



Au Courant

Disability-inclusive development

July 2023

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When we consider the impact of our policies, programs, trade agreements, and diplomatic relations, how often do we take into account the special needs of [1.3 billion people globally who are living with disabilities](#)? When the earth quakes, who is able to evacuate? How many people are deprived of quality education and economic opportunities due to a lack of reasonable accommodations in schools, refugee camps and workplaces across the world?

Canada’s endorsement of disability-inclusive development (DID) is clear. In 2010, Canada ratified the [Convention on the Rights of Persons with Disabilities](#). In 2017, the Feminist International Assistance Policy adopted an intersectional human rights approach that takes into account all forms of discrimination, including discrimination based on ability. The December 2021 [mandate letter](#) of the Minister of International Development directs Global Affairs Canada (GAC) to provide greater assistance to people with disabilities in developing countries through development assistance programming.

Moreover, the Auditor General’s March 2023 performance audit report, [International Assistance in Support of Gender Equality](#), notes that our department could better integrate intersecting identity factors, including disability, in project-level gender equality assessments. This is in line with the intersectional framework of Gender-Based Analysis Plus and the Government of Canada’s commitment to consider how groups of people have multiple and diverse intersecting factors that affect how they experience government initiatives and policies.

This issue of *Au Courant* aims to raise awareness about this commitment, clarify key concepts, and help address DID in policies and programs. The authors ask us to recognize the magnitude of the challenges. For instance, I was surprised to read in Chalklen and Katsui’s article that, between 2014 and 2018, less than 2% of all international assistance projects targeted persons with disabilities and less than 0.5% of all international assistance targeted disability inclusion.

Yates-Rajaduray, Egan and Musselman point to the economic and social challenges faced by people with episodic disabilities caused by chronic conditions. Sharma turns the spotlight on inclusive education, given that the world’s 240 million children with disabilities are much more likely to have never attended school than children who do not experience disability. Buyer, Macharia, Nduta and Delorme call for efforts to ensure that refugees with disabilities can access safe and respectable livelihoods in refugee camps.

Our GAC colleague Ruvimbo Chidziva clarifies the key concepts at the heart of disability-inclusive development. Louis and Baranyi highlight the urgent and unmet needs of persons with disabilities in fragile and conflict-afflicted contexts like Haiti. Uchechukwu, Adojutelegan and Palmer remind us that healthcare institutions and providers, caregivers and law enforcement agencies often neglect people with disabilities, and that women and girls are likely to experience double discrimination.

The authors also share encouraging developments and solutions. Loutfy explains how more than 75 countries use the Washington Group on Disability Statistics’ tools and guidelines for disability inclusive data collection in censuses and surveys. Nguyen and Stienstra point out that policies and programs that address intersectional discrimination can help eliminate systemic barriers through education, training, and capacity building. Chalklen and Katsui emphasize the essential role of organizations of persons with disabilities (OPDs). McClain-Nhlapo contends that a key factor to DID success is having the political will to commit to and fund disability inclusion, and to work with OPDs as partners in development.

I extend my heartfelt thanks to all the authors for their excellent contributions and to the members of our editorial advisory board for their hard work and the ambitious scope of this edition of *Au Courant*. We are moving in the right direction, but there is still much to do in order to achieve disability inclusion, both inside and outside our department. My key takeaway is that DID is good development, period.

I also want to thank Au Courant readers across the department for their sustained support over the years. Going forward, the Au Courant platform will keep its name, but the format, content and approach will change to better reflect our needs and optimize our resources. Stay tuned!

What’s Inside	Page
<i>Introduction</i>	1
<i>Canada’s approach to disability-inclusive development</i>	2
<i>A message from GAC’s champion for persons with disabilities</i>	2
<i>How to implement disability-inclusive development</i>	3
<i>Data and disability inclusion: the global context</i>	4
<i>An intersectional approach to disability-inclusive development</i>	5
<i>Humanitarian action and people with disabilities in Haiti</i>	6
<i>Social inclusion of people living with episodic disabilities</i>	7
<i>Engaging organizations of persons with disabilities</i>	8
<i>Disability inclusion in reproductive health services in Nigeria</i>	9
<i>Economic inclusion of refugees with disabilities in Kenya</i>	10
<i>Organizations of persons with disabilities in Africa</i>	11
<i>Other resources</i>	12

Canada's approach to disability-inclusive development programming

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The World Health Organization (WHO) [estimates](#) that 80% of people with disabilities live in low- and middle-income countries. This reality entails a disability-inclusive development challenge: identifying and dismantling what the [Convention on the Rights of Persons with Disabilities](#) (CRPD), which Canada ratified in 2010, describes as “attitudinal and environmental barriers that hinder the full and effective participation of persons with disabilities in society on an equal basis with others.”

To tackle this challenge and ensure that persons with disabilities can benefit from development programs, Canada has adopted a “[twin-track approach](#)” that includes mainstreaming disability with an intersectional, cross-cutting approach to programming based on Canada’s Feminist International Assistance Policy, and targeted support for individuals. In order to implement this approach, Canada seeks to meaningfully engage organizations of persons with disabilities (OPDs), both in Canada and internationally.

Based on preliminary data, GAC’s support to advance disability-inclusive development outcomes totalled \$353M in 2021-22, up from \$346M in 2020-21. Through this commitment, Canada works to make health and education systems more inclusive for persons with disabilities; provide access to physical and functional rehabilitation to those living with the effects of landmine explosions and armed

conflict; support women and girls with disabilities who are survivors of gender-based violence; and help persons with disabilities who are living in poverty to gain meaningful skills for employment.

Canada is also an active supporter of resolutions relating to disability rights at the UN General Assembly, the Human Rights Council and the WHO. At the 2022 Global Disability Summit, Canada committed to advancing programming and advocacy for persons with disabilities by supporting OPDs in developing countries, advancing disability inclusion in paid and unpaid care, improving disability-inclusive data collection and disaggregation, and formalizing disability inclusion training for Global Affairs Canada (GAC) staff. Canada has also enhanced its formal engagement with civil society and academic partners by convening a GAC Working Group on Disability Inclusion, which serves as a consultation and coordination platform for Canada’s international assistance work.

The magnitude of the challenge requires a strong and consistent global commitment. In order to ensure that development programming includes and is accessible to persons with disabilities, Canada and its development partners must work collaboratively, using a multi-sectoral approach. These actions are essential to breaking the negative feedback loop between poverty and disability.

Fit for all: a message from Vikas Sharma, GAC’s champion for persons with disabilities

On April 19, I joined my colleagues on the Global Affairs’ Diversity and Inclusion Council to provide testimony at a Senate Committee hearing on Canada’s foreign service’s “fit for purpose”. From their questions, it was evident that Committee members already possessed a good sense of the systemic discrimination and career obstacles facing women, visible minorities, and members of the 2LGBTQI community. Questions about persons with disabilities were, however, like the disabilities community, harder to place in a simple narrative. Many disabilities are non-visible, and exist along a broad spectrum of physical and mental differences.

[Treasury Board Secretariat data from 2021-2022](#) and public service surveys show that persons with disabilities are significantly under-represented (only 4.3% representation within GAC, relative to 9.1% workforce availability), and a majority of those in this cohort routinely confront deliberate, inadvertent, systemic, and/or structural exclusions and treatment that mute their voices. The good news is that the same will and culture of acceptance to have women fully represented at the leadership and working levels is now being marshalled to other equity-seeking groups. Now is the time to mainstream inclusion-based analysis into policy analysis and decision-making. This issue of Au Courant is an important contribution toward promoting a culture of awareness and action that engages and benefits persons with disabilities.

How to implement disability-inclusive development

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The swift and almost universal ratification of the 2006 [UN Convention on the Rights of Persons with Disabilities](#) (CRPD) is the most significant contributor to the advancement of disability-inclusive development across the globe. With more than [185 ratifications](#), the Convention has encouraged the passing of [disability-specific laws in many countries](#) and influenced the inclusion of references to [disability in the Sustainable Development Goals](#) (see related box on this page).

The CRPD provides the foundation for the global architecture of disability-inclusive development. It has been translated into hundreds of languages and made accessible to millions of persons with disabilities. It has also informed the policies of many countries and bilateral donors, and has led to the development of guidance on implementing the convention's articles, such as the [right of persons with disabilities to work and employment](#). Today, the question is no longer whether we should include persons with disabilities in development, but rather how to do it.

For example, the [World Bank's Disability Inclusion and Accountability Framework](#) (DIAF) links disability inclusion to the World Bank's twin goals of ending poverty and boosting shared prosperity, and supports the integration of disability in the World Bank's activities and investments. There is also an explicit reference to disability as a ground of discrimination in the World Bank's [Environmental and Social Framework](#), in the [10 Commitments on Disability-Inclusive Development](#), and in the commitments made as part of the

[International Development Association replenishment](#). These commitments have been bolstered by sectoral guidance notes on disability inclusion, matched with staff training and targeted funding.

Countries increasingly engage donors and international financial institutions (IFIs) like the World Bank for technical assistance on disability inclusion. Demand ranges from support for disability-inclusive education to collecting better disability-disaggregated data to inform evidence-based policy. As a result, many IFIs and donors have invested in building teams to guide the work on disability inclusion within and outside of their agencies.

Article 32 of the CRPD has galvanized the role of organizations of persons with disabilities (OPDs), which are more engaged and better prepared to participate in policy and decision-making processes in order to ensure that persons with disabilities are part of the development discourse. The mantra of "Nothing About Us Without Us" has never been more pronounced.

Since the CRPD was adopted, we have learned many lessons from initiatives aiming to ensure the full participation of persons with disabilities in political, economic and social life. The keys to success include making efforts to educate specialists on disability inclusion, having the political will to commit to and fund disability inclusion, and working collaboratively with OPDs as partners in development.

Action for ending poverty and hunger for all persons with disabilities

1. *Design social protection policies and programmes to include persons with disabilities.*
2. *Remove barriers that persons with disabilities face in accessing and benefiting from social protection on an equal basis with others.*
3. *Sensitize personnel of grant offices about barriers experienced by persons with disabilities to access social protection.*
4. *Improve access to and accessibility of banking and other financial services.*
5. *Disaggregated data on poverty and hunger by disability status.*
6. *Establish national systems to monitor and evaluate social protection programmes regarding inclusion and positive impact on persons with disabilities.*

Source: [United Nation's Disability and Development Report](#)



Data and disability inclusion: the global context

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Organizations of persons with disabilities (OPDs) recognize the importance of systematically collecting and analyzing disability data for the development of disability-inclusive policies and programs. [Article 31 of the Convention on the Rights of Persons with Disabilities](#) (CRPD) highlights the need to collect and disaggregate appropriate disability data and make them accessible to persons with disabilities and others. Moreover, [disability is part of Agenda 2030](#), including goals, targets and indicators.

In order to encourage the collection of population-based data, the [Washington Group on Disability Statistics](#) (WG) has developed tools, such as its [short set of questions on functioning](#), and implementation guidelines designed to introduce and transform disability inclusive data collection. More than 75 countries, as well as several international organizations, including UNICEF and the World Bank, have used the questions to inform their statistics collection.

Reflecting the views of OPDs around the world, the [Disability Data Advocacy Toolkit](#) shows that data collection practices by some statistical entities lack systematic data disaggregation by disability. Development organizations as well as artificial intelligence mechanisms remain mostly dependent on government-issued data that do not necessarily reflect the lived experiences of persons with disabilities.

The toolkit illustrates how citizen-generated data can fill data gaps, and gives examples of global initiatives supporting community-driven data collection by national and local organizations of persons with disabilities. For example, community-driven efforts, such as one-on-one interviews, door-to-door surveys, and focus group discussions, were designed to collect quantitative and qualitative data reflecting the experiences of persons with disabilities during the Covid-19 pandemic. The Lebanese Union of Persons with Physical Disabilities used similar methods to collect data on the COVID-19 pandemic experiences of persons with disabilities, and to identify the impacts of the August 4, 2020 blast at the marine port in Beirut.

Regular dialogues between OPDs and national statistical entities could further advance the collection of high-quality data that is disaggregated by disability, potentially allowing various data users to enhance service provision and other opportunities for persons with disabilities. In addition, community driven data collection efforts by OPDs should be strengthened by ensuring technical support, advocacy guidance, and ongoing opportunities for regular information exchange and learning.

Persons with disabilities are often invisible in data collection and monitoring. In order to break this cycle, UNICEF recommends taking the following actions:



1. Develop inclusive methodologies and instruments



2. Implement inclusive study designs and methods of data collection



3. Represent the experiences of person with disabilities in data analyses and results



4. Ensure that reporting and dissemination are inclusive



5. Promote discussion, learning and reflection about disability



6. Ensure availability of evidence to guide inclusion strategies and policy development

Source: [UNICEF Data](#)

An intersectional approach to disability-inclusive development

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Women and girls with disabilities are a diverse group, with varying access to development programs and policies and opportunities to engage with them. For example, [our research in Vietnam](#) shows that women and girls with disabilities in rural and remote areas do not have equal access to education, training and employment opportunities, and are more disadvantaged compared with people who do not have a disability. Women with intellectual disabilities face additional disadvantages because of assumptions that they are unable to hold leadership roles and participate in socio-political spaces.

Worldwide, [Indigenous and ethnic minority women and girls with disabilities](#) also encounter discrimination in response to their age, gender, disability, ethnicity and rurality. [Policies and programs that identify and challenge intersectional discrimination](#) can help address these systemic barriers through education, training and capacity building efforts.

International development efforts must develop contextually relevant and intersectional policies for supporting organizations of people with disabilities that take into account their different capacities and resources as well as opportunities for learning, networking and engagement. Women and girls with disabilities should be fully included in policymaking relevant to their own contexts. Some advocacy networks in the Global South, such as the emerging [Global Forum on the Leadership of Women with Disabilities](#) and the [Indigenous Persons with Disabilities Global Network](#), already take an intersectional approach and provide essential connections and resources.

To address inequities, development practitioners and policy makers should create opportunities for stakeholders from the Global South to engage in development conversations and propose solutions for their local contexts. This requires including Indigenous knowledge and gendered disability approaches in the development of international agreements, funding programs, and specific projects. The [Disability Rights Advocacy Fund](#), for example, uses [participatory grant-making](#) to ensure that local people with disabilities lead decision-making.

UN Women offers an excellent [intersectionality toolkit](#) that can help development staff learn how to use intersectional approaches. Opportunities for leadership training and capacity building are essential to address systemic inequities, and the [Women's Institute on Leadership and Disability \(WILD\)](#) offers skills building and support networks. In order to become young leaders in their schools and communities, girls with disabilities need more than accessible buildings, curriculum and teaching methods. The [ENGAGE](#) partnership illustrates [how to create spaces](#) for learning and advocacy among girls and young women with disabilities in the Global South. Our own Engendering Disability-Inclusive Development (EDID) partnership is working in this direction (see textbox on this page for details).

Bringing about more sustainable changes for women and girls with disabilities requires listening with care, respect and reciprocity, as well as developing policies and programs in response to the views and experiences they share.



Engendering Disability-Inclusive Development

The 2020-27 [Engendering Disability-Inclusive Development](#) (EDID) partnership brings together researchers, decision-makers, and civil society organizations in Canada, Haiti, South Africa and Vietnam. EDID uncovers, creates, and shares knowledge about women and girls' contributions to and progress toward disability-inclusive development. In the image, a young woman with physical disabilities speaks at a local EDID workshop in Hanoi, Vietnam. Photo credit: EDID-Vietnam project.

Humanitarian action and persons with disabilities in Haiti

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Under article 11 of the [Convention on the Rights of Persons with Disabilities](#) (CRPD), the international community has an obligation to provide humanitarian assistance adapted to the needs of persons with disabilities affected by disasters and to include them in decision-making. The humanitarian-development-peace nexus reiterates these principles, but [a study](#) published in February 2022 indicates that stakeholders are struggling to implement this approach.

Have these standards fuelled change in Haiti since the catastrophic earthquake of 2010? At the time, as we demonstrated [in our own research](#), the Haitian state and civil society, including organizations for persons with disabilities, had to demand that people with disabilities be taken into account by the international humanitarian agencies that bypassed them after the earthquake.

Let's compare this situation to that of persons with disabilities after the earthquake of August 14, 2021, in the country's southern peninsula. This earthquake occurred shortly after President Jovenel Moïse's assassination, when there was no parliament and local elected representatives had just been replaced. Incoming government officials were being briefed on their files when the earthquake struck.

In this context, members of the Réseau Associatif National pour l'Intégration des Personnes Handicapées (RANIPH Sud, an extensive network of organizations for persons with disabilities in the country's southern region), along with national and international humanitarian organizations, such as Handicap International, provided rehabilitation and support services in the peninsula's health care centres. However, according to [a study](#) from the Centre Égalité pour la Connaissance, la Communication et la Liberté (ECCEL), based on interviews with 26 people with disabilities, including 15 women from the Sud and Nippes departments, these actions reached few persons with disabilities and did not address certain needs such as the request from women with disabilities to be protected from violence.

Despite the progress made in coordinating humanitarian organizations and local networks such as RANIPH Sud, these actors are still struggling to meet the needs of persons with people with disabilities, especially women with disabilities. This case also highlights the difficulty in ensuring State involvement in an environment where the State lacks legitimacy and capacity. Canada, as a signatory to the CRPD and adherent to the Organization for Economic Cooperation and Development (OECD) Development Assistance Committee (DAC) [Recommendation on the Humanitarian-Development-Peace Nexus](#), can contribute to monitoring these standards in Haiti and to the search for a Haitian solution to the crisis of governance and economic insecurity suffocating the country.



People with disabilities participate in ECCEL's research following the August 2022 earthquake in Miragoâne, Haiti. Photo credit: Ilionor Louis.

Realizing the social inclusion of people living with episodic disabilities

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If you know someone living with diabetes, HIV, depression, long COVID, or other long-term health conditions, then you likely know someone who experiences an [episodic disability](#). Episodic disabilities are frequently overlooked in disability policies and programs because they don't fit the conventional understanding of disability as an ongoing, static limitation.

Episodic disabilities are chronic conditions characterized by fluctuating periods and degrees of illness and wellness. They can be unpredictable in duration, severity, symptoms, and frequency. For example, a person with rheumatoid arthritis might be well for months, and then experience several episodes of illness in a row, which can impact their employment, social inclusion, and access to care.

Statistics Canada's 2019 report [The Dynamics of Disability](#) notes that, of the 6.2 million Canadians with disabilities over the age of 15, 39% experienced continuous limitations, whereas 61% experienced some form of episodic disability. The 2022 World Health Organization's [Global report on health equity for persons with disabilities](#) estimated 16% of the world's population, or close to 1.3 billion people, live with a disability, including episodic conditions. [Approximately 80% of this population lives in developing countries](#). In Africa alone, [24 million adults live with diabetes](#) and [over 25 million people live with HIV](#). These illnesses and their treatments can be episodically disabling.

There are significant social and economic challenges for people living with these conditions, for their families, and for their communities. Donors can contribute to social and

economic inclusion in a development context by supporting some key measures:

All stakeholders should use definitions of "disability" that include episodic disability, including healthcare providers, insurers, employers, policy-makers, and donors. This is key to ensuring access to services and support. Episodic disabilities were included in Canada's definition of disability for the first time in 2019, with the [Accessible Canada Act](#).

Health care systems and services must address the needs of people living with episodic disabilities. For example, the global HIV response has focused heavily on anti-retroviral treatment with [little understanding](#) of their long-term, potentially disabling, side-effects. [Innovative programs](#) and [community-led advocacy](#) initiatives can serve as inspiration.

Workplace accommodations. All stakeholders should develop plans that provide employment-related accommodation, such as part-time work, job sharing, and flex-time arrangements.

Income support programs should accommodate persons with episodic disabilities so that they may participate in the workforce on a part-time basis or when their health allows, without penalty.

Legislation and policy need to be [barrier-free](#) for people with episodic disabilities. [Trial work periods](#), part-time work, job sharing, and uninterrupted benefits should be part of a comprehensive set of policies.



People living with long COVID-19 can suffer physical and cognitive impairments for months after the initial infection. Photo credit: WHO/Igor Kryuchkov.

Engaging organizations of persons with disabilities in inclusive education

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Although [Sustainable Development Goal 4](#) (SDG 4) and the United Nations (UN) Committee on the Rights of Persons with Disabilities' [General Comment No. 4](#) (2016) have increased awareness of the need for education for *all* children, learners with disabilities continue to be significantly excluded. Compared with children without disabilities, [the world's 240 million children with disabilities](#) are 49% more likely to have never attended school and 42% less likely to have foundational reading and numeracy skills.

An [inclusive education system](#) puts learner diversity at its core and addresses the needs of the most marginalized learner groups, such as learners with disabilities. In 2020, under its [Inclusive Education Flagship Initiative](#), the [International Disability Alliance](#) (IDA) developed the first cross-disability [consensus report on the implementation of SDG 4](#) led by organizations of persons with disabilities (OPDs). This document reiterated the importance of systems in which all learners, with and without disabilities, learn together and receive the support they need, from pre-school to post-secondary and vocational education, in inclusive and accessible educational facilities, including sign language bilingual schools.

In 2022, the IDA, the [International Disability and Development Consortium](#) (IDDC), and the [Global Campaign for Education](#) (GCE) US launched a [Call to Action](#) to ensure SDG 4 for all learners, including those with disabilities. This call followed the [second Global Disability Summit](#) (GDS), which led to 230 commitments on inclusive education from

different stakeholders. Meaningful OPD engagement attracted a great number of commitments, which speaks to the important role that OPDs play in inclusive development.

The Call to Action and GDS commitments need concrete actions in order for tangible changes to take place, and OPDs need support to play their critical role in ensuring inclusion. A good example in this direction is a [training of trainer curriculum](#) on Article 24 of the Convention on the Rights of Persons with Disabilities for OPD leaders, which the IDA piloted in Kenya, Nigeria and Nepal.

The role of governments, especially donor countries, is critical to the realization of SDG 4 for learners with disabilities. The IDA calls on governments to [sign](#) on to the Call to Action and commit to the following:

- Adopting a 'twin-track' approach to education budgeting that promotes system-wide transformation for inclusion and provides aimed support for learners with disabilities.
- Developing clear criteria on disability-inclusive education for all education grants.
- Tracking investments in education at all levels using the OECD-DAC [disability policy marker](#).
- Ensuring all education data is fully disaggregated by gender and disability.
- Strengthening OPD capacity and fully engaging OPDs as partners in the design, development and implementation of education programs.



IDA training workshop on Inclusive Education for West African representatives of organizations of persons with disabilities. Trainers used English, French and Nigerian sign languages. Photo credit: International Disability Alliance.

Disability inclusion in sexual and reproductive health services in Nigeria

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The World Bank 2020 report [Disability Inclusion in Nigeria](#) explains that persons with disabilities lack access to basic services, and attitudinal barriers prevent their socioeconomic inclusion. Although Nigeria is a signatory to the [Convention on the Rights of Persons with Disabilities](#) (CRPD), healthcare institutions/providers, caregivers and law enforcement agencies often neglect people with disabilities, and women and girls are likely to experience double discrimination.

The [Ipas Nigeria Health Foundation](#) piloted a disability-centred sexual and reproductive health (SRH) intervention in 2017, working with the Deaf Women Association of Nigeria and the Federal Capital Territory's health administration to enhance deaf women's access to SRH services. During the six-month intervention, Ipas trained sign language interpreters who assisted women receiving services such as menstrual hygiene, family planning, perinatal care and psychosocial counselling across 5 secondary health facilities. Some women shared their experience prior to this intervention:

"When I was ... having my second child, they abandoned me in the labour room [...] They left me there when it was time to deliver. I suffered because I could not communicate with them."

"..... Yes, they felt communicating with me through writing is a waste of time so they are usually not patient enough to attend to me."

Following the intervention, another participant said: "My experience has been wonderful. When I go to the hospital, the interpreter welcomes me, submits my card, takes me to the doctor and helps me communicate perfectly with the doctor. I was even able to tell my medical history..."

During a presentation to the health authorities, Ipas pointed out the challenges highlighted by the intervention and provided the following recommendations to sustain and scale up the intervention:

- Government should provide translation and interpretation support services, along with job aids to health facility workers serving persons with disabilities.
- More service providers should be trained on basic sign language and the skills required to serve persons with disabilities. Training should ensure that participants are aware of the principles and ethics of engaging with persons with disabilities.

Since these recommendations were presented, not much has been done to sustain and scale up intervention outcomes in Nigeria. It is critical to address the needs of women and girls with disabilities in SRH services, so that they do not suffer reproductive coercion and can make decisions about their own sexual and reproductive health. Donors can ensure that programs include disability-inclusive strategies for SRH services; they can also support the scaling of pilot interventions with demonstrated impact.



A disabled woman addressing the police on the importance of disability inclusion during a police training in Borno state, Nigeria. Photo credit: Patricia Emodi/Ipas Nigeria.

Economic inclusion of refugees with disabilities in Kenya

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As highlighted in the United Nations High Commissioner for Refugee's report [Working with Persons with Disabilities in Forced Displacement](#), the intersecting issues of disability, age and gender have important impacts on refugees' access to livelihoods. These issues are exacerbated by conflict, displacement and lack of education, as is the case in the [Kakuma refugee camp](#) in Turkana County, Kenya.

[Humanity & Inclusion](#)'s economic inclusion work in Kakuma and other camps focuses on safe and dignified livelihoods for refugees who own micro-, small- and medium-sized enterprises (MSMEs). In order for inclusion to be effective, community members must have access to markets, finance, education, employment, entrepreneurship, and skill development. Economic inclusion work is designed to allow all people to contribute fully to society as employees, entrepreneurs, consumers and citizens.

Many refugees with disabilities have limited startup capital and low financial literacy. A 2016 [study](#) shows that these limitations, coupled with stigma, can prevent refugees from accessing credit and exclude them from financial and business services, as well as government relief and support funds. Women with disabilities face additional challenges, including discriminatory gender norms, the burden of care and vulnerability to violence. Other barriers to entrepreneurship include the high costs and lengthy procedures for registering a business; lack of access to education, especially primary education; a limited understanding of the rights of women and persons with

disabilities, [including the right to work on an equal basis with others](#); and travel restrictions that impede the purchase of supplies outside of refugee camps.

On the other hand, the following actions help facilitate economic inclusion: implementing good practices such as enterprise registration, business branding and regulation compliance; engaging [organizations of persons with disabilities](#) and other disability advocates in economic inclusion initiatives; and enshrining disability inclusion in national policies.

Economic development interventions generally emphasize the establishment of businesses but fail to sufficiently address growth, sustainability and continuity, leading to the creation of MSMEs that generate too little revenue to address poverty and increase resilience.

Interventions should focus on the intersection of gender and disability, should link to public and private institutions, markets, and procurement chains, and should improve access to high-quality services. This approach would involve viewing refugees with disabilities as active community members that have a significant impact on the economy of host communities and countries.

Funders should ensure that calls for proposals target persons with disabilities, and they should assess the capacity of development actors to address inclusion throughout the project cycle. Otherwise, while disability may be mentioned in proposals, meaningful results for persons with disabilities may be limited or nonexistent.



Micro-entrepreneur with visual disability at his shop in Kakuma refugee camp, July 2022. Photo credit: E. Sellers.

Are African organizations of persons with disabilities really included on the ground?

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As of 2022, 16% of the global population were persons with disabilities, according to the [World Health Organization](#). Most of them lived [in developing countries](#). Though [Article 32 of the United Nations Convention on the Rights of Persons with Disabilities](#) (CRPD) highlights the importance of including persons with disabilities in international cooperation, this has not yet happened to a great extent. Moreover, it is essential to include organizations of persons with disabilities (OPDs) in international development because they are best placed to ensure disability inclusive development.

As noted in [Disability-inclusive ODA: Aid data on donors, channels, recipients](#) and seen below, between 2014 and 2018, less than 2% of all international aid projects targeted persons with disabilities, and less than 0.5% of all international aid targeted disability inclusion, or the accommodation of full and equal participation in society of persons with disabilities. Furthermore, none of the 5 major recipients of disability-inclusive aid in 2017 or 2018 were African countries. Between 2014 and 2018, 69% of disability-inclusive aid was channeled through international non-governmental organizations (NGOs) and NGOs based in donor countries, while only 8% was channeled through NGOs based in developing countries.

The [African Disability Forum](#) (ADF) was established in 2014 to strengthen the voices of African OPDs, as we were not being heard in many places, including in the international

cooperation sector. Many stakeholders collaborate with the ADF, given that there is huge potential to engage directly with local ADF members with a view to promoting disability-inclusive development with local insight.

Various donors have developed disability inclusion strategies, policies and projects as part of their international cooperation approach, including the [United Kingdom](#), [Germany](#), [Norway](#), [Finland](#) and the [UN](#). Yet, in 2020, the UN Special Rapporteur on the Rights of Persons with Disabilities [reported](#) that only one-third of bilateral donors, multilateral agencies and private donors consulted had developed a disability-specific strategy, policy or similar commitment. Thus, it is not surprising that disability-inclusive practices have not been implemented to a great extent.

Based on the ADF's 9 years of experience, we feel there is a huge power asymmetry between African OPDs and "partner" donors, wherein "partners" continue to make strategic decisions and set priorities. The CRPD offers [a human rights-based approach to disability](#), promoting the self-determination of persons with disabilities. However, the ADF has been struggling to gain decision making power over our activities in the context of international cooperation. Disability inclusion is important. The ADF would like to see it implemented in reality, and we challenge all readers of this article to walk the talk.

Aid projects targeting persons with disabilities made up less than 2% of all international aid between 2014 and 2018



Source: Development Initiatives based on OECD DAC CRS.

Other resources

Asian Development Bank

- [Strengthening disability-inclusive development: 2021-2025 road map](#)

Christian Blind Mission International

- [Disability data advocacy toolkit](#)
- [Fundamental principles for inclusive development](#)
- [The future is inclusive: how to make international development disability-inclusive](#)
- [Inclusion counts: the economic case for disability-inclusive development](#)

Development initiatives

- [Disability-inclusive ODA: aid data on donors, channels, recipients](#)

Economic and Social Commission for Asia and the Pacific

- [Social development: disability-inclusive development](#)

Global Affairs Canada

- [Disability inclusion: checklist of GAC's international assistance programming and policy \(internal access only\)](#)

Global Facility for Disaster Reduction and Recovery

- [Disability inclusion action plan 2018-2023](#)

Government of Canada

- [Towards an accessible Canada](#)

International Disability Alliance

- [Indigenous persons with disabilities global network](#)
- [Inclusive education flagship initiative](#)

Oxfam

- [More practical lessons from five projects on disability-inclusive development](#)

Realize Canada

- [What is episodic disability](#)
- [Realize annual report 2021-22: at the intersections of HIV, aging, disability and wellbeing](#)

RTI International

- [Disabilities inclusive education systems and policies guide for low and middle income countries](#)

Stephen Baranyi & Illionor Louis

- [Disability and development in Haiti: beyond one-dimensional views](#)

The Women's Institute on Leadership and Disability (WILD)

- [Measuring the impact of WILD](#)

UNESCO

- [Making rights to education real for refugees with disabilities](#)

UNICEF

- [Seen, counted, included: using data to shed light on the well-being of children with disabilities](#)

United Nations

- [Convention on the rights of persons with disabilities \(CRPD\)](#)
- [UN disability inclusion strategy](#)
- [Sustainable development goals and disability](#)

University of Guelph

- [Pandemic impacts on women and girls with disabilities](#)

UN Women

- [Intersectionality resource guide and toolkit](#)

Washington Group on Disability Statistics

- [Resources for disability data users](#)

World Bank

- [Disability inclusion and accountability framework](#)
- [Disability inclusion in Nigeria: a rapid assessment](#)

World Health Organization

- [Global report on health equity for persons with disabilities](#)

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