NATIONAL POLICY

ON

CARE FOR PEOPLE WITH DISABILITIES

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CONTENTS

1. INTRODUCTION

2. BACKGROUND

3. THE CONSEQUENCES OF DISABILITIES

4. MULTI-SECTORAL NATIONAL POLICY
   1. THE POLICY OBJECTIVE
   2. PRINCIPLES OF THE POLICY
   3. POLICY GUIDE-LINES - RESPONSIBILITIES OF THE VARIOUS AGENCIES
      3.1. RESPONSIBILITIES OF THE STATE
      3.2. ROLE OF SOCIETY
   4. CO-ORDINATION OF MULTI-SECTORAL ACTIVITIES
   5. RESOURCES FOR DISABILITY PREVENTION AND CARE PROGRAMMES AND ACTIVITIES

6. CONCLUSION
NATIONAL POLICY ON CARE FOR PEOPLE WITH DISABILITIES

1. INTRODUCTION

1.1 The issue of people with disabilities is one of the important socio-economic development problems for developing countries, where the systems established for the integration of disabled persons are inadequate. Yet, countries, organisations, groups and individuals are attempting to prevent the disabilities and provide care to people with disabilities by all means.

1.2 The National Development Plans of Botswana, including NDP 7, contain some guidance for action for the provision of services to people with disabilities. Consideration is given to education, health and other social sectors.

1.3 If the issue of disability is not addressed, the impact of disability on the socio economic development at all levels of society would be an enormous problem for the country in the long run. This observation has led to the emerging recognition that only a national response, which engages all sectors of the society meaningfully in the care for people with disabilities, is required.

1.4 The National Policy on Care for People with Disabilities outlines the national response to the demand for a co-ordinated delivery of service and care for people with disabilities in Botswana. It describes the role of various government ministries, the private sector, non-governmental and local organisations, community leaders and members, and persons with disabilities, in the national response. The national policy forms the basis on which a national strategic plan will be developed. Within the national strategic plan, different ministries and organisations will formulate their sectoral action plans and projects for implementation.

1.5 The policy will be used to guide all actors in disability prevention and care, including government ministries at policy making and operational levels, non-governmental and community organisations, private sector organisations and enterprises and members of the community. External support organisations providing financial and technical assistance for all disability related activities will do so within the framework of the national policy.

1.6 The principles that constitute this policy are based on the guidelines contained in the National Development Plans of Botswana, the United Nations World programme of Action Concerning Disabled Persons, and the different government ministries’ knowledge of the nature of the disability issue. These principles necessitate a well co-ordinated approach to deal with disabilities. In addition, the policy principles take cognizance of human rights in line with the country’s constitution.
BACKGROUND

2.1 The Government of Botswana, a few years after attaining independence, began to gauge the need for helping people with disabilities. In the early 1970s, the Government commissioned a study on different disabilities that were prevalent in the country in order to analyse the situation.

2.2 The Ministry of Health in response to the findings of the above mentioned project, and realising the need to provide service, introduced the Special Services Unit for the Handicapped (SSUH) in 1975. The SSUH has now been developed into Rehabilitation Services Division under the Ministry of Health.

2.3 The Ministry of Education was also supplemented by the introduction of special education concepts while formulating education policy in 1977. These concepts have now led to the establishment of the Special Education Division, which has been set up for planning and overseeing education of people with special needs.

2.4 The Ministry of Local Government, Lands and Housing established the Department of Social Welfare and Community Development in the early 1970s. The services delivered by the department, although not specifically aimed for the disabled persons, benefit all who are in need.

2.5 The Ministry of Labour and Home Affairs, since 1992, has taken over the Division of Culture and Social Welfare from the Ministry of Local Government, Lands and Housing. The Division involves itself in the provision of social welfare services to the whole population, including people with disabilities, in co-operation with the Local Authorities.

2.6 There are non-governmental organisations which have been involved in providing various services to groups of disabled people in the country. In addition to that, there are associations/organisations formed by individual communities which work for the welfare of people with disabilities in the community.

2.7 It can be said that existence of disability related institutions, organisations and associations of different origins can be attributed to the formal and informal partnership of people and the Government of Botswana. Although services are being provided to people with disabilities, they are provided in isolation, and more uncoordinated than interactive.

2.8 The United Nations declared 1981 as the International Year for the Disabled persons (IYDP), and the period 1983-1992 as the International Decade for the Disabled People (IDDP). With those announcements in the early 1980s, the UN took initiative in sensitising countries throughout the world to give consideration to the issues of disabilities and their consequences.
The World Programme of Action concerning disabled persons was adopted by the General Assembly of the UN in December, 1982. It constitutes an international long-term plan based on consultations with government organs and bodies within the United Nations system, and with inter-governmental and governmental organisations. According to the World programme of Action, progress could be achieved more quickly, efficiently and economically if close co-operation was maintained at every level.

Diseases, injuries/accidents and genetic defects are the primary causes of impairments to the physical and psychological structure of a person. The psycho-social and physical barriers of the environment superimposed on these impairments cause disability.

The incidence of certain disabilities is high in developing countries. In addition, in developing countries, people with disabilities generally have a shorter life span. On the whole, the most important factors contributing to death in the developing countries are infectious diseases and diarrhoea. Because of these high mortality rates, the prevalence of disability in developing countries is lower than in the industrialised ones. As health services in these countries improve, however, survival rates will increase. The actual number of people with disabilities will therefore go up while the incidence of disability can be expected to decline. The prevalence of disability in developing countries has been estimated to be around 10%.

The Central Statistics Office, in 1991, attempted to assess the extent and types of disabilities in the country by including a questionnaire on disability in the census in Botswana. The 1991 census revealed that disability problems affect 2.2% of the population. The data showed that 66.2% of the disabled population lived in rural areas.

On the basis of field experience by WHO, it is estimated that only 2-3% of people who could benefit from rehabilitation are actually receiving services in developing countries world-wide.

Many factors are responsible for the inability of persons with disability to undergo rehabilitation in order to integrate into society. Some of these are:

- weakness of an infrastructure or related services for social assistance, health, education, vocational training and placement;
- constraints, that include lack of resources, geographical distance, physical and social barriers make it impossible for many people to take advantage of available services.
3. THE CONSEQUENCES OF DISABILITY

3.1 Some effects of disabilities occur immediately after the onset of the disability, and some may be far reaching and long-term. The bad consequences affect not only individuals but also their families, their community and the society as a whole.

3.2 The following are some of the consequences that individuals with disabilities may suffer from.

The person is likely to:
- find it difficult to move, see, hear, feel, think, control themselves or do certain things;
- may or may not regain abilities/functions with or without treatment/training;
- lose his independence and become dependent upon others;
- lose social integration;
- live in poverty and with a poor quality of life.

3.3 Disabilities will have far-reaching consequences, at household and societal levels. These will include:
- the need for care by the family will be increased;
- social relationships will be disturbed and the family structure may disintegrate;
- economic burdens on families may lead to poverty;
- low socio-economic level and low education lead to less development and lower productivity in society;
- the demand for care by the society/state will be increased.

4. MULTI-SECTORIAL NATIONAL POLICY

4.1 THE POLICY OBJECTIVE

The purpose of the Policy is to guide those parties interested in disability issues, in order to involve them in the process effectively. Because of the varying degrees of involvement of the numerous actors within disability care, it is necessary to set an overall policy objective.

Before laying down the policy objective, it is important to take note of the view of the United Nations in this regard:

"The purpose of the World Programme of Action concerning Disabled Persons is to promote effective measures for prevention of disabilities, rehabilitation and realisation of the goals of full participation of disabled persons in social life and development of equality."

Considering the above-stated facts, the following policy objective is proposed for the Republic of Botswana:
TO COMBAT THE INCIDENCE OF DISABILITY AND TO PROMOTE THE QUALITY OF LIFE FOR PEOPLE WITH DISABILITIES

4.2. PRINCIPLES OF THE POLICY

The principles of the National Policy for Care of People with disabilities will be:

**PRINCIPLE 1**
Recognition and protection of the human rights and dignity of every individual

**PRINCIPLE 2**
Participation in the basic entities of society - the family, social grouping and community - is the core of the existence of the human being.

**PRINCIPLE 3**
To strive for a self-sufficient society through the formation of an environment within which all peoples, including those with disabilities can develop their abilities to the fullest possible extent.

**PRINCIPLE 4**
To ensure that the person with disability has a responsibility and a right to determine his own well-being.

**PRINCIPLE 5**
To ensure that the care, socialisation and education of the person with disability in the family context are set objectives

**PRINCIPLE 6**
To ensure that the integration of the person with disability into society is actively promoted.

**PRINCIPLE 7**
To recognise that care of people with disabilities is a continuous process requiring more family participation, community involvement and less institutionalisation.

**PRINCIPLE 8**
To ensure that equal opportunities of all members of society are aimed at, but will vary according to the needs and abilities of the individual.

**PRINCIPLE 9**
To ensure that care of people with disabilities is to be effectively co-ordinated, in a spirit of co-operation and beneficial interaction.

4.3 POLICY GUIDE-LINES - RESPONSIBILITIES OF THE VARIOUS AGENCIES

The responsibilities of the various bodies involved in the system of care for people with disabilities are stated in the following guide-lines.
4.3.1 RESPONSIBILITIES OF THE STATE

- To prevent the social, emotional and physical deprivation of an individual. If it is already manifested, to help to combat it and to supplement the measures made by the person, his family or society in this regard.

- To maintain a system of care for people with disabilities.

- To ensure that the welfare of people with disabilities has its rightful place in development programmes in the broad educational, health, social, physical and economic spheres.

- To ensure that people with disabilities are not disadvantaged in securing employment whenever possible.

4.3.1.1 OFFICE OF THE PRESIDENT

To provide political leadership and support through:

- Mobilising policy-makers in various Ministries and sectors in the provision of services to people with disabilities.

- Advocating for the provision of public and private resources as needed for people with disabilities.

4.3.1.2 THE MINISTRY OF EDUCATION

- Establish special education as an integral part of regular and non-formal education.

- Provide national leadership supervision in the development, implementation and maintenance of special education policy at all levels of education system.

- Provide guidelines for use by Local Authorities and non-governmental organisations on matters pertaining to establishing and managing special education provisions.

- Provide specialists and professionals on all areas of special education in order to assist children and adults with learning difficulties that may arise physical and/or mental handicapping conditions.

- Provide support to NGOs providing special education.
THE MINISTRY OF HEALTH

The role of the Ministry of Health will be:

- To continue the existing disability prevention services under the Primary Health Care and Hospital Care programmes.

- To introduce small-scale rehabilitation facilities in national referral hospitals and district hospitals.

- To strengthen the existing community-based rehabilitation services under the Primary Health Care programmes, in order to achieve more effective delivery of services.

- To provide assistance to non-governmental organisations that are providing health-related services to people with disabilities and are qualified for government assistance.

- To oversee the implementation of the community based rehabilitation strategy under the Primary Health Care programme by the Rehabilitation Services Division through co-ordination, training, supervision and provision of referral services in medical rehabilitation.

THE MINISTRY OF LOCAL GOVERNMENT, LANDS AND HOUSING

- To ensure that development plans and policies designed by Local Authorities have adequate provisions for disabled people.

- To ensure that disabled people participate and/or are fully consulted in the planning and development of land that may directly or indirectly affect them.

- To ensure that any development of land has provision for disabled people.

- To ensure that sufficient financial, manpower and facilities (including transport and housing) resources are available for the implementation of disability related programmes executed by Local Authority.

- To ensure proper liaison with government bodies and other agencies in order to coordinate programmes effectively.

- To execute proper policies to assist non-government Local organisations in implementing programmes at their level.
4.3.1.5 THE MINISTRY OF LABOUR AND HOME AFFAIRS

The role of this Ministry will be:

- To ensure that the rights of the workers affected by disabilities will be protected by legislation.

- To provide guidelines regarding the prevention of occurrence of disabilities at workplaces.

- To make adaptations in the vocational training programmes so that training of people with disabilities is also included. The physical structure of the training centres as well as workplaces, where possible, should be altered to make them easily accessible to people with disabilities.

- To develop a social scheme that will provide support to the families who care for the family members with severe disabilities.

- To develop sports facilities and programmes to assist integrate people with disabilities into the main society.

- To provide assistance in whatever form to non-governmental organisations and associations establishing work-units for disabled people.

- To ensure that the needs of people with disabilities are taken into consideration when they are catered for under the National Policy on Destitute, and this should also include needy students.

- To ensure that Children's Act stipulates that all institutions for reception of children or juveniles are designed to cater for the needs of persons with disabilities.

- To ensure that considerations should be made when formulating all the policies and laws on social welfare in order to safeguard the interests and needs of disabled persons, such as for children, the youth, the old people and groups in the society.

- To ensure that all policies, programmes and laws relating to women, youth, sports, culture and prisons give emphasis on disability care.

4.3.1.6 THE MINISTRY OF WORKS, TRANSPORT AND COMMUNICATION

The Ministry will:

- Further the social integration of people with disabilities through transport communication policies.

- Support infrastructural developments undertaken by Government in regard to people with disabilities.
- Provide national leadership and supervision for support of disabled persons as users of our built environment.

- Provide appropriate technical guidelines regarding the above for use by Local Authorities, parastatal and private organisations.

- Provide support to NGOs within the context of the National Policy on Care for People with Disabilities.

4.3.2 ROLE OF SOCIETY

- The community, organisations and individuals should contribute to provide effective care of people with disabilities,

- Society should try to alleviate the needs of people with disabilities, and should intervene when they can not satisfy their own needs.

- The involvement of society is needed in the provision of actions and facilities that support disabled people, and in the rehabilitation of people with disabilities.

4.3.2.1 THE BOTSWANA COUNCIL FOR THE DISABLED FOR NGOs

- The co-ordination of the activities of all non-governmental organisations providing rehabilitation to disabled people.

- The promotion of organisations/associations of and for people with disabilities, and the monitoring of their activities.

- The assessment of projects related to the disabled, established by NGOs and the recommendation of them for assistance by Government.

4.3.2.2 THE PRIVATE SECTOR

- The business community has an obligation to support the programmes for disabled people in the country.

- Welfare work is a joint effort, and the private sector has a crucial role to play in the field of care for people with disabilities.

4.4. CO-ORDINATION OF MULTI-SECTORAL ACTIVITIES CONCERNING THE CARE FOR PEOPLE WITH DISABILITIES

4.4.1 Programmes of prevention of disabilities, and rehabilitation of disabled people have been and will be carried out by a number of sectors within and outside the Government. Co-ordination of this multi-sectoral national response will therefore be critical to the effective implementation and the optimal use of resources.
4.4.2 A NATIONAL CO-ORDINATING COMMITTEE ON DISABILITY will be formed, whose membership will include senior officers from the various government ministries involved in disability, representatives of key non-governmental organisations, and private individuals with and without disabilities who have demonstrated a high level of interest, concern and dedication regarding care for disabled persons.

4.4.3 In order to successfully co-ordinate the activities implemented by a variety of Ministries, sectors and organisations, not least with regard to their implementation of international programmes, the committee will be chaired by the Director of Health Services.

4.4.4 The Ministry of Education will provide a secretariat to the National Co-ordinating Committee on Disability, and will be strengthened to enable them to discharge this task.

4.4.5 The functions of THE NATIONAL CO-ORDINATING COMMITTEE ON DISABILITY will be:

- To ensure that Government ministries formulate strategic plans in order to provide services to people with disabilities in accordance with National Policy Guidelines.

- To monitor and coordinate the implementation of future National Policy on Care for People with Disabilities as well as programmes that are developed within its framework.

- To ensure that evaluation of the various components of the National Disability Prevention and care Programmes are carried out.

- To advise Government Ministries in the provision of assistance to the non-governmental organisations, in order that the Government departments support those organisations that have related functions. The committee will evaluate the activities of the NGOs in collaboration with the Botswana Council for the Disabled, and make recommendations for appropriate action to the Ministries concerned.

5. RESOURCES FOR DISABILITY PREVENTION AND CARE PROGRAMMES AND ACTIVITIES

5.1 Disability prevention and care activities will be integrated into on-going activities of Ministries, in order to maximise the use of man power, financial, and other resources.

5.2 The Government will, where possible increase funding for disability prevention and care activities to be implemented in the country.

6. CONCLUSION

Where necessary, legislation will be developed to protect the rights of persons with disabilities. This policy will be reviewed regularly for its applicability and effectiveness in light of recent information and the response from the community in Botswana.