

Focus: Persons with Disabilities in ADC

Unless disabled people are brought into the development mainstream, it will be impossible to cut poverty in half by 2015 or to give every girl and boy the chance to achieve a primary education by the same date-goals agreed to by more than 180 world leaders at the United Nations Millennium Summit in September 2000.

James David Wolfensohn, President of the World Bank from 1995-2005, 2004

Introduction

As already emphasised in the Universal Declaration of Human Rights of 1948, “all human beings are born free and equal in dignity and rights” and “everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.” Every person therefore also has the right to liberty, education, a free choice of occupation and to found a family. Persons with disabilities are, however, often deprived of these rights, especially in developing countries.

Of more than 650 million people with disabilities, altogether some 80 per cent live in developing countries (10 per cent of the entire world population), with children making up as much as 87 per cent. Many live in an absolute poverty, are frequently deprived access to the most basic education or health facilities, are discriminated against and socially excluded or victimised by prejudice or stigmatisation. It is now recognised that the Millennium Development Goals (MDGs) cannot be achieved without the full inclusion of persons with disabilities. This was, for example, the conclusion reached by the report of the Expert Group Meetings on Mainstreaming Disability in MDG Policies, Processes and Mechanisms in 2009:

“The Millennium Development Goals cannot be achieved without the full and effective inclusion of persons with disabilities and their participation in all stages of the MDGs processes.”

The causes and consequences of disabilities depend on the social and economic setting. Of key importance also is the framework created by government in recognition of the rights of persons with disabilities and/or the pro-active measures it takes to implement them.

If government itself is not strong enough or there is a lack of political will, donors must also take action. So the need for the full inclusion of persons with disabilities and/or respect for their rights and needs in development cooperation has now been largely recognised by bilateral and multilateral donors as well as Austrian Development Cooperation (ADC).



Social model

This closer focus on persons with disabilities was largely influenced by initiatives such as the Disability Movement, which advocated a departure from the narrow vision of disability solely as a medical problem to be solved with curative and rehabilitation measures or segregation in special institutions (individual model). Instead, account should also be taken of the discrimination and social exclusion attending disability (social model). Support for persons with disabilities should therefore concentrate in particular on eliminating barriers. While medical concerns remain important, key emphasis is now attached to human rights issues. This approach rejects the notion of according special status to persons with disabilities.

UN Convention on the Rights of Persons with Disabilities

Crucial for the inclusion of persons with disabilities was the UN Convention on the Rights of Persons with Disabilities adopted by the UN General Assembly in December 2006 and ratified by Austria in September 2008. Today, the convention is seen as the most important international set of provisions on the treatment of persons with disabilities and as marking a fundamental paradigm shift:

Persons with disabilities are no longer seen as recipients of assistance, primarily in need of medical treatment and social protection, but as active members of society and subjects with rights, able to claim these and take their own decisions.

The aim of the convention is to grant full and equal entitlement of persons with disabilities to *all* human rights (civil, political, economic, social and cultural) and to promote, safeguard and ensure respect for their dignity. To this end, the states parties must take all necessary measures to implement the rights guaranteed in the convention. Particularly important here is the active inclusion of persons with disabilities, through consultation, for example.

Compliance with the convention is overseen by a semi-judicial complaints mechanism instituted by the Optional Protocol. After exhausting official national channels, complaints on contraventions of rights under the convention can be addressed to the Committee on the Rights of Persons with Disabilities. Made up of independent experts, the committee also appraises national reports at regular intervals and makes recommendations to the states parties. These must establish their own coordinating agency to advance the national implementation of the convention.

Of particular importance here is Article 32 (International cooperation), which obliges the states parties to support other countries in implementing the convention as part of international cooperation. This *can* include measures to ensure that development programmes also include and are accessible to persons with disabilities. Inclusive development is thus not of legally binding application, but Article 32 entails at least a semi-binding obligation in conjunction with other provisions of the convention.

For Austrian Development Cooperation (ADC), this means the full inclusion of the rights of persons with disabilities in its programme and project activities.

Key facts on the UN Convention on the Rights of Persons with Disabilities (as at May 2011)

- Adoption: 13 Dec. 2006
- Entry into force: 3 May 2008
- States signatory: 147
- States parties: 99 (including ADC priority countries: Ethiopia, Armenia, Bosnia and Herzegovina, Burkina Faso, Nicaragua, Moldova, Serbia, Uganda)
- Ratified by Austria on 26 Sept. 2008

Optional Protocol to the UN Convention on the Rights of Persons with Disabilities

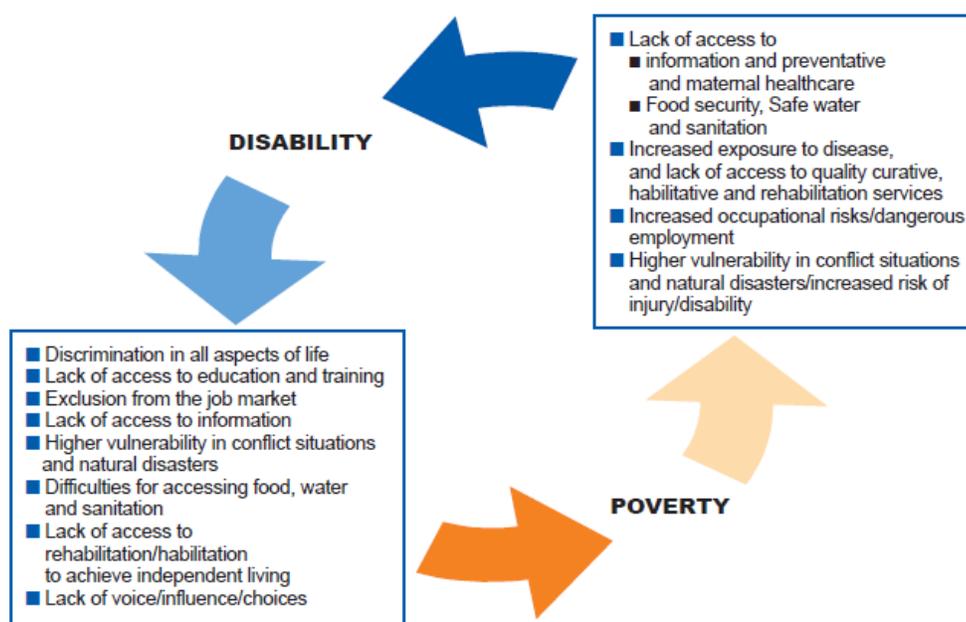
- Adoption: 13 Dec. 2006
- Entry into force: 3 May 2008
- States signatory: 90
- States parties: 61 (including ADC priority countries: Bosnia and Herzegovina, Burkina Faso, Nicaragua, Serbia, Uganda)
- Ratified by Austria on 26 Sept. 2008

Disabilities and development cooperation sectors and themes

Poverty and disabilities

Persons with disabilities usually belong to particularly poor sections of the population. Every fifth person living in poverty worldwide is disabled. According to estimates, the ratio of persons with impairments among the poor world population is also disproportionately higher than those without disabilities.

The link between disability and poverty is difficult to sever without external assistance. Chronic poverty can be both the cause and consequence of disabilities. Limited or no access to adequate food, education or health care raises the probability of disease and/or psychological, physiological or anatomical impairments. In about 20 per cent of cases, disability is due to malnutrition, in 50 per cent, to poverty. Between about 250,000 and 500,000 children go blind every year for lack of vitamin A, for example. In addition, only two to four per cent of persons with disabilities in developing countries have access to rehabilitation measures. Unfortunately, this adverse trend continues. The World Health Organisation (WHO) estimates that the number of persons with medium to severe disabilities will double by 2035. Disabilities are often avoidable with suitable medical care and sufficient food. The connection between poverty and disability is often also identified as a vicious circle that can be depicted as follows:



Source: European Commission, Make Development Inclusive: How to include the perspectives of persons with disabilities in the project cycle management – Guidelines of the EC, 2008, page 9.

Environment and disabilities

About a third of all diseases that can result in impairments and disabilities can be attributed to environmental factors. Environmental destruction should not therefore be underestimated as a cause of disability. Catalysts can be individual disasters and direct contamination, such as the nuclear accident at Chernobyl or the toxic gas release in Bhopal in India, as well as lack of workplace health and safety, excessive use of pesticides or cyanide and mercury poisoning in gold mining. Slow processes such as soil erosion, the depletion of groundwater, climate change

and the attendant malnutrition/undernourishment, however, can also often cause diseases which can result in permanent impairments or disabilities and ultimately in poverty.

Children and disabilities

Particularly children with disabilities need additional care and attention and support from their families. Investments in children with disabilities are, however, sometimes even seen as a waste. Frequently, these children are refused access to school and in the worst cases they are ostracised by society. As a result, they frequently end up on the street. For lack of preventive and health services in poor countries, minor impairments often become severe, raising the risk of early death. This is why the mortality rate among children with disabilities can amount to as much as 80 per cent even in countries where average child mortality has declined to below 20 per cent.

Gender and disabilities

Girls and women with disabilities suffer from multiple disadvantages. Besides the usual discrimination, such as limited access to food, land, health care, education and gainful employment and the much heavier workload, girls and women with disabilities are more frequently exposed to violence, above all sexual violence, with the related high risk of HIV infection and other dramatic consequences. Genital mutilation, for example, has also caused disabilities in more than 100 million women.

Armed conflicts and disabilities

Wars and hostilities, the use of mines and cluster and fragmentary bombs as well as the destruction of infrastructure have devastating effects on the physical and mental integrity of people. They often have several long-term detrimental effects on equal opportunities and decent conditions of life or destroy these completely.

Persons with disabilities in ADC

Under Section 1 of the Austrian Federal Development Cooperation Act, “any measure adopted (...) shall take into consideration in a suitable manner, the needs of (...) people with disabilities.” This principle also forms part of major ADC policy documents, such as on good governance and human rights. Although due to its room for interpretation, the phrase, ‘in a suitable manner’, can pose problems for ADC in practical implementation, Austria thus largely met at least its legal obligation under Article 32 of the UN convention as early as 2003.

Seven principles of ADC

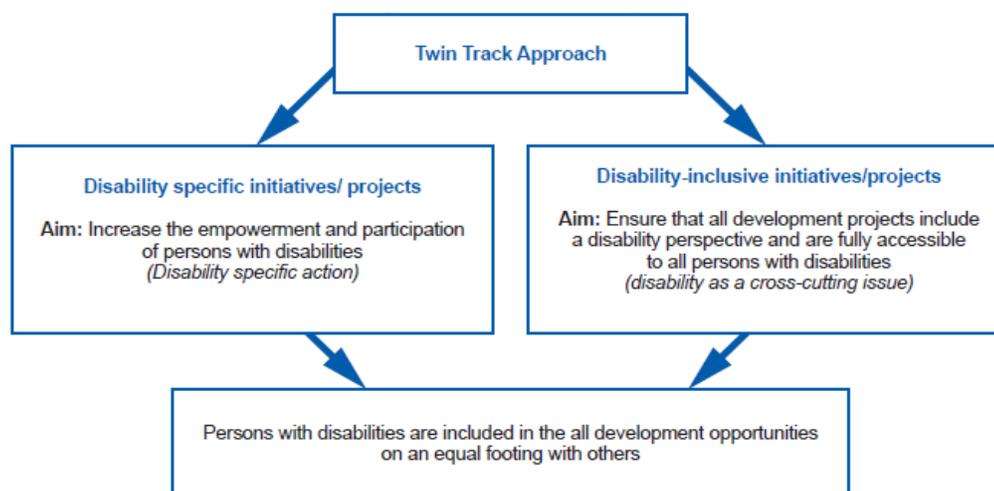
Based on the principle of human rights for all, ADC adopts an inclusive approach of development for all and therefore especially promotes participation and equal opportunities for persons with disabilities and their empowerment. Key here are prevention and rehabilitation to give those affected a better chance to take part in development. The ADC approach follows the recommendations of the European Commission in particular:

- Persons with disabilities are a diverse group and must be seen and treated as such.
- Persons with disabilities must be increasingly included in decisions as actors in development cooperation in keeping with the principle of ‘nothing about us without us’.
- Persons with disabilities are bearers of rights and not recipients of aid.
- A dual approach is needed: specific projects for persons with disabilities and the inclusion of persons with disabilities as a cross-cutting theme in all programmes and projects (twin track approach).
- Project evaluations must assess whether account has been taken of the needs of persons with disabilities.

- Measures should be designed for sustainability, include the social setting above all (family) and thus have long-term beneficial impacts on the situation of persons with disabilities and the development prospects in a country.
- Priority must be attached to the promotion of women and children with disabilities.

Based largely on these principles, ADC adopts a rights-based approach (RBA) to development. The elimination of physical or interpersonal barriers and the provision of (infrastructure) resources are of prime importance. All people should be equally able to claim their rights and persons with disabilities should be given equal access to health, water, education, political participation, etc. The exclusion of persons with disabilities is thus redefined from a socio-political problem to a human rights violation.

Of foremost importance for ADC is also the twin track approach recommended by the European Commission, which can be illustrated as follows:



Source: European Commission, Make Development Inclusive: How to include the perspectives of persons with disabilities in the project cycle management – Guidelines of the EC, 2008, page 24.

ADC therefore supports specific projects and programmes to promote the concerns, needs and rights of persons with disabilities and includes these as far as possible in the design, implementation, monitoring and evaluation of all measures. The quality criteria on the disabilities theme provide directions on how the rights and needs of these persons can be integrated into project design and what must be taken into account during implementation. Participation, empowerment, accountability and non-discrimination play a key role here. ADC requires its project partners to involve persons with disabilities in planning a project. They also make up a target group for special consideration in reintegration measures as part of ADC peacebuilding and conflict prevention activities. Appropriate know-how is also imparted to personnel to ensure the full inclusion of persons with disabilities. A special commissioner also deals with questions on persons with disabilities and the inclusion of their rights and needs in the activities of ADC. ADC is also engaged in various national and international networks. Together with organisations such as Light for the World, for example, a working group was set up on this issue to discuss ways of effectively including persons with disabilities in ADC measures. Finally, ADC also takes active part in the Global Partnership for Disability and Development, in which numerous bilateral and multilateral donor organisations and disabled persons organisations (DPOs) are represented.

Selected projects

Equal opportunities for persons with disabilities in Africa

In African countries, persons with physical or mental impairments are often neglected by the government. The aim of the framework programme, Light for the World, is therefore to provide support for inclusive development at community level in Ethiopia, Burkina Faso or Mozambique, for example. Instead of just being given medical treatment and welfare aid, persons with disabilities are integrated as actors at all social levels.

In community-based rehabilitation programmes, helpers come into the house, plan individual assistance programmes and show relatives how they can help in learning important skills. The prime aim is to enable persons with disabilities to take equal and self-determined part in development. Major steps are access to basic medical care and rehabilitation, educational work and raising awareness on how to avoid disability. Organisational capacity is being built for rehabilitation. Training affords new prospects for persons with disabilities.

In a process over several years at international level led by the World Health Organisation (WHO), guidelines have been devised for community-based rehabilitation. Besides WHO, this involved other UN organisations, associations for persons with disabilities and development organisations. As an international development strategy, the guidelines provide a framework for community-based rehabilitation and they also lay the foundation for networking individual initiatives with a view to drafting national development strategies and conducting international exchange (1980-05/2009; NGO framework programme, Light for the World 2009-2011, Light for the World - Christoffel Development Cooperation, Jan. 2009 - Dec. 2011, cofinance: EUR 1,330,600 - 74.26 per cent of total).

Bosnia and Herzegovina: Demining to prevent disabilities

Over 15 years after the end of the war, large parts of Bosnia and Herzegovina are still mined. This does not just affect general security, it also impedes national reconstruction and economic growth. People are repeatedly killed or suffer permanent physical injury. Demining is expensive and Bosnia and Herzegovina is unable to finance this on its own. The bulk of requisite funds comes from international donors. ADC also takes part in demining the West Balkan state. In addition, Austria supports an outpatient pain relief and therapy facility for mine victims. Altogether, about 220,000 square kilometres are scheduled for demining to make them habitable and reusable for agriculture, tourism and industry. This will also enable the return of internally displaced persons and refugees to their communities and the development of social and economic infrastructure. It will also allow the Commission of Missing Persons to gain access to major areas (2063-00/2010, Support of Mine Action Activities in Bosnia and Herzegovina, 2010-2012, Sept. 2010 – Aug. 2012, International Trust Fund for Demining and Mine Victims Assistance (ITF), EUR 420,000).

Belarus: Care and support for children with disabilities

Due to the nuclear reactor disaster in Chernobyl, a fifth of the national territory of Belarus was contaminated with radioactivity. Environmental damage, the poor living conditions of many people, poverty among large parts of the population and alcohol abuse place a heavy burden on the health and social system. Especially severely affected are families with disabled children, who number among the poorest sections of the population in the country. Limited assistance is provided for parental care, mostly by mothers, who cannot engage in gainful employment for lack of care facilities. Educational and assistance services are largely confined to special schools and rehabilitation centres. Disabled youth have practically no chance of learning an occupation. There is little awareness of the need for the social integration of persons with disabilities. The government is therefore seeking to improve support facilities by developing regional institutions.

With assistance from Austrian Development Cooperation and together with the Belarussian and Slovakian Red Cross, the Austrian Red Cross is engaged in Grodno District in the Northwest of the country in improving the situation of 1,000 children with disabilities. A mobile, multidisciplinary team of assistants come to the families' homes and help them to care and provide for the children and learn special care methods. Family members have also been supported through the establishment of a day care centre so that they can take up work again. By setting up self-help groups, networking is promoted among those affected to enable mutual exchange and support (8108-10/2008, Improving Health Care for Children with Disabilities, 1 Jan. 2009 - 31 Dec. 2010, Austrian Red Cross, cofinance: EUR 73,000.00 - 40.02 per cent of total).

Pakistan: Training for youth with disabilities

Persons with disabilities frequently live in social isolation. Education and training are essential for earning income and leading a self-determined, relatively independent life. With Austrian support in the Islamabad/Rawalpindi conurbation, each year about 170 Down's syndrome patients, autistic persons and hearing-impaired and underdeveloped youth and adults aged 14 to 29 receive employable training. A fully equipped technical and vocational training centre is being set up in a care facility in Rawalpindi in the northern province of Punjab. Following a medical and psychological examination of the candidates, an assessment of their talents and a market analysis, a number of courses are provided in various modules. The training measures comprise courses in tailoring, embroidery, knitting, pottery and home economics as well as in secretarial work and joinery where required. Female participants must make up at least 50 per cent of the total. More than 1,000 family members also benefit from the measures (2319-01/2009, Training for Persons with Disabilities HOPE'87, 1 June 2009 - 31 May 2011, cofinance: EUR 66,000 - 50 per cent of total costs).



Further reading

ADC

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<http://www.un.org/disabilities/documents/toolaction/ipuhb.pdf>

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European Commission, Study of Disability in EC Development Cooperation, November 2010, http://ec.europa.eu/europeaid/what/social-protection/documents/223185_disability_study_en.pdf

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Canadian Network on Disability and Development: <http://www.cndd.ca/Home.aspx>

Light for the World: www.lichtfuerdiewelt.at

Hilfswerk Austria: www.hilfswerkaustria.at

Horizont3000: www.horizont3000.at