Disability and International Cooperation and Development:

A review of Policies and Practices

VOLUME 1 – Disability

June 2010
DISABILITY AND INTERNATIONAL COOPERATION AND DEVELOPMENT: A REVIEW OF POLICIES AND PRACTICES

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MAY 2010

Keywords: Disability, Development, International Cooperation

JEL classifications: O19, K40, H89
ACKNOWLEDGEMENTS

This paper has been produced thanks to funding provided by the Italian Ministry of Foreign Affairs - Directorate General for Development Cooperation (DGCS) in line with their long-term commitment to mainstreaming disability in the development agenda.

We gratefully acknowledge feedback received from the following people and organizations:

**A.K. Dube**, African Decade for Persons with Disabilities  
**Alana Officer**, World Health Organization (WHO)  
**Angela Garabagiu**, Council of Europe  
**Axel Leblois**, Global Initiative for Inclusive Information and Communication Technology (G3ict)  
**Barbara Murray**, International Labour Organization (ILO)  
**Filippo Scammacca Del Murgo e Dell’Agnone, Chiara Venier, Mina Lomuscio and Paola Campostrini**, Italian Ministry of Foreign Affairs – General Directorate for Development Cooperation (DGCS)  
**Kristen Pratt**, Australian Agency for International Development (AusAID)  
**Nawaf Kabbara**, Arab Decade for Persons with Disabilities  
**Ronald Wiman**, Ministry for Foreign Affairs of Finland, Department of Development Policy  
**Silvia Lavagnoli**, Office of the High Commissioner for Human Rights (OHCHR)  
**Sven Isojarvi**, United Nations Development Program (UNDP)

We are also grateful to Peter Coleridge, Alberto Ninio (World Bank), Deepti Samant (Burton Blatt Institute and Global Partnership for Disability and Development), and Katherine Guernsey, who as the peer reviewers provided helpful comments and suggestions, and to Dung Thi Ngoc Tran for document processing.
ABSTRACT

This review examines recent policies of major multilateral and bilateral agencies, which they have employed to include disability in development aid. It also provides, whenever possible, examples of their programs. This review does not assess the merits or impact of those policies or practices; it only provides their mapping. The content of the summaries of individual organizations and agencies updates and extends previous compilation efforts by Inclusion International (2005 a, b), Disability Awareness in Action (1995), Handicap International/ Christoffel-Blindenmission (2006), and United Nations (2009).

The review indicates the following five emerging trends: (i) disability has become a part of international cooperation and development aid; (ii) international cooperation policies often link disability to Millennium Development Goals (MDGs); (iii) the agencies often combine several approaches to frame the inclusion of disability in development, including human rights, participation, inclusion and development; (iv) disability is included both through specific/ targeted and mainstreaming/ inclusion/ integration programs; and (v) approaches, policies and programs are dynamic and have changed over time.
# Abbreviations and Acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ADA</td>
<td>Austrian Development Agency</td>
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<td>ADC</td>
<td>Austrian Development Cooperation</td>
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<td>ADDP</td>
<td>African Decade of Disabled Persons</td>
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<td>APCD</td>
<td>Asia-Pacific Development Center on Disability</td>
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<td>AusAID</td>
<td>Australian Agency for International Development</td>
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<td>BMF</td>
<td>Biwako Millennium Framework for Action towards an Inclusive, Barrier-Free and Rights-Based Society for Persons with Disabilities in Asia and the Pacific</td>
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<td>BMZ</td>
<td>German Federal Ministry for Economic Cooperation Development</td>
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<td>CBR</td>
<td>Community-Based Rehabilitation</td>
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<td>CEB</td>
<td>United Nations System Executives Board for Coordination</td>
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<td>CIDA</td>
<td>Canadian International Development Agency</td>
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<td>COSP</td>
<td>Conference of States Parties</td>
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<td>CPOA</td>
<td>Continental Plan of Action</td>
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<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
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<td>CSO</td>
<td>Civil Society Organization</td>
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<td>DALY</td>
<td>Disability-Adjusted Life Year</td>
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<td>DAR</td>
<td>Disability and Rehabilitation</td>
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<td>DFID</td>
<td>United Kingdom Department for International Development</td>
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<td>DGCS</td>
<td>Italian Ministry of Foreign Affairs - General Directorate for Development Cooperation</td>
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<td>DPO</td>
<td>Disabled People Organization</td>
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<td>DPI</td>
<td>Department of Public Information</td>
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<td>D&amp;D</td>
<td>Disability and Development</td>
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<td>EC</td>
<td>European Commission</td>
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<td>ESCWA</td>
<td>Economic and Social Commission for Western Asia</td>
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<td>FAO</td>
<td>Food and Agricultural Organization of the United Nations</td>
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<td>GPDD</td>
<td>Global Partnership for Disability Development</td>
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<td>G3ict</td>
<td>Global Initiative for Inclusive Information and Communication Technology</td>
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<td>HDNSP</td>
<td>Social Protection and Labor Unit of Human Development Network</td>
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<tr>
<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome</td>
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<td>IASG</td>
<td>UN Inter-Agency Support Group for the Convention on the Rights of Persons with Disabilities</td>
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<td>IBRD</td>
<td>International Bank for Reconstruction and Development</td>
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<td>ICT</td>
<td>Information Communications Technology</td>
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<td>IDA</td>
<td>International Development Association</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>JBIC</td>
<td>Japan Bank for International Cooperation</td>
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<td>JICA</td>
<td>Japan International Cooperation Agency</td>
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<td>MDG</td>
<td>Millennium Development Goal</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>NCD</td>
<td>U.S. National Council on Disability</td>
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<td>NGO</td>
<td>Non-Governmental Organization</td>
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<td>NORAD</td>
<td>Norwegian Agency for Development Cooperation</td>
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<td>NZAID</td>
<td>New Zealand International Aid and Development Agency</td>
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<td>ODA</td>
<td>Official Development Assistance</td>
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<td>OHCHR</td>
<td>Office of the High Commissioner for Human Rights</td>
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PGD  Swedish Policy for Global Development
PRSP  Poverty Reduction Strategy Paper
SIDA  Swedish International Development Cooperation Agency
UN   United Nations
UNAIDS Joint United Nations Program on HIV/AIDS
UNDESA UN Department of Economic and Social Affairs
UNDP  United Nations Development Programme
UNESCO United Nations Educational, Scientific and Cultural Organization
UNFPA United Nations Population Fund
UN-HABITAT United Nations Human Settlements Programme
UNHCR United Nations High Commissioner for Refugees
UNICEF United Nations Children’s Fund
UNIDO United Nations Industrial Development Organization
UNMAS United Nations Mine Action Service
USAID United States Agency for International Development
WHO   World Health Organization
WIPO  World Intellectual Property Organization
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1. INTRODUCTION

1.1 Purpose of review

1.1.1 The purpose of this review is to canvas policies and, to the extent possible, practices of major multilateral and bilateral development agencies, aimed at including disability in development. Development that includes disability, as referenced in this review, is understood as development in which persons with disabilities participate as both actors and beneficiaries. It can be achieved by disability-specific initiatives, by adding disability-specific components to development programs, by fully inclusive programming, designed to include disability concerns into all development processes, or by a combination of these approaches.

1.1.2 While this review does not claim to be exhaustive, it does attempt to provide as comprehensive as possible an overview of policies and practices on disability and development (D&D), both within and among the United Nations (UN) system, and among major bilateral development agencies. It should be noted that this is a dynamic issue and thus many development agencies are either in the process of crafting new disability policies or strategies or are currently reviewing their existing approaches with a view to modifying or amending them.

1.1.3 Section 2 of this Report reviews the international legal and policy framework pertinent to the consideration of D&D with particular attention to the Convention on the Rights of Persons with Disabilities (CRPD) and Millennium Development Goals (MDGs). Section 3 reviews multilateral agencies and structures, particularly those within the UN system, and reviews their existing policies and/or practices related to D&D. Section 4 includes coverage of regional structures supporting the inclusion of disability in development. Section 5 identifies bilateral development agencies that, either as matter of written policy or as evidenced through practice, have taken steps to design and implement programs and practices that are inclusive of disability. Section 6 provides conclusions.

1.2 Disability and development

1.2.1 According to the World Health Organization (WHO), it is estimated that 10 percent of the world’s population experience a disability. The majority of persons with disabilities are estimated to live in developing countries, the fact that reflects the distribution of the world’s population. The prevalence of disability is observed to increase with the age of the population.
Box 1: Disability - Some Facts from Around the World

Disability is a stronger correlate of non-enrollment in school than either gender or class.

“Analysis of 14 household surveys from 13 developing countries suggests that 1-2 percent of the population have disabilities. Adults with disabilities typically live in poorer than average households: disability is associated with about a 10 percentage point increase in the probability of falling in the two poorest quintiles. Much of the association appears to reflect lower educational attainment among adults with disabilities. People of ages 6-17 with disabilities do not live in systematically wealthier or poorer households than other people of their age, although in all countries studied they are significantly less likely to start school or to be enrolled at the time of the survey. The order of magnitude of the school participation deficit associated with disability - which is as high as 50 percentage points in three of the 13 countries - is often larger than deficits related to other characteristics, such as gender, rural residence, or economic status differentials. The results suggest a worrisome vicious cycle of low schooling attainment and subsequent poverty among persons with disabilities.”

In Uganda, population in urban households headed by a disabled person was nearly 40 percent more likely to be poor, and children living in such households were less likely to attend school.

Poverty estimates derived, for 1992, for urban Ugandan households with a disabled head “show that 27 percent of the urban dwellers are poor and that poverty amongst those who live in a household with a disabled head is much higher, 43 percent.... Children in households headed by a disabled head receive less education. To the extent that education drives the ability to earn an income in the future, it confirms quantitatively the qualitative point made by Lwanga-Ntale (2003) that the currently disabled are more likely to pass their poverty on to their children.”

In India, the employment rate of people with disabilities is 60 percent lower than that of the general population.

“Controlling for other factors, having a disability reduces the probability of being employed by over 30 percent for males in rural [Uttar Pradesh] (UP) and [Tamil Nadu] (TN), though the effect is lower for women. However, those in rural areas and the better educated (those with post graduate education or vocational training) have relatively better prospects of employment relative to other disabled people. People with certain types of disabilities, e.g. hearing, speech and locomotor disabilities, and those with disability since birth also have better chances of getting a job. Mental illness and particularly mental retardation have a strong negative impact on the probability of being employed, even in cases where such disabilities are not severe. The presence of a disabled member also has impacts on the labor supply of other adult household members. Around 45 percent of households in UP and TN with a person with a disability report an adult missing work to care for a member with disabilities, the bulk of these every day and on average for 2.5 hours. However, other adult men are more likely to be working in households with disabled members, due to the need to compensate for lost income.”

Developing countries account for 90 percent of the Disability-Adjusted Life Years (DALYs) loss caused by road traffic injuries.

“For each road traffic injury death, there are dozens of survivors who are left with short-term or permanent disabilities that may result in continuing restrictions on their physical functioning, psychosocial consequences or a reduced quality of life. In 2002, road traffic injuries were the ninth leading cause of DALYs lost…accounting for over 38 million DALY lost, or 2.6 percent of the global burden of disease. Low-income and middle-income countries account for 91.8 percent of the DALYs lost to road traffic injuries worldwide. These observations illustrate the fact that low-income and middle-income countries carry most of the burden of the world’s road traffic injuries.


1.2.2 Persons with disabilities often lack a voice in the public discourse, and their interests and needs are frequently neglected. The negative interaction between persons with impairments and functional
limitations and attitudinal and other environmental barriers creates disability and hinders their participation in social and economic life. These barriers to inclusion have profound social and economic effects not only on individuals with disabilities but also on their families and/or caregivers who often forego economically productive activities to stay at home and provide care. The exclusion leads to the loss and inefficient use of human capital, reduced individual and national productivity, the loss of fiscal revenues, and increased fiscal costs.

1.2.3 Empirical evidence suggests that poverty is associated with disability and that disability may increase the risk of poverty. In low income settings, poverty is found to cause malnutrition, which leads to micronutrient deficiency and developmental disability. Poverty causes underinvestment in children’s education, particularly in the case of children with disabilities. Poor people often have no choice but to take any job available, working in difficult and unsafe conditions where workplace accidents frequently occur. Lack of access to health care can cause even mild or treatable health conditions to develop into permanent disabilities. On the other hand, disability often leads to a decrease in family income and may increase the family’s vulnerability to poverty.

1.2.4 A central theme emerging from the CRPD, and specifically reflected in its obligations, is the need to ensure the full participation of persons with disabilities in all spheres of life, including the development of national and international laws, policies and programs. This includes ensuring the participation of persons with disabilities and their representative organizations in the planning, design, implementation and evaluation of each country’s development programs in order to ensure a full success in the implementation of poverty reduction and other economic and social development strategies. At the international level, a number of multilateral and bilateral donors, as well as agencies and programs across the UN system, have been working to address disability inclusion in the context of their development assistance.

2. INTERNATIONAL LAW AND POLICY FRAMEWORK FOR ADDRESSING DISABILITY AND DEVELOPMENT

2.1 Disability, social development & international instruments

2.1.1 The UN Declaration on the Rights of Mentally Retarded Persons and the Declaration on the Rights of Disabled Persons, adopted in the 1970s, were the first international instruments to set forth human rights principles relating specifically to persons with disabilities. The adoption of these instruments represented, at the time, progress in terms of situating disability rights on the international agenda. Nonetheless, these documents were soon seen as outdated by the disability community for their approach to disability as they reflected medical and charity models of disability which served to reinforce paternalistic attitudes (Oliver 1996). Progressively, the disability community supported a social model of disability, which offered a fundamental conceptual shift “away from focusing on the physical limitations of particular individuals to the way the physical and social environments impose limitations on certain groups or categories of people” (Oliver 1983:23).

2.1.2 During the 1980s, human rights-based approaches started to take hold at the international level. The human rights of persons with disabilities garnered heightened attention by the UN during the 1980s with designations of the International Year of the Disabled in 1981 and the International Decade of Disabled Persons from 1982-1991. These UN-sponsored decades served to raise the profile of disability issues and helped to foster the emergence of a global disability community. Emphasis on social development and the importance of including persons with disabilities in policies and programming also formed part of an evolving international dialogue.
2.1.3 In 1982, the launch year of the International Decade, the World Programme of Action Concerning Disabled Persons\(^\text{11}\) was adopted by the General Assembly as a means of encouraging national level programs to achieve equality for persons with disabilities.\(^\text{12}\) The World Programme of Action, among other things, urges the organizations within the UN system to “explore, with the governments to which they are accredited, ways of adding to existing or planned projects in different sectors, components that would respond to the specific needs of disabled persons.”\(^\text{13}\) The Programme is presented as a global strategy with three core objectives which include enhancing disability prevention, rehabilitation and equalization of opportunities, to ensure the full participation of persons with disabilities in social life and national development.\(^\text{14}\)

2.1.4 The adoption of the World Programme was followed by the 1993 adoption by the General Assembly of the UN Standard Rules on the Equalization of Opportunities for persons with disabilities.\(^\text{15}\) This instrument was designed to serve as a blueprint for policy-making and provide a basis for technical and economic cooperation among states.\(^\text{16}\) Rule 21 of the Standard Rules specifically addresses the responsibility of States in the realm of technical and economic cooperation and thus may be regarded as an important antecedent to Article 32 of the CRPD. Rule 22 specifies the need for States to participate actively in international cooperation concerning policies for the equalization of opportunities for persons with disabilities. The Standard Rules, while non-binding, nevertheless served to inform State policies and practices and, in some instances, provided the framework for bilateral donor policies on disability.\(^\text{17}\)

2.1.5 Beyond disability-specific instruments, the core human rights conventions establish a general human rights framework that is applicable to persons with disabilities and upon which the Standard Rules are based.\(^\text{18}\) Notably, the Convention on the Rights of the Child (CRC)\(^\text{19}\) includes a specific provision pertaining to children with disabilities (Article 23). The Convention on the Elimination of All Forms of Discrimination against Women\(^\text{20}\) provides a general framework for ensuring the rights of all women, including women with disabilities.

2.2 The Convention on the Rights of Persons with Disabilities and disability and development

2.2.1 On December 19, 2001, the UN General Assembly, with resolution 56/168, established an Ad Hoc Committee "to consider proposals for a comprehensive and integral international convention to promote and protect the rights and dignity of persons with disabilities, based on the holistic approach in the work done in the fields of social development, human rights and non-discrimination and taking into account the recommendations of the Commission on Human Rights and the Commission for Social Development."\(^\text{21}\)

2.2.2 The work of the Ad Hoc Committee resulted in the adoption of the CRPD by the UN General Assembly on December 13, 2006. The CRPD entered into force on May 3, 2008. The CRPD embraces a human rights-based, social model of disability,\(^\text{22}\) reflecting the original mandate of the Ad Hoc Committee. The human rights approach recognizes persons with disabilities as active agents and holders of rights and stipulates that all people with all types of disabilities must enjoy all human rights and fundamental freedoms, irrespective of their social or economic status. At the same time, the CRPD recognizes that “disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others.”\(^\text{23}\)

2.2.3 In addition to being a human rights instrument, the CRPD has an explicit social development dimension. It recognizes that people with disabilities often face the risk of poverty and that many of them experience multiple forms of discrimination based on economic or other status.\(^\text{24}\) It underscores “the critical need to address the negative impact of poverty on persons with disabilities.”\(^\text{25}\)

2.2.4 By ratifying the CRPD, State Parties are bound to implement the Convention. The monitoring and implementation framework of the CRPD is an important vehicle for assessing and following closely the inclusive development vision of the Convention. The Committee on the Rights of persons with
disabilities is the body of independent experts which monitors implementation of the Convention by States Parties. The Conference of States Parties (COSP), created within the framework of the CRPD is designed to facilitate its implementation and serves as a forum for dialogue and sharing best practices.

2.2.5 The CRPD reflects the interdisciplinary and holistic nature of development; each individual article must be interpreted in light of its general principles reflected in Article 3 and other thematic articles such as those on education, health, accessibility, employment, living in the community, adequate standard of living, and others.

2.2.6 The CRPD expressly recognizes that international cooperation supports national efforts to effectively implement States Parties’ obligations. States Parties are to cooperate internationally through partnerships with other States, and/or with relevant international and regional organizations and civil society in support of national measures to give effect to the CRPD. Specifically, Article 32 identifies a range of measures that States can take within the framework of international cooperation which include inter alia: (1) “capacity building, including through the exchange and sharing of information, experiences, training programs and best-practices”; (2) research programs and the facilitation of access to scientific knowledge; and (3) technical and economic assistance, including the facilitation of access to accessible and assistive technologies. In addition, Article 32 also states “that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities,” thus Article 32 has important provisions not only for State Parties, but also for bilateral and multilateral development partners.

2.3 Millennium Development Goals & disability

2.3.1 The inclusion of persons with disabilities in development is pertinent not only to improving their and their families’ welfare, but it also has important ramifications for the achievement of international global development goals, such as the MDGs.

2.3.2 In September 2000, building upon a decade of major UN conferences and summits, world leaders adopted the UN Millennium Declaration, committing their nations to a new global partnership to reduce extreme poverty and setting out a series of time-bound targets that have become known as the MDGs. The MDGs are eight goals to be achieved by 2015 that respond to the world’s main development challenges. These goals are:

- MDG 1. Eradicate extreme poverty and hunger.
- MDG 4. Reduce child mortality.
- MDG 5. Improve maternal health.
- MDG 7. Ensure environmentally sustainable development.
- MDG 8. Develop a global partnership for development.

2.3.3 The Goals consist of 21 quantifiable targets and are measured by 60 indicators. Although these targets and indicators do not explicitly mention disability, they are relevant to the well-being of disabled people and disability concerns are relevant for the achievement of MDGs.

2.3.4 In December 2008, the UN General Assembly adopted a resolution, Realizing the Millennium Development Goals for Persons with Disabilities through the Implementation of the World Programme of Action Concerning Disabled Persons and the CRPD. This was followed by a Report of the Secretary-General in July 2009. The report focuses on the situation of persons with disabilities with respect to the realization of the MDGs and on lessons learned and synergies and complementarities achieved, based on the implementation of the World Programme of Action, the Standard Rules and the CRPD.
2.3.5 The UN Secretariat for the CRPD in collaboration with the WHO organized the *Expert Group Meeting on Mainstreaming Disability in MDG Policies, Processes and Mechanisms: Development for All.* The meeting reviewed existing policy frameworks, resources and tools, and mechanisms for mainstreaming disability in MDG processes and provided policy recommendations.

2.3.6 Including disability perspective in MDGs would also serve as benchmarks to implement a number of the specific substantive provisions in the CRPD. For example, CRPD Article 24 (Education) would be bolstered by including disability as a target under MDG 2 on universal primary education. Empirical evidence from across the world indicates that children with disabilities tend to have lower enrollment rates than children without disabilities; therefore, achieving the MDG 2 is not possible as long as children with disabilities are not specifically targeted in an effort to reach Universal Primary Education. The importance of formulating development policies and programs in accordance with agreed international commitments including on disability has been acknowledged in the 2008 Accra Agenda for Action.

3. **Global International Organizations and Structures Supporting the Inclusion of Disability in Development**

3.1 **UN Inter-Agency Support Group on the CRPD**

3.1.1 The UN is currently facilitating system-wide work in support of CRPD promotion and implementation across the organization. In September 2006, the UN System Chief Executives Board for Coordination (CEB) established the Inter-Agency Support Group (IASG) on the CRPD in recognition of the commitment of the UN system in “promoting, protecting, and ensuring [the CRPD’s] general principles, as defined in Article 3, both in the work of the UN system, and in its internal policies.” The Group is charged with coordinating the work of the UN system in support of the promotion and implementation of the Convention which includes the development of a draft strategy and plan of action to mainstream the CRPD throughout the work of the UN system. In addition, the UN Development Group task team on disability is working with the UN Development Operations Coordination Office to develop guidelines on disability for UN country teams.

3.1.2 Individual agencies are working on CRPD implementation as part of their internal as well as external programming and activities. A range of illustrative examples of agency initiatives, in particular those that relate specifically to development work, are considered in the sections that follow.

3.2 **Secretariat for the CRPD**

3.2.1 The Secretariat for the CRPD is jointly operated by the UN Department of Economic and Social Affairs (UNDESA) and the Office of the UN High Commissioner for Human Rights (OHCHR). The Secretariat prepares publications and acts as a clearinghouse for information on disability issues; promotes national, regional and international programs and activities; and gives substantial support to technical co-operation projects and activities. It draws its mandates from: 1) the CRPD adopted in 2006; 2) the Standard Rules on Equalization of Opportunities for PDWs adopted in 1994; and 3) the World Programme of Action Concerning Disabled Persons adopted in 1982.

3.3 **United Nations Department of Economic and Social Affairs**

3.3.1 Disability issues within the UN system have historically been addressed by the UNDESA, Division for Social Policy and Development in New York within the UN Program on Disability. UNDESA is responsible, among other things, for servicing the COSP. It is also playing a lead role in the dialogue on D&D across the UN. The negotiation and adoption of the CRPD provided the impetus for an
expansion of the office and a new mandate for UNDESA to house the CRPD Secretariat during the elaboration and negotiations of the Convention. As noted in the previous section, UNDESA, together with the Office of the UN High Commissioner for Human Rights (OHCHR), is the joint Secretariat of the CRPD.

3.4 Office of the United Nations High Commissioner for Human Rights

3.4.1 The OHCHR is the principal human rights official of the UN responsible for UN human rights activities and heads the OHCHR, which was established to assist the High Commissioner in fulfillment of her mandate.42 Part of the UN Secretariat, the OHCHR has also the broad mandate to promote and protect the effective enjoyment by all, including persons with disabilities, of all civil, cultural, economic, political and social rights. The overall mandate includes preventing human rights violations, promoting international cooperation to protect human rights, strengthening and streamlining human rights activities throughout the UN system.43

3.4.2 OHCHR serves as the co-secretariat for the CRPD, and plays the primary role in servicing the treaty monitoring body created within the framework of the CRPD. More generally as part of its work on human rights and development, OHCHR has worked on the adoption of an inter-agency plan on strengthening human rights-related UN actions at the country level, and the integration of human rights in key inter-agency policy documents and programming guidelines, such as those for UN resident coordinators, the UN Development Assistance Framework and the common country assessment.44 Efforts are currently under way to include the rights of persons with disabilities and related concerns explicitly within these guidelines, and at all stages of processes including engagement, country analysis, strategic planning, and monitoring and evaluation (M&E). Additionally, in response to the calls for the mainstreaming of human rights within the UN, a Statement of Common Understanding was developed, which specifically addresses a human rights-based approach to the development cooperation and development programming by UN bodies.

3.4.3 OHCHR is working on integrating human rights and strengthening national accountability in national MDG-based development process in focus countries. This experience, and in particular the development of civil society capacities to monitor the Liberian Poverty Reduction Strategy and the State budget from a human rights perspective, was presented at the Expert Group Meeting on Mainstreaming Disability in MDG Policies, Processes and Mechanisms: Development for All, organized by UNDESA in April 2009 in Geneva. Following the recommendations of participants, this pilot initiative in Liberia is also targeting the disability task force, a group of more than 20 national non-governmental organizations (NGOs) providing a forum within which persons with disabilities express their voice.

3.5 United Nations Development Programme

3.5.1 The United Nations Development Programme (UNDP) is the UN’s global development network, an organization mandated to advocate for change and link countries to knowledge, experience and resources to help build better lives. The MDGs are a major focus for UNDP which uses its network to link and coordinate both global and national efforts to achieve the MDGs. Its work is organized around the following global issues: (1) democratic governance; (2) poverty reduction; (3) crisis prevention and recovery; (4) environment and energy; and (5) HIV/AIDS. UNDP has embraced both a human rights-based approach to development and a focus on the empowerment of women.

3.5.2 UNDP is currently developing guidelines for the inclusion of persons with disabilities in the development and implementation of its programming. Specific efforts to integrate disability into the work of UNDP include the development of an online learning tool to raise awareness of the rights of persons with disabilities among UNDP staff members.48
3.5.3 While UNDP does not have an explicit disability policy, it supports persons with disabilities and their representative organizations through its programming, both through disability-specific initiatives, such as supporting capacity building of disabled people organizations (DPOs), and through inclusion in regular programs (for example, supporting DPOs and including persons with disabilities in mainstream UNDP programs, such as civic education or participatory developing planning).

3.6 Food and Agricultural Organization

3.6.1 The UN Food and Agriculture Organization (FAO) leads international efforts to defeat hunger. FAO has an established history of promoting the rights of rural persons with disabilities and has worked to integrate the needs and concerns of rural persons with disabilities into its rural development work, agricultural policy support and program development activities. More specifically, its objectives in this area are to support national governments’ efforts to: (1) improve income-generating and employment opportunities for rural disabled people in agriculture and related sectors; (2) upgrade agricultural production technologies to meet the special requirements of rural workers with disabilities; (3) foster occupational safety and health in agriculture, including accident prevention in agricultural and agro-forestry industries; (4) eliminate nutrition-related disabilities through improved dietary practices and food security interventions; and (5) integrate disability issues into national rural development policies and programs.

3.6.2 FAO has established an ad hoc Interest Group on Disability Matters, which brings together FAO experts from a number of technical areas to address the issues facing persons with disabilities in relation to agriculture and rural livelihoods.

3.6.3 Illustrative programming includes successful pilot programs introduced in Thailand and Cambodia for disability-centered farming in response to the Asian and Pacific Decade of Disabled Persons.

3.7 International Labour Organization

3.7.1 The International Labour Organization (ILO) is devoted to advancing opportunities for women and men to obtain decent and productive work in conditions of freedom, equity, security and human dignity. Its main aims are to promote rights at work, encourage decent employment opportunities, enhance social protection and strengthen dialogue in handling work-related issues. The ILO Disability Programme promotes decent work for women and men with disabilities and facilitates means to overcome the obstacles preventing persons with disabilities from full participation in the labor markets. The approach of the Program is based on the principles of equal opportunity, equal treatment, non-discrimination and mainstreaming, and the concept of affirmative action as underlined in the ILO Convention concerning Vocational Rehabilitation and Employment (Disabled Persons) Convention (No. 159) 1983, its accompanying Vocational Rehabilitation and Employment (Disabled Persons) Recommendation, 1983 (No. 168) and other ILO conventions concerning equality of opportunity and non-discrimination. The Program involves the following main activities: (1) promotion of international labor standards concerning persons with disabilities, (2) improving knowledge on disability-related matters concerning vocational rehabilitation, training and employment; (3) advocacy, guidance and policy advice to governments, workers’ and employers’ organizations, and organizations of/for persons with disabilities on vocational rehabilitation, training and employment of disabled persons; and (4) technical cooperation services. The 2001 ILO Code of Practice on Managing Disability in the Workplace adds to the range of standards which the ILO uses in its work to promote the employment of disabled persons. An agreed, non-binding set of rules and procedures aimed primarily at enterprises aims to improve recruitment, promotion, job-retention and return-to-work prospects for persons with disabilities, based on equality of opportunity. The Code also describes the respective roles of governments, employers’ and
workers’ organizations, as well as DPOs in facilitating the effective introduction of disability management.

3.7.2 Recent illustrative activities include compilation of information on: (1) skills development programs for persons with disabilities in selected countries of Southern Africa; (2) good practice in training and employment in Asia and the Pacific region; (3) effective strategies for skills development and access to work in community-based rehabilitation (CBR) programs in Africa, Arab States and the Asia/Pacific Region; (4) approaches adopted to ensure the effective implementation of legislation concerning the employment and training of disabled persons; and (5) employer initiatives to promote the employability and employment of persons with disabilities and their integration into the workforce. These knowledge development activities provide the basis for practical guidelines developed for constituents. The ILO has also developed a training program on disability-related legislation concerning training and employment in collaboration with Cornell University and an online training course on labor market inclusion of persons with disabilities, in collaboration with the ILO Turin Centre. A disability equality training methodology has been developed and is currently being field tested in several countries of Africa and Asia. A Disability Inclusion initiative has been adopted in the ILO’s Employment Sector, aiming to ensure that disability issues are taken into account in all of the Sector’s activities. Internally, the ILO is striving to build on its policy on the employment of persons with disabilities adopted in 2005 and is posting its job openings through disability networks, as well as the ILO website, and encouraging persons with disabilities to apply. Finally, the ILO Governing Body has also approved a reasonable accommodation fund for the purpose of providing needed devices for employees and interns with disabilities so that these costs are not a disincentive for any specific program or office budget.\textsuperscript{55}

3.8 \textit{United Nations Children’s Fund}

3.8.1 The United Nations Children’s Fund (UNICEF)\textsuperscript{56} is mandated by the UN General Assembly to advocate for the protection of the rights of the child, to help meet the basic needs of children and to expand their opportunities to reach their full potential.\textsuperscript{57}

3.8.2 UNICEF has recently established an inter-divisional working group on disability but has no official policy as such on disability in its work, although UNICEF has worked on disability issues in the context of child rights for many years. Its mandate under the CRC\textsuperscript{58} includes disability rights not only because the CRC is applicable to all children including children with disabilities, but also because Article 23 of the CRC expressly addresses children with disabilities. Among its disability work, UNICEF supports a “child friendly school” program/approach which is a model for inclusive education for all children, including children with disabilities. UNICEF is currently supporting awareness-raising on the CRPD in several countries and produced a child-friendly version of the CRPD, which is used in a variety of UNICEF country programs\textsuperscript{59} including Uzbekistan, Burkina Faso and the Russian Federation.\textsuperscript{60} UNICEF provides technical assistance in the review of national legislation in light of the provisions of the CRPD.

3.8.3 Illustrative examples of programming in this context include technical assistance to China in the revision of the Law on the Protection of Disabled Persons, in particular the inclusion of new provisions on children with disabilities. UNICEF has also worked with several countries to integrate disability into social protection system reforms including in Croatia, Kyrgyzstan, the Republic of Moldova, and South Africa.\textsuperscript{61}

3.8.4 UNICEF contributed to the advancement of the rights of persons with disabilities through a collaborative partnership with Special Olympics International in eight countries. International Inspiration, a multi-country sport initiative in partnership with the United Kingdom Committee for UNICEF, will be implemented by 20 UNICEF country offices and will provide quality and inclusive physical education and sports opportunities to children with disabilities.\textsuperscript{62}
3.9 United Nations Educational, Scientific and Cultural Organization

3.9.1 The UN Educational, Scientific and Cultural Organization (UNESCO)\(^{63}\) promotes international co-operation in the fields of education, science, culture and communication. UNESCO’s mission is to promote education as a fundamental right, to improve the quality of education and to facilitate policy dialogue, knowledge sharing and capacity building.

3.9.2 UNESCO coordinates the global drive towards Education for All and leads the UN Literacy Decade, the UN Decade of Education for Sustainable Development and the Global Initiative on Education and AIDS of the Joint UN Program on HIV/AIDS (UNAIDS). As a part of its work in support of Education for All, UNESCO established the Flagship on Education for All and the Right to Education for Persons with Disabilities in cooperation with the University of Oslo.\(^{64}\)

3.9.3 Illustrative activities in support of the CRPD, and in particular, Article 24 [on Education] implementation, include the UNESCO International Conference on Education held in Geneva in November 2008 and dedicated to inclusive education. UNESCO also produced a DVD, A World for Inclusion: Ensuring Education for All through the UN Disability Convention,\(^ {65}\) which used footage from Finland, Kenya and Turkey to address the situation of children with disabilities worldwide.

3.10 United Nations Population Fund

3.10.1 The UN Population Fund (UNFPA)\(^ {66}\) is an international development agency that promotes “the right of every woman, man and child to enjoy a life of health and equal opportunity.”\(^ {67}\) UNFPA provides technical assistance to countries in using population data for policies and programs to reduce poverty and, in addition, “to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect.”\(^ {68}\)

3.10.2 While UNFPA does not have a specific disability focal point or program, it is actively supporting awareness-raising and ratification of the CRPD and, in particular, the sexual and reproductive rights of women and girls with disabilities.\(^ {69}\)

3.10.3 UNFPA held an Expert Meeting on Sexual and Reproductive Health of persons with disabilities, in November 2006 and issued a report in connection with the meeting.\(^ {70}\) Its brochure, Sexual and Reproductive Health of persons with disabilities\(^ {71}\) emphasizes that sexual and reproductive health needs and rights of disabled persons are often overlooked and outlines some of their concerns, the international commitments that aim to protect their rights, and UNFPA recommendations for expanding their access to sexual and reproductive health care. A guidance note, entitled Promoting Sexual and Reproductive Health for Persons with Disabilities, was issued jointly by UNFPA and WHO, in 2009. Another publication, Disability Rights, Gender and Development: A Resource Tool for Action, produced in collaboration with Wellesley College and UNDESA, is a resource compendium and UNFPA Emerging Issues: Mental, Sexual and Reproductive Health,\(^ {72}\) likewise addresses disability issues.\(^ {73}\) An illustrative example of programming includes work in Haiti, where UNFPA supported efforts to advance the rights of persons with disabilities by organizing a national forum and associated activities to advance the formulation of a national policy for the integration of persons with disabilities and translated the CRPD into Creole.\(^ {74}\)

3.11 United Nations High Commissioner for Refugees

3.11.1 The UNHCR\(^ {75}\) is mandated to lead and co-ordinate international action to protect refugees and resolve refugee problems worldwide. UNHCR has taken steps to enhance the protection of persons with disabilities by adding specific protection provisions for them in the planning process. Refugee and internally displaced children with disabilities in both urban and camp settings are of particular concern, as they face challenges in obtaining access to education due to physical, attitudinal and/or social barriers.
UNHCR and its partners are also developing a training module for field staff on psycho-social support for persons of concern, using the Inter-Agency Standing Committee guidelines on mental health and psycho-social support, with a specific focus on persons of concern who have suffered torture, violence and/or harassment.

3.12 United Nations Human Settlements Programme

3.12.1 The UN Human Settlements Programme (UN-HABITAT), is the UN agency for human settlements. Its mandate is to promote socially and environmentally sustainable towns and cities with the goal of providing adequate shelter for all people, including persons with disabilities. On the occasion of the entry into force of the CRPD, the UN-HABITAT underscored its commitment to CRPD implementation.

3.12.2 The publication, Policy Guidelines for Children with Disabilities Living in Informal Settlements in Kenya details a comprehensive community centre approach to rehabilitation that ensures accessible and adequate space for health services, education and social activities. UN-HABITAT is testing this approach in a pilot project in Kibera, Africa’s second largest informal settlement, located in Nairobi.

3.13 United Nations Mine Action Service

3.13.1 The UN Mine Action Service (UNMAS) was established by the UN General Assembly in 1997 to serve as the UN focal point for mine action and to support the UN's vision of “a world free of the threat of landmines and unexploded ordnance, where individuals and communities live in a safe environment conducive to development, and where mine survivors are fully integrated into their societies.”

3.13.2 The work of UNMAS is grounded in the five “pillars” of mine action: (1) removing and destroying landmines and explosive remnants of war and marking or fencing off areas contaminated with them; (2) mine-risk education to help people understand the risks they face, identify mines and explosive remnants of war and learn how to stay out of harm's way; (3) medical assistance and rehabilitation services to victims, including job skills training and employment opportunities; (4) advocating for a world free from the threat of landmines and encouraging countries to participate in international treaties and conventions designed to end the production, trade, shipment or use of mines and to uphold the rights of persons with disabilities; and (5) helping countries destroy their stockpiles of mines as required by international agreements, such as the 1999 Ottawa Convention.

3.13.3 UNMAS is working to integrate the principles of the CRPD into mine action programs and national frameworks for the implementation of victim assistance programs and is utilizing the CRPD as a reference for its work in the field. UNMAS utilizes the CRPD to inform its work with States around victim assistance obligations under the Mine Ban Treaty and Article 8 of Protocol V of the Convention on Certain Conventional Weapons.

3.14 United Nations Industrial Development Organization

3.14.1 The UN Industrial Development Organization (UNIDO) is a specialized agency of the UN that promotes industrial development for poverty reduction, inclusive globalization and environmental sustainability. Its mandate is to promote and accelerate sustainable industrial development in developing countries and economies in transition, and work towards improving living conditions in the world's poorest countries by drawing on its combined global resources and expertise.

3.14.2 In recent years, UNIDO has taken on an enhanced role in the global development agenda by focusing its activities on poverty reduction, inclusive globalization and environmental sustainability. Its programming is based on two core functions, first, as a global forum that generates and disseminates industry-related knowledge and second, as a technical cooperation agency, providing technical support and implement projects.
3.15  **World Health Organization**

3.15.1 The WHO\(^{84}\) is the directing and coordinating authority for health within the UN system. It is responsible for providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries and monitoring and assessing health trends.

3.15.2 Within WHO, disability issues are addressed by the Disability and Rehabilitation (DAR) team, situated within the Department of Violence and Injury Prevention and Disabilities in the Cluster of Non-communicable Diseases and Mental Health. The DAR team is directed to work on the enhancement of the quality of life of persons with disabilities and the promotion of the rights and dignity of persons with disabilities. To that end, it focuses on the following activities: (1) producing, jointly with the World Bank, a world report on DAR (expected in December 2010); (2) advocacy to raise awareness about the “magnitude and consequences of disability”; (3) facilitation of data collection, analysis and dissemination of disability-related data and information; (4) supporting national, regional and global efforts to promote health and rehabilitation services for persons with disabilities; (5) promoting the CBR approach; (6) promoting the development, production and distribution of assistive device and technologies; (7) capacity building for health/ rehabilitation policy makers and service providers; (8) contributing to policy development of local, national and international public health policies on DAR; and (9) fostering partnerships.\(^{85}\)

3.15.3 All of the WHO core program areas, including policies, healthcare and rehabilitation, CBR, assistive devices and technology and capacity building, are framed by reference to the CRPD.\(^{86}\)

3.15.4 Closely linked to its support of the CRPD, WHO has established a Task Force on Disability with the stated goal of ensuring that WHO programs and projects are designed and implemented in accordance with the needs of persons with disabilities and that, consistent with the principles of the CRPD, “disability is a mainstream issue across the Organization.”\(^{87}\)

3.15.5 Illustrative WHO activities include the development of technical guidelines on CBR to provide clear directions on how community-based development initiatives can work to promote the rights of persons with disabilities and respect for their inherent dignity in accordance with the CRPD.\(^{88}\) WHO and UNICEF are jointly developing the guidelines for health care workers on how to improve participation of children with disabilities in under-resourced settings.\(^{89}\) WHO, through its Department of Mental Health and Substance Abuse, is also working on advocacy law and policy reform, collaborating, for example, with academic institutions to ensure coverage of mental health law and policy, and building the capacity of national actors to advocate for human rights and influence reform efforts in line with the CRPD.\(^{90}\) WHO is also developing a tool, with the CRPD as a framework, to provide countries with guidance on human rights standards that need to be respected, protected and fulfilled in mental health facilities and social care homes.

3.15.6 UNAIDS, together with WHO and OHCHR, have developed a policy brief on *Disability and HIV*, which explores this often neglected intersection and makes policy recommendations. The brief discusses actions that need to be taken so that persons with disabilities have access to inclusive HIV services that are tailored to their diverse needs, and are also equal to the services available to others in the community.

3.16  **World Intellectual Property Organization**

3.16.1 The World Intellectual Property Organization (WIPO) is a specialized agency of the UN with a mission to develop a balanced and accessible international intellectual property system, which rewards creativity, stimulates innovation and contributes to economic development while safeguarding the public interest.\(^{91}\) The WIPO Standing Committee on Copyright and Related Rights has included the issue of
copyright exceptions and limitations for persons with disabilities on its work agenda. WIPO has also initiated awareness-raising efforts and increased accessibility along with other partners to strengthen linkages between the intellectual property system and the CRPD framework.

3.17 Global Initiative for Inclusive Information and Communication Technologies

3.17.1 The Global Initiative for Inclusive Information and Communication Technologies (G3ict), an advocacy initiative of the UN Global Alliance for Information and Communication Technologies (ICT) and Development, works to promote information and communications technology solutions for persons with disabilities and related best policy practices pursuant to the CRPD. G3ict also includes multi-stakeholder global and regional forums, the dissemination of information and research tools, media relations and a web-based media resource centre. The rationale for the initiative is explicitly tied to the CRPD, and more specifically Article 9, which “creates the first universal framework addressing the accessibility of ICT and assistive technologies.” It produces and maintains, in cooperation with the International Telecommunications Union, an e-accessibility toolkit for policy makers for persons with disabilities. In a recent initiative, G3ict partnered with Disabled Peoples’ International (DPI) to develop the Digital Accessibility and Inclusion Index, which measures the degree to which countries meet the requirements of accessibility to ICT consistent with the CRPD. G3ict also publishes the G3ict Digital Accessibility World Report, which provides updates and information on developments in accessibility.

3.18 The World Bank

3.18.1 The World Bank is a vital source of financial and technical assistance to developing countries around the world. The World Bank mission is to fight poverty and to help people help themselves and their environment by providing resources, sharing knowledge, building capacity and forging partnerships in the public and private sectors. The World Bank is made up of two unique development institutions owned by 186 member countries: the International Bank for Reconstruction and Development (IBRD) and the International Development Association (IDA). Each institution plays a different but collaborative role in advancing the vision of inclusive and sustainable globalization. The IBRD aims to reduce poverty in middle-income and creditworthy poorer countries, while IDA focuses on the world's poorest countries. The World Bank provides low-interest loans, interest-free credits, and grants to developing countries for a wide array of purposes that include investments in education, health, public administration, infrastructure, financial and private sector development, agriculture and environmental and natural resource management.

3.18.2 Every year, the World Bank approves hundreds of projects and its staff produces hundreds of analytical reports. Investment lending in education, social protection, health, transport, and other sectors is relevant directly to persons with disabilities. For instance, projects to strengthen social insurance systems would include actions to strengthen disability related social insurance benefits. Projects to assist the development of safety nets would target poor and vulnerable population as beneficiaries and thus poor and vulnerable persons with disabilities and their families would benefit from such projects. In development policy and other investment lending, the relevance is indirect, as the World Bank supported programs concern all citizens in a given country.

3.18.3 The World Bank established a D&D team within the Social Protection and Labor Sector of the Human Development Network (HDNSP) in 2002, with the objective of building the evidence base and generating knowledge on disability and building partnerships in order to further the World Bank’s primary work in the operations. D&D is currently preparing several studies, including an empirical analysis of Disability and Poverty in Developing Countries and a study on Employment of PDWs. In collaboration with WHO, the World Bank is preparing a World Report on Disability. With regards to integrating disability into the World Bank’s analytical and operational work, D&D has organized a number of knowledge sharing and dissemination events, launched a toolkit for training of bus-drivers, and
provided technical assistance to the World Bank operational teams working on projects in Azerbaijan, Jordan, Ethiopia, Burundi, and Bangladesh.

3.18.4 Regarding partnerships, the World Bank established the Global Partnership for Disability and Development (GPDD). Since 2004, the GPDD has grown into a global alliance composed of national governments, development banks, UN agencies, DPOs, NGOs, universities, foundations, and enterprises, all committed to the GPDD objective to combat the social and economic exclusion and impoverishment of persons with disabilities and their families in developing countries. The Bank is supporting GPDD through a Development Grant Facility and a Multi-Donor Trust Fund established by Italy, Finland, and Norway. GPDD and the World Bank D&D team have implemented a number of activities supported by the MDTF, including: (i) a study on disability in disaster (in final draft); (ii) a capacity building project on inclusive national development strategies (Poverty Reduction Strategy Papers - PRSPs): the case of Mozambique; (iii) Regional Seminar on Accessibility of the Environment, Universal Design, Tourism and Development (for Portuguese speaking countries in Africa); (iv) a seminar on D&D for the MERCOSUR Working Group on Promotion and Protection of the Rights of Persons with Disabilities; and (v) communities of practice on women with disabilities in development, inclusive education and working group on Haiti reconstruction.

3.18.5 In addition to the analytical and operational work of the World Bank on disability, the institution has tasked the Human Resources Vice-Presidency to take steps to create a supportive workplace for persons with disabilities to enable them to fulfill their job responsibilities while fully utilizing and developing their capacities. Initiatives to date include programs to ensure accessibility of facilities (most of the World Bank offices across the world have been made accessible) and information technologies, and reimbursement of accommodations costs through a central Disability Accommodation Fund. The Office of Diversity and Inclusion of the Human Resources Vice-Presidency is currently developing an on-line course aimed at educating the World Bank staff on disability.

4. **REGIONAL ORGANIZATIONS & STRUCTURES**

4.1 *UN regional commissions and decades*

4.1.1 The UN regional commissions were created by the UN in order to fulfill the economic and social goals set out in the UN Charter by promoting cooperation and integration between the countries in each region of the world. The five regional commissions are: the Economic Commission for Europe (ECE, established in 1947); the Economic and Social Commission for Asia and the Pacific (ESCAP, 1947); the Economic Commission for Latin America and the Caribbean (ECLAC, 1948); the Economic Commission for Africa (ECA, 1958); and the Economic and Social Commission for Western Asia (ESCWA, 1973). Several of the regional commissions have prioritized disability issues as a component of their work.

4.1.2 Economic and Social Commission for Asia and the Pacific and Asian Decades

4.1.2.1 The Economic and Social Commission for Asia and the Pacific (ESCAP)\textsuperscript{97} supports member and associate member governments on developing approaches that promote the participation of persons with disabilities in the development process. This support is provided through operational activities, encouragement of networking and collaborative action, identification of examples of good practice, as well as advisory services on the implementation of the Agenda for Action for the Asian and Pacific Decade of Disabled Persons.

4.1.2.2 During the concluding year of the UN Decade of Disabled Persons (1983-1992) ESCAP, at its 48th session in April 1992, declared an Asian and Pacific Decade of Disabled Persons for the period 1993 to 2002.\textsuperscript{98} This regional initiative was launched at a meeting convened by ESCAP in Beijing in December 1992 and focused on the inclusion of persons with disabilities in society and in all mainstream
development programs to reach the Decade goal of full participation and equality of persons with disabilities. That meeting adopted the Proclamation on the Full Participation and Equality of Persons with Disabilities in the Asian and Pacific Region, and the Agenda for Action for the Asian and Pacific Decade of Disabled Persons. The Proclamation and Agenda for Action for the Decade were endorsed by the Commission at its 49th session in April 1993.

4.1.2.3 A second Decade was declared by ESCAP at its 58th session in May 2002, for the period 2003-2012, at an inter-governmental meeting to conclude the first Decade. The thrust of the new Decade is to fully implement the paradigm shift from a charity-based approach to a human rights-based approach to the full range of disability concerns in the region. At an October 2002 meeting, governments considered the adoption of a regional framework for action towards an inclusive, barrier-free and rights based society for persons with disabilities and drafted the Biwako Millennium Framework for Action towards an Inclusive, Barrier-Free and Rights-Based Society for Persons with Disabilities in Asia and the Pacific (BMF).99

4.1.3 The BMF sets forth regional policy recommendations for action by governments in the region and concerned stakeholders, and identifies seven areas for priority action in the new decade. Each priority area contains critical issues, targets and the action required. The regional framework for action explicitly incorporates the MDGs and their relevant targets to ensure that concerns relating to persons with disabilities become an integral part of efforts to achieve the goals. BMF incorporates disability concerns into national policies and program to achieve the targets of the MDGs. The BMF identifies the following seven priority areas: (1) self-help organizations of persons with disabilities and related family and parental associations, (2) women with disabilities, (3) early detection, early intervention and education, (4) training and employment, including self-employment, (5) access to built environments and public transport, (6) access to information and communications, including information and communications and assistive technologies, and (7) poverty alleviation through capacity-building, social security, and sustainable livelihood programs.

4.1.4 In 2007, a High-Level Inter-Governmental Meeting on the Midpoint Review of the Asian and Pacific Decade of Disabled Persons was held in Bangkok and drafted Biwako Plus Five, which provides supplemental strategies for further implementation of the BMF by 2012. The BMF and Biwako Plus Five are significant regional instruments that continue to inform the approach taken to disability inclusion.100

4.1.5 The African Decade of Disabled Persons

4.1.5.1 The African Union declared the first decade of the new millennium (1999-2009) as the African Decade of Disabled Persons (ADDP). In 2001 the African Union’s Labour and Social Affairs Commission along with its African Rehabilitation Institute and the ILO developed a Continental Plan of Action (CPOA) to guide the member states of the African Union on how to implement the African Decade. The adoption of the ADDP placed responsibility on African states to implement Decade Program activities. In October 2008, the ADDP was extended until 2019.

4.1.5.2 Through the African Decade, the member states of the African Union are committed to: (1) formulate and implement national policies, programs and legislation to promote the full and equal participation of persons with disabilities; (2) promote the participation of persons with disabilities in the process of economic and social development; (3) promote the self-representation of persons with disabilities in all public decision-making structures; (4) enhance support services for persons with disabilities; (5) promote special measures for children, youth, women and elderly persons with disabilities; (6) ensure and improve access to rehabilitation, education, training, employment, sports, the cultural and physical environment; (7) promote and protect disability rights as human rights; (8) support the development of and strengthen DPOs; and (9) mobilize resources.
4.1.5.3 The ADDP is supported by a Secretariat whose mission is to promote inclusive development and human rights of persons with disabilities by being a credible, knowledge based disability organisation working in partnership with African governments, civil society organizations (CSOs) and DPOs.

4.1.5.4 Illustrative activities implemented by the Secretariat include work on the formulation of disability indicators, the development of a training manual for disability research and research reports in the field of health, education, HIV/AIDS, and the development of other types of resources to benefit the work of DPOs in the area of disability law and policy and D&D. The Secretariat also engages in a variety of training and capacity building projects. Examples of such work include workshops on resource mobilization; training for African journalists to promote the Decade; and a digital story workshop for participants including parents and youth from nine countries (Kenya, Senegal, Nigeria, Tanzania, Ethiopia, South Africa, Uganda, Mozambique, and Zimbabwe) to document their stories on education, health, sport, and social inclusion using digital story format on issues.

4.1.6 Economic and Social Commission for Western Asia and the Arab Decade

4.1.6.1 The Economic and Social Commission for Western Asia (ESCWA) declared the period 2003 to 2014 as the Arab Decade of Persons with Disabilities at a summit of Arab Leaders held in Tunis in 2004. The Arab Summit decided that responsibility for overseeing implementation of the Decade lies with the Arab League and the Arab Organization of Disabled People. The main target areas identified for the Decade are as follows: education; health; legislation; rehabilitation and employment; the disabled woman; the disabled child; accessibility and transport; globalization, poverty and disability; information and awareness; and recreation and sports.

4.1.6.2 In the context of poverty reduction, the Arab Decade identifies the following objectives: (1) reducing unemployment among people with disabilities; (2) intervening to limit poverty through poverty reduction strategies and ensuring that the incidence of disability does not increase due to poverty; (3) implementing rehabilitation programs in poor areas to help low income families deal positively with persons with disabilities and working towards developing and improving the intellectual abilities and skills of persons with disabilities; (4) offering loans to PDWs who are unable to work and to those with severe disabilities to ensure a dignified existence within each country according to its means, and financial assistance to those who can work until they find gainful employment.

4.2 Council of Europe

4.2.1 The Council of Europe was established on May 5, 1949. It aims to create a common democratic and legal area, ensuring respect for its fundamental values: human rights, democracy and the rule of law. It seeks to develop throughout Europe common principles based on the European Convention on Human Rights and other instruments to protect the dignity of European nations and citizens and to promote Europe’s stability, economic growth and social cohesion. Based in Strasbourg, France, it has 47 member states across Europe.

4.2.2 Disability is a thematic issue area of concern for the Council of Europe. From 1959 to 2007, disability-related activities were carried out within the legal and financial framework of the Partial Agreement in the Social and Public Health Field. The work was steered by the Committee on the Rehabilitation and Integration of persons with disabilities (Partial Agreement) (CD-P-RR). It resulted in the elaboration of some 60 resolutions adopted by the Committee of Ministers and in the publication of about 60 reports and comparative analyses, providing useful instruments for the transfer of know-how and for social benchmarking.

4.2.3 The ideas to expand the Council of Europe disability-related activities from the Partial Agreement with 18 member states to all Council of Europe member states, and to elaborate a ten-year action plan,
were first launched at the 2nd Ministerial Conference on Disability, held in Malaga, Spain, in 2003, the European Year of persons with disabilities.

4.2.4 In 2006, the Council of Europe Committee of Ministers adopted the Recommendation Rec(2006)5 on the Council of Europe Action Plan to Promote the Rights and Full Participation of Persons with Disabilities in Society: Improving the Quality of Life of Persons with Disabilities in Europe 2006-2015. The Plan is addressed to the governments of all Council of Europe member states. The fundamental goal of the Council of Europe Disability Action Plan 2006-2015 is to help member states reinforce anti-discriminatory and human rights measures to enhance equal opportunities and independence of persons with disabilities and guarantee their freedom of choice, full citizenship, and active participation in the life of the community and improve their quality of life.

4.2.5 The Action Plan recommends specific actions along 15 key action lines, covering various spheres of life for persons with disabilities, from participation in political and cultural life to education, employment, accessibility, transport, information and communication, to health care, rehabilitation, social and legal protection, community living, research or awareness-raising. The Action Plan also acknowledges that there are persons with disabilities who face specific barriers or multiple discrimination, for example; women, children, elderly persons, and migrants with disabilities or persons with disabilities in need of a high level of support. Since their specific needs require cross-cutting approaches, the Plan regroups them under so-called “cross-cutting aspects.”

4.2.6 In 2009, the Council of Europe engagement on disability issues was further enhanced through the adoption by the Committee of Ministers of three Recommendations in the disability field:

- Recommendation on achieving full participation through Universal Design, and
- Recommendation on the education and social inclusion of children and young people with autism spectrum disorders.

4.2.7 Other Council of Europe bodies, such as the Parliamentary Assembly of the Council of Europe and the Council of Europe Commissioner for Human Rights also contribute to promoting the rights and full participation of persons with disabilities, for example by addressing parliamentarians and human rights protection bodies in member states.

4.3 European Union

4.3.1 The European Union, together with its member states, is the largest provider of development assistance. The legal parameters for European development cooperation are set forth in a variety of legal instruments, including the Amsterdam Treaty. The touchstone for European development cooperation is poverty reduction as expressed in the MDGs.

4.3.2 In 2004, the European Commission (EC) issued a Guidance Note on Disability and Development. This document provides advice to EU delegations on how to address disability within the context of development cooperation and explicitly recognizes that poverty reduction goals “cannot be met without considering the needs of disabled people” and, further, that “disabled people are still not sufficiently included in international development work funded by the EU.” The Guidance Note articulates 10 core principles intended to serve as a guide to European delegations and services, including:

1) understand the scale and impact of disability in the country setting and recognize the diversity of the population of persons with disabilities;
2) advocate and support the human rights model of disability rather than the charitable or medical approach;
3) pursue a “twin-track approach”, defined as the need to “mainstream disability issues across all relevant programs and projects and to have specific projects for disabled people”; and
4) assess, as part of the mid-term review, the extent to which country programs are
inclusive of persons with disabilities.\textsuperscript{117} In 2007, the European Parliament and the Council of the European Union establish the year 2007 as the European Year of Equal Opportunities for All.\textsuperscript{118}

4.3.3 From 2000-2009 there were some 280 projects specifically addressing disability. These projects targeted persons with both mental and physical disabilities. The main activities included: capacity building, policy development, CBR, promotion of human rights, de-institutionalization, social inclusion, and improving the data collection.

4.3.4 The European Union signed the CRPD and is poised to conclude the agreement, to the extent of its competences. On August 29, 2008, the Commission adopted and transmitted to the European Parliament and the Council two proposals concerning the conclusion by the European Community, of the UN CRPD and its Optional Protocol. On April 24, 2009, the European Parliament endorsed both proposals and furthermore, by accompanying the relevant reports with a Resolution, it acknowledged that the conclusion of this CRPD is a landmark for the European Community since for the first time it becomes a party to a core UN human rights convention. The Council is currently working on the adoption of the decision. Many of its member states have signed and ratified the CRPD, thereby triggering the inclusive development obligation in Article 32.\textsuperscript{119} It should further be noted that the European Parliament has endorsed action on inclusive development, adopting in 2006 a resolution on D&D\textsuperscript{120} that, among other things, calls on the Commission to develop a detailed, technical implementation action plan to implement its \textit{Guidance Note}, including guidelines on inclusive sector policies and an inclusive Project Cycle Management handbook; a training module for services and delegations; and annual reporting to Parliament and the Council and further calls on the Commission to ensure that there are appropriate resources allocated for disability-specific actions.\textsuperscript{121}

4.3.5 The EC has also financed a project entitled "Disability Mainstreaming" implemented by the International Disability and Development Consortium that has developed a series of tools to help staff and partners as well as organizations providing development aid to mainstream disability into their day-to-day work.\textsuperscript{122}

5. \textbf{BILATERAL DEVELOPMENT AGENCIES}

The section that follows reviews existing approaches to disability inclusion across a variety of bilateral development agencies. While the review does not purport to be exhaustive, it does seek to provide a summary overview of various approaches based on the available information.\textsuperscript{123}

5.1 \textit{Australian Agency for International Development}

5.1.1 The Australian Agency for International Development (AusAID)\textsuperscript{124} manages Australia’s development cooperation and aims to assist developing countries reduce poverty and achieve sustainable development, in line with Australia’s national interest.

5.1.2 The AusAID approach to D&D, articulated in \textit{Development for All: Towards a Disability-Inclusive Australian Aid Program 2009-2014},\textsuperscript{125} is the newest among bilateral donors and is the most detailed. The process by which it was developed was purposefully participatory, including consultation not only within and among the Australian disability community, but also including the participation of people with disability and other stakeholders in developing countries where AusAID works.\textsuperscript{126} AusAID has established a Disability Reference Group to provide ongoing strategic guidance to the Australian aid program on implementation of the strategy.\textsuperscript{127} It should also be noted that the Australian strategy is the only D&D policy to explicitly indicate the availability of the document in accessible formats, including large print, audio, acre reader and Braille, in keeping with the spirit of Articles 21 and 49 of the CRPD.
The strategy identifies a number of barriers to the inclusion of disability in development, among them, the fact that disability issues are not explicitly included in the MDGs, that there is often a lack of institutional support for disability inclusion in development, that staff may be resistant on account of lack of knowledge or skills and concerns over added workload, lack of resources or seed funding or inclusive programs and monitoring and lack of accountability mechanisms. Possible responses to address these are outlined in the Companion Volume to the strategy.

A set of six Guiding Principles underpin the strategy and will guide its implementation: (1) ensuring an active central role by persons with disabilities; (2) recognition and respect for rights; (3) respect and understanding of diversity; (4) taking the interaction of gender and disability into account; (5) focusing on children; and (6) supporting people-to-people links and promoting partnerships.

The strategy targets three core outcomes, including: (1) to support persons with disabilities to improve the quality of their lives across all facets of social, economic, political participation; (2) to reduce preventable impairments, initially focusing on avoidable blindness and road safety; and (3) leadership on disability inclusive development, which contains two strands, for Australia itself to model good practice and become an effective leader regarding disability inclusive development on a global level, and to also support the leadership of persons with disabilities including in developing leadership potential and skills. Two additional enabling outcomes are: (4) capacity-building within AusAID regarding disability inclusive development; and (5) fostering an improved understanding of D&D through developing strategic partnerships with policy staff, DPOs, partner countries, to ensure robust data and research on persons with disabilities is captured.

The Strategy adopts a “twin track” approach, noting there is a need to both mainstream disability inclusion within existing programs, and provide for disability specific initiatives. In seeking to improve quality of life (Outcome 1), the strategy aims to ensure appropriate inclusion within the framework of initially two sectors across the breadth of the aid program identified as priority areas in consultations: education and infrastructure. While the strategy stresses as part of Outcome 1 that health is not an initial priority sector “to steer clear of an overly medical focus” and “because there is already great deal underway” in AusAID’s health sector, Outcome 2 focuses entirely on prevention, specifically “reduced preventable impairments” and thus has a decidedly public health focus. Beyond the initial focus on two key sectors, the strategy also commits to providing more comprehensive support to up two partner governments initially (the nature of that support responsive to the assistance sought). As a further mainstreaming approach, the Strategy commits to ensuring that flexible programs will be reviewed to ensure that they meet the needs and priorities of persons with disabilities. As a “disability specific” initiative, the Strategy recognizes the lack of capacity of DPOs is a major barrier to empowering persons with disabilities to participate in raising awareness and engaging in advocacy. It also commits to supporting strengthening the capacity of DPOs, recognizing that “effective DPOs will become catalysts for other positive changes in inclusive development.”

While the strategy is new, it does build on programs preceding its adoption, which are varied, including disability-specific activities, programs integrated into mainstream or regular activities, as well as prevention-oriented activities. Illustrative activities include: (1) landmine survivor rehabilitation and other types of mine action, such as mine risk education; (2) community-based sport programs in which persons with disabilities are included; (3) inclusive education; and (4) disability targeted work through volunteer programs.

The Austrian Development Agency (ADA) is the operational unit of Austrian Development Cooperation (ADC). The central goals of Austria’s aid are reducing global poverty, safeguarding peace and human security, and preserving the environment. Its policies and the two policy pillars of bilateral
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and multilateral development cooperation include the MDGs and the Paris Declaration. The Federal Development Cooperation Act of 2002 (as amended 2003) sets forth development-policy criteria and includes basic principles by which programmes and projects are to be governed among them, “consideration for the needs of children and persons with disabilities.”

5.2.2 The central development-policy positions and strategic framework of ADC are defined in the Three-Year Programme on Austrian Development Policy for the period 2008–2010. The program notes Austria’s participation in the adoption of the UN CRPD and its Optional Protocol. It states the intention of ADC “to account for persons with disabilities in its programs and projects and pay due attention to inclusive development.” It further identifies as a “central concern” ensuring “participation and equal rights for persons with disabilities” and, adds that “[p]revention, rehabilitation and education are also essential to afford this group more opportunities of taking part in development.” In terms of organizational responsibility, the program states that “a special officer in ADA ensures that the rights of persons with disabilities are respected in programs and projects.”

5.2.3 In 2005, ADA’s released a focus paper on disability within the context of development cooperation. The paper identifies “seven guiding principles” to support the integration and equality of persons with disabilities: (1) recognition of the diversity of persons with disabilities; (2) inclusion of persons with disabilities in decision-making processes as stake-holders of ADC; (3) acceptance of persons with disabilities as rights-holders as opposed to recipients of charity; (4) pursuit of a “twin track” approach which recognizes both disability specific projects and the cross-cutting application of disability in development; (5) project evaluation examining the accommodation of the specific needs of persons with disabilities; (6) sustainability, embracing the social environment; and (7) a priority focus to women and children with disabilities. The paper further identifies priority sectors and themes, including poverty, environment, child mortality, particularly among girls with disabilities, the intersection of gender and disability, including the disabling effects of gender violence, and the impact of armed conflicts.

5.2.4 A review of programming reveals both disability-specific projects as well as the inclusion of disability within mainstream programs. Illustrative programs of both varieties include peace-building and conflict prevention efforts which identify persons with disabilities as one among several “target groups” and disability-specific programs run by local partner organizations. Community centers for children in Bosnia and Herzegovina and Kosovo provide disability specific support to children with psychosocial and post traumatic stress disorder issues and their caregivers, while also providing broad based community awareness of the rights of children. In Sri Lanka following the Asian tsunami, a project aiming to ensure the inclusion of some 9,000 persons with disabilities in microcredit initiatives used the strategy of coordinating with existing development project, rather than pursuing separate programming. Light for the World, an Austrian development NGO focusing on D&D is one of the flagship programs funded by ADC and is actively promoting the inclusion of disability in development.

5.3 Canadian International Development Agency

5.3.1 The Canadian International Development Agency (CIDA) was established in 1968 to administer the bulk of Canada’s official development assistance (ODA) programs. The mission of CIDA is to lead Canada’s international effort to help people living in poverty. Its mandate is “to manage Canada’s support and resources effectively and accountably to achieve meaningful, sustainable results and engage in policy development in Canada and internationally, enabling Canada’s effort to realize its development objectives.”

5.3.2 CIDA has identified certain global issues, defined as international development challenges being addressed by programming, concentrated in five sectors and relating to the achievement of the MDGs. These five sectors include: (1) governance; (2) health; (3) basic education; (4) private sector development; and (5) environmental sustainability. These five sectors are further informed by the “crosscutting themes
of gender equality or equality between men and women” and are supported by a “policy suite” consisting of 10 policies, as well as strategies and frameworks.\textsuperscript{150} There is as yet no disability policy or statement in the CIDA “policy suite.”

5.3.3 Notwithstanding the absence of a specific disability policy, CIDA has a well-established track record of supporting capacity-building for DPOs, the most prominent is the long-standing support provided by Disabled Peoples’ International, a global, grassroots, cross-disability membership organization active in more than 130 countries and headquartered in Canada. Other illustrative projects supporting disability organizations include support for the Canadian Association for Community Living, a project designed to raise awareness and engage with Canadians and Canadian-based development NGOs on the need to combat global poverty and exclusion of people with intellectual disabilities, and to ensure that international development efforts - including poverty reduction strategies and the MDGs - are inclusive of people with intellectual disabilities.\textsuperscript{151}

5.4 \textit{Department of Development Policy, Ministry for Foreign Affairs of Finland}

5.4.1 Finland’s development policy is formulated, planned and implemented by the Ministry for Foreign Affairs Department for Development Policy\textsuperscript{152} in close cooperation with other ministries, NGOs, the private sector, and Finnish society as a whole. The substance of the policy is guided by the government’s development policy program which sees development as an integral part of Finland’s foreign and security policy. Finland’s current development policy, set out in a 2007 resolution, aims to contribute to the global effort to eradicate poverty through economically, socially and ecologically sustainable development, in accordance with the MDGs.\textsuperscript{153} Priority issues include issues relating to climate and the environment in addition to crisis prevention and support for peace processes as an important element of the promotion of the social dimension of sustainable development.

5.4.2 A primary impetus for addressing disability inclusion in development across Scandinavia was a 1991 meeting of Nordic DPOs in Hanaholmen, Finland. There, participating DPOs agreed to lobby their governments for increased action on D&D. Prior to that, however, Finland started supporting the UN Office in Vienna to produce a manual on how to integrate disability in development cooperation projects.\textsuperscript{154}

5.4.3 In 1996, the Finnish government made a formal “Decision-in-Principle” to include “…the status of disabled people as a concern in the context of poverty reduction and human rights.”\textsuperscript{155} Four years later, in Copenhagen, all the Nordic ministers for development cooperation declared in concert to, among other things: “Recognize and promote the UN Standard Rules as guidelines for all bilateral and multilateral development work and to assure that special measures are taken to create accessibility and participation in development society for persons with disabilities in order to strengthen their possibilities to exercise their human rights”.\textsuperscript{156}

5.4.4 In 2003, as a result of the evaluation commissioned by the Ministry for Foreign Affairs (see note 157) a guiding note was issued by the Ministry for Foreign Affairs for the better inclusion of disability in development projects. The evaluation made by the Government Audit Office (2007), however found out, that disability issues continued largely to be outsourced to disability NGOs rather than being included in the mainstream.

5.4.5 The current Finnish Development Policy Program recognizes persons with disabilities as one of the most vulnerable groups and has made the promotion of their rights and opportunities as one of the cross-cutting objectives of all Finnish development cooperation.\textsuperscript{157} Thus, the 2007 policy states that disability is a cross-cutting theme “supported throughout all Finnish development policy”, and that “promotion of the rights of groups that are easily excluded, particularly children, persons with disabilities, indigenous people and ethnic minorities, and the promotion of equal opportunities for participation.”\textsuperscript{158}
Box 2: Finnish Development Policy Program in a Nutshell

**Key objective:** Millennium Development Goals (UN General Assembly 2000)

**Sustainability:** Economic, ecological, and social

**Priorities:**
- Climate and environment issues
- Prevention of crises
- Support for peace-building processes
- Consideration of the production and consumption habits of industrialized countries, too

**Humanity policy:** attention to the future of mankind

**Cross-cutting themes in development policy:**
- Improvement of the position of women and girls and promotion of equality
- Promotion of the rights and opportunities of vulnerable groups, such as children, persons with disabilities, indigenous peoples and ethnic minorities
- Combat HIV/AIDS as a social and health issue

5.4.6 Based on the responsibilities outlined in the Policy Program and the lessons learned from the evaluations, the Development Policy Department of the Ministry for Foreign Affairs issued a guidance directive on the integration of the crosscutting issues, including disability, in all Finnish development cooperation (May 2009). The note outlines three action lines for the implementation of the provisions concerning the crosscutting issues: (1) mainstreaming; (2) targeted components if mainstreaming does not lead to satisfactory results; and (3) including the crosscutting themes in all policy dialogue at bilateral and multilateral levels. The implementation of this approach is done by including the crosscutting issues in project cycle management and documentation, as well as in the quality criteria for project appraisal. A team to support the inclusion of crosscutting themes and to provide training and technical assistance was established at the Department. Indicators for follow up are being designed for the statistical system of the Department. Regular reporting to the Government and Parliament on the implementation of the Development Policy Program is done yearly.

5.4.7 The Ministry is also partnering with DPOs for ensuring the relevance and appropriate quality of disability projects. An umbrella organization for the development cooperation of DPOs, FIDIDA\(^{159}\) has been contracted to appraise all disability projects proposed by NGOs, as well as to provide support to DPOs for improving their capacity for development work, as well as for improving the quality of DPO implemented development projects.

5.4.8 The disability related activities of the Ministry for Foreign Affairs are being included in the Government's National Plan of Action on Disability.\(^{160}\) The Document is based on the CRPD approach and the “whole of government approach”; all government departments and agencies are responsible to implement the policy in areas that fall under their mandates. This includes the domain of the Ministry for Foreign Affairs, as well, both its traditional foreign policy mandates, as well as development cooperation.

5.5 **Germany: Gesellschaft fur Technische Zusammenarbeit**

5.5.1 The German Federal Ministry for Economic Cooperation and Development (BMZ)\(^{161}\) is responsible for the formulation of the German development cooperation which is implemented by a number of agencies including: Gesellschaft fur Technische Zusammenarbeit (GTZ), KfW (Development...
Bank), InwENT (Capacity Building International), and DED (German Development Service). Poverty reduction is the overarching goal of the German development cooperation.

5.5.2 BMZ Development Action Plan on Human Rights (2004 – 2007 and 2008- 2010) focuses on supporting social groups most affected by discrimination. In that context, it identifies persons with disabilities as among the most highly disadvantaged social groups. The 2008 - 2010 Action Plan commits to strengthening human rights in partner countries and to implementing international conventions and agreements, including the CRPD which Germany ratified in 2008.  

5.5.3 In 2006, GTZ released a discussion paper commissioned by BMZ entitled Disability and Development. This document recognizes the link between disability and poverty and specifically highlights the importance of disability inclusion in order to achieve the MDGs. The paper notes that BMZ “has committed itself to realizing the objectives of a human rights-based, inclusive development approach and a social disability model” utilizing a “human rights approach” and “implementing universally applicable human rights.” Persons with disabilities are to be included in poverty reduction strategies and processes and to have access to health and education services and social protection systems. The paper further emphasizes the need to strengthen the rights of persons with disabilities and fosters their participation in all aspects of society.

5.5.4 At the implementation level, programming adopts the twin-track approach defined as “specific measures...implemented for persons with disabilities” together with activities designed to confront structural social inequalities that are integrated into strategically important areas of development. Thus, disability-specific projects and projects in areas such as poverty reduction not solely focused on persons with disabilities but benefiting them are both prioritized under the policy. Implementation is also human rights-based in the sense that projects are “to ensure that the rights of persons with disabilities and their participation in all areas of social life are promoted in the sense of inclusive development.”

5.5.5 Illustrative examples include mainstream projects focused on providing access to health care, education, social protection services, national health insurance systems, employment, and infrastructure on the one hand and disability-specific initiatives, such as physical rehabilitation and special education facilities on the other. Rehabilitation services targeted to persons with disabilities are coupled with integration/mainstreaming programs of CBR and comprehensive public health approaches.

5.6 Irish Aid

5.6.1 Irish Aid is the Government of Ireland’s program of assistance to developing countries, administered through the Department of Foreign Affairs. Ireland has had an ODA program since 1974 and its development cooperation policy is an integral part of Ireland’s wider foreign policy and is particularly connected to the objectives of peace and justice. Irish development cooperation policies and programs are intended to reflect a commitment to human rights and fairness in international relations.

5.6.2 Responsibility for Irish foreign policy, including assistance to developing countries lies in the first instance with the Minister for Foreign Affairs. Particular responsibility for policy on Overseas Development Assistance is assigned to the Minister of State for Overseas Development at the Department of Foreign Affairs. The Development Cooperation Directorate, a Division of the Department of Foreign Affairs, is responsible for administering the Irish Aid program. It also has a coordinating role in relation to Overseas Development Assistance by other government departments.

5.6.3 The Irish Aid program prioritizes the reduction of poverty, inequality, and exclusion in developing countries and is characterized as part of the global effort to achieve the MDGs. The MDGs thus provide the point of departure for the determination of Irish Aid priority sectors in health, agriculture and food security, water and sanitation, infrastructure and roads, trade, and good governance. In addition,
the Irish development program incorporates cross-sectoral strategies on gender, governance, HIV/AIDS, and the environment into all of its development activities.

5.6.4 While Irish Aid does not have a specific disability policy, it has acknowledged that “traditionally disability has received limited attention from aid agencies and donors” and that “if the MDGs are to be achieved, the needs of disabled people must be considered alongside other development challenges by national governments, donors, international organizations, and NGOs.” The Irish Aid White Paper addresses disability within a disability-specific framework, undertaking to “examine the possibilities for increased activity in the area of D&D, such as support for specific programs to address the needs of disabled people.” Irish Aid identifies its disability work as including “programs to remove landmines and ongoing water and sanitation programs, which are central in tackling trachoma, the leading cause of preventable blindness in the world” and thereby adopts a prevention focus.

5.7 Italy: Direzione Generale per la Cooperazione allo Sviluppo (DGCS)

5.7.1 The Ministry of Foreign Affairs, and particularly its Directorate General for Development Cooperation (DGCS), is responsible for Italy’s development assistance in collaboration with other key development institutions. Italian Cooperation with developing countries aims to fight against poverty and to strengthen institutions in terms of good governance. The policy stands on two priority pillars, the first of which is the need for solidarity, and the second viewing cooperation as “a method for establishing, improving and strengthening relations among the world’s various and diverse nations and communities.” Italy frames its development cooperation in relation to the MDGs.

5.7.2 The Italian disability policy for development cooperation first situates disability as part and parcel of “fundamental human and civil rights.” The policy recognizes “multiple discrimination” experienced by persons with disabilities and commits to addressing the rights of women and minors in particular by drawing from existing international provisions (such as the Platform of Beijing), as well as already established Italian Cooperation Guidelines. Accordingly, the thrust of disability initiatives are taking specific actions to confront social exclusion and economic marginalization. Persons with disabilities “must be able to enjoy the same rights of access and participation in all activities of society (economic, political, educational, cultural, sporting, games)” and “general strategies regarding health, rehabilitation and prevention must be more strictly oriented towards achieving equal opportunities.” The policy specifically references support for initiatives that enable inclusive education, employment training and creation, and awareness on rehabilitation and prevention. The approach to the disability policy implementation is focused on ensuring participation of persons with disabilities and their organizations, adopting a multi-disciplinary approach, and supporting processes for inclusion.

5.7.3 Both disability-specific activities and mainstreaming/ integration of persons with disabilities within whole development sectors are defined as priorities. For example, social cooperatives promote employment integration by including both non-disabled and disabled persons at all levels, including decision-making and technical-operational processes. Integration with respect to employment is “to put aside the employment clichés” and train persons with disabilities as professionals. Equal access to education includes integration through (i) training of teachers; (ii) supporting parents’ organizations that include the families of both non-disabled and disabled children; while (iii) providing incentives for disabled persons to become teachers; and (iv) providing education programs that address disability-specific needs. Gender quality and children’s rights are areas of special focus.

5.7.4 Illustrative programming includes work in Albania, Angola, Bosnia and Herzegovina, Cameroon, China, Cuba, Ecuador, El Salvador, Ethiopia, Jordan, Kenya, Kosovo, Lebanon, Libya, Morocco, Montenegro, Central African Republic, Serbia, Sudan, Palestinian Territories, Tunisia, Vietnam, Yemen, and Zambia.
5.8  Japan International Cooperation Agency (JICA)

5.8.1  The Japan International Cooperation Agency (JICA) was established on October 1, 2003.176 “New JICA” was officially inaugurated on October 1, 2008 with a merger between the existing entity and the overseas economic cooperation section of the Japan Bank for International Cooperation (JBIC). JICA aims to contribute to the promotion of international cooperation and to the sound development of Japanese and global economy by supporting the socioeconomic development, recovery or economic stability of developing regions.

5.8.2  While JICA does not have a specific policy on disability as such, several policy documents inform its approach to the inclusion of persons with disabilities in its programming.177 Within JICA, disability is situated with the Social Security Division which functions as the focal point for disability issues. There is no specific budget line for disability within the agency.

5.8.3  One of the flagship disability programs supported by JICA is the Asia-Pacific Development Center on Disability (APCD) Project. Launched in 2002, it aims to encourage persons with disabilities to empower themselves through networking that involves governments and NGOs in the Asia-Pacific Region.178 APCD carries out cooperation programs with countries in the Region. In February 2009, it hosted the first Asia-Pacific Conference on “Community-based Inclusive Development: Persons with Disabilities and Their Families” in collaboration with WHO, ESCAP, and several NGOs.

5.9  New Zealand’s International Aid and Development Agency

5.9.1  Established in 2002, New Zealand’s International Aid and Development Agency (NZAID) is the agency within the Ministry of Foreign Affairs and Trade that manages New Zealand's ODA program and provides policy advice on international development issues.179 NZAID's mission is to “[s]upport sustainable development in developing countries in order to reduce poverty and to contribute to a more secure, equitable, and prosperous world.”180 NZAID has identified 10 priority issue areas in which its international development work is focused: (1) governance and leadership; (2) economic growth and livelihoods; (3) education; (4) health; (5) law and justice; (6) human rights; (7) gender equality; (8) environmental vulnerability; (9) conflict prevention; and (10) humanitarian support.

5.9.2  While NZAID does not have a disability policy as such, several core documents inform its approach to disability inclusion in its development programming. The NZAID Human Rights Statement provides an overarching policy, covering NZAID’s poverty reduction objectives and utilizing a human rights-based approach.181 The human rights principles reflected in the Statement include: universality and indivisibility, equality and equity, accountability, empowerment, inclusion, non-discrimination, and participation.

5.9.3  NZAID has funded a number of individual in-country projects throughout the Pacific region.182 Many of these include capacity-building support for DPOs.

5.10  Norwegian Agency for Development Cooperation

5.10.1  Norwegian development aid is administered through the Norwegian Agency for Development Cooperation (NORAD), a directorate under the Norwegian Ministry of Foreign Affairs.183

5.10.2  In 1999, as part of the presentation of its proposed national budget, the Norwegian Government stated that greater emphasis would be placed on measures for persons with disabilities. In its budget recommendation, a unanimous Standing Committee on Foreign Affairs recognized that development assistance for persons with disabilities is to be given priority and noted the need for a coherent and coordinated effort, in which the rights of persons with disabilities would be included in bilateral and multilateral assistance. The Committee further stressed the need for guidelines and an overall plan to
ensure that development assistance for persons with disabilities is in accordance with sound principles and principles of human rights.

5.10.3 This commitment led to the adoption of the Norwegian Plan for the Inclusion of Persons with Disabilities in Development Cooperation, prepared by the Ministry for Foreign Affairs in November 1999. The plan instructs NORAD to draft a plan for the operationalization and use of measures in the efforts to provide bilateral aid to persons with disabilities and notes that the plan “will ensure that these efforts are carried out in accordance with sound principles and principles of human rights.”

5.10.4 In 2002, NORAD’s plan of action, The Inclusion of Disability in Norwegian Development Cooperation was published. The plan covers Norwegian policy towards disabled persons, relevant international agreements and conventions, including discussion on challenges linked to D&D issues and the second section sets forth practical guidelines for how the work can be implemented (box 3).

Box 3: The Inclusion of Disability in Norwegian Development Co-operation

Persons with disabilities must be included in all six areas for development cooperation and in cooperation with civil society and other partners:

1. Social development: include persons with disabilities in the development of mainstream services in all sectors: health, education, water and sanitation, and transport, etc.

2. Economic development: include persons with disabilities in employment policy, business, all aspects of income generating opportunities, and appropriate vocational training.

3. Peace, democracy and human rights: through human rights approach to community development, and through participation in the development of democratic decision-making processes, and in reconciliation efforts in post-war societies.

4. Environment and natural resource management: through the prevention of pollution and the provision of safe work in order to prevent disabilities; through giving persons with disabilities equal share of access to, and management of natural resources.

5. Humanitarian assistance in the event of conflicts and natural disasters: by ensuring their equal access to humanitarian assistance and by their inclusion in the planning process.

6. Women and gender equality: by making sure that women and children with disabilities are included in all aspects of programs and projects.

Source: Based on NORAD (2002a).

5.10.5 Illustrative programming includes support for the trust fund at the World Bank that supports the inclusion of disability in the World Bank’s projects; support for the UNESCO flagship on inclusive education, of which part of the secretariat is based in Oslo; support for conferences on inclusive development, including the Nordic Conference on Disability in Development held in November 2000; and support for comprehensive data collection and analysis on the living standards of disabled people in Southern Africa (through SINTEF).

5.11 Swedish International Development Cooperation Agency (SIDA)

5.11.1 The Swedish Policy for Global Development (PGD) adopted by the Swedish Riksdag (Parliament) in 2003, states that all persons are entitled to human rights, regardless of their sex, age, disability, ethnic origin, or sexual orientation. The principal agency responsible for Sweden’s development programs is the Swedish International Development Agency (SIDA), whose work is guided
by the Universal Declaration of Human Rights and by international human rights conventions, including its disability policy. The Swedish Policy “is to be permeated by two perspectives: a rights perspective and the perspective of the poor.” SIDA’s poverty policy underlines the importance of carrying out thorough poverty analyses that include the situation of persons with disabilities and facilitate their participation in social development.

5.11.2 In 2005, SIDA adopted a disability position paper, *Position Paper: Children and Adults with Disabilities*, in which it states: “Development cooperation is to be characterized by an equality perspective in which all people are of equal value” and that an equality perspective that contribute to the elimination of discrimination against persons with disabilities encompasses the principal aim of the paper. SIDA emphasizes that the “situation of persons with disabilities shall, therefore, generally be taken into consideration in SIDA’s overall development analysis and in planning, implementation, M&E activities.” The position paper identifies the following “areas of special strategic importance in improving the situation of persons with disabilities” where SIDA will work: (1) PRSPs; (2) schools, education and research; (3) health and rehabilitation/ habilitation; (4) HIV/AIDS; (5) armed conflicts and humanitarian assistance; (6) infrastructure; (7) information and shaping opinion; and (8) support to civil society and other networks.

5.11.3 Illustrative programs supported by SIDA include support for the inclusion of persons with disabilities in electoral processes, including programs implemented by the International Foundation for Election Systems with local DPOs, research of assistive technology in Latin America, and projects to ensure the inclusion of DPOs in HIV/AIDS education and outreach.

5.12  United Kingdom Department for International Development

5.12.1 The Department for International Development (DFID) was established in 1997 with the elimination of poverty as its overall aim, marking a departure from an earlier emphasis on economic development. The new objective was set out in the 1997 *White Paper, Eliminating World Poverty: A Challenge for the 21st Century.*” The 1997 White Paper committed the government to contributing to a set of poverty reduction targets. These targets included halving the proportion of people in developing countries living on less than one dollar a day, and substantial reductions in child and maternal mortality by 2015. Since that time, two acts of parliament have placed development higher on the national agenda, with the International Development Act 2002 clarifying the purpose of aid spending as poverty reduction and the International Development (Reporting and Transparency) Act of 2006 defining DFID’s annual parliamentary reporting process.

5.12.2 In 2000, DFID launched an issues paper entitled *Disability, Poverty and Development*. This document reflects the social model of disability and articulates a “twin-track” approach that “both encourages specific projects to address the needs of disabled people, as well as wider efforts to mainstream disability equality into wider poverty reduction strategies, where appropriate to do so.” This approach was developed prior to the adoption of the CRPD, and references the UN Standard Rules and the equalizations of opportunities of persons with disabilities.

5.12.3 The 2000 paper was followed by a 2004 Knowledge and Research Project led by disabled people exploring the mainstreaming of disability in development work and involving a mapping study of DFID’s activities on disability. Thereafter, DFID commissioned a project in 2005 undertaken by the UK Council of Disabled People to research the effectiveness of DFID’s processes and procedures at promoting disability equality in developing countries.

5.12.4 The 2006 White Paper *Eliminating World Poverty: Making Governance Work for the Poor* reaffirmed the government’s commitment to achieving the 2015 targets and set out proposals for managing international governance in a way that increases the opportunities for the world’s poor and emphasized that the MDGs are a main focus of the work of DFID.
5.12.5 In 2007, DFID released a practice paper entitled, How to Note: Working on Disability in Country Programs. The document sets forth the rationale for prioritizing disability inclusion in development, underscoring the link between poverty and disability and the importance of including disability in MDGs, emphasizing the impact of disability on the household and wider economy, and noting that disability is a human rights issue and that disability equality is a government commitment under the Disability Discrimination Act.

5.12.6 Illustrative disability programming supported by DFID discloses both disability-specific initiatives as well as disability components within the framework of mainstream programs. DFID’s “targeted work on disability,” or, disability-specific programming, supports DPOs, government partners and other CSOs to influence disabled people’s access to services and assets; the voice and agency of disabled people; the legal and policy framework; and/ or discriminatory attitudes and behavior. An example of disability-specific DFID work includes work with the Southern African Federation of the Disabled (SAFOD) on a four-year research program, as well as thematic research on education and HIV/AIDS. The objectives of the program are to build the capacity of DPOs to undertake research and influence policy development. DFID’s work “to promote mainstreaming across DFID programs” focuses on specific actions for budget support, education, health, water and sanitation, social protection, civil society programs, and humanitarian and conflict settings. Illustrative examples include DFID India’s support for the Government of India’s universal primary education program and the Reproductive and Child Health Program, both of which include disability-specific indicators which enable the government and donors to track progress for disabled people. DFID Malawi supported the Federation of Disability Organizations in Malawi to ensure that disabled people were included in HIV/AIDS policies and have equal access to information. And in Mali, DFID partners the WaterAid and SightSavers International to adapt village wells to enhance access to water for persons with disabilities.

5.13 United States Agency for International Development

5.13.1 The United States Agency for International Development (USAID) is the principal U.S. agency working to provide assistance to countries recovering from disaster, trying to escape poverty, and engaging in democratic reforms. USAID is an independent federal government agency that receives overall foreign policy guidance from the Secretary of State. Its work supports long-term and equitable economic growth and U.S. foreign policy objectives through programming in economic growth, agriculture and trade; global health; and democracy, conflict prevention, and humanitarian assistance. Within USAID, the Bureau for Policy and Program Coordination and the Agency’s Disability Team have responsibility for the Agency’s disability policy and guidelines.

5.13.2 In 1991, the General Accounting Office undertook an investigation of the inclusion of disability into US foreign assistance programming in developing countries and, among other conclusions, found that while such programs were directly relevant to persons with disabilities, disability inclusion remained “sporadic” and concluded that USAID “does not generally attempt to target the disabled in its regular bilateral assistance programs…”. Thereafter, in 1996, the U.S. National Council on Disability (NCD) issued a report entitled Foreign Policy and Disability, reviewing the activities of the U.S. Department of State, USAID, and the U.S. Information Agency and concluding that “the United States does not have a comprehensive foreign policy on disability” and that “neither the spirit nor the letter of the U.S. disability rights laws is incorporated into their activities of the principal foreign policy agencies.”

5.13.3 In 1997, USAID, noting the NCD report and recommendations, issued USAID Disability Policy Paper, a non-binding guidance note. The policy articulated in the 1997 document was grounded in the principle of non-discrimination, as reflected in American disability civil rights, with the objective “[t]o avoid discrimination against persons with disabilities in programs which USAID funds and to stimulate an engagement of host country counterparts, governments, implementing organizations and other donors in promoting a climate of nondiscrimination against and equal opportunity for persons with disabilities.”
And, further “to promote the inclusion of persons with disabilities both within USAID programs and in host countries where USAID has programs.”  In November 2004, USAID made the 1997 Disability Guidelines part of USAID policy, thereby requiring that a disability component be integrated throughout all USAID funded programs. The specific objectives of the USAID Disability Policy are (1) to advance the U.S. 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; (2) to increase awareness about disability issues within USAID programs and in host countries; (3) to engage other U.S. government agencies, host country counterparts, governments, implementing organizations and other donors in fostering a climate of nondiscrimination against persons with disabilities; and (4) to support international advocacy for persons with disabilities.

5.13.4 The 1996 NCD report was followed by another NCD review in 2003. In subsequent years, several key developments occurred, particularly within the context of USAID programming. In response to the 2003 NCD Report, the USAID Administrator appointed Lloyd Feinberg to serve as the Agency’s Disability Coordinator to oversee the implementation of the Disability Policy. And, in an effort to deepen its institutional commitment to inclusive development, USAID established two policy directives which (1) require contracting officers 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; and (2) require that contractors and recipients of USAID funding comply with standards for accessibility in all new construction, as well as in renovations of structures, facilities, or buildings. The solicitation policy calls for inclusion of the policy in the standard clauses of the solicitation but it does not require the policy to be referenced or integrated into the selection criteria. The policy on inclusive infrastructure has a waiver process and also lists various exceptions, including for emergency construction, such as during times of natural disaster.

5.13.5 USAID has issued five reports on the implementation of the USAID Disability Policy, the most recent of which was issued in December 2008. In its Fifth Report on the Implementation of USAID Disability Policy, USAID makes the following recommendations to further advance the implementation of its disability policy: (1) increase outreach to and consultation of DPOs and disability leaders by USAID missions, offices, and bureaus; (2) systematize the inclusion of disability into USAID program selection criteria; (3) increase formal and non-formal training opportunities and raise awareness of inclusive practices for staff, implementing partners and DPOs; and (5) increase the number of missions with disability plans.

5.13.6 Illustrative programs include efforts to ensure that USAID staff is sensitized on inclusive development in addition to ensuring that USAID is implementing disability inclusive programming, whether through disability-specific project or by including a disability dimension into a regular program. USAID/Ecuador worked to sensitize all of its employees on inclusive practices and to identify and confront barriers to ensure that persons with disabilities have equal access to USAID programs, including programs in democracy and governance, employment, and the environment. The mission has a comprehensive disability plan in place that it has shared with its stakeholders that includes the appointment of a disability focal point for the mission and a requirement that all new staff members take the USAID e-learning course titled “Inclusive Development.” The mission also employs an individual with a disability as a senior staff member. The mission hosted seminars on accessibility and inclusive practices for USAID implementing partners. Ecuador also supports several program initiatives that target persons with disabilities, including a workforce labor insertion program through the National Federation of Ecuadorians with Physical Disabilities (Federatión Nacional de Ecuadorianos con Discapacidad Física) and an economic opportunities program that offers computer training in partnership with Microsoft. In Vietnam, USAID supports legal and regulatory reforms, educational mainstreaming, and increased economic opportunities for Vietnamese with disabilities. A final example includes a project implemented by American Institutes for Research to develop pilot programs and advocacy strategies to address the needs and to protect the rights of individuals with disabilities, working in three countries where USAID
has a significant presence. The pilot projects aim to increase opportunities for individuals with disabilities to be involved in (a) the design and implementation of programs to improve the quality of basic education in Pakistan, (b) more equitable participation in democracy and governance in Mexico, and (c) ways to combat the spread of HIV/AIDS in Zambia. The project also include the design and convening of training sessions for USAID and its implementing partners to foster a greater understanding of the strategies needed to advance inclusive development.²¹⁰

Box 4: Recommendations for USAID Missions, Bureaus, and Offices

USAID encourages all USAID missions, bureaus, and offices to do the following:

• Develop a disability plan, and disseminate the plan to all implementing partners, government agencies, donors, and other stakeholders.
• Coordinate and consult with DPOs to receive advice on integration, and use DPOs as a resource to assess the inclusiveness of current and future programs.
• Appoint a disability focal point within the mission to ensure the full integration of PDWs, coordinate disability related activities, and implement the disability plan.
• Ensure that staff members take the e-learning course, and encourage other staff development activities related to increasing the knowledge of inclusive practices.
• Conduct annual reviews of their programs in relation to the inclusion of persons with disabilities.
• Establish a mechanism to identify, document, and distribute best practices.²¹¹

5.13.7 Efforts to advance disability inclusion on overseas programs have been buoyed by the creation of a Federal Advisory Committee on Persons with Disabilities on June 23, 2004, and re-chartered in June 2006 and June 2008.²¹² The Committee serves the U.S. Secretary of State and the USAID Administrator in an advisory capacity on the interests of persons with disabilities in formulation and implementation of U.S. foreign policy and foreign assistance.

5.13.8 In September 2009, NCD commissioned a third study and launched a project that will examine in detail the extent to which foreign assistance programming across various sectors is inclusive of persons with disabilities. The project will also include an analysis of the implementation of the USAID Disability Policy.

6. Conclusions

6.1 This review examines at existing policies of major multilateral and bilateral agencies, which they have employed to include disability in development aid. It also provides, whenever possible, examples of their programs. This review does not assess the merits or impact of any of the policies or practices presented. It provides a preliminary mapping of existing policies and practices in order to present a summary overview of developments and emerging trends in efforts to include disability related issues in development aid.

6.2 Disability has become a part of international cooperation and development aid. It is found that all reviewed agencies have included disability in either their policies and/ or programs. Some policies and programs are new, others are long-established. In most of the cases, the inclusion is explicit, underpinned by relevant policy frameworks defined by resolutions, strategies, actions plans and other
national, regional and international instruments, and effectuated through development aid programs. In some cases, while specific disability policy framework is absent, disability is an integral part of the implemented programs.

6.3 **International cooperation policies often link disability to MDGs.** A vast majority of the reviewed policies link the achievement of MDGs to the inclusion of disability in development. The MDG 1 – Eradicating hunger and extreme poverty, and 2 – Achieve universal primary education, are most frequently mentioned in this context, pointing that neither of them is likely to be achieved, unless issues specific to poverty and access to education among persons with disabilities are adequately addressed.

6.4 **The policies and practices reviewed often combine several approaches to frame the inclusion of disability in development cooperation.** They include human rights, participation, inclusion and development. A human rights-based approach is increasingly being used in conjunction with other approaches for the inclusion of disability into international cooperation policies and programs. The human rights-based approach is either disability specific, or informed more generally by international and/ or domestic human rights framework.

6.5 **With respect to implementation and practice, the prevailing trend is to incorporate disability-specific/ targeted and mainstreaming/ inclusion/ integration programs.** Most of the surveyed agencies combine approaches and instruments to include disability in development cooperation and aid. Thus, their programs would typically include: (i) disability specific programs, targeting persons with disabilities and their specific needs; (ii) disability-specific components that are appended to mainstream programs; and (iii) persons with disabilities and their specific needs are addressed within the framework of mainstream programming and across sectors. Differences in this regard seem to be a matter of degree and emphasis, not necessarily distinct approaches.

6.6 **Policies and programs are dynamic and have changed over time.** The review covers policies and programs aimed at including disability in international cooperation and development aid over the last 15 years. Although the period is short, the changes have been quite rapid, reflecting international developments with regards to disability which have culminated in the adoption of the CRPD.

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2 The CRPD broadly describes persons with disabilities as “those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others”. CRPD Article 1: Purpose, p. 4.


4 See CRPD Art. 4(3).

5 See CRPD Art. 32. It should be noted that the Article 4(3) obligation on participation, along with the Article 3 general principle of participation and inclusion, are to be read and applied across the CRPD text, thereby triggering an obligation to consult with disabled persons and their representative organizations in formulating and implementing the inclusive development mandate of Article 32(1).

6 See UN 1971.

7 See UN 1975.
8 In 2001, the WHO’s International Classification of Functioning, Disability and Health (ICIDH-2) adopted a biopsychosocial approach, which integrates the medical and the social model of disability. “ICIDH-2 is based on an integration of these two opposing models. In order to capture the integration of the various perspectives of functioning, a “biopsychosocial” approach is used. Thus, ICIDH-2 attempts to achieve a synthesis, thereby providing a coherent view of different perspectives of health from a biological, individual and social perspective.” See WHO 2001.

9 See UN 1981b.

10 See UN 1982c.

11 See UN 1982b.

12 Ibid. at paras. 87-90 (providing, inter alia, that “Member States should urgently initiate national long-term programs to achieve the objectives of the World Programme of Action; such programs should be an integral component of the nation’s general policy for socio-economic development.”).

13 See UN 1982a.

14 Ibid. at paras. 170-175, 176-183. Its three chapters provide an analysis of principles, concepts and definitions relating to disabilities; an overview of the world situation regarding persons with disabilities; and set out recommendations for action at the national, regional and international levels. It makes reference to the human rights of persons with disabilities and also contains detailed provisions on technical and international cooperation, including development assistance and regional and bilateral assistance.

15 See UN 1993.

16 Ibid. at ¶ 1, Part IV. The UN Standard Rules establish a monitoring mechanism through the appointment of a Special Rapporteur who reports to the Commission on Social Development. The Standard Rules provide general guidance on how to take into account the disability dimension in technical and economic cooperation. While non-binding, the Standard Rules represented a significant step in outlining a comprehensive framework for addressing the rights of persons with disabilities. The Standard Rules reaffirm the principle of inclusive policies, plans and activities and specify: “The needs and concerns of persons with disabilities should be incorporated into general development plans and not be treated separately.”

17 See GTZ 2006.


19 See UN 1989.

20 See UN 1981.

21 See UN 2001. [Emphasis added].


23 See CRPD at preambular para. (e).

24 Ibid. at preambular para. (p).

25 Ibid. at preambular para. (t).

26 Ibid. at art. 40. The term “States Parties” in the international law of treaties refers to those States that have ratified a treaty and are therefore bound to comply with its obligations, subject to permissible reservations, declarations and understandings.

27 Thus, for example, the Mine Ban Treaty implementation process includes regular meetings of States Parties which have provided an important forum for the reporting on and sharing of best practices in Mine Ban Treaty implementation, including programming and expenditures on assistance to landmine survivors. See UNMAS 1997.
28 *Ibid.* at art. 32(1). “States Parties recognize the importance of international cooperation and its promotion, in support of national efforts for the realization of the purpose and objectives of the present Convention, and will undertake appropriate and effective measures in this regard, between and among States and, as appropriate, in partnership with relevant international and regional organizations and civil society, in particular organizations of persons with disabilities.”


30 For a discussion of the MDGs and their implicit, but unstated, link to disability issues, see IDDC 2005.


32 See UN 2009a.

33 The Secretariat is jointly staffed by the UNDESA and the OHCHR.

34 See WHO 2009.

35 Accra Agenda for Action, 4 September 2008, available at: http://siteresources.worldbank.org/ACCRAEXT/Resources/4700790-1217425866038/AAA-4-SEPTEMBER-FINAL-16th00.pdf. (“Developing countries and donors will ensure that their respective development policies and programs are designed and implemented in ways consistent with their agreed international commitments on gender equality, human rights, disability, and environmental sustainability.”). Para. 13.

36 The CEB brings together the executive heads of UN system organizations and specialized agencies.

37 For a summary of the work of the IASG, see UN 2009c.

38 *Ibid.* at para. 6. The membership of the IASG consists of: the Secretariat, specifically UNDESA and OHCHR, FAO, ILO, UNDP, UNESCO, UNFPA, UNWTO, UNICEF, UNHCR, WHO, UNIDO and, UN-HABITAT; and the regional commissions: ECA, ECE, ECLAC, ESCAP, ESCWA (See the Abbreviations and Acronyms for full names).

39 The core group includes the UNDESA, OHCHR, and ILO.

40 The UN agencies and programs highlighted herein are by no means exhaustive, rather, they are indicative of the range of measures being undertaken across the UN system to better take into account the needs of persons with disabilities. Many others not detailed here are, of course, significant, including for developing countries. Thus, for example, the International Civil Aviation Organization (ICAO), has approved recommendations for states concerning accessible facilities for passengers with disabilities and the Executive Committee of the Universal Postal Union (UPU), has promulgated recommendations for national postal administrations to improve access to their facilities for disabled persons.

41 For information on this program, see http://www.un.org/esa/socdev/enable.

42 See generally http://www.ohchr.org/EN/AboutUs/Pages/WhoWeAre.aspx

43 See generally A/RES/48/41 para. 4 and http://www.ohchr.org

44 Written submission of the UNHCR to the Secretary-General’s High-Level Panel on UN System-wide Coherence in the areas of development, humanitarian assistance and the environment (Nov. 9, 2006), available at: http://www.un.org/events/panel/resources/pdfs/HLP-SWC-FinalReport.pdf


46 See generally http://www.undp.org/about/

47 CRPD Status, *supra* note 41 at para. 28.


49 See generally http://www.fao.org/about/en/


51 For information regarding the programs, see http://www.fao.org/english/newsroom/highlights/2000/001106-e.htm
52 See http://www.ilo.org/global/About_the_ILO/lang--en/index.htm
53 See ILO 1983b.
54 See ILO 1983a.
55 See CRPD Status, supra note 40.
56 See generally http://www.unicef.org
58 See UN 1989.
59 See UNICEF 2009.
60 CRPD Status, supra note 41 at para. 40
61 Ibid. at para.59.
62 Id. at para. 48.
64 See generally http://www.inclusionflagship.net/flagship.shtml
65 CRPD Status, supra note 41 at para. 39.
66 See generally http://www.unfpa.org/about/index.htm
67 Ibid.
68 Ibid.
69 Its Executive Director has, for example, issued two statements in support of the CRPD. See UNFPA Press Release, Statement by Thoraya Ahmed Obaid, Executive Director, UNFPA on International Day of Families, May 2007, available at: http://www.unfpa.org/public/News/pid/130 (Pledging the support of UNFPA “to protect the reproductive rights of persons with disabilities and ensure universal access to sexual and reproductive health” and calling on governments “to sign and ratify the CRPD and put its provisions into practice.”). See also Press Release, Statement by Thoraya Ahmed Obaid, Executive Director, Statement on the International Day of Disabled Persons, available at: http://www.unfpa.org/public/News/pid/159
71 See UNFPA 2007.
72 See UNFPA 2008.
73 CRPD Status, supra note 41 at para. 42.
74 Ibid.
75 See generally http://www.unhcr.org/pages/49c3646c2.html
76 See generally http://www.unchs.org/
78 CRPD Status, supra note 41 at para. 51.
79 See generally http://www.mineaction.org/overview.asp?o=22
80 See UNMAS.
81 CRPD Status, supra note 41 at para. 49.
According to the UNMAS webpage on human rights, “The Convention has particular significance for mine action as it details the rights of survivors of mines and explosive remnants of war. While the Convention does not identify new rights, it provides guidance on how to ensure that persons with disabilities can exercise their existing rights without discrimination. It provides a solid legal framework for the provision of victim assistance to survivors of mines and explosive remnants of war.”

See generally http://mineaction.org/overview.asp?o=1120

See generally http://www.unido.org/index.php?id=7840

See WHO 2006.

Thus, for example, assistive devices and technology for persons with disabilities are linked to Articles 20 and 26 of the CRPD. See DAR, Assistive Devices and Technologies, available at: http://www.who.int/disabilities/technology/en/


CRPD Status, supra note 41 at para. 54.

Notably, WHO has developed Guidelines the Provision of Manual Wheelchairs in less Resourced Settings and developed an informal alliance (persons with disabilities, NGOs, donors, INGOs, etc.) to work together on implementing articles 20 and 26 of the CRPD as they relate to mobility devices. A position paper on mobility devices is under development.

WHO, in collaboration with the Law College of the Indian Law Society (ILS) in Pune, India, has established the International Diploma on Mental Health Law and Human Rights, a course of study that aims to build the capacity of key actors in countries to enable them to participate in advocacy, legal and policy reform.

For more information, see http://www.g3ict.org.

Ibid.

Ibid.

For more information, see http://www.worldbank.org

See generally http://www.unescap.org/

CRPD Status, supra note 41 at para. 55.

For more information, see http://www.worldbank.org

Established by Resolution (59) 23 and revised by Resolution (96) 35

The texts adopted in the framework of the Partial Agreement in the Social and Public Health Field included:

Recommendation No R (92) 6 on a coherent policy for persons with disabilities; Resolution ResAP(95)3 on a charter on the vocational assessment of persons with disabilities; Resolution ResAP(2001)1 on the introduction of the principles of universal design into the curricula of all occupations working on the built environment; Resolution ResAP(2001)3 “Towards full citizenship of persons with disabilities through inclusive new technologies”; Resolution ResAP(2005)1 on safeguarding adults and children with disabilities against abuse.
107 See http://www.socialdialogue.net/docs/si_key/CofEurope_060405_%20Rec_2006_5_Disability_Action_Plan.pdf

108 It was launched at the European Conference “Improving the Quality of Life of persons with disabilities in Europe: Participation for All, Innovation, Effectiveness”, held under the Russian Federation Chairmanship of the Committee of Ministers in cooperation with the Norwegian Presidency of the Nordic Council of Ministers, 21-22 September 2006, St. Petersburg, Russian Federation.


111 See Recommendation CM/Rec(2009)9: https://wed.coe.int/ViewDoc.jsp?id=1526657&Site=CM&BackColorInternet=C3C3C3&BackColorIntranet=EDB021&BackColorLogged=F5D833


114 For a useful summary of EC funding both for projects within members states, as well as development aid beyond the EU, see Waddington 2009. It should be noted that the overall European approach to disability is in a rapid state of development. At the end of the European Year of People with Disabilities in 2003, the Commission launched a Communication entitled Establishing Equal Opportunities for People with Disabilities: A European Action Plan, 2003-2010 (COM/2003/650), that provided the framework for the European disability policy. This framework Communication identified three pillars for the European Disability Action Plan as well as one key strategic objective with a time horizon of 2010: legislation, mainstreaming disability issues in relevant Community policies and processes, improving accessibility for all, and involving and supporting stakeholders. Every two years the Commission identifies a set of priorities in the context of the European Disability Action Plan. Many of those actions are based on the mainstreaming of disability. The Presidency Conclusions of 2007 following the first informal meeting of ministers responsible for disability matters called for a coherent and coordinated approach for the implementation of the UN Convention in Europe and for the identification of common challenges and solutions. Council Resolution (2008/ C 75/01) invites the Commission to begin work on a new European Disability Strategy to succeed the current DAP assessing how national actions reflects EC and MS commitments to fully implement UN Convention and considering setting consistent and comparable national targets to that end.


116 Ibid. at 3.

117 Ibid. at 10-12.


119 The CRPD has a double application to the EC. On the one hand it applies within the Community competence. The legal basis for the signing of the CRPD by the EC as a matter of European law rests in Article 13 of the Treaty of Amsterdam on non-discrimination and Article 95, addressing market harmonization. The Community competences will be declared in the document for conclusion of the CRPD (see proposal for Conclusion of the CRPD and its Optional Protocol COM (530) 2008. Furthermore pursuant to art 300.7 TEC, the CRPD applies in its entirety to the European institutions. Signature and conclusion or accession by a regional integration organization is permitted pursuant to Article 44 of the CRPD. See Proposal for a Council Decision on the signing, on behalf of the EC, of the CRPD and its Optional Protocol, COM (2007) 77, final, 27 February 2007. For an excellent treatment of the implications of CRPD ratification for the EC, see Waddington 2009, supra note 210.

121 Ibid.

122 For more information, see http://www.make-development-inclusive.org/index.php?spk=en

123 In this regard, access to information on bilateral development agencies, and in particular on their approach to disability, varies considerably. In some cases, interviews were conducted in order to supplement information. In other cases, interviews were not possible.


125 See AusAID 2008.

126 See Pratt 2009.

127 For more on the Reference Group, including its Terms of Reference, see http://www.ausaid.gov.au/hottopics/topic.cfm?ID=5848_9505_6245_8952_1116

128 AusAID Disability Strategy, supra note 139 at p. 36.

129 See especially Companion Volume, supra note 144 at Section 5.

130 AusAID Disability Strategy, supra note 139 at p. 11.

131 Ibid. at 12.

132 For more discussion, see Companion Volume, supra note 144, Section 5.

133 Ibid. at 19, 22.

134 The range of support that might be considered is broadly discussed in the Companion Volume, supra note 144 at 198-200.

135 AusAID Disability Strategy, supra note 139 at 19.

136 Ibid. at 13.

137 See generally http://www.entwicklung.at/en/development-policy/austria.html. The Federal Ministry for European and International Affairs plans the strategies and programs and ADA implements these together with public institutions, NGOs, and enterprises.

138 Others include the right of partner countries to choose their own way of development, respect for cultural diversity, and gender equality.

139 See Federal Ministry for European and International Affairs 2008.

140 Austria ratified the CPRD and its Optional Protocol on Sept. 26, 2008. For a complete list, see UN Enable, Convention and Optional Protocol Ratifications and Signature, available at: http://www.un.org/disabilities/countries.asp?id=166

141 See Federal Ministry for European and International Affairs 2008.

142 Ibid.

143 Ibid.

144 See ADC 2005.

145 Ibid.

146 Ibid. at 3.

147 Ibid. at 4.


See CIDA 2009.

See generally http://www.cacl.ca/English/projects/CIDA.asp


See Wilman (ed) 2003.

See STAKES 2003.

See NDC 2002.

See Ministry for Foreign Affairs of Finland 2007.

Ibid. at 16.

Finnish Disabled Peoples Development Cooperation Association.

The Action Plan is expected to be finalized in Spring 2010.

See generally http://www.bmz.de/en/

See BMZ 2008.

See GTZ 2006.

Ibid. at 10.

Ibid. at 2.

Ibid. at 11.

Ibid.

Ibid. at 13.

See http://www.irishaid.gov.ie/about.asp

See Irish AID 2006.

Ibid. at 16.

See generally http://www.cooperazioneallosviluppo.esteri.it/pdgcs/inglese/intro.html

Ibid.

See GDDC (no date).

Ibid.

See About JICA, available at: http://www.jica.go.jp/english/about/organization/

Guidelines for Environmental and Social Considerations; Making Development Projects Inclusive/ Accessible for Persons with disabilities in ODA Loan Operations and set of Thematic Guidelines on Disability which were given approval by the Director of JICA.

See JICA 2008.

See NZAID 2002a and 2009.

Ibid.

See NZAID 2002b.

Ibid. at 25-26 for a summary of such projects.

See generally http://www.norad.no/en/About+Norad
As part of its campaign promise, the government elected in May 1997 pledged to create a new department for international development headed by a cabinet minister. Prior to that time, UK development cooperation was overseen by the Overseas Development Administration, a division within the Foreign and Commonwealth Office.

For a helpful overview of the history of UK overseas aid, see [website](http://www.dfid.gov.uk/About-DFID/History/).

See DFID 2002.


See DFID 2007.

The origins of USAID may be traced to the Marshall Plan reconstruction of Europe after World War II and the Truman Administration's Point Four Program. In 1961, the Foreign Assistance Act was signed into law and USAID was created by executive order. See [website](http://www.usaid.gov/about_usaid/).

It should be noted that while USAID is the lead agency for international development assistance, there are a number of other agencies that implement international development programming, including, for example, the U.S. Department of State, the Department of Defense, and the Department of Labor, among others.

For more details see [website](http://www.usaid.gov/about_usaid/).

See [website](http://www.usaid.gov/about_usaid/disability/).

See NCD 1991. NCD recommended (1) creating a comprehensive foreign policy on disability to advocate for PERSONS WITH DISABILITIES through activities on international levels; (2) extending U.S. disability law by legislation or executive order to include unambiguously the international operations of the U.S. government; (3) employing domestic standards of nondiscrimination in U.S.-sponsored international activities; (4) training U.S. foreign affairs agencies and their contractors to plan for programmatic accessibility; and (5) establishing the principle that no U.S. international activity should have a lower standard of inclusion than its domestic correlate. *Id.*

See USAID 1997.

Notably, the 1997 Policy Paper takes the position that: “While the Americans with Disabilities Act applies to U.S. citizens (including USAID employees) overseas, it does not apply to non-U.S. citizens, who are the primary beneficiaries of USAID programs. The USAID disability policy is thus in part an effort to extend the spirit of the Americans with Disabilities Act in areas beyond the jurisdiction of U.S. law.”


These reports are available on the USAID website at: [website](http://www.usaid.gov/about_usaid/disability/).
210 See USAID 2008.

211 Ibid.

REFERENCES


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______. 1982a. UN General Assembly resolution 47/3, para. 173.


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