop on the rights of persons with disabilities is the only reported action taken in the disability area (2014). Otherwise monitoring is mainly done by international organisations such as UN, Amnesty and Human Rights Watch. None of them have focussed on disability rights so far. Since the Optional Protocol of the CRPD has not yet been signed, the UN bodies do not have a formal right to receive complaints.

The ***Council of Persons with Disabilities,*** which was established in 2014 to work towards adoption and implementation of laws and policies in line with the UN Convention on the Rights of Persons with Disabilities, has a mandate to coordinate and oversee implementation of the laws and policies. It is not clear what kind of powers it has towards the various Ministries.

The ***Human Rights Education Institute of Burma*** http://www.hreib.com/ is a nongovernmental organisation that facilitates a broad range of human rights training and advocacy programs for grassroots organisations and community leaders.

Main civil society actors

In the area of community based rehabilitation and disability inclusive development, the most important NGOs are:

- The Leprosy Mission International (Myanmar) http://www.leprosymission.org/myanmar.html supports disability rehabilitation services and community-based disability inclusive development for leprosy and disability-affected people through a network of Disability Resource Centres (DRCs); support the expansion of prevention of disability programmes in the DRCs and encourage the inclusion of people with leprosy and other disabilities into mainstream programmes; work in partnership with other NGOs around issues such as vulnerable groups, food security and education, advocating for full inclusion of people with disabilities; and treble the coverage of DRCs in strategic areas. In recent years the Leprosy Mission (TLM) Myanmar's programme has grown in size and is now recognised by the government, the UN and international non-governmental organisations (NGOs) as a key stakeholder in the disability field in Myanmar. CBM (Christoffel Blindenmission) has entered into a partnership with TLM around the community-based programme.
- Association for Aids and Relief (AAR-Japan) http://www.aarjapan.gr.jp/english/
- New Humanity FOCSIV
- Myanmar Disabled Peoples' Organization (MDPO). MDPO is an umbrella organisation of disability organisations in Myanmar formed in 2004 and a member of the Asian and Pacific Disability Forum and DPI.
- Eden Centre for Disabled Children. Eden Centre for Disabled Children, http://www.edencentre.org is an organisation for children with physical and intellectual disabilities. The centre promotes equalisation of opportunities and is offering physiotherapy, special education, awareness raising and CBR programmes.
- ShweMinnTha Foundation

In the area of disability policy and advocacy a range of local disability organisations are active. These generally lack resources and knowledge and experience, especially in influencing government and donors and their planning and monitoring frameworks. DPOs are mainly concentrated in urban areas. According to the Government web page the most important NGOs in the disability policy field are the following:

- Myanmar Independent Living Initiative (MILI)
- Myanmar Disabled Women Association, an active partner in the women's movement and signatory of many petitions for women's rights and democratic governance.
- Su PaungArman Blind Workers Association
- Saint Mary Shelter for the Blind
- Myanmar Disabled Peoples' Organization (MDPO), which is an umbrella organisation formed in 2004 and a member of the Asian and Pacific Disability Forum.
- Mandalay Deaf Association and Home for the Deaf Mandalay
- Myanmar Physically Handicapped Association http://www.myanmarmpha.org/index.htm
- Myanmar Christian Blind Fellowship. The objectives are to raise and develop the education level of visually impaired persons, to make them able to earn a living on their own and to be

independent, capable persons who can participate fully on equal basis with others in the society.

- Myanmar National Association for the Blind https://www.facebook.com/mnabmyanmar
- Blind Massage Development Foundation
- Yangon Deaf Association and Resource centre. Deaf Association and resource centre maintains and develops the role of Myanmar sign language, upgrades the education level and literacy rate of the deaf people, supports the needy deaf in terms of money, moral, knowledge and human resources, promotes and advocates for the rights of the deaf people. YDA is a member of World Federation of the Deaf.
- Family Support Network for Intellectual Disability
- Unity Group of Intellectual Disability
- Network for Myanmar Disabled People (NMDP)
- Myanmar Paralympic Sports Federation and Special Olympic Myanmar

In addition, international agencies such as UNDP, UNESCAP, The Leprosy Mission International (TLMI), JICA, Latter Days Saint Charity, World Vision, Asia Mind, Action Aid, Triangle GH and Japan Heart are also participating in the implementation of disability programmes.

What Sweden can do: 7 questions to discuss

Coherent with the new results strategy for Myanmar 2013-2017, Sweden could discuss the following:

- Could Sweden do more to include disability rights in the dialogue with government on human rights (e.g. ratification on mine ban treaty, including disability aspects in reporting to the UN treaty bodies)?
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the embassy need to take such initiative?
- Could Sweden do more to include persons with disabilities and their organisations in local democracy, peace building and human rights efforts? E.g.
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
- Could Sweden do more to include disability organisations in CSO capacity development programmes in order to build their capacity to monitor the compliance of the CRPD, to participate meaningfully in PRS and other development processes and to monitor government programs?
- Could Sweden do more to promote inclusion of disability rights monitoring and reporting in the support to human rights institutions and organisations? Especially in relation to follow up on the results of the new legislation and action plan for persons with and the reporting to the Committee on the rights of persons with disabilities (due in 2015). Monitoring tools can be downloaded here.
- Could Sweden do more to include women with disabilities in access to SRHR services and GBV initiatives? In peace building efforts as stipulated in UN resolution 1023?
- Could Sweden do more to enhance its competency in the area of disability rights? E.g. how to include disability in Terms of Reference for pre-planning, tenders, construction and evaluation of programs, how to include disaggregated indicators for persons with disabilities in democracy and HR programmes etc.?

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in the Western Balkans

November 2014

This brief focuses on disability rights in selected countries in the Western Balkan region. It first provides a brief background on common challenges faced by the wider Eastern Europe and Western Balkan region, followed by a specific Western Balkan section, covering Albania, Bosnia-Herzegovina, Kosovo, Serbia and Turkey.

Common challenges

People with disabilities in the Western Balkans and Eastern Europe experience many common challenges. With the exception of Turkey, the countries share a legacy of Soviet-influenced social policies, including deeply entrenched medical and rehabilitative approaches to disability, with an emphasis on segregated, state-run institutionalised care. In order to access state services, persons with disabilities typically had to be assessed by commissions of medical and pedagogical "experts" and given a disability status, which generally specified a type and "degree" of disability. Many persons with disabilities lost their legal autonomy and became dependent on family members, who could make decisions and draw benefits on their behalf. Parents of children with disabilities were encouraged to give them up as orphans of the state. Extensive bureaucratic systems were established over decades to administer disability assessments and placements in orphanages, residential homes and other institutions. These systems were vulnerable to corruption and reinforced the exclusion and exploitation of persons with disabilities.

Since the dissolution of the Eastern bloc, many persons with disabilities, including children, remain in institutions throughout the region. Rehabilitative and educational services in these institutions are reported to be poor or non-existent. According to the Mental Disability Advocacy Centre in Budapest, around 1 million adults with disabilities in the region continue to face significant and systematic violations of their human rights in residential facilities. There is considerable political pressure and legal obligations on country governments in the region to move away from institutionalising persons with disabilities towards more inclusive, rights-based approaches to disability. However, most countries in the region have struggled to establish alternative systems of care, especially in the light of economic and political instability, exacerbated in many cases by declining public health systems, conflict and civil unrest, as well as environmental hazards. Across the region, persons with disabilities continue to be isolated, marginalised, discriminated against and in many cases, exploited and abused. Discrimination has been embedded in many countries' legislative frameworks, health care and pension systems, education systems and employment sectors. People with disabilities face restriction of movement, have fewer opportunities to participate in social events or lead full, productive, independent lives (USAID Report 2009).

According to the Center for Social Orientation in Belgrade (Butigan et al 2012), the main trends characterising disability-related reform in the region include:

- Emerging partnerships between state governments and civil society organisations, with service provision shifting increasingly to the latter;
- De-institutionalisation and the establishment of community-based and home-based services;
- International assistance, ranging from support on policy reform and capacity-building of organisations working in the disability terrain to direct financing of service delivery to persons with disabilities.

The situation of persons with disabilities in the Western Balkan countries

There are no reliable, up-to-date statistics on disability across the Western Balkan region. Existing data are based on projections, for example using the WHO/World Bank average prevalence rates, or drawn from sample surveys, country census information or government social security records. According to the *World Report on Disability*, the regional prevalence rate for disabilities in the low- and middle-income countries of Europe is estimated at 16.4% (WHO/World Bank 2011). All five of the Western Balkan countries reviewed in this brief fall into this regional grouping. The variance in prevalence rates in various studies depends on the different definitions of disability used. The Convention of the Rights of Persons with Disabilities (CRPD) uses a broad definition of disability: "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others". Many countries still have narrower, medical definitions in their laws as these have not yet been adapted to the CRPD. These narrow definitions often refer to specific bodily limitations (such as "loss of function in more than two limbs" or "less than 10% of normal vision despite wearing glasses").

The following table presents the most recent disability statistics for the Western Balkan countries. It shows that this region could be home to as many as 15 million persons with disabilities, the majority living in Turkey.

Country	**Most recent estimate of disability prevalence**	**Most recent total population estimate** (in millions)	**Estimated number of persons with disabilities** (if WHO regional average of 16.4 % is applied)
Albania	3.4%	2.78 (2011)	455,920
Bosnia-Herzegovina	14.6%	3.84 (2011)	629,760
Kosovo	7%	1.82 (2012)	298,480
Serbia	7.4%	7.20 (2012)	1,180,800
Turkey	12.3%	76.67 (2013)	12,573,880
Total			**15,138,840**

Source: USAID 2009; WHO/World Bank 2011; Republic of Kosovo (2009); and own calculations.

Some key features of the disability situation in the region are as follows:

- **Albania** has a relatively low institutionalisation rate for persons with disabilities, compared to the rest of the region. A strong family tradition may account for the existence of more community-based day centres than in other countries (National Albanian Center for Social Studies, 2005).
- In **Bosnia-Herzegovina**, landmines constitute a major contributor to the number of persons with disabilities. One out of every 173 people is estimated to be disabled due to injuries sustained during the civil war and 15% of the population are seen to suffer from psychological trauma, specifically post-traumatic stress disorder (USAID 2009). According to UNICEF, 67% of children placed in residential care in Bosnia-Herzegovina are children with disabilities.
- Data from **Kosovo** are extremely limited. Government records reflect that 17,476 people received disability pensions and an additional 1,936 families (2,080 persons with disabilities) received support through the social assistance system in 2008. Education data show that the majority of children with disabilities who attend school in Kosovo fail to advance to high school.
- While **Serbia** has made considerable progress in improving its legislative framework pertaining to disability (see next section), persons with disabilities still face social

exclusion and their living conditions have not yet improved significantly (Butigan et al 2012). According to the UNDP, for example, 70% of persons with disabilities in Serbia live in poverty and only 13% have the opportunity to work.

- In **Turkey**, disability statistics are severely out dated. A 2005 study by Mental Disability Rights International exposed extensive human rights abuses against children and adults with disabilities in Turkish residential institutions. It found that inhuman and degrading conditions of confinement were widespread throughout the Turkish mental health system.

Legal and policy frameworks

The country governments of the Western Balkans have taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. At the same time, significant legal and policy gaps remain. In terms of **international instruments**, the situation can be summarised as follows:

- As Kosovo is a partially recognised state and is not a member of the United Nations, it cannot become a state party to UN conventions. The other four countries have all signed and ratified the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD). CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The full text of the convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Bosnia-Herzegovina, Serbia and Turkey have signed the Optional Protocol to the CRPD, and Bosnia-Herzegovina and Serbia have also ratified it. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities.
- Two of the Western Balkan countries have signed the *Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction* (also known as the Ottawa Mine Ban Treaty) – and all four (excluding Kosovo) have either ratified or acceded to this convention. It is an important instrument for reducing the incidence of disabilities, and places an obligation on governments to clear all known areas contaminated by anti-personnel mines within 10 years.
- Two countries, namely Albania and Bosnia-Herzegovina, have signed and ratified the *Convention on Cluster Munitions*, thereby agreeing to destroy all stockpiles of cluster munitions within eight years, clear all areas contaminated with cluster munitions remnants within 10 years, and provide assistance to and fulfil the rights of victims of cluster munitions.
- The four Western Balkan countries that are UN members are also state parties to the UN *Convention on the Rights of the Child* (CRC) and to the *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW). Both of these conventions make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

Country	CRPD		CRPD Optional Protocol		CRPD initial country report submitted	Ottawa Mine Ban Treaty	
	Signed	Ratified*	Signed	Ratified*		Signed	Ratified*
Albania	☐	☐				☐	☐
Bosnia-Herzegovina	☐	☐	☐	☐	☐	☐	☐
Kosovo	As non UN member, cannot sign or ratify UN conventions						
Serbia	☐	☐	☐	☐	☐		☐
Turkey	☐	☐	☐				☐

* Ratified or acceded.

Sources: United Nations Treaty Collection; UN Office of the High Commissioner on Human Rights.

At the **regional level**, the following points are important to note with reference to disability rights:

- None of the Western Balkan countries covered by this brief are members of the European Union. Serbia, Turkey and Albania are candidates for membership. As such, these countries are not currently bound by regional instruments such as the *Charter of Fundamental Rights of the European Union*, or the *European Disability Strategy 2010-2020: A Renewed Commitment to a Barrier-Free Europe*. However, as candidate countries, the Western Balkan states are likely to be willing to show that their own policy efforts are in line with these EU instruments. The European Disability Strategy sets targets, for example, for member states to develop inclusive education policies, and to prioritise persons with disabilities in anti-poverty strategies.
- Albania, Turkey, Bosnia-Herzegovina and Serbia are members of the Council of Europe, which promotes cooperation amongst European countries in the areas of legal standards, human rights, democratic development and the rule of law. Unlike the EU, the Council cannot enact legislation. However, it does oversee compliance with the *European Convention on Human Rights* and the *European Social Charter*, the latter of which specifically recognises the right of persons with disabilities to social integration and participation in community life. The Social Charter has been signed and ratified by all four countries.
- The Council of Europe has an *Action Plan to promote the rights and full participation of people with disabilities in Europe, 2006-2015*. The primary goal of the plan is to help member states reinforce anti-discriminatory and human rights measures. It provides a framework for state governments to develop rights-based disability legislation, policy and practices, while allowing for country-specific conditions. According to the Council, the plan should be seen as a regional political instrument and operational implementation tool to help states implement the CRPD.

In terms of **national laws and policies** that impact most directly on the rights of persons with disabilities, the Western Balkan countries have the following overall commitments in place:

- In **Albania**, Article 59 of the Constitution stipulates that the state must act in favour of persons with disabilities in the fields of rehabilitation, special education, social integration and improving living conditions. In 2006, after considerable dialogue between government and civil society actors, a *National Strategy on People with Disabilities* was adopted. Since then, a new *Law on the Inclusion and Accessibility of Persons with Disabilities* has been enacted, which aims to enable full and effective participation of all persons with disabilities in all social spheres on an equal basis with others (UNDP).
- In **Bosnia-Herzegovina**, a *Policy in the Area of Disability* was adopted in 2008 by the Ministry of Human Rights and Refugees. A *Strategy and Action Plan for the Equalisation of Opportunities for People with Disabilities 2010-2014* was approved in the Federation of Bosnia-Herzegovina (one of the two entities in Bosnia-Herzegovina), as was a *Strategy for Promoting the Social Status of Persons with Disabilities 2010-2015* in the other entity, Republika Srpska. However, little progress has been made in implementing these policies (DAT-SEE). A *Law on Vocational Rehabilitation, Training and Employment of Persons with Disabilities* was adopted in 2009. Yet the country still lacks a coherent legal framework to advance disability rights more broadly and protect against discrimination.
- In **Kosovo**, the *Anti-Discrimination Law* of 2004 specifically protects the rights of persons with disabilities. A *National Action Plan for Persons with Disabilities* was approved in 2009, representing a first attempt to bring disability policy in Kosovo in line with the principles of the CRPD. A commission, including representation from civil society, was established to monitor the implementation of the plan; however, it does not appear to be particularly active (DAT-SEE). A *Law for Blind Persons* was adopted by the Kosovo Assembly, as well as a *Law on Vocational Ability, Rehabilitation and Employment of People with Disabilities*. Like other countries in the region, Kosovo has

instituted a quota system to promote the employment of persons with disabilities. However, a coherent over-arching rights-based disability law is not yet in place.

- In **Serbia**, the *Law for Prevention of Discrimination against Persons with Disabilities*, adopted in 2006, was the first legal document in the country dealing directly with discrimination against a vulnerable group (ANED 2102a). The *Serbian National Strategy for Improving the Position of Persons with Disabilities*, also adopted in 2006, set out to establish a single institutional framework for planning and monitoring of policies relating to disability issues. Since then, three important laws have been adopted, namely the *Law on Professional Rehabilitation and Employment of Persons with Disabilities* of 2009, the *Law on Fundamentals of Educational System* of 2009, which established inclusive education within the legal framework, and the *Law on Social Protection* of 2011, which brought changes regarding services and benefits for persons with disabilities.
- In **Turkey**, a *Law on Persons with Disabilities* was adopted in 2005, dealing with the rights of persons with disabilities as regards education, vocational training, employment, protection against discrimination, reasonable accommodation and so forth (ANED 2012b). The law placed an obligation on municipalities to comply with certain accessibility provisions for persons with disabilities within 7 years, when the law would come into effect. This deadline has since had to be postponed for an additional 3 years. The *Decree on Special Education* of 1997 provides for the inclusion of children with disabilities in mainstream educational facilities in Turkey.

Implementing agencies

The disability policies and actions plans of the Western Balkan countries are implemented by means of different institutional arrangements. There is a need across the region to de-institutionalise the provision of services to persons with disabilities and to replace the commissions who were responsible for assessing disability status and severity with more inclusive, cross-sectorial structures.

- In **Albania**, primary responsibility for the implementation of disability laws and policies rests with the Ministry of Labour, Social Affairs and Equal Opportunities. The Social Insurance Institute and the Ministry of Education and Science also play important roles. Recent reform efforts have focused on building the capacity of state institutions, DPOs and service delivery organisations to implement disability policies, raising awareness about the CRPD amongst government employees and the broader public, as well as establishing best practice in accessible refurbishment of public buildings (UNDP). However, concern has been expressed that the implementation of the *National Strategy on People with Disabilities* is hamstrung by insufficient budget allocations at the national and local levels. As a result, rehabilitation and other services to persons with disabilities remain lacking (DAT-SEE).
- In **Bosnia-Herzegovina**, the Ministry of Health & Social Welfare and the Federal Ministry of Social Affairs are responsible for the implementation of disability policies and programs. The complexity of governance in Bosnia-Herzegovina and the separate jurisdictions bring additional challenges to improving the situation for persons with disabilities. The division of responsibilities between state, entity, canton and municipality makes it difficult to ensure a coherent approach. Persons with disabilities often receive very different benefits, and have different rights, depending on where they are living. According to a 2012 report of the state-level Ombudsman, regulations relating to disability are inconsistently applied and the criteria for granting work or living allowances and payments to persons with disabilities have not been harmonised, coordination and cooperation between levels and areas of government is poor and there is a lack of systematic record-keeping as regards disability beneficiaries and services (DAT-SEE).
- In **Kosovo**, overall responsibility to steer the implementation of the *National Disability Plan* is vested in the Office of the Prime Minister / Office for Good Governance, Human Rights and Equal Opportunities (OGG). The plan

also identifies objectives and activities for several governmental and non-governmental actors, including (amongst others) the Ministry of Health, Ministry of Education, Science and Technology, the Municipal Education Department, the Ministry of Environment and Spatial Planning, the Ministry of Labour and Social Welfare, Regional and Municipal Employment offices, the Ministry of Culture, Youth and Sport, the Statistical Office of Kosovo, the University of Prishtina, DPOs and NGOs. The OGG serves as the focal point and is expected to report back to the government of Kosovo every six months on implementation progress (Republic of Kosovo 2009).

- In **Serbia**, the Council for Persons with Disabilities is an expert body which advises the government on the social and economic status of persons with disabilities and coordinates the contributions of the various ministries and other actors in decision-making on policy and legislation. It also works on the implementation of laws and other regulations to advance the rights of persons with disabilities (ANED 2012a). The main government ministries with disability-related responsibilities include the Ministry of Labour, Employment and Social Policy (it has a department for Persons with Disability Support), the Ministry of Health and the Ministry of Education (USAID 2009). The Centre for Vocational Rehabilitation and Employment of Persons with Disabilities (under the National Employment Service) is responsible for affirmative measures related to employment of persons with disabilities (ANED 2012a).
- In **Turkey**, the main responsibility for disability policy implementation rests with the Directorate General for Disabled and Elderly Affairs, under the Ministry of Family and Social Policies, which was established in 2011. The Turkish Employment Organisation, under the Ministry of Labour and Social Security, has the duty to implement the quota regime with regard to employment of persons with disabilities in public and private organisations. The Social Security Institute, under the Ministry of Labour and Social Security, has two important functions with regard to persons with disabilities. The institute covers the costs of health services, as well as mobility devices, prostheses and some other disability-related devices. Secondly, the institute is responsible for the administration of state pensions. The Ministry of Health co-ordinates the health boards which have the power to designate someone as “a disabled person”; these health board reports are provided mainly by public hospitals (ANED 2012b).

Accountability measures

The attainment of the rights of persons with disabilities remains a concern in the Western Balkan region. At international level, country governments are required to submit an initial report to the Committee on the CRPD two years after ratifying the convention, and every four years subsequently. Thus far, only Bosnia-Herzegovina and Serbia have submitted their initial reports to the Committee on the CRPD and the committee has no enforcement powers in relation to countries that fail to submit their reports. Although the government of Kosovo has stated its commitment to the principles of the CRPD, as a non-member it has no formal accountability to the Committee’s monitoring mechanism. To track the continued work of the Committee and access its observations on the implementation of the CRPD in the other Western Balkan countries, visit http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx.

At the regional level, monitoring and oversight of the Council of Europe’s *Disability Action Plan* falls under the mandate of the European Coordination Forum (CAHPAH), assisted by a Bureau. The Forum is a multidisciplinary committee of disability experts from all 47 member states, the observer states, various Council of Europe bodies and committees, and several international organisations, both governmental and non-governmental. While the plan encourages member states to develop disability frameworks in line with the CRPD, it leaves a great deal of scope for countries to customise their approaches and to progressively realise the rights contained in the convention. The plan is also closely linked to the European Convention on Human Rights, which

has a robust monitoring mechanism through the powers of the European Court of Human Rights (Flynn 2011).

At the national level, four of the Western Balkan countries – namely Albania, Bosnia-Herzegovina, Serbia and Kosovo - have national human rights institutions, which should be expected to advance and promote the rights of persons with disabilities in their respective countries. In Serbia, the Deputy Ombudsman oversees the Council for Persons with Disabilities and the Elderly (ANED 2012a). What about Human Rights Action Plans in the WB countries?

Main civil society actors

The main DPOs that can be identified in the Western Balkan countries include:

- The **European Disability Forum** is an independent regional organisation representing the interests of 80 million Europeans with disabilities. The EDF is the only cross-European platform run by persons with disabilities and their families. Only EU countries have full membership on the EDF; however, DPOs from Albania, Serbia and Turkey have observer status.
- The **National Organisation of Persons with Disabilities of Serbia** (NOOIS-NOPDS) is an umbrella organisation of 11 national organisations of persons with different types of disabilities.
- The **Confederation of Persons with Disabilities** is an umbrella organisation in Turkey composed of the Federation of Visually-impaired, the Turkish National Federation of the Deaf, the Federation of Persons with Orthopaedic Disabilities, the Federation of Children and Adults with Cerebral Palsy and the Federation of Persons with Intellectual Disabilities.
- **RUSHIAK** is Turkey's first grassroots organisation by people with mental disabilities and their relatives. It challenges inhumane treatment by defining people with mental disabilities as full human beings and equal citizens in every way. RUSHIAK runs advocacy campaigns, organises free vocational and empowerment training for its stakeholders, and creates monitoring groups to inspect institutions to ensure they are compliant with legal and health regulations.

Several international organisations make important contributions to the disability movement in the Western Balkan region, including MyRight, Save the Children, Handicap International, Disability Rights International, Inclusion International, World Vision, USAID, UNICEF and WHO. Other organisations playing a key role in awareness-raising, advocacy and service provision include (but are not limited to):

- The **Albanian Disability Rights Foundation** is a human rights organisation with a special focus on disability issues. It provides free legal aid and promotes awareness of human rights of persons with disabilities, their family members and relevant stakeholders. It also monitors and brings to public attention human rights violations against people with disabilities, while also lobbying decision-makers at all political levels to advance disability rights.
- The **SUMERO Alliance** is the largest organisation in Bosnia-Herzegovina working to advance the rights of persons with intellectual disabilities. It lobbies for the full recognition of their rights and the establishment of appropriate care facilities and independent living opportunities, and also provides training and support to persons with intellectual disabilities and their families.
- The **Disability Monitor Initiative** (DMI) for South East Europe is an advocacy initiative that gathers and disseminates information on disability to support the move towards full participation and equal opportunities for persons with disabilities. The DMI is primarily based on field research consultations with people with disabilities, service providers, members of civil society, government officials and local authorities. The objectives are to build up knowledge on the situation of people with disabilities, examine best practices and inform policy reforms at national and international levels.
- **Civil Rights Defenders** is an independent organisation founded in Sweden in 1982 which defends human rights and supports and empowers human rights defenders at risk in

different countries around the world. Civil Rights Defenders supports disability rights advocates in Bosnia-Herzegovina, Serbia, Albania and Kosovo.

What Sweden can do: 9 questions to discuss

- Could Sweden do more to include disability rights as an explicit part of its support to regional accountability mechanisms, efforts to establish independent human rights institutions and watchdog organisations? In support to human rights reporting processes? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure that support for reform efforts in Western Balkan countries (needed to achieve candidate status and eventual EU membership) include reforms in the area of disability legislation and policy development in line with the CRPD and the European Social Charter, as well as the deinstitutionalisation of persons (and especially children) with disabilities?
- Could Sweden do more to include DPOs in programmes that seek to strengthen civil society organisations and networks to influence policies and monitor the implementation of legal and policy commitments?
- Could Sweden do more to support efforts to strengthen the capacity of government authorities in the Western Balkan region to translate their commitments towards the rights of persons with disabilities into effective programmes? Inclusion Made Easy - a quick programme guide to disability in development here.
- Could Sweden do more to ensure that women with disabilities are included in programmes aiming to advance women's rights and gender equality? In programmes aiming to combat gender based violence?
- Could Sweden do more to promote inclusion of persons with disabilities in programmes that seek to strengthen freedom of expression, access to information, human rights monitoring and elections monitoring?
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so and that other Nordic donors also have an interest in this? What support and additional information would the embassy need to take such initiative?
- Could Sweden do more to include and enable persons with disabilities and their organisations to participate in human rights networks and social and cultural events?
- Could Sweden do more to keep updated on the situation and rights of persons with disabilities in the Western Balkan region and of the Swedish position on these rights? E.g. European disability Forum, International Disability in Development Consortium (IDDC).

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Eastern Europe

November 2014

This brief focuses on disability rights in selected countries in the Eastern European region. It first provides a brief background on common challenges faced by the wider Eastern Europe and Western Balkan region, followed by a specific Eastern Europe section covering Belarus, Georgia, Moldova, Russia and Ukraine.

Common challenges

People with disabilities in the Western Balkans and Eastern Europe experience many common challenges. With the exception of Turkey, the countries share a legacy of Soviet-influenced social policies, including deeply entrenched medical and rehabilitative approaches to disability, with an emphasis on segregated, state-run institutionalised care. In order to access state services, persons with disabilities typically had to be assessed by commissions of medical and pedagogical "experts" and given a disability status, which generally specified a type and "degree" of disability. Many persons with disabilities lost their legal autonomy and became dependent on family members, who could make decisions and draw benefits on their behalf. Parents of children with disabilities were encouraged to give them up as orphans of the state. Extensive bureaucratic systems were established over decades to administer disability assessments and placements in orphanages, residential homes and other institutions. These systems were vulnerable to corruption and reinforced the exclusion and exploitation of persons with disabilities.

Since the dissolution of the Eastern bloc, many persons with disabilities, including children, remain in institutions throughout the region. Rehabilitative and educational services in these institutions are reported to be poor or non-existent. According to the Mental Disability Advocacy Centre in Budapest, around 1 million adults with disabilities in the region continue to face significant and systematic violations of their human rights in residential facilities. There is considerable political pressure and legal obligations on country governments in the region to move away from institutionalising persons with disabilities towards more inclusive, rights-based approaches to disability. However, most countries in the region have struggled to establish alternative systems of care, especially in the light of economic and political instability, exacerbated in many cases by declining public health systems, conflict and civil unrest, as well as environmental hazards. Across the region, persons with disabilities continue to be isolated, marginalised, discriminated against and in many cases, exploited and abused. Discrimination has been embedded in many countries' legislative frameworks, health care and pension systems, education systems and employment sectors. People with disabilities face restriction of movement, have fewer opportunities to participate in social events or lead full, productive, independent lives (USAID Report 2009).

According to the Centre for Social Orientation in Belgrade (Butigan et al 2012), the main trends characterising disability-related reform in the region include:

- Emerging partnerships between state governments and civil society organisations, with service provision shifting increasingly to the latter;
- De-institutionalisation and the establishment of community-based and home-based services;
- International assistance, ranging from support on policy reform and capacity-building of organisations working in the disability terrain to direct financing of service delivery to persons with disabilities.

The situation of persons with disabilities in the Eastern European countries

There are no reliable, up-to-date statistics on disability across the Eastern European region. Existing data are based on projections, for example using the WHO/World Bank average prevalence rates, or drawn from sample surveys, country census information or government records of social benefits. According to the *World Report on Disability*, the regional prevalence rate for disabilities in the low- and middle-income countries of Europe is estimated at 16.4 (WHO/World Bank 2011). At the time of the study, all five of the Eastern European countries covered by this brief fell within this regional income grouping. The variance in prevalence rates in various studies depends on the different definitions of disability used. The Convention of the Rights of Persons with Disabilities (CRPD) uses a broad definition of disability: "Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others". Many countries still have narrower, medical definitions in their laws as these have not yet been adapted to the CRPD. These narrow definitions often refer to specific bodily limitations (such as "loss of function in more than two limbs" or "less than 10% of normal vision despite wearing glasses").

The following table presents the most recent disability statistics for the Eastern European countries. It shows that these Eastern European countries may be home to as many as 34 million persons with disabilities, the majority living in the Russian Federation.

Country	**Most recent estimate of disability prevalence**	**Most recent total population estimate** (in millions)	**Estimated number of persons with disabilities** (if WHO regional average of 16.4% is applied)
Belarus	5.3%	9.46	1,551,440
Georgia	3.2%	4.94	810,160
Republic of Moldova	4.4%	3.49	572,360
Russian Federation	9.2%	143.45	23,525,800
Ukraine	5.3%	45.46	7,455,440
Total			**33,915,200**

Source: USAID 2009; WHO/World Bank 2011; and own calculations.

Some key features of the disability situation in the region are as follows:

- In **Belarus**, the government reported a population of 512,500 persons with disabilities in 2007, of which 28,300 were under the age of 18. In the same year, 8,451 children with disabilities were estimated to be in residential institutions (USAID 2009). People with disabilities remain marginalised and discrimination is widespread (Astapenia 2013). A significant portion has no opportunity to study or work. Only 14% of Belarusians with disabilities of working age have jobs. Only a third of Belarusians support the idea that their child could study in the same class as a child with disabilities (Ibid).
- In **Georgia**, government records show that 137,806 people received a disability pension in 2008, including 34,200 children and their families (USAID 2009). Over recent years, the government has undertaken an ambitious childcare reform process in Georgia. Most of its state-run institutions for children without disabilities have been closed and replaced with community services that enable vulnerable families to keep their children at home. However, children with disabilities have largely been excluded from this reform process and remain marginalised and, in many instances, face the prospect of life-long segregation from society (DRI 2013).

- In **Moldova**, persons with disabilities face practical problems that prevent them from enjoying their rights. There is still limited access to social infrastructure, education and employment opportunities, and institutionalised care remains the dominant approach (Dilion 2014). Historical conflicts have contributed to the prevalence of physical and mental disabilities, including post-traumatic stress disorders. Little attention is directed to minority groups with disabilities, including the Roma, and those affected by conflict (USAID 2009).
- In the **Russian Federation**, the medical model of disability remains dominant, with high reliance on institutionalised care. Nearly 30% of Russian children with disabilities live in state-run orphanages, as parents continue to be pressurised to give up their babies to state care. Once in the system, children with disabilities such as cerebral palsy, schizophrenia, Down's Syndrome and the specific Russian "diagnoses" of "debility" and "idiocy" are barred from opportunities to learn — including learning how to walk (Human Rights Watch 2103).
- In the **Ukraine**, the government recognised around 2.7 million persons with disabilities in 2013. Many parents are still encouraged to give up infants and children with disabilities as social orphans. Many spend their lives in institutions where basic conditions are lacking, education is non-existent, and neglect and abuse are common (USAID 2009). Persons with disabilities also lack access to public spaces, services and opportunities to participate in society, due to physical barriers and stigma (International Relief & Development 2012).

Legal and policy frameworks

The country governments of Eastern Europe have taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. At the same time, significant legal and policy gaps remain. In terms of **international instruments**, the situation can be summarised as follows:

- Four of the five Eastern European countries – namely Georgia, Moldova, Russia and the Ukraine - have signed and ratified or acceded to the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD). Belarus is the only country in Europe that has not yet signed or ratified the convention, and reports indicate that it plans to do so soon. The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The full text of the convention is available at www.un.org/disabilities/convention/conventionfull.shtml.
- Only Georgia and the Ukraine have signed the Optional Protocol to the CRPD, and only Ukraine has ratified it. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities.
- Three of the Eastern European countries - Belarus, Moldova and the Ukraine - have signed and ratified or acceded to the *Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction* (also known as the Ottawa Mine Ban Treaty). This convention, which is an important instrument for reducing the incidence of disabilities, places an obligation on the governments in question to clear all known areas contaminated by anti-personnel mines within 10 years.
- Only the Republic of Moldova has signed and ratified the *Convention on Cluster Munitions*, thereby agreeing to destroy all stockpiles of cluster munitions, clear all areas contaminated with cluster munitions remnants within 10 years, and provide assistance to and fulfil the rights of victims of cluster munitions.
- All five of the Eastern European countries are state parties to the UN *Convention on the Rights of the Child* (CRC) and to the *Convention on the Elimination of All Forms of Discrimination against Women* (CEDAW). Both of these conventions make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

Country	CRPD		CRPD Optional Protocol		CRPD initial country report submitted	Ottawa Mine Ban Treaty	
	Signed	Ratified*	Signed	Ratified*		Signed	Ratified*
Belarus							☐
Georgia	☐	☐	☐				
Republic of Moldova	☐	☐			☐	☐	☐
Russian Federation	☐	☐					
Ukraine	☐	☐	☐	☐	☐	☐	☐

* Ratified or acceded.

Sources: United Nations Treaty Collection; UN Office of the High Commissioner on Human Rights.

At the **regional level**, the following points are important to note with reference to disability rights:

- None of the Eastern European countries included in this brief are members of the European Union, nor are they current candidates for membership. As such, these countries are not bound by regional instruments such as the *Charter of Fundamental Rights of the European Union*, or the *European Disability Strategy 2010-2020: A Renewed Commitment to a Barrier-Free Europe*. However, indications exist that Moldova, Ukraine and Georgia would like to make progress towards possible EU candidacy (by signing Association Agreements), and therefore are likely to want to show that their own policy efforts are in line with these EU instruments. The European Disability Strategy sets targets, for example, for member states to develop inclusive education policies, and to prioritise persons with disabilities in anti-poverty strategies.
- Moldova, the Russian Federation, Georgia and the Ukraine are members of the Council of Europe, which promotes cooperation amongst European countries in the areas of legal standards, human rights, democratic development and the rule of law. Unlike the EU, the Council cannot make binding laws. However, it does oversee compliance with the *European Convention on Human Rights* and the *European Social Charter*, the latter of which specifically recognises the right of persons with disabilities to social integration and participation in community life. The Social Charter has been signed and ratified by all four countries.
- The Council of Europe has an *Action Plan to promote the rights and full participation of people with disabilities in Europe, 2006-2015*. The primary goal of the plan is to help member states reinforce anti-discriminatory and human rights measures. It provides a framework for state governments to develop rights-based disability legislation, policy and practices, while allowing for country-specific conditions. According to the Council, the plan should be seen as a regional political instrument and operational implementation tool to help states implement the CRPD.
- Belarus, Moldova and Russia are members of the Commonwealth of Independent Nations (CIS), while Georgia withdrew in 2008 and the Ukraine is in the process of withdrawing. The member states are party to the CIS' *Convention on Human Rights and Fundamental Freedoms*, which in Article 18, recognises the right of "persons who are physically or mentally unfit to work" to occupational rehabilitation, vocational training and social reintegration. It places an obligation on member states to establish appropriate rehabilitative facilities and to set measures in place to encourage employers to hire persons with disabilities. It also recognises the right of persons with disabilities to education and training.

In terms of **national laws and policies** that impact most directly on the rights of persons with disabilities, the Eastern European countries have the following overall commitments in place:

- In **Belarus**, the *Law on Social Protection of Disabled Persons* of 1991 stipulates that state policy in the field of social protection must be aimed at ensuring the rightful participation of disabled persons in society and is to be carried out with respect for human rights and without discrimination on the basis of

disability. The *Law On Disability Prevention and Rehabilitation of Disabled Persons* was adopted in 2008. While it rests on a medical model of disability, the law recognises the rights of persons with disabilities to respectful treatment, education opportunities and inclusion in social life, amongst other things. Belarus has also introduced tax incentives for businesses to employ persons with disabilities. According to reports, a new state program is being developed for 2016 – 2020 to advance the social integration of persons with disabilities.

- In **Georgia**, the *Law on Social Security of Persons with Disabilities* of 2001 places an obligation on the state to ensure the engagement of persons with disabilities in social, economic and cultural life. In 2009, the government approved an *Action Plan on Social Integration of People with Disabilities 2010 - 2012*, which aimed to improve the legal framework for disability rights. The same year, parliament created the State Coordinating Council, under the leadership of the Prime Minister, to oversee the implementation of the plan. By presidential decree, 2013 was declared the *Year of Protecting the Rights of Persons with Disabilities in Georgia*. The *Law of Georgia on the Elimination of all Forms of Discrimination*, passed in 2014, specifically outlaws unfair discrimination against persons with disabilities and makes provision for those whose rights have been violated to take recourse.
- In the **Republic of Moldova**, the Constitution makes specific reference to the right of persons with disabilities to social protection and assistance. The state recognises the right of all people to an adequate standard of living, including food, clothes, shelter, medical care and social services. In 2013, Moldova adopted the *Law on Social Inclusion of Persons with Disabilities*, which corresponds with the approach of the CRPD. The country has started the process of adjusting its entire legal framework to the principles set forth in the Convention and the new disability law (Dilion 2014).
- In the **Russian Federation**, article 39 of the Constitution recognises the right of persons with disabilities to social security. The *Federal Law on the Social Protection of Disabled People* of 1995, while reinforcing a medical model of disability, sets out the mandates of federal and state authorities to provide rehabilitation services. It also to some extent protects the rights of persons with (narrowly defined) disabilities to education, access to information, social infrastructure, housing and employment. Since ratifying the CRPD in 2012, the Russian Federation is under an obligation to reform its domestic legislation in line with the convention.
- In **Ukraine**, the Constitution guarantees the right of all persons, including those with disabilities, to education, healthcare, employment, recreation and the enjoyment of civil and political rights. The state has achieved significant progress in harmonising national legislation with CRPD principles and the legal reform process has involved the participation of Disabled People's Organisations (DPOs). However, DPOs have noted that the predominant policy framework is still based on a medical/welfare approach (referring to "invalids" for example) as opposed to a human rights based approach, which would encompass full inclusion on society (UCOPD 2012). There are also significant policy gaps, for example legislation to govern inclusive education for children with disabilities.

Implementing agencies

Various institutional arrangements are in place to implement the disability policies of the Eastern European countries. There is a need across the region to de-institutionalise the provision of services to persons with disabilities and to replace the commissions that were responsible for assessing disability status and severity with more inclusive, cross-sectorial structures.

- In **Belarus**, the main actors in providing services to persons with disabilities are the Ministry of Labour and Social Protection (MoLSP) and the Ministry of Health. The MoLSP is responsible for coordinating disability pension benefits and rehabilitation services and facilities. The website of the MoLSP states that the ministry also provides administrative,

technical and information support to the National Interagency Council on Disability Affairs. However, it is unclear what the mandate and activities of this council are.

- In **Georgia**, overall responsibility for the implementation of disability policies has recently been vested in a newly formed State Coordinating Council, under the leadership of the Prime Minister, which is made up of representatives from seven line ministries, as well as seven DPOs and organisations working in the disability field. It is anticipated that the council will redefine institutional arrangements for advancing the rights of persons with disabilities in Georgia.
- In the **Republic of Moldova**, the Ministry of Labour, Social Protection and Family, as well as the Ministry of Health have been responsible for most disability-related services. However, the new disability law of 2013 makes provision for a National Council for the Rights of Persons with Disabilities, which is meant to take on overall responsibility for the promotion of state policies in the field of disability and to monitor implementation of the CRPD. The Council is to be made up representatives of central and local public authorities, DPOs and NGOs working in the disability terrain.
- In the **Russian Federation**, to officially acquire the legal status of being a "disabled person", a medical and social expert evaluation has to be undertaken, which is coordinated by the Ministry of Health. After being granted this status, people with disabilities are eligible for legal and medical benefits, including financial support and pensions, which are administered by the Ministry of Labour and Social protection, through its Department on Affairs for the Disabled. The Ministry of Education and Science is responsible for the delivery of education to children and youth with disabilities. Since 2008, efforts have been underway to increase the enrolment of children with disabilities in mainstream schools.
- In **Ukraine**, the assessments of individual persons with disabilities' needs for rehabilitation are made by medical professionals of Medical Social Expert Commission, functioning under the Ministry of Health. The Ministry of Social Policy is responsible for social security and coordinating rehabilitation services for persons with disabilities, including the administration of most institutional care facilities and orphanages. The social protection system is currently undergoing reform. Several NGOs also provide rehabilitation and care services to persons with disabilities.

Accountability measures

The attainment of the rights of persons with disabilities remains a concern in the Eastern European region. At international level, country governments are required to submit an initial report to the Committee on the CRPD two years after ratifying the convention, and every four years subsequently. Thus far, only the Republic of Moldova and the Ukraine have submitted their initial reports to the Committee on the CRPD and the committee has no enforcement powers in relation to countries that fail to submit their reports. To track the continued work of the Committee and access its observations in Eastern Europe, visit http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx.

At the regional level, monitoring and oversight of the Council of Europe's *Disability Action Plan* falls under the mandate of the European Coordination Forum (CAHPAH), assisted by a Bureau. The Forum is a multidisciplinary committee of disability experts from all 47 member states, the observer states, various Council of Europe bodies and committees, and several international organisations, both governmental and non-governmental. While the plan encourages member states to develop disability frameworks in line with the CRPD, it leaves a great deal of scope for countries to customise their approaches and to progressively realise the rights contained in the convention. The plan is also closely linked to the European Convention on Human Rights, which has a robust monitoring mechanism through the powers of the European Court of Human Rights (Flynn 2011).

At the national level, four of the Eastern European countries covered by this brief – namely Georgia, Moldova, the Russian Federation and the Ukraine - have national human rights institutions, which should be expected to advance and promote the rights of persons with disabilities in their respective countries. The Public Defender of Georgia, which serves as its national human rights institution, has conducted special reports on aspects of disability rights and has been relatively active in monitoring progress on the implementation of disability policies in that country.

Main civil society actors

DPOs that can be identified in the Eastern European countries include:

- The **Belarusian Association of Assistance for Children and Young People with Disabilities** brings together approximately 4,000 families in Belarus bringing up children and young people with intellectual and physical disabilities. The goal of the association is to create equal opportunities for children and youth with disabilities to participate in every field of social life.
- The **National Assembly of Persons with Disabilities** of Ukraine (NAPD) is an umbrella body uniting some 100 public organisations, including youth with disabilities, women with disabilities, parents fostering children with disabilities, athletes with disabilities, disabled people of Chernobyl, war veterans, people with diabetes, with intellectual disabilities, mental disorders, people with disorders of the musculoskeletal system, with impaired vision and hearing (representing about 2 million people in total).The NAPD has been active for 10 years and helps to monitor the implementation of the CRPD in the Ukraine, including the submission of shadow reports.
- The **Coalition for Independent Living** (CIL) in Georgia is a cross-disability organisation established in 2003 and uniting 23 DPOs in the country. Its mission is to support equal opportunities for persons with disabilities to participate fully in the political, economic, social and cultural life of Georgia. It undertakes advocacy, public education and training on disability rights, and monitors the implementation of the CRPD in Georgia.

Several international organisations make important contributions to the disability movement in the Eastern European region, including Handicap International, Save the Children, Disabled People's International, World Vision, Inclusion International, Caritas, Mental Disability Advocacy Centre, Open Society Foundation, USAID, UNICEF and WHO. Other organisations playing a key role in awareness-raising, advocacy and service provision include (but are not limited to):

- The **Office for the Rights of Persons with Disabilities** in Belarus is a team of professionals working together to protect the rights of persons with disabilities. It aims to transform Belarusian society to one that is free from barriers and prejudice against persons with disabilities. The organisation advocates for the rights of persons with disabilities and promotes understanding of disability as a human rights issue.
- The Association **MOTIVATIE** (Motivation) in Moldova is an independent NGO that monitors the implementation of the CRPD in the country. The mission of the organisation is to improve the quality of life of persons with physical disabilities through the creation of alternative services, involvement of beneficiaries in these services and the promotion of their rights.
- **Perspektiva** is a Russian advocacy organisation that aims to promote independence and an improved quality of life for persons with disabilities. It is committed to building the capacity of grassroots DPOs to advocate for equal rights and also assists persons with disabilities and their families to acquire new skills and knowledge, amongst other activities.
- The **Disability Monitor Initiative** (DMI) for South East Europe is an advocacy initiative that gathers and disseminates information on disability to support the move towards full participation and equal opportunities of people with disabilities. The DMI is primarily based on field research consultations with persons with disabilities, service providers, members of civil

society, government officials and local authorities. The objectives are to build up knowledge on the situation of people with disabilities, examine best practices and inform policy reforms on the national and international levels.

- **Civil Rights Defenders** is an independent organisation founded in Sweden in 1982 which defends human rights and supports and empowers human rights defenders at risk in different countries around the world. Civil Rights Defenders supports disability rights advocates in Belarus, Moldova, Russia and the Ukraine.

What Sweden can do: 9 questions to consider

Within its mandate and strategy for Eastern Europe, Sweden has a range of opportunities to include persons with disabilities in a more deliberate manner. Questions to discuss:

- Could Sweden do more to include disability rights as an explicit part of its support to regional accountability mechanisms, efforts to establish independent human rights institutions and watchdog organisations? In support to human rights reporting processes? Monitoring tools can be downloaded here.
- Could Sweden do more to ensure that support for reform efforts in Eastern European countries include reforms in the area of disability legislation and policy development in line with the CRPD and the European Social Charter, as well as the deinstitutionalisation of persons (and especially children) with disabilities?
- Could Sweden do more to include DPOs in programmes that seek to strengthen civil society organisations and networks to influence policies and monitor the implementation of legal and policy commitments?
- Could Sweden do more to support efforts to strengthen the capacity of government authorities in the Eastern Europe region to translate their commitments towards the rights of persons with disabilities into effective programmes? Inclusion Made Easy - a quick programme guide to disability in development **here.**
- Could Sweden do more to ensure that women with disabilities are included in programmes aiming to advance women's rights and gender equality? In programmes aiming to combat gender based violence?
- Could Sweden do more to promote inclusion of persons with disabilities in programmes that seek to strengthen freedom of expression, access to information, human rights monitoring and elections monitoring?
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so and that other Nordic donors also have an interest in this? What support and additional information would the embassy need to take such initiative?
- Could Sweden do more to include and enable persons with disabilities and their organisations to participate in human rights networks and social and cultural events?
- Could Sweden do more to keep updated on the situation and rights of persons with disabilities in the Eastern Europe region and of the Swedish position on these rights? E.g. European disability Forum, International Disability in Development Consortium (IDDC).

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.

Disability Rights in Colombia

November 2014

The situation of persons with disabilities in Colombia

It is estimated that over 3 million persons live with some kind of disability in Colombia, equivalent to 6% of the population. Regional disparities are however significant and the departments with the largest number of persons with disabilities have an average prevalence rate of between 7.8% and 9.5%. Out of the 20 departments, five have particularly high rates of persons with disabilities, namely Caquetá, Tolima, Vichada, Córdoba and Cauca. The legacy of armed conflict has resulted in many land mine victims and the situation for persons with disabilities is also aggravated by displacements caused by the conflict.

Disability is both a cause and a consequence of poverty and over 80% of persons with disabilities in Latin America live in poverty, according to the World Bank. In Colombia, the number of persons with disabilities is higher in low-income households relative to other households (Fundación Saldarriaga Concha). Among persons with disabilities in Colombia, 61% have no income. According to *Dane*, the Administrative Department of National Statistics, only 15.5% of those of a productive age have some kind of occupation and only 2.5% receive the stipulated minimum wage. Of economically active persons with disabilities, women constitute only 34%. The indigenous and afro-Colombian minorities have higher rates of disabilities than the majority mestizo population.

The level of illiteracy is three times higher among persons with disabilities (22.5%) than in the rest of the population (7%). Over a third of all illiterate persons with disabilities are under 15 years of age. Children and adolescents with disabilities are under-represented at all levels of education and normally enter school later than children without disabilities. Only 27% of children with disabilities have access to primary school, less than 50% complete basic primary education and only 3% proceed to secondary education. Boys with disabilities have better access to education at all levels, with an average of 58.2% for all levels in relation to girls.

A report on psychosocial disabilities (Disability Rights Promotion International 2014) highlights the large gap between official policy and its implementation in Colombia. It reveals a group that is overlooked due to lack of awareness and voice. The report draws attention to high levels of abuse and discrimination against people with disabilities, including systemic violations of their rights to social participation, privacy and family life, health, habilitation and rehabilitation, education, information, communication and access to justice. The existing regulations and legal obligations are not widely known. There is also a lack of acknowledgement of the legal capacity of persons with disabilities, which hinders the effective enjoyment of human rights.

Colombia's current legal framework on legal capacity allows for the sterilisation of women with disabilities without their consent, in the case of women who are placed under plenary guardianship and therefore are deemed incapable. Widespread and persistent discrimination against women and girls with disabilities results in the systematic denial of their right to sexual education, to experience their sexuality, to have sexual relationships, and to start families on equal footing than women without disabilities (IGLHRC report 2013).

The legal and policy framework

Colombia has ratified the UN Convention on the Rights of Persons with Disabilities (CRPD), the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities – but not the optional protocol. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.

Colombia has also signed and ratified a number of other treaties that advance the rights of people, including those with disabilities, for example:

- the UN Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women – both of which make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society;
- the Inter American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities (2001) , also confirmed in the national Law 762 of 2002.

Colombia's national legislation on disability rights is complex and includes national and regional policies, as well as special measures for displaced persons with disabilities. There is a national system for disability rights and a National Public Disability and Social Inclusion Policy, for which the Ministries of Health and Social Protection are responsible. The system includes a focus on Community Based Rehabilitation (CBR) in coordination with DPOs and a national CBR network. In terms of other national laws and policies, the following have the most direct bearing on the rights of persons with disabilities:

- **The Constitution of Colombia** guarantees the rights of persons with disabilities in Article 16 (universal rights to individual development, Article 25 (the right to work in dignified and fair conditions) and Article 49 (the right to public health and sanitation services). These articles do not however make any specific reference to disabilities. Article 13 on the equal rights, freedoms and opportunities of all persons stipulates the responsibility of the State to protect marginalised groups from discrimination, including persons with physical or intellectual disabilities. Article 47 places an obligation of the State to institute policies for the prevention, rehabilitation and social integration of persons with disabilities, as well as the implementation of special measures when required.
- **Law 324** (1996) provides specific rights to persons with hearing impairments.
- **Law 361** (1997) establishes mechanisms for the social inclusion for persons with disabilities, including subsidies for assistive devices.
- **Law 1145** (2007) regulates and coordinates the implementation of the National Public Disability and Social Inclusion Policy amongst national, regional and local public entities, Disabled People´s Organisations (DPOs) and civil society, in order to guarantee the fundamental human rights of persons with disabilities. **El Sistema Nacional de Discapacidad – SND** is a system consisting of regulations, norms, activities, resources, programmes and institutions that aim to ensure that the general principles of Law 1145 (2007) are put into practice.
- **Law 1346** (2009) regulates the responsibilities of government institutions at different levels to ensure that general policies, plans and programmes include persons with disabilities (Article 3). Furthermore families, private companies, NGOs, professional associations, labour unions and society at large are seen as duty bearers with the responsibility to promote, respect and visualise the full enjoyment of the rights of persons with disabilities, to eliminate all barriers to the full participation of persons with disabilities and their families and to denounce discriminatory behaviour against persons with disabilities. The Council for Disability Inclusion coordinates the promotion of the rights of persons with disabilities in the private sector, and includes representatives from companies, professional associations, NGOs, Chambers of Commerce, trade unions and DPOs. It provides persons with disabilities with the right to special social protection (Article 28). The **Ministry of Labour** is responsible to ensure that companies fulfil their obligations in relation to disabilities, including the employment of new staff and the work environment (Article 27).
- The **Statuary Law on Disability** (Ley Estatutaria 1618/2013) in accordance with **Law 1346** guarantees the rights of persons with disabilities through inclusion, affirmative action and other reasonable measures to eliminate all forms of discrimination due to disabilities.

- **The National Disability Plan** of 2004 was updated in 2013 to be coherent with the current national development plan "Prosperidad para Todos" (Law 1450/2011). The new plan (Conpes 166)**,** developed by the Consejo Nacional de Política Económica y Social, is a rights-based and focuses on human development rather than on assistance and protection. The overall objective of the plan is "to guarantee the full enjoyment, in equal conditions of all the human rights and freedoms of persons with disabilities by strengthening the implementation of the National Public Disability and Social Inclusion Policy". The first step is to recognise persons with disabilities as rights-holders and the obligation of the State is not to assist persons with special needs, but to respond to their rights.
- **Directriz de discapacidad y desplazamiento –** Guildelines for disability and displacement - have been developed by the Ministry for Social Protection, in agreement the UNHCR in Colombia. The aim is to support departmental, district, municipal and local entities, as well as civil society, to develop their programmes, plans and actions so that displaced persons with disabilities can regain their autonomy and independence (in the individual, family, cultural, social and community spheres).
- The **Register for the Localisation and Characteristics of Persons with Disabilities (RLCPD**) provides the country with a baseline on the situation of persons with disabilities across the country. When it is used properly, the register should lead to the design of measures especially geared to counteract discrimination in different territories. The register is based on a free and voluntarily registration via the web page.
- **The National Health Plan** guides local and regional administrations on how to decrease or at least maintain the disability prevalence recorded in the 2005 census.
- According to the **National Development Plan (2010-2014),** disability should be mainstreamed in all government policies. The Ministry for Social Protection, in coordination with DANE and municipalities, should implement measures to improve the situation of persons with disabilities, based on information derived from the register (see below). .
- Colombia has introduced the **International Classification of Functioning, Disability and Health** (**ICF)** as the basis of its disability assessment systems.

Implementing agencies

- **The National Disability System (SND)** has four levels: 1) The Ministry of Social Protection has the overall responsibility for the system; 2) The National Disability Council, *El Consejo Nacional de Discapacidad (CND)* works to monitor, evaluate and co-ordinate the system and the implementation of the national disability policy, while also making recommendations to the *National Disability Observatory (OND)* 3) The *Department and District Disability Committees (CDD)* act as intermediary levels for coordination and monitoring of the policy; and 4) *Municipality and Local Disability Committees (CMD and CLD)* are responsible for the local implementation and follow-up of public disability policies. The coordination between the CDD, CMD and CLD is managed by the *Territorial Councils of Social Policy (CTPS)*, in which persons with disabilities should be represented.
- National Territorial Encounters - **Encuentros Nación Territories -** are spaces to exchange and discuss case studies and good practices in the design and implementation of public disability policies. Governmental entities at local levels, including disability committees and the National Disability Council, civil society organisations for and of persons with disabilities, social and community networks, service providers, scholars, persons with disabilities and their families, and communities participate in these spaces.
- The **Ministry of Education** is responsible to guarantee access to quality and inclusive education to persons with special needs in accordance with the right to habilitation, comprehensive rehabilitation, full inclusion and participation of persons with disabilities,

- **Public service television** is obliged to include closed captioning, sub-titles or sign language.
- The **Ministry of Information Technology and Communication** has launched the project ConVertic which provides companies, libraries, universities and service hubs with free text-to-sound-converters and magnifying programmes to benefit the 1.2 million Colombians with visual impairments.

Accountability measures

- The **Constitutional Court** is responsible to ensure that the constitutional rights of persons with disabilities are upheld. Despite this the Constitutional Court endorsed in March 2014 the practice of surgical sterilisation of minors with cognitive and psychosocial disabilities without their consent. Article 7 of the law 1412 protects minors against this practice, yet despite the fact that the Court found Art. 7 to be constitutional, it declared itself in favour of the right of parents and legal guardians to deny minors with intellectual disabilities their reproductive rights. National and international organisations protested against the decision declaring it to be against the commitments of Colombia under the CRPD and CEDAW and a case was also brought to the Inter-American Commission on Human Rights. (Source Centre for Reproductive Health)
- The **National Plan of Action 2010-14 ("Prosperidad para todos")** contains a broad range of measures to improve the promotion, protection, respect for and guarantee of human rights. This could be used by DPOs and other civil society actors to hold the government to account for their progress in implementing the plan. Existing mechanisms include institutionalised spaces for dialogue and exchange of information between the government and the civil society.
- The **Defensoría Delegada para la Salud, la Seguridad Social y la Discapacidad** is part of the Defensoría del Pueblo Colombia, the Ombudsman for Human Rights. It conducts studies and evaluations, formulates defence resolutions, gives advice and builds the capacity of other sections of the Ombudsman, among other things. The Defensoría del Pueblo promotes, raises awareness about and defends the rights of all Colombians. It also exercises oversight over the constitutional justice.
- The **Inter-American Commission for Human Rights**, which performs hearings and issues recommendations to governments.

These accountability systems have not yet been very helpful to in terms of assisting persons with disabilities to monitor and access their rights. The well-designed and elaborated legal and policy frameworks have yet to be implemented in practice. Colombia has not yet reported on the CRPD.

Main civil society actors

Some of the main national organisations of persons with disabilities (DPOs) in Colombia are:

- **Federación Colombiana de Organizaciones de Personas con Discapacidad Física – FECODIF –** was established in 2003 to give voice to and defend the rights of persons with disabilities and their organisations. It is a member of a number of national structures (Mesa Nacional de Pensar la Discapacidad; Mesa Nacional para la inclusión laboral de las PcD; Comité Técnico sobre accesibilidad al medio físico, al transporte y a las comunicaciones; Instituto Colombiano para el Desarrollo de Normas Técnicas y Certificación; Red Colombiana de Capacidad y Derechos) and of Latin-American networks such as la Red Iberoamericana de Entidades de Personas con Discapacidad Física and RIADIS, Red latinoamericana de organizaciones no gubernamentales de personas con discapacidad y sus familiares. FECODIF has members at local, regional and national levels.
- **La Asociación Colombiana Para el Desarrollo de Personas con Discapacidades- ASCOPAR -** works in a broad range of areas for the development of person with different disabilities.
- **La Asociación Colombiana de sordociegos –SURCOE –** is a national organisation of deaf-blind persons and works for the rights of persons with multiple disabilities and their families.

- **Federación Nacional de Sordos de Colombia – FENASCOL -** was formed in 1984 by 12 regional Deaf Associations and today has 29 member organisations all over Colombia.
- **Coordinadora Nacional de Organizaciones de Limitados Visuales - CONALIVI -** is a national platform that has 30 member organisations representing or working for the rights of persons with visual impairments in different parts of Colombia.
- **Asociación Colombiana de Síndrome de Down (ASDOWN).** The association has brought a case of forced sterilisation to the Inter-American Commission for Human Rights.

A major international actor in Colombia is **Handicap International** which works in the areas of victim assistance, community based rehabilitation and rights. There are also regional networks such as **Red Latino Americana de Organizaciones No Guvernamentales de Personas con Discapacided y sus Familias** (Latin America Network of Non-Governmental Organisations of Persons with Disabilities and their Families – RIADIS) which is a cross-disability network formed by DPOs from 19 countries in Latin America and the Caribbean and regional programmes such as **Disability Rights Promotion International (DRPI)**, Latin America.

What Sweden can do: 7 questions to discuss

The legal and policy framework for disability rights is rather good, with exception of laws on legal capacity, but implementation is still very weak. Within the country strategy for Colombia, there are opportunities to address these issues, in cooperation with other agencies. Some questions to consider:

- Could the Swedish support to the Ombudsman and other accountability systems more explicitly include monitoring of the rights of persons with disabilities? Monitoring tools can be downloaded here.
- Could women with various disabilities be more systematically and deliberately included in programmes focussing on gender equality, women's empowerment/participation and gender based violence?
- Could the Swedish civil society support in Colombia also consider including DPOs - as voice and representatives of the rights holders, including those injured by the conflict? DPOs need capacity to raise awareness around disability rights, to monitor the implementation of legal and policy commitments and to advocate for the harmonisation of international commitments.
- Could Sweden do more to include and enable persons with disabilities and their organisations to participate in professional networks and in social and cultural events?
- Could Sweden do more to include persons with disabilities in peace building efforts, particularly amongst ethnic minorities and in the departments with the highest rates of persons with disabilities? Examples of resources and tools are
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do? What support and additional information would the embassy need to take such initiative? E.g. Inclusion Made Easy - a quick programme guide to disability in development here.

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Disability Rights in Guatemala

November 2014

The situation of persons with disabilities in Guatemala

It is estimated that over two million[1] people live with some kind of disability in Guatemala, equivalent to around 13% of the population (15.47 million 2013) which is over the estimated average for Latin America (10% WHO). Disability is both a cause and a consequence of poverty and over 80% of the people with disabilities in Latin America live according to the World Bank in poverty. Only 15% of people with disabilities in Guatemala are estimated to have an income; 13% are occupied within the informal sector and only 2% have a formal employment according to the National Council for the Attention to People with Disabilities (CONADI).

Disability is a source of impoverishment both to the persons with disabilities and their families. Poverty dimensions in Guatemala are as elsewhere gendered and enhanced by racial discrimination, which is reflected in the life of persons living with disabilities. The National Institute of Statistics (INE) informs in the report *Mujeres y Hombres en cifras 2008,* that 66% of the persons with disabilities in 2005 were indigenous. They are highly overrepresented given that approximately 40% of the citizens belong to indigenous populations. The report shows that almost 60% of the women and 45% of the men with disabilities in the country have never enrolled in school, approximately 15% of the girls and 20% of the boys with disabilities had completed year 4 to 6 of the primary school and less than 5% of attended secondary school (2005).

The high rates of violence have contributed to an increase of disabilities particularly among young people. According the Guatemalan Institute of Social Security (IGSS) 80% of the cases of acquired disability are caused by firearms. The World Report on Disability (WHO/World Bank 2012) also notes that the risk of being exposed to violence is in general higher for people with disabilities than those without disabilities. One extreme example is the sexual, physical and psychological violence committed by inmates, armed guards and other staff against children and adults with disabilities at the psychiatric Federico Mora Hospital. In 2012 the Inter-American Commission on Human Rights (IACHR), on the demand of Disability Rights International[2] and the Human Rights Office of the Archdiocese of Guatemala City (ODHAG), called on the government to take immediate actions to stop the human rights abuses. After continued pressure from the IACHR an Accord was signed with the government in October 2013 in which promises are given to create a system of community-based mental health services within two years, to reduce the number of detainees at the institution, to establish group homes for adults and new family-based supports for children with disabilities are to be established and that no new admissions of children will be allowed.

The national disability movement witnesses about widespread discriminatory attitudes towards persons with disabilities and lack of basic services (both due to the inexistence of services and economical and physical barriers). One matter that has been on the Disabled People´s Organisations' (DPO) agenda during recent years is the low accessibility to public transport in Guatemala and other urban municipalities. Another critique refers to media's use of derogatory expressions and how it encourages images of pity rather than discussing rights. Local authorities are said to legitimise and intensify the exclusion and the literacy of disability rights is low both among public officials, the public and persons with disabilities (Grech 2008).

[1] CONADI

[2] http://www.disabilityrightsintl.org/disability-rights-international-continues-to-pressure-guatemalan-government-to-end-human-rights-abuses-at-notorious-psychiatric-facility/

The shadow report by DPO's to the Office of the Commissioner of Human Right (April 2012) mentions the lack of harmonisation of national policies and legislation with international commitments and highlights that:

Article 6 of the legislation of housing (Decree 9-2012) speaks about the right to a dignified, adequate and healthy home but does not mention the need special programmes or special approaches in order to respect the rights of people with disabilities. The Law on Special Education has no assigned funds which makes it dependent on the will of public officials. Actions for inclusive education in public schools, job opportunities and improvement of health services to people with disabilities have been announced without specifying how this will be implemented. No special measures are considered in relation to food security and there are no special initiatives to counteract malnutrition and its effects on people's intellectual, physical or sensorial disabilities. This is according to the shadow report particularly serious in relation to the high number of children suffering of malnutrition in the country.

In general disability rights tend to be framed in isolation and are not raised when rights to gender equality, education, health, housing, social protection, sexual and reproductive rights for instance are discussed. Given the serious human rights situation in the country disability rights seem to be overshadow by other forms of discrimination and are rarely considered in national social programmes or in donor support to human rights defenders.

The legal and policy framework

Guatemala has ratified the UN Convention on the Rights of Persons with Disabilities (CRPD), the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities. The Convention is available at www.un.org/disabilities/convention/conventionfull.shtml.

Guatemala has also signed and ratified a number of other treaties that advance the rights of people, including those with disabilities, for example:

- the UN Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women – both of which make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society;
- the Inter American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities (2001);

In terms of **national laws and policies**, the following have the most direct bearing on the rights of persons with disabilities:

- The Decree No.135-96 Law on the Attention to People with Disabilities from 1996. It has not been harmonised with the Inter-American Convention or UN Convention of the Rights of Persons with Disabilities. The implementation of the Law has been weak and it is criticised as inapt by civil society organisation. A new legislation proposal was presented to the Congress in November 2013 by the High Level Commission for the Harmonization of the Legal Framework of Disabilities (appointed by the Health and Social Assistance Commission of the Congress and with representatives from various DPOs). The proposal has not been approved.
- Modification of the Decree 135-96 in 2011 to recognise short people as persons with disabilities.
- The National Disability Policy (2006).
- The Law on Special Education for Persons with Special Education Needs with and without Disabilities (2007).
- Decree No. 76-97 National Law on the Development of Physical Culture and Sports (1990) and the National Law on Sports Decree 76-97 Non-Affiliated Sports (Deporte no Federado) (1998).

In spite of the policy commitments above disability remains a low priority for decision-makers. The formation of the parliamentarian Disability Commission has been stalled over five years despite the multiple demands by DPOs and CONADI on the Congress. The disability movement stresses that the lack of alignment of national legislation to the international agreements shows the low level of commitment of the government. The law that regulates the annual national budget does not consider the legislative

and administrative measures needed to implement the international and national commitment to disability rights.

Implementing agencies

El *Consejo Nacional de Personas con Discapacidad* (Conadi), governmental agency with the purpose to coordinate, advice and implement the national disability policy for the integration and social inclusion of persons with disabilities on equal terms. Apart from monitoring the policy implementation of governmental entities it also provides training to different professionals, promote and participate in information campaigns. It makes public denouncement of cases of discrimination as in its recent critique of the National Council of Sports and Recreation for denying support to the Latin American Championship of Wheelchair Basketball, as the council's block of reforms of the Law of sports and Physical Culture.

The 2012 shadow report produced by the disability movement states that the relations with CONADI has not always been good and mentions that the board has been reported to the Attorney for Human Rights for violating the freedom of expression of a person with disabilities.

The *Defensoría de las Personas con Discapacidad (Office for the Defence of the rights of Persons with Disabilities)* was formed in 2003 and is part of the Ombudsman of Human Rights in Guatemala (PDH). Its principal functions is to define policies and strategies for the PDH on matters concerning the rights of people with disabilities, to conduct periodic analysis of the status of this population, to decide mediation policies in conflicts between authorities that are responsible to defend the rights of people with disabilities and to provide technical assistance to the Unit of Specific Rights, support the development of DPOs and participate as an observer in the CONADI.

Accountability measures

The two entities mentioned above are responsible for overview the implementation of disability policies and function as complaint mechanisms. Only state parties and the Inter-American Human Rights Commission can bring cases t the Inter-American Human Rights Court, but victim of human rights abuses can present their complaints to the Commission that in its turn decides if the case should be brought to the Court (Art. 49 and 51 of CADH)

Main civil society actors

As far as organisations of people with disabilities are concerned, some of the actors in Guatemala are:

Asociación Central de Ciegos de Guatemala – ACCG, is a member of the World Blind Union and Latin American Blind Union, providing support and training in ICT and Braille among other activities.

Asociación Nacional de Ciegos de Guatemala

Asociación Guatemalteca de Personas con Discapacidad Visual

Asociación de Sordos de Guatemala- ASORGUA, a DPO formed in 1994, member of the World Federation of the Deaf (WFD). Programmes for the members (education, health, labour market).

Asociación de Personas con Discapacidad y Vida Independiente – PAVIDI, a DPO formed in 2010 promoting independent living for persons with disabilities.

Asociación Guatemalteca de Apoyo al Limitado Físico – AGALFI, member of *Comité Paralímpico Guatemalteco-COPAG***,** works for the quality of life and the integration and social, economic and political equality of persons with disabilities through awareness raising, advocacy and the creation of spaces for its members.

Personas Productivas Con Discapacidad – ASODISPRO, focuses on labour rights and opportunities using a web platform to link persons with disabilities with companies and employers. It is also a spot for information particularly for persons that recently are facing disabilities.

Colectivo Vida Independiente de Guatemala is a DPO with members with and without disabilities that promote structural change through analysis, reflection, debate, education and research with the aim to strengthen the social, political and economic participation of persons with disabilities.

As the disability movement is rather fragmented there are also a substantial number of smaller DPOs at departmental level. There is no umbrella or national civil society platform for the DPOs and other civil society organisations working for disability rights.

What Sweden can do: 10 questions to discuss

Within the framework of the on going Swedish cooperation with Guatemala, focussing on peace and reconciliation, human rights, poverty reduction/inclusive economic growth, social equality and inclusion, basic health and gender equality - Sweden has great opportunities to include the rights of persons with disabilities. Some questions to discuss:

- Could Sweden do more to systematically include disability rights as an explicit part in its support to accountability mechanisms, human rights institutions and watchdog organisations? Especially in its support to indigenous organisation given that out of the 2 million persons with disabilities 1.3 are indigenous persons? Examples of monitoring tools can be downloaded here.
- Could Sweden do more to include DPOS in civil society capacity development programmes in order to strengthen their capacity to raise awareness around disability rights and engage in monitoring of the implementation of legal and policy commitments?
- Could Sweden do more to include and enable DPOs and persons with disabilities to participate in its professional networks, academic engagements and in social and cultural events?
- Could Sweden do more to ensure that women with disabilities are included in programmes focussing on women economic empowerment, SRHR and gender-based violence?
- Could Sweden do more to promote inclusions of disability rights in access to justice programmes, for example efforts to assist children with disabilities to be registered and access their educational and health rights?
- Could Sweden do more to ensure that supported economic empowerment, rural development, microcredit, entrepreneurship and private sector programmes are accessible to and inclusive of persons with various disabilities? Examples of tools can be found here.
- Could Sweden do more to bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the embassy need to take such initiative?
- Could Sweden do more to ensure that women, men and children with disabilities (and mental health conditions) are systematically included and even prioritised in emergency relief and humanitarian aid efforts? Could Sweden raise the issue of malnutrition as a cause to and consequence of disabilities? Examples of tools can be found at the IDDC web site here. Other tools are:
  - ✓ Manual on mainstreaming disability in disaster risk reduction here
  - ✓ Disability and the post-conflict agenda here
  - ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
  - ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here
- Could Sweden do more to ensure that deliberate measures are taken to make supported social and basic health services accessible and inclusive of men, women and children with various disabilities? Inclusion Made Easy - a quick programme guide to disability in development here.
- Could Sweden do more to keep up to date on the situation of the rights of persons with disabilities in Guatemala?

References

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The human rights of persons with disabilities are a Swedish government priority. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.