

**Including Disability into Development
Cooperation. Analysis of Initiatives by
National and International Donors**
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Resumen

Alrededor de un 80% de los 650 millones de personas con discapacidad viven en países en vía de desarrollo. Es evidente que pobreza y discapacidad forman un círculo vicioso. Este documento analiza el papel de los derechos y las necesidades de las personas con discapacidad en el contexto de la cooperación al desarrollo y defiende que, si se quieren obtener los objetivos de desarrollo, es fundamental incluir la discapacidad en estrategias de desarrollo. Lamentablemente son pocos los países donantes que consideran la discapacidad al definir y programar sus estrategias de desarrollo. En esta investigación se revisan varias iniciativas en el ámbito de la discapacidad implementadas por agencias nacionales de cooperación (USAID, DfID, NORAD, MFA, SIDA, DANIDA, GDDC y GTZ) y organizaciones internacionales (WB, UN, IADB, ADB, UE). El objetivo es identificar buenas prácticas y destacar los principales obstáculos que han impedido que las agencias de cooperación apliquen con éxito políticas de desarrollo inclusivas.

Abstract

Around 80% of the 650 millions persons with disabilities live in developing countries. It is acknowledged that poverty and disability are related through a vicious cycle. This paper considers the role of the disability dimension (needs and rights) within the framework of development cooperation and focuses on the importance of including disability in development strategies in order to achieve development goals. Lamentably only few donor countries consider disability at the moment of defining and programming their development cooperation strategies. In this research have been reviewed several disability-related initiatives undertaken by national cooperation agencies (USAID, DfID, NORAD, MFA, SIDA, DANIDA, GDDC and GTZ) and international organizations (WB, UN, IADB, ADB, UE). The aim was to identify best practices and to highlight main obstacles that have prevented cooperation agencies from implementing successfully inclusive development policies.

Palabras clave: discapacidad; derechos de las personas con discapacidad; discapacidad y pobreza; cooperación al desarrollo

Key words: disability; disability rights; disability and poverty; development cooperation.

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List of Abbreviations

ADB: Asian Development Bank
BCDP: British Council of Disabled People
CAP: Country Assistance Plans
CSOs: Civil Society Organizations
DANIDA: Danish Development Agency
DfID: British Department for International Development
DPOs: Disabled People Organizations
EC: European Commission
EDF: European Disability Forum
FIDIDA: Finnish Disabled People's International Development Association
GPDD: Global Partnership for Disability and Development
GTZ: German Technical Cooperation
ICF: International Classification of Functioning, Disability and Health
IADB: Inter-American Development Bank
ILO: International Labour Organization
KaR: Knowledge and Research Programme
LAC: Latin America and the Caribbean
MDGs: Millennium Development Goals
MFA: Ministry of Foreign Affairs of Finland
NORAD: Norwegian Agency for Development Cooperation
PPAs: Partnership Programs Agreements
PRSP: Poverty Reduction Strategy Paper
PWD: People with Disabilities
RDA: Rapid Disability Analysis
SIDA: Swedish International Development Cooperation Agency
STAKES: National Research and Development Centre for Welfare and Health in Finland
UN: United Nations
UNESCO: United Nations Educational, Scientific and Cultural Organization
UNDP: United Nations Development Program
UNICEF: United Nations Children's Fund
WHO: World Health Organization

1 Introduction

The United Nations estimates that some 650 millions persons have a disability and that the majority of persons with disabilities (around 80% of them) live in developing countries and are among the poorest of the poor (United Nations, 2007). According to the World Bank, one in every five of the world poorest is disabled (Elwann, 1999). Persons with disability in poor countries face barriers that limit their access to education, employment, housing, transportation, health care and rehabilitation. Economic and social exclusion is a reality for persons with disability in those countries.

It is acknowledged that the eradication of poverty will not be achieved without including the disability dimension (rights and needs) in every aspect of development. Despite this, in the last decades disability has not been an important issue in developmental work. A very significant example are the *Millennium Development Goals* where persons with disabilities¹ are not mentioned at all.

This paper aims to study several initiatives undertaken by national cooperation agencies and international organizations to include disability in development cooperation actions. This analysis will allow a better comparison between what different organizations have progressed in including disability in their development strategies and initiatives, and to highlight best practices applied so far.

On December 2006 the General Assembly of United Nations adopted the first binding instrument to protect persons with disabilities: the *Convention on the Rights of Persons with Disabilities*. The Convention all through its text focuses on the link between disability and poverty; moreover article 32 specifically provides a legal framework for international cooperation to support inclusive development.

The Convention has entered into force in April 2008. At the moment of writing this paper² unfortunately not all countries had signed it (e.g. USA). Among those states that signed it, only a small group already accomplished the

ratification process. Despite this it has become clear that the Convention will become the reference legal tool fixing the framework principles to be applied in every national and international initiative that regulates issues concerning disability. In this context, states will be obliged to comply with the Convention's articles and respect and promote disability rights without any exception.

Precisely the origin of this research lays in the approval of the *Convention on Rights of Persons with Disabilities* by the United Nations. This event gave birth to the idea of this work, whose main goal is to review in detail how national development agencies are dealing with disability (if they are dealing with this issue at all). With the Convention many states will have to start to include disability in development cooperation actions. At the moment there is not a perfect paradigm to reproduce and it is not sufficiently clear which are the best approaches and initiatives to include disability in development cooperation strategies and plans.

Only eight national agencies (USAID, DfID, NORAD, MFA, SIDA, DANIDA, GDDC and GTZ) have undertaken actions of a certain relevance to encompass disability issues in their action plans. The agencies have acted in different ways and in different moments. Also some international organizations (the United Nations, the World Bank, the European Commission, the Asian Bank and the Inter-American Development Bank) have carried out important initiatives regarding inclusive development. It has been considered that these supranational organizations play a crucial role in the promotion of disability policies, since an important volume of development work (and budget) is managed through them.

Before reviewing several initiatives and policies, this analysis begins defining the concept of disability. As it will be explained disability is not simple to define because of different cultural approaches to the issue. In order to justify the importance of including disability issues into development policies/programs it has been estimated important to survey previous research that demonstrates and analyzes the relation between disability and poverty and the vicious cycle that links them.

¹ "Person with disabilities" is the expression officially used by the United Nations and the majority of organizations. Anyway many agencies use the term "disabled" highlighting the disabling process that individuals can suffer from. In this text the words "disabled" and "persons with disabilities" will be used accordingly to organizations or agencies analyzed.

² The last review of this document was made in July 2008.

Another reason why disability must be incorporated in development policies is because disabilities rights are human rights. During the last years the approach to development evolved significantly placing human rights at the center of development. Human rights are the fundamental universal and indivisible principles by which every human being can claim justice and equality. Disability describes the barriers faced by people with impairment to achieve equality and justice and disabled people are human beings with full rights. Therefore, it is axiomatic that development approaches based in human rights should consider the challenges and obstacles that disabled people face to fulfill their rights.

After mentioning the *Convention on the Rights of Persons with Disabilities*, this study will review general notions on inclusive development and mainstreaming disability. In order to develop effective development policies including disability issues, it is important to understand what is meant with inclusive development and mainstreaming disability.

Investigating the national agencies initiatives is not a simple task. Firstly because not all the information is available. Only few of the analyzed agencies publish their initiatives regarding disability in their annual reports and websites. For this reason, the agencies were contacted directly via e-mail or phone. Secondly because, even after having contacted the agencies directly, in the majority of cases, the general information services were not aware of what the disability policies or programs within the organization were. During the period in which the greater part of this research was done (end of 2007 and January 2008), only few of the reviewed organizations had staff specifically in charge of disability issues. In spite of the fact that every cooperation agency and organization has different structural characteristics, budgets and approaches to disability, in the last part of this paper the policies and actions including disability in development cooperation are compared and best practices are identified.

Some international organizations are also promoting inclusive development; although every organization has acted in a different way according to its mandate and tradition, they certainly are influencing the international aid system in this regard defining trends and general policies.

Finally, conclusions identify main obstacles and constraints that have prevented national agencies from implementing successfully inclusive development policies. Disability issues in development cannot be completely understood without taking into account the policies and strategies developed at national level by the partner countries receiving cooperation funds. However, this paper will take into consideration only the donors actions. Firstly because donors approach to disability affect how developing countries establish disability policies. And secondly, because it has been deemed that analyzing national strategies in developing countries should be the focus of further research.

2. Defining Disability (Approaches to Disability)

Defining disability is a complex and controversial task because it is a multi-dimensional concept and its definition has strong cultural influences. There are basically three ways to approach disability: through a charity, medical or social model.

a) CHARITY MODEL

The charity model is the oldest approach. This model views people with disabilities as unfortunates or victims of circumstance, whom society must care for as a moral responsibility. Consequently, they need special services, special institutions, etc., because they are different. While this approach may enrich benefits and services for people with disabilities, the charity model tends to under-emphasize the capacities of people with disabilities to participate more fully in work and community life.

B) MEDICAL MODEL

Medical models of disability view it as a physical, mental, sensorial and psychological deficiency embodied in an individual that limits a person's activities. This view concludes that social and cultural exclusion is essentially the result of limitations imposed by determinate impairments. As the problem is primarily medical, the solution tends to be in cure and/or rehabilitation or social assistance. In this case resources are invested in health care and related services in an attempt to cure disabilities medically, expand functionality and/or

improve functioning thus allowing disabled persons a more "normal" life. Medical view locates the problem in the individual.

C) SOCIAL MODEL

The social model represents a truly radical re-conceptualization of disability. The social model draws a clear distinction between impairments and disability. Society disables people with impairments by its failure to permit inclusive participation of people with disabilities. Disability thus arises from complex interactions between health conditions and the context in which they exist. Interventions are thus not only at the individual level but also at the societal level. For example the introduction of universal design to make infrastructure more accessible, inclusive education systems,

and community awareness programs to combat discrimination (Albert, 2004b).

D) ICF

The World Health Organization developed an instrument that combines both the medical and social model to measure the functional capacity of every person. This tool is called *International Classification of Functioning, Disability and Health* (ICF). In the ICF, disability is conceived as a dynamic interaction between health conditions (disease, disorders, injuries, traumas, etc.) and contextual factors (environmental and personal factors). The scheme shown in Fig. 1 demonstrates the role that contextual factors (e.g. environmental and personal factors) play in the disabling process.

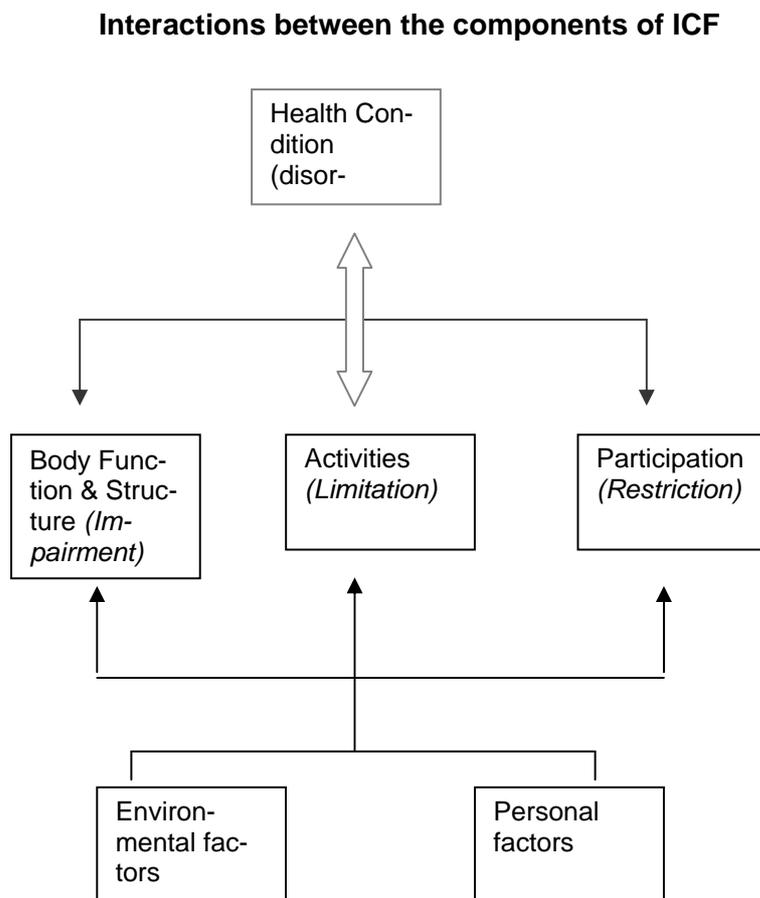


Fig 1. Interactions between the components of ICF, *Introduction to the International Classification of Functioning, Disability and Health (ICF)*, World Health Organization, 2001.

The ICF has been accepted by the majority of development organizations and sets the gold standard for understanding and measuring the extent of disability. Approaching disability in such a multidimensional way allows understanding the causes of disablement and detecting better solutions to improve the life of people with disabilities, and eventually prevent disability. Therefore, the ICF provides an appropriate instrument for the implementation of stated international human rights mandates as well as national legislation.

However, some critics to this approach (e.g. Barnes et al., 2002; Ingstad, 2001) have argued that the ICF represents little more than medical model thinking clothed in social model language, particularly as many professionals continue to pay little attention to environmental impacts and focus instead on impairment.

2.1 DATA ON DISABILITY

At the moment of writing this research, there is no sufficient high quality data on disability. This occurs for several reasons. Countries definitions vary widely, as do methodological approaches to measuring disability. For example it depends very much on the reasons for collecting the data (e.g. establishing a disability pension scheme versus making public services accessible) and/or the data instrument used (e.g. a census, survey or administrative data). Less data exists for different impairments (Mont, 2007).

More and more frequently ICF is commonly taken as the reference to measure disability prevalence. The World Bank is trying to set forth a standard for defining disability suitable for developing internationally equivalent measurement procedures in order to provide comparable prevalence rates (a checklist of good measurement practices is provided). That is, to report the percentage of people with a limitation in at least one of the core functional domains, as outlined by the ICF and as implemented by the UN's Washington Group on Disability Statistics. This coincides with the basic trend of measuring functional limitations, rather than disability (Mont, 2007).

In the meanwhile there is general agreement on the fact that people with disabilities represent around the 10 or 12% of the worldwide population, more or less 650 million people.

This figure derives from the outcome of different surveys, projects, programs and studies, carried out by international organizations (e.g. UN, World Bank), national development agencies (e.g. SIDA, GTZ) and national governments (e.g. Honduras, India). Besides the WHO affirms it is reasonable to think that this figure is increasing due to population growth, medical advances and ageing process (World Health Organization, 2007).²

3. Poverty and Disability.

According to the United Nations Development Program (UNDP) the 80% of persons with disabilities live in developing countries and the 20% of the world poorest are disabled people (United Nations, 2007). This figure shows clearly and immediately the existing link between poverty and disability. More precisely poverty and disability are related through a vicious cycle. Poverty can be a direct cause of disability such as disability through discrimination and exclusion can bring to poverty conditions.

Analysis of case studies in developing countries prove that higher disability rates are associated with higher illiteracy, poor nutritional status, lower inoculation and immunization coverage, lower birth weight, higher unemployment and underemployment rates, and lower occupational mobility (Elwann, 1999).

It is acknowledged that poor nutrition, dangerous working and/or living conditions, limited access to vaccination programs and health and maternity care, and more generally poor health services, poor hygiene, bad sanitation, road accidents, lack of information or misinformation about the causes of impairments, war and conflict, and natural disasters can cause disability.

It has been demonstrated that lack and inappropriate health care can exacerbate disease outcome and a remedial impairment can become a permanent disability. For example, the WHO currently estimates that there are 1.5 million blind children worldwide, with the largest number in Africa and Asia. In developing countries, up to 70% of blindness in children is either preventable or treatable (Yeo, 2001).

The United Nations Children's Fund (UNICEF) says that in developing countries the

proportion of disability caused by communicable, maternal, peri-natal diseases, injuries and the proportion of childhood disability are higher than in developed countries (UNICEF, 2008).

Moreover accidents and conflicts are also an important cause of disability, especially in developing countries. During conflicts, civilians with soldiers are at risk from active hostilities, as well as from unexploded ordnances, land mines, and violent excesses. Health care and social assistance systems break down, and some normally treatable conditions can become disabling. For every child killed in warfare, three are injured and acquire a permanent form of disability (Elwann, 1999). Poverty affects disability so strongly that, ac-

ording to the World Bank estimations, as many as 50% of disabilities are preventable and directly linked to poverty. Consequently if they are left unaddressed, they generate social exclusion and stigma, which, in turn, generates another series of social disabilities. Their access to education, work and health care is limited (Guernsey et al., 2006).

In addition, disabled people have lower access to education. Following the research and data gathering carried out by the United Nations Educational, Scientific and Cultural Organization, (UNESCO), around 90% of children with disabilities in developing countries do not attend school. The global literacy rate for adults with disabilities is as low as 3%, and 1% for women with disabilities. Literacy rates of

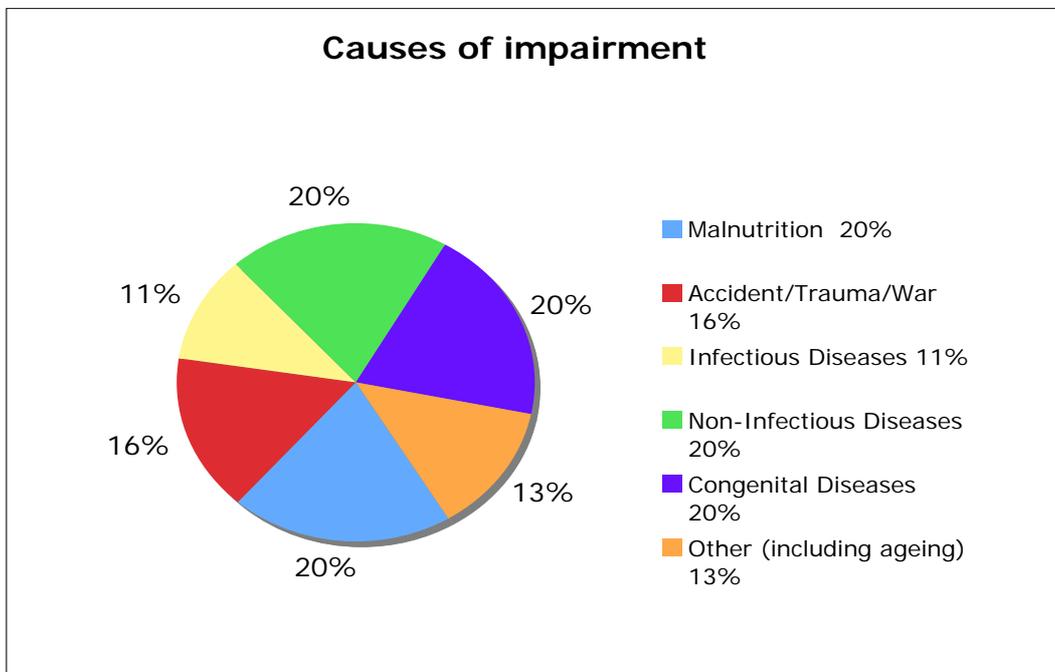


Fig 2. Causes of Impairments Source: Overcoming Obstacles to the Integration of Disabled People, UNESCO sponsored report as a contribution to the World Summit on Social Development Copenhagen, 1995.

disabled people in developing countries are among the lowest in any other social group or population segment (UNESCO, 2003).

Exclusion and marginalization reduce the opportunities for the disabled to contribute productively to the household and the community, and increase the risk of falling into poverty. Persons with disabilities are more likely to have incomes below poverty, and less likely to have savings and other assets than the non-disabled population. For instance, unemployment

among persons with disabilities is as high as 80% in some developing countries (ILO, 2002). However lack of employment for disabled people is fundamentally a cultural problem. Disabled people in developing countries merely access to employment due to the fact that often employers assume that persons with disabilities are unable to work (ILO, 2002). The incorporation of disabled people to the labor market in developing countries might become also an important source of growth for these countries.

The Vicious Cycle of Poverty and Disability

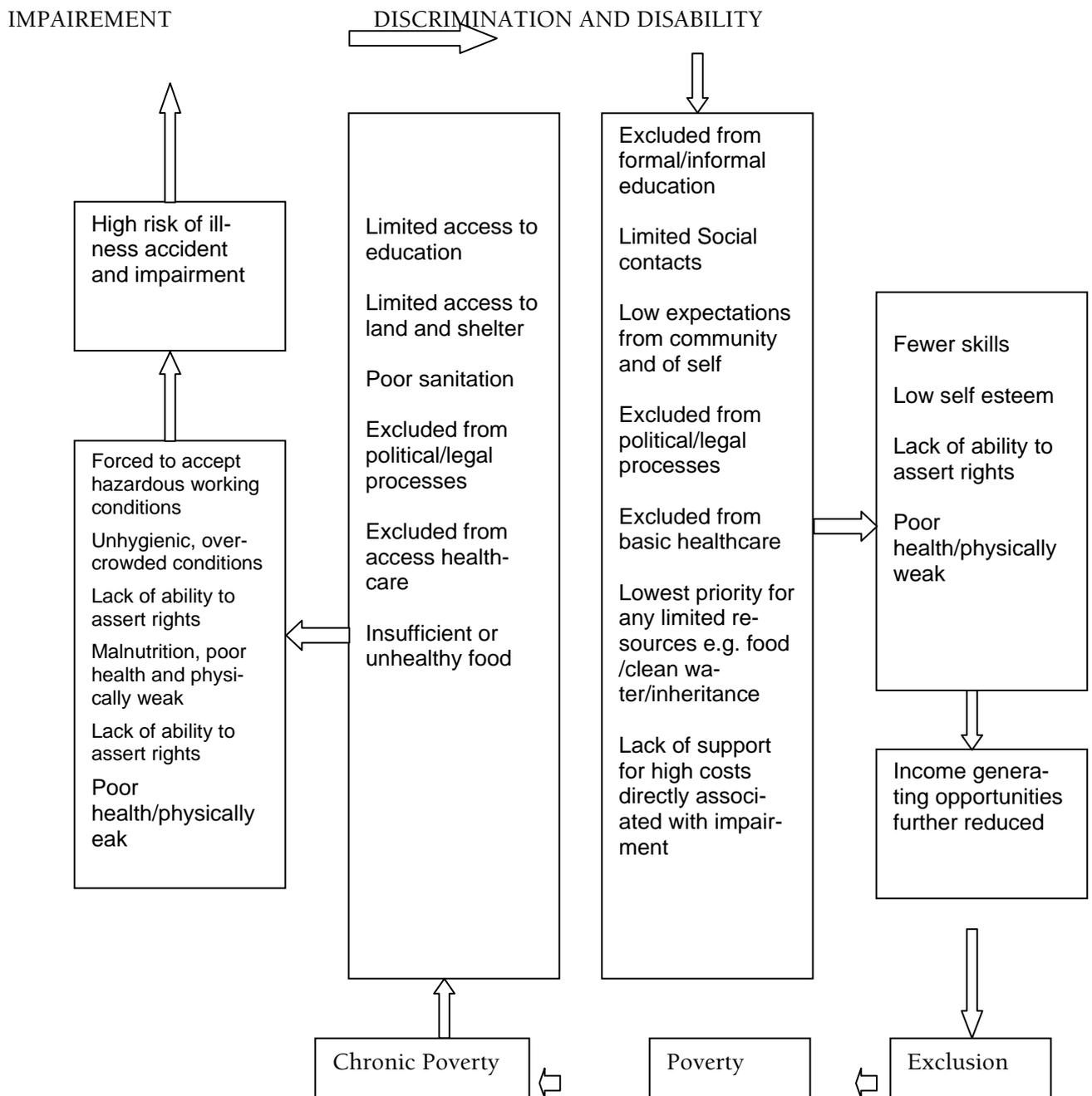


Fig. 3. The Vicious Cycle of Poverty and Disability. Adapted from *Disability and Development*, DfID, 2002.

The table above shows the intrinsic relationship between poverty and disability in the context of developing countries. Social, education and health conditions associated to poverty contribute to increase disablement. And at the same time, on the other way impairment through exclusion and discrimination can lead to chronic poverty, not only because of disability costs but also because of underused labor and social resources for growth.

The model presented in the Fig. 3, explains why poverty alleviation and sustainable equitable economic development must be accepted as a pre-requisite for prevention of impairment, and why it is not possible to eradicate poverty without including disabled people in development cooperation programs.

3.1 THE MILLENNIUM DEVELOPMENT GOALS

Even though some case studies and a certain research tradition have proven the link between poverty and disability, only in few occasions persons with disabilities rights and needs are acknowledged in development strategies and plans. Lamentably people with disabilities are marginalized, even at the highest level of international policy developmental frameworks. The *Millennium Development Goals* are a very significant example (MDGs).

Undoubtedly the *Millennium Development Goals* (MDGs) represent the key policy directions for targeting income, poverty reduction, health, and environment among international development policies and programs. The MDGs are a global partnership that has grown from the commitments and targets established at the world summits of the 1990s. Set for the year 2015, the MDGs promote poverty reduction, education, maternal health, gender equality, and aim at combating child mortality, AIDS and other diseases.

It has become clear that the policies and programs of most bilateral and multilateral agencies are geared to a greater extent to reaching the MDGs. Nevertheless with the exception of a quotation in the 2007 review of the *Millennium Development Goals*, where there is a direct reference to the fact that “malnutrition can cause permanent disability”, there is no other citation of disability related issues in the *Millennium Development Goals*.

The lack of explicit allusion to disability in the MDGs makes it easy for disability to become either peripheral or to fall entirely off the international cooperation agenda. However, reaching the *Millennium Development Goals* is unlikely to be achieved unless the rights and needs of people with disabilities are considered in the process of development (Guernesey, et al., 2006).

In fact, a detailed analysis of the *Millennium Development Goals* demonstrates that there is a strong linkage between disability issues and seven out of the eight Goals (Albert 2005 c):

1) *Eradicate Hunger and Poverty*. Disabled people make up as much as one-fifth of the world's poor.

2) *Achieve Primary Universal Education*. 40 million of the 115 million children not attending primary school in developing countries have disabilities.

3) *Promote Gender Equality and Empower Women*. Disabled women are more likely to be victims of sexual abuse. Violence against women causes psychological disabilities; besides certain disabilities, such as obstetric fistula, are particularly stigmatizing.

4) *Reduce Child Mortality*. Children with disabilities are at a higher risk of dying because of medical conditions, but also due to lack of access to public services and intense stigma-even within their own homes.

5) *Improve Maternal Health*. Disabled women have less access to public health information, placing them at greater risk of unwanted pregnancies and HIV/AIDS.

6) *Combat HIV/AIDS, Malaria and Other Diseases*. AIDS and other contagious diseases can be disabling in and of themselves. However, most significantly, efforts to halt these epidemics frequently do not encompass disabled people, putting them at higher risk of contracting these diseases.

7) *Ensure Environmental Sustainability*. Environmental dangers can lead to the onset of many types of disabilities; inaccessible environments prevent disabled people from taking part in economic and social activities (Inclusion International, 2003).

4. The Rights of Persons with Disabilities

The rights-based approach to disability essentially means viewing persons with disabilities as subjects of law. Its final aim is to empower disabled persons, and to ensure their active participation in political, economic, social, and cultural life in a way that is respectful and accommodating of their difference. This approach is normatively based on international human rights standards and operationally directed to enhancing the promotion and protection of the human rights of persons with disabilities. Strengthening the protection of human rights is also a way to prevent disability.

Exclusion and abuse of people with disabilities are violations of their human rights. People with disabilities are entitled to enjoy the same rights as all others. A human rights approach to disability acknowledges that people with disabilities are rights holders and that social structures and policies restricting or ignoring the rights of people with disabilities often lead to discrimination and exclusion. A human rights perspective requires society, particularly governments, to actively promote the necessary conditions for all individuals to fully realize their rights (Albert, 2001).

The goal of a human rights approach to disability is to ensure the equal dignity and equal effective enjoyment of all human rights by people with disabilities. What are referred to as “disability rights” and “the human rights of people with disabilities” are not extra protections or a separate and special category of rights, but part of the full range of human rights available to everyone. All people have the right to participate and to exercise self-determination as equals in society (IDDC, 2005).

However, as it has been seen previously, the most important development policies, included under the framework of the United Nations *Millennium Development Goals*, do not take into consideration the rights and needs of people with disabilities. Despite this, in the last years an increasing number of countries began to realize that they would have not been able to reach the MDGs as long as persons with disabilities continued to be discriminated against and marginalized from so-

ciety. The *Convention on Rights of Persons with Disabilities* adopted in December 2006 by the UN General Assembly and entered into force in April 2008 is in line with this trend.

Before this Convention, an extensive body of non-binding international documents addressing people with disabilities already existed (e.g. *Standard Rules on the Equalization of Opportunities for Persons with Disabilities*). However the non-binding nature meant that governments infrequently implemented them.

The *Convention on Rights of Persons with Disabilities* is the first binding instrument addressing only disability rights; it embodies the disability related legal framework in which states are acting and the main principles with which they will have to comply.

The draft and approval of the Convention has taken more or less 4 years, and has benefited from the participation of a large part of the civil society representing disabled interests.

The Convention consists of 50 articles addressing civil, political, economic, social and cultural rights. It also includes an Optional Protocol that recognizes “the competence of the Committee on the Rights of Persons with Disabilities to receive and consider communications from or on behalf of individuals or groups of individuals subject to its jurisdiction who claim to be victims of a violation by that State Party of the provisions of the Convention” (Optional Protocol, 2006).

Until April 2008 the Convention has been signed by 129 states and only 27 have ratified it. Much lower is the number of countries (71) that have also signed the Optional Protocol. The fact that the Convention entered into force means disabled people and their democratically elected representative organizations will have an internationally recognized and legally binding instrument, by which they will stress their governments to enforce disability rights. Hence the Convention will need to be reflected in the national development cooperation policies.

All through the text of the Convention important issues related to development and the link between poverty and disability are addressed. The Preamble notes that despite “various instruments and undertakings” persons with disabilities continue to face human rights violations and barriers to their full inclusion and

participation as equal members of society, and that the majority of disabled persons live in “conditions of poverty”. It also anticipates that promoting the full participation of persons with disabilities “will result in ... significant advances in the human, social and economic development of society and the eradication of poverty,” and notes the “importance of mainstreaming disability issues as an integral part of relevant strategies of sustainable development”.

The Convention underlines “the importance of international cooperation for improving the living conditions of persons with disabilities in every country, particularly in developing countries”, a concept that is mainly addressed again in more detail in article 32. This article is entirely dedicated to international cooperation. The Ad Hoc Committee chose to include article 32 considering that disability “is a major cross-cutting development issue for all development partners” (United Nations, 2007), and that international cooperation that is not inclusive of disability issues has the potential to lead to the inadvertent creation of long-term barriers for persons with disabilities.

Article 32 reported entirely hereunder affirms the following obligations for state parties:

- (a) Ensuring that international cooperation, including international development programs, 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 programs 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.

In this context the term “international cooperation” is interpreted broadly, including not only aid programs but also the “exchange and

sharing of information, experiences, training programs and best practices”.

The Convention is expected therefore to have development implications not only for countries, but also for development actors. Development will have to be, from now on, truly inclusive.

5. Including the Disability Dimension into Development Cooperation Policies

Because there is an existing link between poverty and disability, and because disability is a human rights issue development programs can no longer make excuses for not addressing disability.

To achieve development that is inclusive of people with disabilities, three principles should be kept in mind, in addition to the general principles found in the *International Convention on the Rights of Persons with Disabilities*. These principles should be thought not only as goals and objectives, but also as processes through which inclusive development for people with disabilities is achieved:

- *Inclusion*: people with disabilities should be accepted as equal partners in development and included as full participants in all development activities.
- *Equity*: people with disabilities should enjoy equitable access to the benefits resulting from development activities. As well, development activities should promote non-discrimination and equal opportunities for people with disabilities to participate in every facet of life—civil, political, economic, social and cultural.
- *Access*: people with disabilities should enjoy access to the built environment, transportation, information and communications infrastructure so that they may be full participants in all aspects of life and enjoy the full range of human rights (Guernsey et al., 2006).

It is acknowledged that because disability is a complex condition and a cross cutting issue, a comprehensive policy for development cooperation in disability issues should have a dual approach.

This is well illustrated in the “twin-track approach” elaborated by the British Department for International Development (DfID) in its issues paper *Disability Poverty and Development* published in 2002. The twin-track approach attempts to:

1. Address inequalities between people with disabilities and people without disabilities in all strategic areas of development work (mainstreaming);
2. Support specific initiatives to enhance the empowerment of people with disabilities.

Appropriate disability-specific strategies are needed to make mainstreaming operative. A disabled child who cannot toilet himself and is paralyzed on a wheel chair cannot benefit from education even if the school is fully accessible, has well-trained teachers and a child-tailored, flexible curriculum. A disabled adult who is illiterate, has low self-esteem, hardly any life-experience and no access to essential assistive devices (calipers, crutches) cannot take part in discussions organized by international organizations to include civil society opinion in programs. And if a document has been produced in braille, but the blind members of the disability community have never been introduced to braille, they cannot participate. So basically, mainstreaming cannot be effective unless at the same time, measures are taken to:

- Provide basic rehabilitation, prevention of impairments worsening, necessary assistive devices, aids and equipment;
- Capacity build grass-roots organizations of disabled persons to enable them to develop life-skills, self-esteem, and an understanding of their rights (EDF, 2003).

Nevertheless isolated projects may produce results but tend not to make sustainable, systemic impacts. A strategy to make basic services available for all on equal terms is more in line with the principles of universal human rights and fundamental freedoms. Separate, segregating services solely for people with disabilities are seldom justified.

Whereas it is simple to identify specific disability projects, it is much more complicated to define and carry out mainstreaming disability into development policies. Mainstreaming disability is very similar in many aspects to gender mainstreaming. This is due to the so-

cial conception of disability. Anyway, while it is accepted that women inequality and discrimination against is based in society and not in biology, it is not that obvious that the social model of disability is preferred to the medical one. Therefore implementation of mainstreaming disability can be more complex due to cultural barriers.

Many authors have adapted the definition of gender mainstreaming of the Economic and Social Council in the agreed conclusions 1997/2 as follows: “Mainstreaming disability into development cooperation is the process of assessing the implications for disabled people of any planned action, including legislation, policies or programmes, in any area and at all levels. It is a strategy for making the disabled people’s concerns and experiences an integral part of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres, so that disabled people benefit equally and inequality is not perpetuated. The ultimate goal of mainstreaming is to achieve disability equality” (Alberts, 2005).

Finally it is necessary to take into account that mainstreaming has usually a modest price tag. For instance design for all does not cost anything extra if taken into account at the planning stage, while patching up afterwards is much more costly.

6. Initiatives from National Development Agencies

6.1 USAID, UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT

On August 1996 the NCD (National Council on Disabilities) issued a report entitled *Foreign Policy and Disability* that argued that the United States did not maintain a coherent disability policy within its foreign policy.

Consequently the year after USAID drafted a policy paper whose objective was to extend the *Americans with Disabilities Act* of 1990 to non-U.S. citizens. The policy was comprehensive and focused not only on inclusive programs but also on the importance to engage and support disabled people organizations.

The main objectives of the policy paper were:

- a) To enhance the attainment of United States foreign assistance program goals by promoting the participation and equalization of opportunities of individuals with disabilities in USAID policy, country and sector strategies, activity designs and implementation;
- b) to increase awareness of issues of people with disabilities both within USAID programs and in host countries;
- c) to engage other U.S. government agencies, host country counterparts, governments, implementing organizations and other donors in fostering a climate of non-discrimination against people with disabilities;
- d) to support international advocacy for people with disabilities.

The policy paper was accompanied by a *Plan of Action* that outlined ways to promote the inclusion of services with and for persons with disabilities in programs throughout the Agency. The Plan did not require additional personnel, financial reporting or other elaborate reporting system. It was designed to be used within existing level of resources and to complement reengineering guidelines. An Agency Team for Disability was established in order to ensure the Agency wide coordination and responsiveness and to assist and facilitate consideration of disability issues in field and Washington.

Since 2000 the Agency started tracking progress of the implementation of its disability policies by compiling an annual or periodic summary report. The first three reports acknowledged the ineffectiveness of the policies mainly due to reduced follow up in the missions, lack of trained staff, general clearness of the objectives to be achieved and lack of resources.

In 2005 USAID came up to an important turning point, in fact the 1997 policy paper was transformed into a mandated policy. In addition two new policy directives (AAPD 05-07 and AAPD 04-17) were issued. Those directives mandate the use of accessibility standards in all USAID-financed construction or reconstruction efforts. They also require contracting and agreement officers to include a provision supporting USAID's disability policy in all solicitations and in the resulting awards for contracts, grants, and cooperative agreements.

Furthermore Senator Harkin of Iowa established the Disability Fund that is congressionally earmarked³. This Disability Fund is managed by the USAID Office of Democracy, Conflict and Humanitarian Assistance (DCHA). The Disability Fund was created to fund DPOs, NGOs and other organizations on specific disability programs. At the beginning the fund consisted of 2.5 million dollars but in 2007 it was increased up to 4 million dollars. Considering that the total budget of the Agency is 15 billion dollars, this figure represents a small amount of money. Yet this amount does not represent the totality of funds assigned to disability issues. Currently the Agency does not keep track of the independently assigned funds to disability specific policies by over 75 missions.

The 2005 report on the implementation of disabilities policies outlined important achievements in relation to disability inclusion within the Agency initiatives. Among these, the establishment under the authority of the secretary of state of an advisory committee on persons with disability, the appointment of a disability coordinator, comprehensive e-learning disability training module for USAID staff and an innovative DPOs capacity development program. The report also reviewed external activities through the response of a survey distributed to the missions. The survey included 4 key indicators mainly related to inclusion of persons with disabilities (e.g. capacity building activities, offices accessibility).

Despite the fact that USAID has not adopted a rights based approach to development and has not signed the *Convention on Rights of Persons with Disabilities*, the American Agency for Cooperation has carried out many interesting initiatives towards the effective inclusion of people with disabilities within its development policies.

USAID policy promotes a twin track approach and the policy is based on inclusion, accessibility, and participation of persons with disability in all steps of the development process.

³ The use of earmarks in the U.S. Congress has expanded significantly over the past thirty years. Earmarking is the term used to refer to a provision in legislation that directs funds to be spent on specific projects. Typically, legislators seek to insert earmarks that direct a specified amount of money to a particular organization or project in his/her home state or district. This differs from the appropriation of money to a particular government agency, for in these cases the appropriate executive department can exercise discretion as to where and how the funds are spent.

The policy is mandatory and even though this does not always lead to its implementation⁴, in the USAID case it has guaranteed some basic achievements and the respects of its principles.

The American Agency has also tried to evaluate the implementation of its policy, or at least to keep track of the initiatives undertaken. There are no real figures on the influence of its policies and this makes it difficult to analyze positive and negative impacts on development outcomes. Currently the number of missions involved in disability-specific projects is over 75.

USAID disability team guarantees internally a follow up of the disability policy. Even so it appeared that the team focuses only on some limited issues (e.g. building accessibility), and there are no persons with disabilities within the team. The disability team does not have a direct line on top the organization but works through the normal bureaucratic channels and this makes their job much more complicated and slow (Alberts, 2005).

USAID has organized e-learning trainings for its staff. Nevertheless the Agency has not based and justified its policy on the link between poverty and disability nor has carried out specific research in the field.

6.2 DFID, BRITISH DEPARTMENT FOR INTERNATIONAL DEVELOPMENT

In 2000, DfID launched an issues paper entitled *Disability, Poverty and Development*. This research paper focused on many important points regarding disability and development such as the adoption of the right based approach, with specific focus on social exclusion, the use of a social and not medical model, and the twin track approach towards disability in development policies. The latter both encourages 1) specific and targeted activities to support the empowerment of disabled people and enhance their capacity to claim their rights, and 2) mainstreaming disability throughout all areas of work so that the needs of disabled people are taken into account at all stages of planning and implementing activities, and

⁴ In the year 2000 the Norwegian government produced a mandatory Plan for the Inclusion of Persons with Disabilities in Development Cooperation. The plan has never been implemented and Norway has not mainstreamed disability within its initiatives. There is not always a direct relation between the mandate of a policy and its implementation.

ensuring that disabled people themselves are consulted about issues that affect them.

The policy paper was not mandatory and did not impose any kind of obligation for DfID. Anyway the document had internationally a discrete success, having been the British Agency the first national agency to focus on the vicious cycle of disability and poverty. Besides it approached the issue using a social and not medical model. This paper represented an important turning point in the DfID way of working and was the beginning of several provisions and initiatives towards the inclusion of disability issues in development policies and programs.

As of 2000 DfID, through the Central Research Department, has been funding research on disability, from improving accessibility in urban areas and in water and sanitation to working on inclusive and special education. In particular, it financed the Knowledge and Research Programme (KaR) dedicated to disability. This disability KaR provided support for small-scale activities in countries in the South alongside with research into the links between poverty and disability, the provision of technical advice to DfID and support for training of DfID staff on disability. The Knowledge and Research Programme is now complete. Recently the Central Research Department has developed a new 4.4 million pounds programme that seeks to strengthen statistical research and the research capacity of DPOs (DfID, 2006a).

One of the initial outputs of the KaR was the draft of a report that explored the mainstreaming of disability within DfID highlighting some key challenges that the department had to face in the future. This research argued that DfID was still far away from this.

In 2005, the British Department commissioned another research this time to the UK Council of Disabled People. This study aimed at analyzing the effectiveness of DfID's programmes in promoting disability equality in developing countries. The report pointed out that:

1. Disability did not afford the importance it merited nor was it mainstreamed within DfID;
2. DfID did not have disabled people represented in its work force;

3. Disability was addressed without the engagement of the disability movement and the involvement of disabled people from both the North and the South.

In 2005, the Development Committee of DfID agreed a *Social Exclusion Policy Paper*. The Paper objective was to tackle social exclusion through wider poverty reduction strategies and acted as a framework for future work on disability. This policy also required heads of overseas offices to undertake a Social Exclusion Analysis in developing Countries Assistance Plans (CAP) specifically covering disability along with the other equality strands.

In 2006 the *Disability Discrimination Act (DDA)* put the public sector under a statutory *Disability Equality Duty* to promote disability equality. The Duty ensured, for the first time, that public bodies tackle institutional disability-related discrimination. The Duty did not directly apply to DfID's core business of eliminating poverty in developing countries. However, DfID committed to apply the principles of the Duty to its development work overseas as a matter of good practice and produced the *Disability Equality Scheme 2006-2009 (DES)*.

The aim of the DES is to mainstream disability equality into DfID "for both its employees and customers by building it into the way they work wherever relevant. One way they will formalize this approach across all of their functions is by including their obligations under the *Disability Equality Duty* within the Blue Book, which is the corporate guide to the rules and procedures of working effectively in DfID" (DfID, 2006b). In the DES the Department also expresses its intention to "promote disability equality in their poverty reduction strategies, and adopt the social model of disability wherever and when they consider it beneficial and proportionate to do so" (DfID, 2006b). Undoubtedly the *Disability Equality Duty* is influencing positively DfID towards an inclusive development.

As stated in the report produced by the British Council of Disabled People, DfID has not mainstreamed disability. However there is a solid bedrock of disability-specific activities being carried out, largely via NGOs and civil society organizations (CSOs). The Civil Society Challenge Fund funded 29 disability-focused projects with UK based NGOs assign-

ing 2.5 million pounds in 2007/8. Country programs also provide support to NGOs locally⁵. Moreover DfID provides support (through Partnership Program Agreements) to Action on Disability and Development and World Vision both with a budget of over 3 million pounds.

When DfID carries out internal evaluations of its country programs it includes questions in the evaluation process on cross-cutting social exclusion issues. Whereas, particular indicators are used in the program monitoring and evaluation framework to measure impact in specific projects on disability.

Within Department staff there is no disability team. It was the Social Development Adviser who replied the queries submitted during this research. DfID's work on disability is largely hidden, and often the staff and country offices are unaware of disability-focused activities. DfID staff needs more information on disability – in particular, practical tools and examples of best practices – to enable them to implement the twin-track approach outlined in the issues paper *Disability, Poverty and Development* (Alberts 2005).

To aware the staff on the importance of including the disability dimension through out all the work, in October 2007 and after consultations with the Finnish Agency of Cooperation, SIDA, GTZ, WHO, EU and World Bank the Department launched the *How To Note* on how to deal with disability issues in DfID country programs. This note, centered on the link between poverty and disability and the link with the development goals, provides the staff with basic information on inclusive development.

As explained, DfID has advanced much to include disability issues in development policies. Anyway, according to external evaluations disability mainstreaming has not been achieved. Besides policies are not mandatory. As in the case of USAID in the United States, in the United Kingdom there is a traditionally well structured national legal framework as it concerns the protection of disability rights and this certainly along side with empowered DPOs, has put major pressure on the devel-

⁵ For example, in Rwanda 800,000 pounds for Voluntary Services Overseas who work to promote the inclusion of disabled people in the planning and delivery of government services.

opment Agency to address disabilities issues in its work.

6.3 THE NORDIC DEVELOPMENT COOPERATION

The Nordic Countries have played an important role in focusing on disability rights and development. At the Copenhagen Conference in 2000 the Nordic Ministers for Development Cooperation agreed on a joint policy declaration and common commitments to address disability issues in development cooperation. The aim was to ensure that the rights and equal opportunities of people with disabilities would be taken into account in development co-operation as part of poverty reduction strategies.

The conference was organized with the major umbrella organizations of people with disabilities. The meeting committed the governments to the recognition and promotion of the United Nations Standard Rules as guidelines for all bilateral and multilateral development work, and the adoption of special measures to improve accessibility and the participation of people with disabilities.

The official Communiqué affirmed the states would commit to:

- Recognizing the link between poverty and disability, and inclusion of the disability dimension in poverty reduction.
- Enhancing efforts for the inclusion of the disability aspect in all relevant areas of development cooperation.
- Taking action to guarantee that development cooperation is inclusive and measures are accessible to children with disabilities in accordance with the Convention of the Rights of the Child.
- Giving special attention to women and girls with disabilities.
- Compiling best practices, identifying and elaborating of principles for inclusive development cooperation.

- Continuing the dialogue and cooperation with the NGOs of people with disabilities to find good practices and practical tools.

The Nordic ministers defined seven steps as the way forward towards the aims stated above. One of the steps was to establish national strategies for the inclusion of the disability dimension in development cooperation. The ministers also agreed that an evaluation and review of this agreement would be made in 2005 (NORAD, 2000).

In 2005 in the official Communiqué the ministries acknowledged “that it would be necessary to make more concrete and consolidated plans if mainstreaming would to be achieved. The Nordic countries therefore decided to work together to identify areas where Nordic cooperation could lead to increased efforts. The main focus would be on increasing mainstreaming efforts, though targeted approaches could be applied when appropriate. As women with disabilities often face double discrimination, gender issues need to be included. The relevant ministries in consultation with Nordic DPOs would have to review the common activities and areas of cooperation” (Nordic Ministries, 2005).

The carefully worded communiqués are a statement of intent rather than a call for action, anyway they represent a framework into which all the four Nordic countries are acting. Hereafter we will analyze singularly the actions undertaken by Norway, Finland, Sweden and Denmark.

6.3.1 NORAD, Norwegian Agency for Development Cooperation

Norway process of including disability issues in development cooperation started some years before the 2000 Copenhagen conference. In 1999 the Norwegian Government stated that greater emphasis would be placed on measures for persons with disabilities. Immediately after, the Ministry of Foreign Affairs produced a *Norwegian Plan for the Inclusion of Persons with Disabilities in Development Cooperation*. In this plan the ministry highlighted the following 4 priority areas for inclusion:

1. The disability dimension in public services, access, health, education, employment, or-

ganization, culture, democratization and co-determination;

2. Focus on the poorest, and inclusion of disability in poverty alleviation, in acknowledgement that disabled people are estimated to form 1/6th of poor populations;

3. Making existing services accessible;

4. Focus on the right to life, and therefore prevention in primary health care, and access to health/medical care.

The Foreign Ministry also invited NORAD to "draw up a plan for the operationalisation and use of measures in the efforts to provide bilateral aid to persons with disabilities. The plan would ensure that these efforts are carried out in accordance with sound principles and principles of human rights"(Foreign Ministry of Norway, 2002).

In the year 2002 NORAD published a document called *The Inclusion of Disability in Norwegian Development Cooperation, Planning and Monitoring for the Inclusion of Disability Issues in Mainstream Development Activities*.

The document approved by the Ministry of Foreign Affairs is divided into two parts. The first part refers to objectives (Norwegian policies towards disability), global instruments (conventions and relevant international agreements), and basic disability and development issues. The second part contained practical guidelines on how to include the disability dimension in program and project cycle.

The guidelines are firmly based on a human rights and a social model of disability approach. The identified specific barriers are:

- 1) Environmental and access barriers;
- 2) Legal and institutional barriers;
- 3) Attitudinal barriers.

The NORAD document underlines that people with disabilities must be included in all the six priorities areas for development cooperation, that are:

- Social development;

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

In the document there is a strong emphasis on mainstreaming disability, together with a recognition to adopt disability-specific and disability component approaches. It also stresses on the importance of rendering accessible services, information and environments moreover on the added value of consultation and partnership with disabled persons.

Despite the policy was mandated by the Norwegian Parliament, NORAD did not achieve the objectives set. Recently the Agency has been reorganized, staff has been cut and responsibilities reassigned, disability mainstreaming has been left aside and it is not considered a priority. Anyway NORAD identifies disabled people among its target groups and assigns to DPOs more or less the 10% (15-16 millions euros) of the total annual allocations to NGOs. Compared to other agencies (e.g. USAID, DfID) this is a considerable figure, although the Agency admits that other target groups such as children, women/gender and indigenous people receive 2/3 times this amount. Aid to disabled people organizations has a rights-based approach but it tends to be overshadowed by other aid priorities like environment and corruption.

Within the staff there is no specialized team in charge of disability issues. In addition no data is available on the number of disabled employed by NORAD. When the Agency was contacted it took them more than one week to identify someone able to answer the queries submitted. And even then it was an officer from the department for Peace, Gender and Democracy who replied. Moreover the Agency has not organized trainings to aware the staff on disability and poverty issues even though the policy paper focuses on this link and stresses on the need to inform the staff. There are no established indicators to evaluate the impact of policies for persons with disability

and in the general evaluation 2007-2008 people with disabilities are not mentioned.

Although nationally NORAD is not considering inclusive development a priority, abroad Norway is one of the most active supporters to multilateral agencies as it regards initiatives related to disability and poverty. With Italy and Finland, Norway is a financial supporter of the Global Partnership on Disability and Development at the World Bank. Norway also supports the UNESCO flagship on inclusive education, and part of the secretariat of this flagship is hosted in Oslo.

6.3.2 MFA, Ministry for Foreign Affairs of Finland

In 1996 the *Decision-in-Principle* by the Finnish government included the status of disabled people as a concern in the context of poverty reduction and human rights. It said: "to attain the goal of poverty reduction, the Government will draw particular attention to the status of disabled people in developing countries". The Finnish Cabinet of Ministers reiterated the same intention in *Finland's Policy on Relations with Developing Countries* in 1998.

With regard to Finland's cooperation with developing countries, the framework sets five overarching goals for:

1. Poverty reduction.
2. Sustainable development.
3. Equality, democracy and human rights.
4. Promotion of global security.
5. Increased economic interaction with developing countries.

Disability is a cross-cutting issue to all the above mentioned fields of work and the Finnish approach to development is right-based.

In the year 2000, as a result of a dialogue with the Finnish Disabled People's Organizations, the Ministry of Foreign Affairs of Finland (MFA) asked STAKES, a governmental, but independent, research and development agency affiliated to the Ministry for Social Affairs and Health, to examine the Finnish development cooperation over the past ten years

from the disability perspective. The result of this research was the publication of a report called *Lable Us Able, a Pro-Active Evaluation of Finnish Development Cooperation from the Disability Perspective*. This report is the first evaluation of the Finnish initiatives to include disability into development cooperation. It represents a good and complete example of evaluation on disabilities policies.

As the document reports, since 1991 the Finnish government targeted a total of about 62 million euros to disability-specific development cooperation. This is about 5% of the total funding for Finnish development cooperation, which is a rather positive figure⁶. The funding has been channeled via Finnish NGOs (70%), which is quite different from the overall Finnish development cooperation where only 7% goes via Finnish NGOs. Most of the 115 projects were small and involved a local NGO or a local institute in a developing country as a partner. The assistance had often focused on the development of separate institutions for people with disabilities, but there were an increasing number of projects strengthening NGOs of people with disabilities, enabling them to "raise their voice", and some other innovative approaches, such as supporting sports activities.

In the year 2000 the Ministry published the *Development Cooperation Manual for Non-Governmental Organizations*. The manual presents the basic principles of project activities and the criteria for granting support guidance for project design intended specifically for NGOs. The updated revision (July 2003) includes the disability dimension as one of the criteria to be always observed and taken into account throughout all project phases.

The MFA collaborates with many international agencies although according to the evaluation multilateral cooperation funding for disability-specific assistance has been extremely small (4%). With the World Bank it has collaborated through the Finnish Consultancy Trust Fund appointing an adviser from STAKES for the inclusion of the disability dimension in the PRSP supported by the high-level Finnish officers working there. Moreover Finland, together with Italy and Norway, has been active

⁶ Among the agencies analyzed and of which data are available Finland is the country that assigns the most (percentage of its budget) to disability issues.

in promoting the Global Partnership on Disability and Development at the World Bank.

Finland also chose to support the production of a *Manual on Inclusive Planning* that was published by STAKES for the United Nations in 1996 and updated in 2000 and 2003. One section of the Manual is dedicated to the Rapid Disability Analysis (RDA). This is a checklist on how efficiently disability is included in the project cycle, and follows the basic document format of the European Union. The same format is included in the Finnish Ministry for Foreign Affairs project management guidelines. The format has been revised slightly and renamed Rapid Handicap Analysis (RHA 4) in relation to the fact that the problem is not the person with disabilities but the handicapping and discriminating project design. This useful tool, that identifies to what extent a program or project is disability-relevant, is being developed and has not yet been used in the Finnish context.

The active input of Finnish NGOs has been of utmost importance for the Ministry of Foreign Affairs to start taking into account disabled needs and rights. Without it there would have been very little cooperation in disability issues supported by the Finnish government (STAKES, 2003). Since 2004 the Finnish Ministry of Foreign Affairs has established a partnership with the Finnish Disabled People's International Development Association, FIDIDA, to improve the quality of projects for the disabled implemented by NGOs.

In the Finnish context the fact that the majority of funds are managed through NGOs means that disability is considered a specific issue. Since the evaluation of 2003, no remarkable improvement has been made in the direction of mainstreaming. In addition, no staff training has been carried out and no disability team has been created. As suggested by STAKES in 2003 a mandatory policy statement should be produced at a high level in the Ministry for Foreign Affairs, the policy should focus on inclusive development and precise directions should be formulated.

6.3.3 SIDA, Swedish International Development Cooperation Agency

The focus of SIDA's work is governed by the *Swedish Policy for Global Development*. This policy, approved by the Swedish Parliament in

December 2003, gives development cooperation one single goal: to contribute to making it possible for poor people to improve their living conditions. The policy acknowledged that previous development efforts put too little emphasis on respect for human rights, democracy and good governance. The same applied to issues such as the sustainable use of natural resources, environmental protection, child rights perspective, social and gender equality and finally the perspectives of persons with disabilities. Hence these factors are essential prerequisites for equitable and sustainable development, they are considered not as an end in themselves, but essentially as means for achieving development. Thus it is recommended that the policy for global development should focus explicit attention on the rights of persons with disabilities.

In 2005, SIDA published a position paper entitled *Development Cooperation for Children and Adults with Disabilities*. This paper recognizes that "the living conditions and needs of persons with disabilities shall be taken into consideration and promoted in all Swedish development cooperation with other countries. SIDA shall work towards persons with disabilities enjoying human rights to the same extent as those without disabilities. In planning, implementing and evaluating development cooperation, SIDA shall strengthen collaboration with persons with disabilities, their organizations and other relevant actors."

The paper is based on a human rights approach and a strong focus on UN Standard Rules; it emphasizes participation of disabled persons; prioritizes mainstreaming, as well as acknowledges the need for disability specific approaches. The position paper has been produced to help in the work of making the situation of persons with disabilities more visible, and it highlights strategic areas for contributions. The main strategic areas are:

- PRSP.
- Schools, education and research.
- Health and rehabilitation/habilitation.
- HIV/AIDS.
- Armed conflicts and humanitarian crisis.
- Infrastructure.
- Information and shaping opinion.
- Support to civil society and other networks.

The paper suggests that persons with disabilities must be taken into account throughout the programme/project cycle both in cases of specific contributions and in those of contributions that do not directly target adults or children with disabilities. The rights and living conditions of persons with disabilities shall thus be integrated into preparation, implementation, monitoring and evaluation processes. Indicators must be defined in the preparatory process to facilitate monitoring and evaluation of how these issues have been integrated into SIDA's work. There is also strong emphasis on bilateral and multilateral dialogue, as well as competence building intended as internal staff training and awareness.

The Swedish Agency as many other national agencies, works through NGOs financing. The contribution of Swedish organizations for persons with disabilities to assisting the development of sister organizations is considered of particular strategic importance. The main partner in disability issues is SHIA, Swedish Organizations of Disabled Persons International Aid Association.

In 2005 a new adviser position was created in SIDA for Comprehensive Social Policy, with a mandate to work in close partnership with the nearest Nordic neighbors, Finland and Norway, and other like-minded partners. Supposedly disability issues are part of the adviser responsibility. Nevertheless, it is not clear who is in charge of this position and information is not available.

The SIDA policy paper is comprehensive and encompasses the social approach to disability, the twin track approach and awareness and training of staff. Anyway, the document has remained just a position paper and it does not imply any mandatory obligation. Since now no evaluation on the policy implementation has been planned.

6.3.4 DANIDA, Danish Development Agency

Among the Nordic countries Denmark has certainly advanced the less as it regards inclusive development and mainstreaming disability.

In the year 2000 the Ministry of Foreign Affairs and DANIDA, Danish Development Agency, an organization inside the Ministry of Foreign Affairs of Denmark, set up to provide

humanitarian help and assistance in developing countries, in cooperation with the Danish Council of Organizations of Disabled People, published a study entitled *From Charity Towards Inclusion: The Way Forward for Disability Support Through Danish NGOs*.

This document focused on the activities of Danish disability non-governmental organizations in supporting DPOs in the South, using funds from DANIDA. It resulted in 13 recommendations criteria for future disability support. These recommendations advocated:

- Using the UN Standard Rules and rights-based approach;
- Prioritizing the capacity building of democratic, decentralized and rights-orientated DPOs in the South, with focus on including particularly marginalized groups such as women, children, very poor people etc.;
- Supporting projects that can be sustainable, are of good technical quality, are properly monitored and are developmental.

Furthermore the paper highlighted 4 key themes that need to be considered:

- 1) Moving from charity to demanding equal rights;
- 2) Mobilizing disabled persons;
- 3) Synergy, cooperation and coordination;
- 4) Direct support and service programmes.

In 2004 the ministry of foreign affairs drafted a report on the *Inclusion of Disability Aspects in Danish Development Cooperation*. The review has shown that disability was increasingly recognized as an important element only in some aspects of development cooperation at the policy and strategy level as well as the project and program level.

The report acknowledged that it had been internally decided not to consider disability as a cross-cutting issue or a priority theme because concern for a special population group, such as persons with disabilities, was deemed of a

less fundamental nature than the broader issues of gender equality, environment, human rights and good governance (Ministry of Foreign Affairs Denmark, DANIDA 2004). At present the Ministry of Foreign Affairs maintains the same position.

Therefore DANIDA has a very specific approach to disability and usually intervenes through the adoption of sectorial technical notes. The Agency has mostly concentrated its interest in education. DANIDA has financed many projects on inclusive⁷ education and has published a technical note on inclusive education for children with disabilities. Other technical notes have been issued on environment and energy: preventing and accommodating disability through improvement of environment and energy supply; on water and sanitation: guaranteeing access to water and sanitation for people with disabilities; on health: ensuring equal access to health care and rehabilitation for people with disabilities; on good governance: including and fostering participation of persons with disabilities.

Since 2001 through framework agreements, mini-programme agreements or single projects, DANIDA has financed specific disability activities implemented by NGOs and DPOs for approximately 142 million euros. The Ministry of Foreign Affairs affirmed DANIDA's practice of involving Danish and developing country NGOs and DPOs and letting them initiate projects has proven to be very successful, and the change from charity to advocacy and rights-based approaches has been much in evidence (Ministry of Foreign Affairs Denmark, DANIDA 2004).

The Danish Agency for Cooperation has both an economic and rights based approach to disability issues. In the last years the Agency has carried out several specific related disability projects successfully. Technical notes show a strong interest to deal with the issue. Nonetheless, as we have seen Denmark has not a comprehensive policy concerning disability mainstreaming and disability is not considered a cross cutting issue.

⁷ Disability aspects are included in DANIDA's education sector programmes in Benin, Bhutan, Nepal, Zambia, and South Africa. Education sector programmes with disability components are under development in Bolivia and Burkina Faso. A considerable effort based on the principles of Education for All, lead by UNESCO, is beginning to take shape in Afghanistan, which is not a programme country.

6.4 GDDC, ITALIAN GENERAL DIRECTORATE FOR DEVELOPMENT COOPERATION

Outside of the Scandinavian region, although a number of other European countries have claimed that they are considering disability in development policies (e.g. Spain, Austria, France) only Germany and Italy have an official policy.

The Italian General Directorate for Development Cooperation (GDDC) of the Ministry of Foreign Affairs published in 2002 the *Italian Cooperation Guidelines Concerning the Disabled*. Through these guidelines, the Italian General Directorate for Development Cooperation (GDDC) aimed to provide a reference framework for development cooperation initiatives, on the issue of disabled people, within countries receiving official development assistance from Italy.

The Italian Guidelines are comprehensive; they begin with strong statements on the centrality of human rights and then detail how disability need to be twin tracked (e.g. both mainstreamed into overall policy and supported through disability-specific projects). This document represented the change from a medical to a social model of disability. The guidelines rely on the conviction that the Agency should start contemplating specific operations of fight against social exclusion and economic marginalisation (GDDC, 2002).

Furthermore the Guidelines recognized "the right to develop persons with disabilities' individual capacities in their own socio-cultural context" hence "the thematic initiatives of the GDDC dedicated to disabled people should include specific actions to fight against social inclusion and economic marginalization" (GDDC, 2002).

The GDDC believed that it is vitally important for disability to be considered a key factor within every financial planning year and in the allocation of national and international resources, and acknowledges that training, implemented under its various forms, is the main tool of action.

In November 2006, during the seminar organized in the framework of the European project *Breaking the Cycle of Poverty and Disability in Development Cooperation*, a representative of

the ministry presented the first results of a mapping activity that aimed at analysing the level of inclusion of disability into cooperation activities. This survey, that represents the only data available on Italian cooperation concerning disability, revealed that the majority of activities were carried out through NGOs dealing with very specific topics such as sanitary assistance, physical rehabilitation, basic education and vocational training and health issues.

In this survey, among the NGOs that work in development cooperation projects only 7 declared to be aware of the *International Classification Functioning, Disability and Health*, and merely 4 of these used it in their project design. It was also highlighted that not all the NGOs working with disabilities issues agreed with the social model of disability. No more figures are available.

Italy has a very well structured policy paper on disability although it is not mandatory. It was not possible to contact the agency and no information is available on the website; besides, the staff of the external delegations is not aware of an existing policy on disability. It seems that the Italian Agency has not carried out evaluations, detailed researches, neither updates of the policy implementation.

Again the majority of projects have been performed by NGOs, and not always representing persons with disabilities. Apparently and contrarily to what is said in the Guidelines, disability is not considered a cross-cutting issue and it is not mainstreamed. As it occurs in other countries (e.g. Norway and Finland) where nationally there is no follow up of inclusive developmental policies, internationally Italy is one of the promoters of the Global Partnership on Disability and Development at the World Bank and it has been one of the major supporters of the *Convention on Rights of Persons with Disabilities*.

6.5 GTZ, GERMAN TECHNICAL COOPERATION

In November 2006 the German Technical Cooperation (GTZ) on behalf of the German Federal Ministry for Economic Cooperation and Development (BMZ) published a policy paper entitled *Disability and Development: a Contribution to Promoting the Interests of Persons with Disabilities in German Development Cooperation*.

This policy paper intends to show the importance of taking into consideration the interests of persons with disabilities in connection with poverty reduction and achievement of the *Millennium Development Goals* (MDGs). It delineates the orientation of German Development Cooperation (GTZ) in this regard, offers a brief outline of activities carried out by the Federal Ministry for Economic Cooperation and Development, the German Technical Cooperation, the KfW Development Bank, the InWent Capacity Building International, the DED German Development Service, and provides impulses for further cooperation efforts in this sensitive area.

The policy, with no mandatory obligations, is based on a rights-based approach affirming that “the human rights approach focuses not only on prevention and rehabilitation but also on equal rights to participation. It emphasizes strengthening the rights of people with disabilities, and fosters their participation in all aspects of society” (GTZ, 2006).

The policy recalls the *World Development Report 2006* on the fact that persons with disabilities are often more severely affected by poverty, unemployment and lack of schooling than people without disabilities, hence it stresses on the link between poverty and disability. In the *German Federal Government's Program of Action to Fight Poverty Worldwide* the link is largely recognized and the program quotes persons with disabilities in the context of including disadvantaged groups in social protection systems and ensuring access to health and education services.

The German policy also recognizes that including disability in poverty reduction strategies (PRS) may be one of the most effective ways for people with disabilities to actively participate in developmental programs. In this regards Handicap International, the Christoffel-Blindenmission (CBM) and the German Technical Cooperation (GTZ) have cooperated on the drafting of a handbook entitled *Making PRSP Inclusive*. These organizations are jointly implementing activities in several countries such as Tanzania, Bangladesh, Sierra Leone and Honduras, Vietnam and Cambodia.

Concerning the implementation level, the German policy paper recalls the *European Guidance Note* and emphasizes the twin track approach as the best way to include the disability dimension into development strategies.

Specific disability projects are carried out by the GTZ. They are intended to improve the accessibility in the health and education sector, address management capacity development and organize training for specialists. Within bilateral cooperation over the last 20 years, Germany has financed some 180 projects and programs supporting persons with disabilities in 40 different countries. Among these projects 30 are directly aimed at disabled people. Approximately 70 million euros have been provided for these 30 projects and programs in the framework of technical cooperation. Further projects of the value of 21 million euros have been promoted by BMZ via churches and private executing agencies. In addition to these, there are a number of projects financed by donations within non-governmental development cooperation.

In the paper there is no reference on how disability has been mainstreamed through all the activities of the numerous bodies participating in German development initiatives. Basically projects are carried out through NGOs and DPOs focusing mainly on health and education, therefore disability is approached in a very specific way. One interesting data provided by the document published in 2006 is the fact that all the bodies keep track of disabled employees, approximately the 5% of the staff is disabled.

Internationally the GTZ is part of the Global Partnership for Disability and Development and Germany has participated actively in the draft process of the *Convention on Rights of Persons with Disabilities*.

7. International Organizations

Although international organizations committed to development cooperation proceed in a different way from national agencies, it is interesting to analyze the actions undertaken to include the disability dimension in their programs. International organizations manage a considerable part of the budget addressed to development cooperation and they influence and mark international trends. As it will be explained, international organizations have progressed in inclusive development accordingly to their mandates and to their budgets.

7.1 UNITED NATIONS (UN)

In the last decades the United Nations have played a very important role in defending and promoting the rights of persons with disabilities. Besides the approval of the three main disability instruments (*World Programme of Action Concerning Disabled Persons* (1982), *Standard Rules on the Equalization of Opportunities for Persons with Disabilities* (1993), *Convention on the Rights of Persons with Disabilities* (2006)), the UN carried out several activities among its offices, programs and specialized agencies to include persons with disabilities in development strategies.

In 1997, the United Nations, in collaboration with the National Research and Development Centre for Welfare and Health (STAKES) in Finland, published the *Disability Dimension in Development Action: Manual on Inclusive Planning*. The manual, updated in 2003, was meant to serve as a tool with which to translate development theories into good practices, and presented step-by-step advice on how to improve the quality of development policies, programmes and projects by exercising sensitivity to the disability dimension at various phases of the mainstream development programme or project planning cycle.

UN agencies working in fields where disability discrimination is acknowledged have engaged to the issue through specific programs, declarations and statements. For instance the International Labour Organization (ILO) has issued numerous publications focused on decent work, socio-economic integration and empowerment of persons with disabilities. Among these, in 2002, the *Disability and Poverty Reduction Strategies* and in 2007 a report on the *Right to Decent Work of Persons with Disabilities*. The United Nations Educational, Scientific and Cultural Organization, UNESCO, has also published documents on inclusive education and education for persons with special needs, among these in 1999 the *Salamanca Statement and Framework for Action on Special Needs Education* and in 2004 the policy paper *Overcoming Exclusion through Inclusive Approaches in Education: a Challenge and a Vision*.

In 2001, as a result of the United Nations international seminar on measurement of disability, the Washington Group on Disability Statistics was formed. The Washington Group is an informal, temporary organizational for-

mat that allows representatives from national statistical agencies to come together to address selected problems in disability statistical methods. In addition the United Nations Statistics Division provides data through its website. In March 2006 a systematic and regular collection of basic statistics on disability was initiated through the existing Demographic Yearbook data collection system.

The post of the Special Rapporteur on Disability of the Commission for Social Development, mandated since 1994 to monitor the implementation of the *Standard Rules on the Equalization of Opportunities for Persons with Disabilities*, has also been involved in advocacy for governments to include and integrate persons with disabilities into national legislation and programming. At the moment the Special Rapporteur is Sheikha Hissa Al Thani from Qatar, elected in 2003. As it regards the monitoring of the Convention a Committee on the Rights of Persons with Disabilities, made up of independent experts, will receive periodic reports from States parties on progress made in implementing the Convention (articles 34 to 39). An article in the Optional Protocol on communications allows individuals and groups to petition this Committee once all national recourse procedures have been exhausted. The Special Rapporteur collaborates closely with the Committee of independent experts.

As shown the United Nations are very active in the protection and inclusion of the rights of persons with disabilities in development strategies. However, the United Nations have not achieved to include disability within the *Millennium Development Goals* of which they are a strong promoter.

7.2 WORLD BANK (WB)

On the disability section of the World Bank website it is claimed that “it is essential that disabled people are included in development efforts in order to improve the economic and human welfare of millions of poor people in the developing world”.

In recent years, especially during the presidency of James D. Wolfensohn, the World

Bank has increasingly taken disability into account within its programs. The president declared more than once that “unless disabled people are brought into the development mainstream, it will be impossible to cut poverty in half by 2015” (Wolfensohn, 2002).

Although the Bank has accomplished many progresses to include the disability dimension in its actions, unlike gender, disability has not been taken on as an official cross-cutting issue (a safeguard⁸).

In 1998 the Board decided to start including disability issues among the Bank activities. In 2002 the Bank appointed Judith Heuman as disability adviser. She has been working trying to improve the Bank’s focus on disability and to “create a more disability-friendly environment for Bank staff, partners and clients with disabilities” (World Bank, 2007). In 2003 the Disability and Development Team was established. The team was financed partially from the Trust Fund Resources, (Norway, Italy and Denmark) that financed two co-terminous staff, whereas the Bank budget covered the advisor personal assistance and an economist.

The Disability and Development Team works in the Social Protection Unit of the Human Development Vice Presidency and it does not have a direct line on top of the organization, but works through the normal bureaucratic channels. Although this does not prevent the team from working with all sections of the Bank, operating in such channels can impose significant limitations in terms of budgets, staffing and work plans (Albert, 2004 a).

By 2004 all six regions had established Regional Coordinators and Cross-Sectional Working Groups on Disability. Regional Disability Coordinators are funded by regional budgets. The World Bank has also created a partnership with the Washington Group on Disability Measurement (WG) to research on development census and survey questions. Investigations have been carried out in Afghanistan, Ecuador and Indonesia.

⁸ The World Bank has developed a series of safeguard policies to help staff promote socially and environmentally sustainable approaches to development as well as to ensure that Bank operations do not harm people and the environment. These safeguard policies include the Bank's policy on Environmental Assessment (EA) and those policies that fall within the scope of EA: Cultural Property; Disputed Areas; Forestry; Indigenous Peoples; International Waterways; Involuntary Resettlement; Natural Habitats; Pest Management; and Safety of Dams.

In 2003 the Global Partnership for Development and Disability (GPDD) was established. This Partnership consists of a wide range of stakeholders including representatives of development banks and cooperation agencies, disabled people's organizations, development NGOs and UN specialized agencies. The GPDD has set up a small task force to coordinate its work. The Global Partnership is supported by a multi-donor Trust Fund for Disability and Development (TFDD). Three donors provide about 400,000 dollars per year (Finland, Italy and Norway).

Since 1999 the Bank published several studies and manuals on poverty and disability, disability mainstreaming, collection on data and recently a document on how the *Convention on Rights of Persons with Disabilities* is relevant to the World Bank activities.

Additionally many publications have been dedicated to the inclusion of the disability dimension in Poverty Reduction Strategy Papers. PRSPs are the main tool the Bank promotes and requires from its partner countries demanding debt relief and further loans. They describe a country's macroeconomic, structural and social policies and programs to promote growth and reduce poverty, as well as associated external financing needs.

The PRSPs approach is becoming increasingly important, since it is not an isolated tool used just by the World Bank and the International Monetary Fund (IMF), but is also supported by other international development partners, and is linked to international and national strategies and policies. Today, PRSPs processes can be found in almost 70 countries worldwide.

Various national stakeholders participate in the formulation of this strategy and draw up the PRSPs document accordingly. The final version should reflect overall stakeholder consensus. However, despite extensive rhetoric about civil society participation, research by many international NGOs shows that the involvement of poor people in drawing up policies and writing PRSPs has been minimal and superficial. The issue of disabled people's participation is not specifically required in the PRSP assessment guidelines, although desegregation by regions, demographic groups and gender is required (Handicap International, 2006).

The Bank is aware of the need to continue working on a political level to render disability a priority, but this will be worthless if the practical processes of PRSPs development don't include disabled people and their issues (Handicap International, 2006).

7.3 ASIAN DEVELOPMENT BANK (ADB)

In June 2005 the Asian Development Bank published the *Disability Brief Identifying and Addressing the Needs of Disabled People*. This is an introduction to disabilities issues in development for the Asian Development Bank staff and their government counterparts.

Since the ADB changed its overarching goal to poverty reduction in 1999, a significant amount of regional and country-based activities on disability has been developed. For instance, disability projects, such as *ADB's Expanding Employment Opportunities for Poor Disabled Persons* were implemented in the three largest cities of Mongolia.

The Asian Development Bank organized different workshops on disability and development. In 1999, the first workshop on disability, held in Manila, concluded with two main recommendations: strengthening ADB's capacity to address the disability dimension in its operations and developing member countries capacity to mainstream disability.

To achieve these recommendations, the ADB approved a regional study to explore disability issues in the region. Provincial and national workshops have been developed in Cambodia, India, Philippines and Sri Lanka and over 1000 persons with disabilities, their families, disability experts and local disability NGOs participated in the consultations.

In October 2002, high level representatives from governments, regional development agencies, international DPOs and people with disabilities were invited to Manila to speak for themselves at the ADB Disability and Development Workshop. Despite the engagement of the Bank in the disability field no disability team was set up.

7.4 INTER-AMERICAN DEVELOPMENT BANK (IADB)

At the annual meeting of the Bank's Board of Governors in 2002, Finland financed a seminar on disability and inclusion. The seminar identified three critical areas for the Bank: 1) improving the quality of data on persons with disability; 2) increasing the inclusion of persons with disability in the education system; and 3) improving access to transportation. The third area was particularly viewed as an area of expertise with previous successful large-scale projects viewed as best practice. Over the past 25 years, the Bank assigned approximately 10 million dollars to technical assistance to disability inclusive development projects.

The Inter-American Development Bank has a disability working team composed of three persons from the staff. Located within the Social Development Division of the Sustainable Development Department (SDS), the disability and development team is guided by the *Social Development Strategy*, adopted by the IADB's Board of Governors at the 8th Replenishment in 1994. With the Replenishment, poverty reduction and social equity became a Bank's priority, and within SDS this is exercised by conducting and disseminating research, designing innovative pilot programs and offering technical assistance to the Bank projects. The goal of the disability team and the four other social inclusion teams is to support the development of socially inclusive policies throughout Latin America and the Caribbean (LAC) towards the full inclusion and participation of all individuals regardless of race, ethnicity, gender, and disability.

For the past five years, the Bank has supported increased access to disability data, and actually is beginning to observe the impact of this investment: 20 countries in the region are including disability questions in censuses and surveys. With new analyses on disability data the IADB is also producing country and regional reports and a series of technical notes on inclusive education, labor market participation, and attention to health care to guide policy-making in improving disability-specific project interventions.

In 2005 the Bank adopted the Mandatory Operational Guidelines on Accessibility in Urban Development Projects with Universal Design Principles. The Guidelines facilitate the incorporation of accessibility - with universal design

principles - into the preparation phase of projects on urban development, building, and public transportation. They contribute with conceptual and technical knowledge to professionals responsible for new initiatives by providing analysis and design measures on how to create access to public environments for all persons independently of their physical and sensory characteristics.

7.5 EUROPEAN UNION (EU)

“The EU is committed to poverty reduction as expressed in the MDGs. This goal cannot be met without considering the needs of disabled people; yet disabled people are still not sufficiently included in international development work funded by the EU... If the interests of disabled people are not recognized then the key goal of poverty reduction in developing countries will not be achieved. Nor will the human rights of PWDs or their participation in society be promoted. If sustainable poverty reduction is to be achieved, disability needs to be addressed” (European Commission, 2003).

Although disability has not been identified as a cross-cutting issue in the European Commission (EC) development policy (European Development Consensus, 2005), the EC tries to support people with disabilities both through its regular programs and sector support, including education and health, and through targeted action.

In 2003 the European Commission published the *Guidance Note on Disability and Development for the EU Delegations and Services*. This note was the outcome of collaboration between the European Disability Forum (EDF), the International Disability & Development Consortium (IDDC) and the European Commission DG Development & Cooperation.

The Note is comprehensive and includes most of the demands made by NGOs expert in this field of work. It is intended to provide background on the situation of people with disabilities for European international cooperation planning. Overall the Guidance Note adopts a rather holistic outlook on disability by advocating for a human rights model to disability complemented by a twin-track approach for developing programming. This document was sent to all EU delegations in developing countries (Latin America, Africa, Asia) with the intention to ensure that the

Commission staff adapted their working methods and environment, in particular the management of programs, to the needs and rights of persons with disabilities.

The main principles and recommendations of the document are:

1. Understand the scale and impact of disability in the country setting and recognize the diversity of the disabled population;
2. Advocate and support the human rights model of disability rather than the charitable or medical approach;
3. Pursue a twin-track approach;
4. Assessing, as part of the mid-term review, to what extent the country program is inclusive of persons with disabilities;
5. Ensure EU funded projects are truly inclusive of disabled persons and their families;
6. Recognize women and children with disabilities rights in programs
7. Include disabled people in the workforce;
8. Ensure that the EU's own services are accessible for disabled persons;
9. Facilitate and support capacity building of representative disability organizations;
10. Facilitate communication between disability organizations and government and other stakeholders.

In December 2005 the European Commission has financed a European project entitled *Breaking the Cycle of Poverty and Disability in Development Cooperation*. The project brings together 12 European organizations to promote a coherent and coordinated approach to mainstreaming disability in development across the 25 European Union Member States, the European Institutions and European NGOs working in development and humanitarian aid. The project targets two main areas: public institutions in the field of development at a policy level as well as at a planning and implementation level. It also includes decision makers and staff members from ministries and government development agencies. All twelve partners are working to identify existing good practice on mainstreaming disability into development at both policy and implementation level. At a national level, partners are developing methodology and practices in different areas to include relevant activities in their plans, which are shared with other countries and across the European Union. The project is ongoing.

The European Union has diligently included the disability dimension in development programs carried out by the European external

delegations. It is expected in the future that the same is done by all its member states.

8. Guidelines

As it has been defended in this paper, it is evident that persons with disabilities must be addressed through out all development policies and strategies. If disabled people needs and rights are not effectively incorporated into cooperation actions, national and international agencies dealing with development work won't fully achieve development goals. That is due to several reasons. Firstly, because persons with disability represent around the 10/12% of the world population and 80% of persons with disabilities live in poor countries. Secondly, because the rights of persons with disability are human rights; accordingly to the internationally recognized human rights based approach not taking the rights of persons with disabilities into consideration in development means violating human rights.

However, it is argued that inclusion of people with disabilities in developmental work is not a new phenomenon. This research describes how some agencies have already undertaken initiatives to include persons with disabilities in their development cooperation policies. Anyway, the commitment, the intensity and the results obtained through the actions implemented are far from representing a fundamental change in the life conditions of persons with disabilities living in developing countries.

Accordingly, it is absolutely necessary to analyze these initiatives and highlight which are the best practices that should be applied more intensively and replicated in the developmental work carried out by other agencies and organizations. After reviewing in detail the experiences and practices in inclusive development cooperation undertaken by several donor countries, the following recommendations are suggested to be taken into account for those agencies interested in pursuing inclusion of disability issues in their development cooperation strategies:

- 1) *Adopt a specific mandatory policy on disability issues.* Only few development agencies have officially adopted a specific policy on disability issues, on the contrary of what many of these agencies have done with other issues (e.g. gender, children,

indigenous people). The policy adopted should be based on: a) *twin track approach* (one which focuses on disability related needs and the other which focuses on inclusion); b) the *social model of disability* (avoiding to treat disability as medical issue and limiting intervention only in the health and education sector); and c) a *human rights based approach* (considering the rights of persons with disabilities as human rights). The policy should outline general mandatory principles that all departments of the agency must consider in every moment of the implementation of their programs and project cycle. In order to justify the policy within the agency staff, it is important that the policy strongly focuses on and explains the direct link between poverty and disability. Moreover, once adopted, this policy should be endorsed in all the agencies' areas and not only in those departments that deal with issues directly related to disability (e.g. health, education and accessibility); it should also be promoted among organizations that cooperate with the agencies in their developmental work.

- 2) *Adopt disability as an official cross-cutting issue in the general policy of the agency.* It is fundamental that all sectorial policies encompass disability recognizing the importance of the disability dimension for the final achievement of development goals. The previous experience of gender mainstreaming can be used as an example and similar strategies should be repeated with disability.
- 3) *Evaluation and data collection.* A comprehensive and mandatory policy is not sufficient if it is not accompanied by a regular evaluation of the policy implementation. Evaluation mechanisms and methodologies should be widely established; they should allow identifying obstacles to implementation and negative and positive impacts of the policy. In order to measure the impact of the programs carried out it is also important to collect data on disability, which, as it has been outlined in this report, is scarce and in many occasions

contradictory. The agencies should make an effort focused on gathering statistic data on disability, and cross-checking this data with the data gathered by other agencies and organizations.

- 4) *Alliance with organizations of persons with disabilities (DPOs).* It is important for development agencies and institutions to collaborate with DPOs, both in their countries and in the developing countries in which inclusive development work is carried out. Organizations of persons with disabilities should be involved not only in advising or consultation, but they should be taken into consideration during the design and decision process of policies and programs. In the case of developing countries, DPOs are still emerging and developmental work should address the empowerment of people with disabilities, through support to the existing DPOs and to the creation of new of them.
- 5) *Constitution of a disability team.* Creating a disability team with an assigned budget within the agency can be useful to coordinate specific disabilities policies, training and awareness of staff, follow up of results and policies impact evaluation. The disability team should include persons with disabilities. A disability team or department should also play a crucial role in advising other departments on how disability can be mainstreamed.
- 6) *Provision of an acceptable budget.* Once disability is completely mainstreamed no additional budget for disability is required. However and accordingly to the twin track approach, before achieving an effective disability mainstreaming it is necessary to create a specific budget line for disability issues addressing crucial areas such as health, education and accessibility. The amount assigned to disability specific policies should be adequate and proportionate to the fixed goals and it should not be much less than budgets assigned to other mainstreaming issues (gender, indigenous people, children,

environment).

- 7) *Foster international alliances.* International collaboration is fundamental to share experiences and partake data on disability. Whenever possible, the agency should participate in global partnership and research programs of international dimension. Developing countries institutions and DPOs should also be supported to take part in these international alliances.

The analysis delineated in this report has shown the above-mentioned initiatives to be those with major effectiveness in including disability needs and rights in development policies. Anyway this is not a comprehensive list. Surely many other practices should be considered by agencies with a declared intention to address disability issues. Even if their convenience and usefulness might seem obvious, only few of the agencies and institutions analyzed in this research are implementing the initiatives listed before. Practically, not one of the agencies analyzed is applying all these best practices.

9. Conclusions

Disability and development are two tightly linked issues. Poverty increases the risks of disability, and disabled people represent an important percentage of the population in developing countries. Therefore, as it has been demonstrated in this research, dealing with disability issues is not only a question of human rights but is also a matter of social and economic development. None society will be fully developed if it is not able to include persons with disabilities.

In spite of the fact that the linkages between poverty and disability are evident, the *Millennium Development Goals*, the main international framework for development policies, don't include disability issues among their objectives. However, there is a current general trend to recognize the importance of including disability in development policies. The main result of this trend is the binding *Convention on Rights of Persons with Disabilities* approved by the United Nations. This Convention has a specific article on inclusive development (art.32) and, accordingly to this article, some development agencies are already

promoting the inclusion of persons with disabilities in their programs.

Aware of this trend, this study has analyzed what 8 national cooperation agencies and 5 international organizations working in development are doing in the area of disability. As a result of this analysis, it has been illustrated that a few national cooperation agencies are trying to include disability into their development strategies. It was also established that every agency experienced different situations and progressed distinctly towards the inclusion of persons with disabilities in their initiatives.

Disability, as it is suggested, should be mainstreamed into cooperation policies as it has been done with gender. Anyway all the agencies have failed achieving in the area of disability what they have accomplished in the area of gender. As this research has pointed out, there are many reasons for this, both internal and external.

All the agencies examined in this report have in common a solid national legislation and a long tradition in protection of the rights of persons with disabilities within their national boundaries and for their citizens. This, and quite often (e.g. USA, DfID or Nordic countries) the lobby capacity of disabled people organizations in their countries, have encouraged the agencies, intended as administrative bodies, to include disability policies in their work. In a few occasions (e.g. DfID, Germany) this has brought to minimize disability inclusion in development cooperation to either employing persons with disability within the agency staff or simply rendering accessible their offices or external delegations.

It is clear that including the disability dimension in development cooperation policies is much more complicated. In order to render cooperation strategies inclusive, the first step to be taken by national agencies is to officially acknowledge (and explain) the link between poverty and disability. But not all the agencies focus on the direct link disability-poverty to justify their commitment to disability issues. Only few of the analyzed organizations have organized staff training on the issue. This has caused incoherence in their programs and no sufficient staff involvement. More complicated has been justifying the inclusion of disability issues in development programs through a human rights based approach, this because

disability is not seen as a human rights issue in some agencies and organizations. (e.g. USAID, Banks).

Moreover in the majority of cases, the disability focus continues to be on the traditional areas of health, special education and accessibility. This occurs because the medical model of disability is still predominant. On the contrary to the gender social approach, it is common to believe that the discrimination of people with disabilities is due to biological reasons.

As a consequence, disability in cooperation is treated as a specific issue. Agencies deal with disability only through specific programs (e.g. rehabilitation, special education). Specific programs, however, need large budgets in order to obtain meaningful progresses in the life conditions of people with disabilities. Small-scale projects lead to small results, and small results, lead to limited interest to invest in larger-scale projects.

Besides the greater part of the, still scarce and relatively of small scale, projects are funded through NGOs and DPOs and undertaken within a charity approach rather than a meaningful human rights framework, even if human rights language is used (e.g. German Cooperation).

This report has also highlighted that it is important to structure disability within cooperation agencies and officially recognize it as a cross cutting issue. Still, generally, agencies don't have either a disability team or a disability officer, and no budget is foreseen for this.

More simply (and worryingly), disability is not considered a priority, and this is probably the first cause why agencies are not committed to the issue. Disabled people are invisible in international data. The lack of data on the incidence of disability makes it a perfect excuse to not deal with the issue. Without reliable data on the status of people with disabilities it is not only difficult to draw attention to their needs but also impossible to determine whether strategies for inclusion are effective.

In addition, many development countries in the first place don't consider disability a priority. They face other more urgent priorities such as gender discrimination, children protection, HIV/AIDS, wars and humanitarian crisis. Disabled people are left aside, whereas

mainstreaming disability would allow improving the impact of every development policy.

Finally, even if some international alliances and partnerships are being created, there is a lack of global capacity for multilateral and multi-stakeholder collaboration in the disability field. This is due to the fact that disability is a very complex and controversial issue and not all countries share the same cultural approach to the issue and are willing to review it.

International organizations can have an important role defining legal frameworks in the protection and inclusion of persons with disabilities also in development cooperation. Nonetheless in the majority of cases (e.g. Banks) they act limitedly to their field of action and specialization, unable to influence considerably national cooperation agencies.

The capacity to include the disability dimension in development cooperation first requires that the objectives of development will be put right, and the main objective must be a society for all. Secondly, it entails the knowledge, skills and understanding of all stakeholders as to what, why and how disability is a matter that should naturally be included in the strategies of poverty reduction. This will involve several efforts and concrete input in order for all participants in the process to commit to the issue.

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