

Disability & International Development Agency
**DISABLED PEOPLES ORGANISATIONS – DENMARK
(DPOD)**

Report of the Comparative Study of Political Approaches and
Government Processes to Mainstream Disability into all Sectors of
Society

Summary Version

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DPOD & International Development Cooperation

DPOD (Disabled Peoples Organizations - Denmark) is a Danish umbrella organisation with 32 member organizations, representing 320.000 people in Denmark.

The work for an inclusive world for persons with disabilities is an important task and the Danish disability sector is a growing stakeholder.

As DPOD is an umbrella organisation that works for its Danish member organisations. This means that the Danish member organisations can get support and funding from DPOD through the Miniprogramme to carry out activities in developing countries. Then DPOD does not support or fund individuals or organisations who do not have a connection to the Danish member organisations.

In cooperation with the member organisations the DPOD Department for Development Cooperation seeks to advance the lives and human rights of persons with disabilities in the developing world. This is done in cooperation with DANIDA (the Danish Development Agency) who funds the activities through the Miniprogramme that DPOD administers and through single projects.

The overall goal of the DPOD development work is to improve the opportunities for persons with disabilities in the developing countries so that these people can implement and achieve their rights as human beings. Thus the focus of the work is both development and building of strong organisations of persons with disabilities in developing countries and lobbying and advocacy in relation to governments in developing countries in order to make them comply with the human rights for persons with disabilities.

DPOD is active in 8 developing countries and the work is carried out in accordance with the country strategies the guidelines for the Miniprogramme Strategy and the Partnership Strategy and a number of thematic themes.

You can read more about the work that DPOD do in Denmark on our Danish web site <http://www.handicap.dk/english> or <http://www.handicap.dk>

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INTRODUCTION

Disabled Peoples Organisation-Denmark (DPOD) has undertaken a cross-national society in 5 countries: Denmark, Uganda, Kenya, Malawi and South Africa.

The objective of the comparative study is to identify the reasons for, challenges and outcomes, from following two fundamental approaches; namely the "right-based approach" and "the road of good intentions" - towards an inclusive society as well as investigating the benefits and/or disadvantages of combining the two approaches.

THE DISABILITY MOVEMENT

Prior to the 1970s, the disability movement approached disability issues based on the needs of people with disabilities mainly in institutions or even within their homes because they were considered to be a special group of society worthy of charity.

However the disability movement has over the years challenged this approach in preference for the *Human Rights Based Approach* which emphasises that persons with disabilities should be perceived as human beings with full rights. A number of international instruments have been adopted to entrench this approach, the most prominent among them being the just adopted UN Convention on the Rights of Persons with Disabilities which emphasises the rights of persons with disabilities to access health (25) education (24), work employment (27) and improved accessibility (9) among others. Other earlier international instruments like the UN Year of Persons with Disabilities (1981), the UN Decade of Persons with Disabilities (1983-1992), and the UN Standard Rules on Equalization of Opportunities for Persons with Disabilities (1993) have influenced policy development and implementation of the Rights based Approach to disability.

THE DISABILITY MOVEMENT IN DENMARK AND AFRICA

The disability movement in Denmark dates way back to the early 19th century (1866) when single disability organisations of the blind, deaf, hearing impairment and physically handicapped were formed to address the needs of specific disabilities through policy development and fighting for their rights. These later formed one umbrella organisation DPOD in 1934 which currently has a membership of 32 organisations. On the other hand, the oldest Disabled People's Organisation (DPO), among the 4 African countries involved in the study is traced in South Africa in 1930s. Apart from that, the rest of the DPOs are a product of the 1980s and 1990s mainly inspired by the awareness created by the UN Decade of Persons with Disabilities, the UN programme of Action concerning disabled persons and the African Decade for Persons with Disabilities (1999-2009).

By and large, the disability movement in Uganda, Malawi, Kenya and South Africa has also been influenced by the western world especially the Scandinavian organisations like DPOD, the Norwegian Association of the Disabled (NAD) and the Swedish Organisation of Persons with Disabilities International Aid Association (SHIA). The organization and modelling of the disability movement in these countries is almost a replica of the disability movement in these three Scandinavian countries. In addition to the Scandinavian group, the other disability focused organisations that have had significant influences on the disability movement in the four countries are Sight Savers International (then Royal Commonwealth Society for the Blind) and Christoffel Blindenmissie from Britain and Germany respectively.

The disability movement in Uganda and South Africa has also been influenced by the national politics of the National Resistance Movement (NRM) and the African National Congress (ANC) respectively. And as a result, they have fair representation in the legislative institutions of these countries.

By way of contrast, while DPOs in Denmark aim mainly at integration and human rights, DPOs in Africa have components of economic empowerment, health care, advocacy and provision of other specialised needs of persons with disabilities since these are not well provided for by the government and other service providers.

ACHIEVEMENTS OF THE DISABILITY MOVEMENT

Access to health care: In Denmark and South Africa, provision of health care is tackled based on both good intention and rights based approach. There is free health care in both countries. On the other hand in Uganda, Kenya and Malawi, there are policies in place to enable persons with disabilities access free health care but service delivery is both lacking in both quality and quantity due to resource constraints.

Access to education (Article 24) Education is vital for the development of persons with disabilities. This is measured by the development of the necessary policies targeting persons with disabilities and children with special needs. In Uganda and Kenya, DANIDA has helped in the identification of children with disabilities and training of special needs teachers under Uganda National Institute of Special Needs Education (UNISE) and Kenya Institute of Special Needs Education (KISE). Free primary education in Kenya, Uganda and Malawi has increased the enrolment of disabled children in schools. These children may however find difficulties getting into tertiary institutions. In Uganda, persons with disabilities get admitted to tertiary institutions and universi-

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ties through affirmative action. In Denmark, there is no specific programme on inclusive education for persons with disabilities although the education system ensures that learners with special needs are catered for either with in the mainstream or in special schools.

Economic Empowerment: In Kenya, Uganda and Malawi, employment laws are silent about persons with disabilities. The Labour Act of 2000 in Malawi provides for non discrimination in terms of employment – equal pay for equal work as well as non discrimination on the basis of disability. This is contrary to Article 27 of the UN Convention on the Rights of Persons with Disabilities. In Africa free primary education is not backed by strategic and technological ventures that are likely to guarantee them economic empowerment and fair competition on the job market especially with escalating rates of unemployment in African countries. However DPOs have at a small scale organised vocational training centres for persons with disabilities. In Denmark, where there is no problem of unemployment, disability organisations negotiate with employment agencies to secure compensation for persons with disabilities. South Africa has realised strides in economic empowerment for persons with disabilities through Small Medium and Micro Enterprises SMME that empower persons with disabilities with credit facilities and training plus a string of income generating projects. In Uganda, the Universities and Tertiary Institutions Act of Parliament of 2001 promotes empowerment of persons with disabilities through higher education. The Malawi Entrepreneurial Vocational Education and Training Authority (TEVETA) Act of 1999 promotes training and entrepreneurial development of women, youth and persons with disabilities. On the other hand, one of the designated functions of the Malawi Council for the Handicapped is to run community and institutional vocational rehabilitation programmes for persons with disabilities as well as to provide post-training support including referral to micro-credit institution.

Accessibility: As stipulated in the UN Convention on the Rights of Persons with Disabilities, persons with disabilities need to access the physical environment, information and technology including communication technologies on the same basis as others. So what have countries done to eliminate obstacles and barriers to accessibility? In Denmark, the building code provides for consideration of disability when designing buildings. However, some buildings are still built without such considerations. The Danish government has a number of opportunities for persons with disabilities to access transport communication through a Competence Centre- IT for every citizen. The Danish Ministry of Science has established a Competence Centre – IT for all (KIA) with the aim to advise public authorities on IT-accessibility and DPOs have representatives in all cen-

tres. In Africa, there is limited awareness about accessibility of persons with disabilities to the physical environment and communication/communication technologies. In Uganda, Kenya, Malawi and South Africa, there are policies and pieces of legislation in place to address the issue but these have largely remained on paper. Structures remain inaccessible and none of the owners of such structures has been penalised for the offence.

Development Cooperation-Partnerships and Networking: African countries form partnerships with bilateral and multilateral organisations through their governments. Governments design Poverty Reduction Strategy papers PRSPs and use the latter to negotiate for funding. The disability issues can get the necessary lobbying through CSOs who are supposed to participate in the formulation of PRSPs. Disability issues may be at risk of being invisible given the numerous development issues that are priority. However, some development partners like DANIDA, USAID and European Union among others have prioritised disability in their agenda and this puts disability at a better chance of negotiations, but only if the disability movements in Africa do effective lobbying.

Monitoring and Evaluation: M&E should be carried out in regard to the performance of development programmes in respect of meeting the needs of persons with disabilities. The guidelines for M&E as laid down in the Convention on the Rights of Persons with Disabilities (Article 33) are not followed. South Africa has a well developed compendium of indicators for assessing the mainstreaming of disability issues in government programmes. This is a case of good practice which other African countries should emulate.

N.D Council

GOOD PRACTICES

The study revealed some *good practices* which the disability movement in the different countries could emulate:

Principle of Compensation: In order to offset or at least minimise the consequences of the barriers and hurdles that disability imposes on an individual from exploiting opportunities, persons with disabilities need *compensation through services and aids so as to enable them live up to their full potential.* This has been successful in Denmark. In Africa there is no such a thing as compensation. All the 4 African countries however offer free primary education for all children and South Africa and Denmark provide free assistive devices. It is NGOs like SHIA, Christian Blind Mission (CBM), Handicap

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International, Leonard Cheshire Foundation, Feed the Children, VSO, Salvation Army and many others who have been providing free or subsidized rehabilitation services persons with disabilities in many African countries.

Education has been widely accepted as a door opener to the labour market, economic empowerment, self help and integration into the society. The 5 countries have free primary education. However children with disabilities face difficulties to access education due to among others lack of Braille materials, audio equipment, non-supporting attitudes and discriminatory actions against persons with disabilities. Other difficulties include poor strategies for employment and deployment of trained teachers in special needs education. DANIDA has assisted in training special needs teachers and offering assistive devices to persons with disabilities in Kenya and Uganda. SA white paper on education provides guidelines to and breaking to education of disabled learners. The National Policy on Equalisation of Opportunities for Persons with Disabilities in Malawi as well as the Education Policy have clear strategies on how to promote inclusive education

Economic Empowerment: which is a get way to overcoming poverty and the consequences of disability, has also had a number of good practices. In SA income generation was the main preoccupation of the disability movement in the 1980s. Self Help Groups of Paraplegics SHARP of Soweto was started by Mr. Mavuso and others mainly to provide the necessary training for persons with disabilities and prepare them for the job market and participate in transforming society. There are many micro credit facilities especially targeting persons with disabilities in SA. In Uganda NUDIPU is currently running 3 income generating projects for persons with disabilities while in Malawi, MACOHA in collaboration with Sight Savers, Trust for Transformation and Opportunity International Bank of Malawi (OIBM) have been involved in a partnership project aimed at economic empowerment for disabled persons.

The quota system in the African countries is a policy to reserve a certain number of positions for persons with disabilities but it is only SA that is operationalising this policy. Denmark is however opposed to this because of its likelihood to steer discrimination. This is based on the argument that persons with disabilities should access employment on merit not because they are disabled.

Accessibility to the Physical Environment and Information has also had a few good practices. The Integrated National Disability Strategy in SA recognises the need

for Self Representation of disabled persons in the realisation of a barrier-free environment. In all the five countries, the use of sign language interpreters has become a standard practice but at varied degrees depending on availability and need. In some countries like Uganda it is provided for by law (Article 24 of the 1995 Constitution of Uganda). In Kenya, each region has been assigned a sign-language interpreter for court proceedings. In Malawi, it is one of the priority policy areas of the National Policy on Equalisation of Opportunities for Persons with Disabilities.

Health care: In Denmark, every citizen is entitled to free health care service by general practitioners and practicing specialists through a health care reimbursement scheme. In South Africa, Uganda, Malawi and Kenya, the governments have made the necessary legislations but only South Africa is implementing its commitments towards the policy

Political Representation of Persons with Disabilities: This is very important for any interest group to be represented legislative bodies. In Uganda, the Constitution provides for 5 members of parliament from the five regions and woman representative as well as representatives at all local councils. SA has at least 10 representatives at the national legislature and other levels. *SA Are they specific disability or elected by all?*

Dialogue, Consensus and Alliance Strategies: This makes the power of the disability movement stronger. The Danish disability movement and the movement in Africa have used dialogue, consensus and alliance based strategies.

Emerging Civil Society Movement: Disability groups are no longer small interest groups but an emerging civil society movement with umbrella organisations that act as voices for all persons with disabilities. Denmark probably gives a good practice case here which can be emulated by the disability movements in the other countries. DPOD and the disability movement is now an actor that is counted on by both the government and people with disabilities in laying down the Danish disability policy.

Unity within the Disability Movement: The disability movement in Denmark has for many years been united in DPOD. This unity has proven to be very successful. This is a good practice African countries are yet to master.

The political approaches so far employed and government processes to mainstreaming disability have grown at different strategic scales in the five countries of this study.

CHALLENGES FOR THE DISABILITY MOVEMENT:

Lack of accurate data and information on disability: obstructs the planning process. Most countries and DPOs do not hold up to date data on the magnitude, types and number of persons with disabilities

Poverty: Because most persons with disabilities are poor, most of their interventions are guided by their needs not rights. This is why some interventions cluster persons with disabilities as a deserving target cluster of the poor.

Lack of Cohesion within DPOs: While Denmark has managed to unite all DPOs into one umbrella organisation, her African counterparts are still fragile with varying interests of different DPOs. This has made it difficult for the African disability movement to engage in meaningful dialogue with their government and bilateral and multilateral corporations.

Capacity of DPOs: Because most persons with disabilities are not well educated, the disability movement is engineered by a few elite who are able to champion their cause. The movement finds it challenging to cope with the changing policy scenery of governments. This of course calls for the DPOs to develop capacities and competences, mostly in terms of understanding of government's development agenda, national policies, legislation, programs and the role that DPOs can play to influence positive change.

Ownership and Accountability of the Disability Movement: While democracy in Denmark governs the disability movement, in Africa, there is a general lack of consensus. Persons with disabilities in the different DPOs do not participate in decision making during negotiations and quite often there is disagreement between the different DPOs.

Disability Mainstreaming: While there are good policies and in some cases, laws for mainstreaming disability in all government departments in Uganda, Kenya and Malawi, there is a stiff shortage of resources to implement such policies. It is only South Africa that has realised some strides in mainstreaming disability in all structures. Persons with disabilities also have a concern that with mainstreaming, they could disappear or rather their voice may become void during policy implementation because they are a small minority group.

Knowledge Gap among Policy Makers and Planners: There is no common approach to mainstreaming. Policy makers and the disability movement itself have not under-

taken measures to reach a consensus on how disability mainstreaming should be treated.

Weak Structures to Facilitate and Monitor the Mainstreaming Process: While the Danish Council is mandated to monitor the situation of persons with disabilities in Denmark, in Uganda, Kenya and Malawi the disability movement is not yet functioning fully to challenge any misconduct within government structures.

Inadequate Investment in Disability Programmes: Disability is part of the social development sector which is poorly funded in almost all African governments. Policy makers contend that disabled persons can enjoy services in the mainstream. Mainstreaming disability has seen decreased funding in Uganda, Kenya and Malawi. A twin-track approach should however be employed to cater for those disability needs that cannot be met in the main stream.

RECOMMENDATIONS AND WAY FORWARD

- Whilst Uganda and SA have successfully provided for disability issues enacted in their constitutions Kenya, Malawi and Denmark have addressed the disability issues at sectoral levels. However, implementation is still a challenge due to lack of funding in these countries. There is need for the African governments to increase funding for implementation of policies and programmes that impact highly on disability such as education, health, employment and many others.
- There is need to publicise the contents of the UN Convention on the Rights of Persons with disabilities among policy makers and DPOs
- It is necessary that a twin track approach to disability is adopted as development programming strategy.
- More partnerships are needed between DPOs and other partners so that Persons with disabilities get employed in organisations
- There is need for constant monitoring and evaluation to keep with the changing national and global trends
- DPOD should continue lobbying for inclusion of disability on the development humanitarian aid, while southern DPOs concentrate on advocating for inclusive policies and programmes in their countries