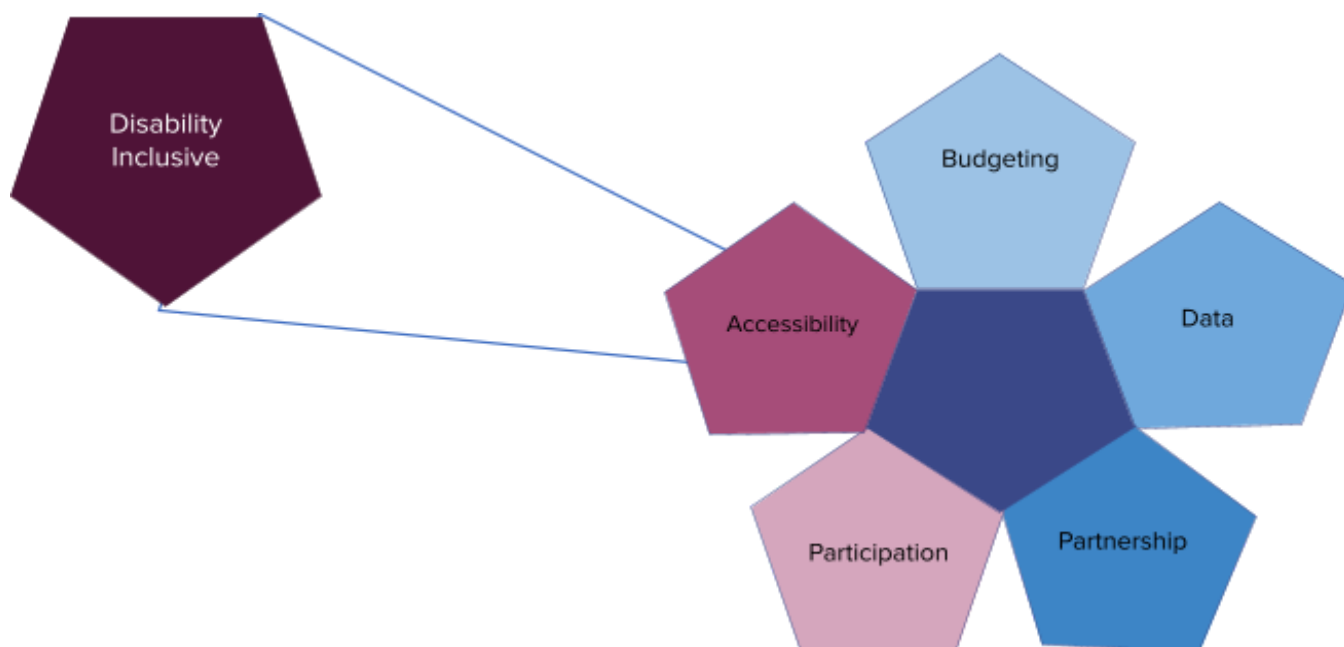


Inclusion of Women and Girls with Disabilities into Health and Gender Equality Programming

Participant Package - Webinar 2

CORE ELEMENTS OF DISABILITY INCLUSION¹

The following are the core elements that promote disability inclusion in development and humanitarian programming. There is no hierarchy of the different elements. They are all equally important and often interlink.



¹ Adapted from trainer (Andrae K. and Coe. S) generated resources and references provided throughout

Accessibility

When you plan and implement project interventions and facilities make sure that you plan, budget and apply – where possible – principles of **universal design**² to ensure all of the interventions, events, activities and facilities are accessible for everyone including persons with disabilities, older persons, pregnant persons, children.

Examples for Environmental Accessibilities include:

- a) Buildings, roads, transportation, other indoor and outdoor facilities, including schools, sport facilities, housing, medical facilities and workplaces.
- b) Information, communications and other services, including electronic services and emergency services.

Examples for Attitudinal Accessibility include:

- Willingness to engage
- Understanding specific requirements by persons with different impairments
- Adapting services and behaviour to remove barriers

Reasonable accommodation usually works on a case-by-case basis and refers to the requirement of an individual person who may request modifications and/or forms of support in specific circumstances. It is usually provided to **ensure the individual can participate** in for example, capacity building and training, travel and transportation, meetings, consultations and events, and workspaces, as well as considerations in the management of camps in refugee/displacement settings.

Reasonable accommodation can be **temporary**, for example,

- A removable ramp for small steps or thresholds
- Computer screen-reading software
- A sign language interpreter for a specific event or for as long as a consultant or employer with hearing disabilities requires assistance.

It can also become **systematic** modifications that benefit a wider range of people, including those with disabilities, that may or may not have cost implications, for example,

- Infrastructural adaptations like permanent ramps or elevators in a building
- Adjustable working desks and ergo-dynamic chairs
- Structuring working days differently, for example,
 - arranging for flexible working hours
 - providing a quiet break or work room/space in an office

Accessibility and reasonable accommodation are linked. Accessibility standards can be implemented progressively and with more permanent features, anticipating such and similar reasonable accommodation requests in the future.

Further resources:

- This [comprehensive guide by CBM Global and The World Blind Union](#) provides practical support on how to deliver a whole-of-organisation approach towards accessibility to achieve 7 core

² <https://www.washington.edu/doi/universal-design-process-principles-and-applications>

accessibility commitments across built environments, information and communications, procurement of goods and services, training and capacity development, programmes, meetings and events, recruitment and human resource (HR) management.

Budget

Without an appropriate budget, inclusion is unlikely to happen. Disability inclusion isn't automatically expensive, but it needs costing and planning throughout the project cycle so that funding proposals will include and justify the appropriate resources. Budgeting will need to consider accessibility and reasonable accommodation to ensure not only participation of persons with disabilities in the project but also enable collection of data, relevant partnerships and capacity development of a range of stakeholders, and support staff and internal process on inclusion. While it may be difficult to calculate exact costs required for disability-related expenses, it is recommended to include approximately 5% of the overall programme budget.

Budget for	Item	Occasion
<p>Reasonable Accommodation & Accessibility</p> <p>Reasonable accommodation is on a case-by-case basis, often in response to an individual need. These adjustments will be needed in environments that aren't accessible, the more accessible the environment, the less reasonable accommodation is necessary</p>	Travel costs for persons with disabilities and their assistants as necessary	Meetings with government and other partners
		Training for persons with disabilities
		Training awareness sessions conducted by persons with disabilities
		Consultation
		Data collection
		Recruitment of persons with disabilities for project
	Sign Language Interpreters	Meetings with government
		Training for persons with disabilities
		Training awareness sessions conducted by persons with disabilities
		Consultation
		Data collection
		Recruitment of persons with disabilities for project
	Accessible venues	Meetings
		Training
	Accessible technical material	Material including diagrams and other visual readable by screen reading software
		Alt Text for photos and visuals
		Language simple and inclusive
		Different formats, e.g. large print, easy-read versions
	Accessible online events	Captions, sign language interpretation, different language translation

Specific targeted activities	Disability awareness raising events	Communities and other stakeholders
	Meetings	Partnership development
	Training	Capacity development of OPD/Self Help Groups
	Support to activities, including, for example accessibility audits	Implemented by OPDs/SHGs
Human Resources	Disability focal point	Disability expertise for project

Further resources:

- [UNHCR Inclusive budgeting Tip Sheet](#)

Data

Data is essential for making information about disability visible, and to generate evidence that can influence decision makers to act. Good quality data collection is also a crucial step for monitoring and evaluating programmes. By identifying who does and who does not benefit from programmes, organizations can adapt and improve project activities to ensure they are more inclusive.

The recommended approach to disability identification, data collection and disaggregation are using the [Washington Group Questions](#) which are based on the social model of disability.

The WGQ uses different sets, from six questions in the short set to extended questionnaires for children, asking questions about the level of difficulties people have doing various activities in daily life. The WGSS is shown in the table below, comprising three elements: (1) the introductory statement; (2) the six questions; and (3) the four response categories for each of the six questions.

The next questions ask about difficulties you may have doing certain activities because of a HEALTH PROBLEM:		
Do you have difficulty seeing, even if wearing glasses?	<input type="checkbox"/> No – no difficulty <input type="checkbox"/> Yes – some difficulty	<input type="checkbox"/> Yes – a lot of difficulty <input type="checkbox"/> Yes – cannot do at all
Do you have difficulty hearing, even if using a hearing aid?	<input type="checkbox"/> No – no difficulty <input type="checkbox"/> Yes – some difficulty	<input type="checkbox"/> Yes – a lot of difficulty <input type="checkbox"/> Yes – cannot do at all
Do you have difficulty walking or climbing steps?	<input type="checkbox"/> No – no difficulty <input type="checkbox"/> Yes – some difficulty	<input type="checkbox"/> Yes – a lot of difficulty <input type="checkbox"/> Yes – cannot do at all
Do you have difficulty remembering or concentrating?	<input type="checkbox"/> No – no difficulty <input type="checkbox"/> Yes – some difficulty	<input type="checkbox"/> Yes – a lot of difficulty <input type="checkbox"/> Yes – cannot do at all
Do you have difficulty (with self-care such as) washing all over or dressing?	<input type="checkbox"/> No – no difficulty <input type="checkbox"/> Yes – some difficulty	<input type="checkbox"/> Yes – a lot of difficulty <input type="checkbox"/> Yes – cannot do at all
Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood by others?	<input type="checkbox"/> No – no difficulty <input type="checkbox"/> Yes – some difficulty	<input type="checkbox"/> Yes – a lot of difficulty <input type="checkbox"/> Yes – cannot do at all

The WGSS can be incorporated into a range of data collection processes and tools and used at all stages of the project management cycle, for example:

- Situation and barrier/power analyses
- Project/programme baseline and end-line surveys/evaluations
- Regular service-level information, monitoring whether services are reaching persons with disabilities and to implement in response to barrier/power analyses

Prevalence and patterns of prevalence	How many people have a disability? What are their characteristics? Where do they live? Utilise validated data methods e.g., Washington Group question sets
Disaggregation of OC by disability status	What are the gaps in poverty, employment, education, health, social protection, etc. Importance of intersectionality, by gender, age, location, ethnicity...
Barriers to participation?	Inaccessible infrastructure, inaccessible information, attitudes, laws and institutions, unaffordability of services...
Support requirements for inclusion?	What kind of human assistance, assistive devices, home/workplace adaptations (...) do people require for basic survival and to promote participation?

Further resources:

- [Using the Washington Group questions on disability data in development programs: A learning brief, 2023](#)
- [How to ask the Washington Group Questions, 2018](#)
- [Measuring Using the Washington Group Questions – Easy Read version, 2018](#)

Situation Analysis and Indicators³

Any questions or review about knowledge, attitudes and/or practice relating to education, health/SRHR, GBV or other relevant thematic areas should also include questions and probes about:

1. **Accessibility** – are services accessible to persons with disabilities in terms of physical access, accessible information, diverse and/or alternative communication?
2. **Attitudes** – are girls and boys and non-binary children and young and older persons with disabilities welcome, are they supported to participate and express themselves, are treated fairly and respectfully relative to their peers without disabilities?
3. **Provision of specific measures** – are policies and systems in place to include diverse persons with disabilities as a rule and principle, rather than a case-by-case scenario, if that.

Below are some examples of adapted questions:

Original Question:

What are the government policies, strategies, and action plans for women's rights and gender equality?

Disability-inclusive rephrasing or probing:

What are the government policies, strategies, and action plans for women's rights, **and to what extent are women with disabilities included, e.g. through specific articles, or explicit mention of the specific situation of women with disabilities?**

³ Adapted from trainer-generated resources (Andrae, K.)

Probe: Do budgets for the implementation of policies, strategies and action plans include reasonable accommodation for the inclusion of women with different disabilities?

Original Question:

Are there safe spaces for women, and to participate in recreational activities, and/or receive counselling etc?

Disability-inclusive rephrasing or probing:

Are there safe and disability-accessible spaces for women, to participate in recreational activities, and/or receive counselling etc. Are these activities inclusive and adapted to so that women with different disabilities can participate? Are counselling sessions accessible to provide appropriate channels of communication for women with hearing or intellectual disabilities?

Further resources:

- [UNICEF Guidelines for Disability Situation Analyses](#)
- [UNFPA: Situational Analysis: Access to Sexual and Reproductive Health and Rights \(SRHR\) for Young Persons with Disabilities in East and Southern Africa](#)

Like specific questions in situation analyses to intentionally learn about the specific and comparative situation of persons with disabilities, **disability-inclusive indicators** are important to promote the monitoring and evaluation of activities, outputs and outcomes along the project cycle. If indicators do not specifically refer to disaggregation or disability inclusion chances are small that M&E activities will actively and consistently collect data on participants with disabilities – with the high risk of persons with disabilities and their experiences and impact on their lives (good and/or bad) remain invisible and unaccounted.

Below are a few examples from the GBV sector:

Original Indicator:

Proportion of health units with at least one service provider trained to care for and refer VWA/G survivors

Disability-inclusive indicator:

Proportion of health units with at least one service provider trained to care for and refer VWA/G survivors with disabilities

Original Indicator

The proportion of VAW/G cases that were investigated by the police

Disability-inclusive rephrasing:

Proportion of sexual violence cases that were investigated by the police, disaggregated by disability (or impairment type) and age

Original Indicator:

Proportion of law enforcement units following a nationally established protocol for VAW/G complaints

Disability-inclusive rephrasing:

Proportion of law enforcement units following a nationally established protocol for VAW/G complaints, disaggregated by disability (or impairment type).

Comment: if this a multi-country programme, it might be worth to consider an indicator that relates to the level of disability inclusion within such national protocols, e.g. *# of countries that include a disability lens (or explicitly include women and girls with disabilities) in their national protocols on VAW/G*

Original Indicator:

Number of shelters and hotlines available for women and children

Disability-inclusive rephrasing:

Number of *disability-accessible* shelters and hotlines available for women and *children with and without disabilities*

Or: Number of shelters and hotlines available for women and children, *disaggregated by impairment-specific accessibility*

Partnerships⁴

A Guide to Disability Organisations

Persons with disabilities have been excluded from most decision-making processes. Families, communities - and development organisations - have tended to decide on their behalf, even when it directly affects their lives. That could be about undertaking physical therapy, having surgery, or being sent away to a "special needs" school.

As a result, they're rarely consulted or involved in development planning. Few can take up leadership positions. In response, a disability movement has been growing around the world. Its aim is to represent the voice of persons with disabilities and lobby for greater inclusion. Conditions vary from country to country. But often there are national organisations for many of the main impairment groups - with branches or committees in towns and villages. If the movement has been established for a while, there may also be a federation or union representing all disabled people in national level policymaking.

Each organisation has a part to play, to ensure persons with disabilities benefit from development. All can be important resources for meeting the needs in your region. However, contacts for consultation about inclusion should be with organisations of people with disabilities themselves - through self-help groups, OPDs or national and international bodies.

Organisations of Disabled People (OPDs) - also known as Disabled Peoples' Organisations (DPOs)

- Are organisations **OF** persons with disabilities
- Are led and managed by persons with disabilities
- Many represent people with a particular impairment
- In countries where the disability movement isn't strong, there may only be two or three impairment groups represented
- Some national level DPOs are known for their lobbying, such as the National Union of Disabled People Uganda (NUDIPU), and Federation of Disability Organisations in Malawi (FEDOMA)
- Some are represented at regional and international level, like the Southern Africa Federation of the Disabled (SAFOD) and International Disability Alliance (IDA)
- Many can be small, relatively weak in capacity and focus on meeting the immediate needs of their members – linked to the high poverty levels and many are in and low historic levels of support

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- The most important aspect of OPDs is their ability to understand the needs in their locality and to mobilise persons with disabilities
- With appropriate support, OPDs can be effective partners in community development programmes for mainstream initiatives.

Self-Help Groups

- Are groups **OF** persons with disabilities and/or caregivers not yet OPD registered
- Tend to be more common in rural or semi-urban contexts where OPDs have yet to reach, or for groups who lack the resources to formally apply for registration
- Play an important role at the local level in connecting children and adults with disabilities and caregivers with each other
- Often offer social support and can be mobilised to provide assistance in during emergencies
- Can be an important link between people with disabilities and community development programmes or disaster resilience programmes and should be sought when carrying out mapping activities.

Disability Non-Governmental Organisations (NGOs)

- Are organisations working **FOR** adults and children with disabilities
- include large international NGOs like SightSavers, CBM, Humanity and Inclusion (formerly Handicap International) Deafchild Worldwide, Sense International, Leonard Cheshire Disability, Sue Ryder Care, AbleChild Africa and ADD International
- Some specialise in particular impairments, some are more focused on building the capacity of persons with disabilities and their representative organisations
- Many national NGOs target people with disabilities specifically, e.g., Uganda Foundation for the Blind, and Association for People with Leprosy in Angola
- Include faith-based charities supporting special needs schools and classes, vocational training centres or working to help produce orthotics/prosthetics
- In many cases medical/rehabilitation needs may be the primary support focus
- Many are transitioning towards rights-based approaches. Policy work and advocacy campaigns are often more advanced in this journey than programming operations of the larger disability NGOs, mainly due to the historical journeys of each organisation and the composition of their supporter base.

Partnerships – guiding principles

While the organisational capacity and number of established OPDs varies between countries and within countries, it is important to try to link with them – either registered organisations or self-help groups. Distinguish between organisations **working for** persons with disabilities and membership organisations **of** persons with disabilities. Where possible support the latter to build mutually suitable partnership opportunities.

A two-pronged approach to partnerships including OPDs could comprise working with:

- a) Network organisations/hubs which would include supporting them to cascade the capacity strengthening that they receive to their membership organisations on the ground who work directly with communities and
- b) Grassroot organisations directly, who often already know what the gaps and resiliencies are in relation to their members' requirements and opportunities for contribution. 'Working with' means acknowledging the resources the grassroot organisations invest in this collaboration and for

which they may need financial support and or capacity strengthening for resource mobilisation to be able to implement their activities in support of the project and partnership.

Preparedness for partnership is time-intensive but important to establish and maintain a functional and trusting relationship with partners. In humanitarian work especially it could make a huge difference to prepare partners for emergencies before one happens: for example, to have a meaningful voice in a humanitarian cluster system, organisations need to know how a cluster system works and how development funding cycles work because development funding happens on a quicker time scale. OPDs need to know what to expect when an emergency happens so they can immediately engage. This needs discussion and negotiation with the organisations.

Investing in knowing potential partners is a key element. This may mean mapping civil space and analysing intersectional needs of partner organisations in regard to access, language and communication, gender/disability/age barriers and other gender identity factors that may affect the dynamics of your organisation's relationship with those organisations. It may also require talking to people who these organisations work with to gauge legitimacy - for example, when local organisational practices may reflect the social norms and practices of the local population. This is particularly important in regard to gender equality, gender-based violence, and institutional abuse.

Building trust with organisations/groups could include having a mutual appraisal process looking at capacities of both partners, also considering how to adapt to partners so your organisation can add value to them. Instead of rejecting potential partners on a yes/no approach to risk, a due diligence process should explore what partners would need to be able to do the project, identify any challenges - including partnership relationship risks (not only project risks), and find mitigating steps.

Scaling models for smaller organisations could be helpful where there is a commitment to long-term support that meets the organisational needs of the partner organisation, while starting with small projects and testing out how dialogue with the organisation would work, considering accessibility in regard to, for example, communication and language, and technical material, to get to know the organisation and how to add value before going into a bigger partnership. Particularly when working with small OPDs or Self-Help Groups, it is important to remember that they identify as a social movement. Grassroot organisations in whatever form do not always benefit from formal registrations and structures that happen with other non-governmental organisations because they need to stay nimble and flexible to act quickly for the benefit of their members. Therefore, capacity building should be approached with power dynamics in mind, negotiating with the organisations or groups what is most useful and acceptable for all involved.

To build truly equal partnerships, programmes should invest in time and training to ensure that people with disabilities have the skills and knowledge to engage in design, analytical input and interpreting data so that the process includes the participants' concerns and unique interpretations.

Further resource:

- [IDA report on meaningful participation of OPDs](#). It provides rationale for partnership with and participation of OPDs and six core recommendations.

Participation⁵

Meaningful participation is a term often used but rarely clearly defined. It should not be limited to consultation of persons with disabilities in the form of extracting information about barriers and challenges.

Persons with disabilities – especially women and girls with disabilities - can often be excluded from consultation processes (unintentionally as well as intentionally). They can and should provide important input into strategies across programming thematic areas, activities inclusive approaches in any programme, and contribute to feedback and assessing progress being made in programming work (or not).

- Be careful not to group persons with disabilities in a single ‘vulnerable groups’ category because the lived experiences of girls, boys, women, men and gender non-conforming persons with disabilities differ.
- Seek out and communicate directly with a diverse range of persons with disabilities, their families, OPDs and discuss with them where they may fit in potential action: as high-level advocates, grassroots OPD or self-help groups who mostly deal with day-to-day concerns, or young persons exploring ways to become activists on matters that are important to them. Gender diversity is very important.
- Be aware that many persons with disabilities, especially girls and young women have experienced low expectations from others and may have internalised those beliefs. It may be necessary to address low self-esteem and confidence by providing specific opportunities and support for developing belief and skills to participate.
- Wherever and whenever possible include a diverse range of persons with disabilities in awareness-raising. Organisations of persons with disabilities, including female-youth and women-led organisations, or individual activists with disabilities should lead awareness campaigns and training on disability inclusion with an age and gender lens for government and non-government agencies, communities and private sector. They can participate in training enumerators for various data collection processes and/or participate as enumerators and facilitators themselves. They should participate in community consultations, rapid assessments, peer education and other opportunities.
- Avoid creating just separate events or meetings for persons with disabilities unless the intention is to work on addressing low self-esteem for example; ensure all events are accessible and inclusive.

⁵ Adapted from trainer-generated resource (Andrae. K)