Policies

Locally, Malawi has recently drafted a National Disability Policy, which has recognized the Constitutional and UN provisions and declarations on disability. The policy framework has adopted a human rights and development approach to disability. The human rights approach recognizes that to compete favorably, people with disability should have access to education, training, employment, health and other aspects of life. The development approach recognizes that people with disability live in abject poverty.

This human right and development approach propagates the notion that the problem of disability has more to do with the lack of responsiveness from the state and the society towards differential treatment posed by disability as opposed to the impairment itself.
The Draft National Disability Policy has been forwarded to the Cabinet, but still needs to be submitted to parliament for approval.

ACRONYMS

CBR - Community Based Rehabilitation

CONGOMA - Council for Non-Governmental Organisation in Malawi

DPOs - Organisations of people with disabilities

FEDOMA - Federation of Disability Organisations in Malawi

ILO - International Labour Organisation

MACODA - Malawi Council for Disability Affairs

MACOHA - Malawi Council for the Handicapped

MANAD - Malawi National Association of the Deaf

MAP	-	Malawi Against Physical Disabilities
MRPWD	-	Ministry Responsible for People with Disabilities
MUB	-	Malawi Union of the Blind
NACCODI Issues	-	National Coordinating Committee on Disability
NGO	-	Non-Governmental Organisation
SADC	-	Southern Africa Development Community
UN	-	United Nations
WHO	-	World Heath Organisation

NATIONAL DISABILITY POLICY

DEFINITION OF TERMS:

Below are definitions as used in this document.

a) <u>*Accessibility:*</u> *Easy availability to all; capability to be seen and/or used by all regardless of economic, social, physical or other limitations.*

b) <u>*Assistive Devices and Support Systems:*</u> *Appropriate aids, appliances, technologies and other support systems that facilitate better functioning of people with disabilities.*

c) <u>*Community Based Rehabilitation*</u>*: A comprehensive approach to rehabilitation that maximises the involvement and participation of people with disabilities, their families and communities in programme design and implementation while maximising the use of available local resources and services.*

d) <u>*Social Construct of Disability*</u>*: The disadvantage or restriction of activity, which is pronounced when society takes little or no account of people with impairments thereby excluding them from mainstream activities.*

e) <u>*Discrimination*</u>*: Different treatment accorded to different persons attributable only or mainly to their respective definitions (race, colour, sex, disability, religion etc)*.

f) <u>*Equalisation of Opportunities*</u>*: Process through which the various systems of society and the environment are made available and accessible to all citizens.*

*g)	Federation of Disability Organisations in Malawi (FEDOMA): The Umbrella body of organisations of people with disabilities.*

*h)	Impairment: Any loss or limitations of psychological, physiological or anatomical structure or function.*

*i)	Malawi Council for Disability Affairs (MACODA): A statutory arm of government with two pronged functions of regulation and implementation.*

*j)	Minimum Disability Package: A planned range of services and support systems that facilitate the full participation of people with disabilities in human development.*

*k)	National Coordinating Committee on Disability Issues (NACCODI): A national forum of all stakeholders on disability issues.*

*l)	Organisations of Persons with Disabilities (DPO): Organisations formed by people with disabilities themselves to advocate for their rights.*

*m)	Medical definition of Person with disability: Any person who, by reason of any impairment of the mind, senses or body, congenital or acquired, is unable to participate fully in regular education, occupation and recreation, or who, by reason of such impairment, require special assistance or training to enable him/her to participate in regular, mainstream or inclusive education, occupation or recreation and other spheres of life.*

*n)	Rehabilitation: A goal-oriented process aimed at enabling a person with impairment to reach an optimum mental, physical and or social functional level, thus providing him/her with the tools to improve his/her own life.*

*o)	Special Needs Education: A system for providing a conducive environment for learners who may not benefit much from the regular education system.*

*p)	Society for all: An environment where all citizens have equal opportunities to participate and realize their potentials and goals in life.*

*q)	The Ministry: The Office of the Minister of State Responsible for People with Disabilities.*

1.   INTRODUCTION

Disability is a cross-cutting issue. It effects and is affected by all aspects of life namely, economic, social, cultural, political, environmental and technological. A comprehensive policy and action plan to address disability issues and their effects on people with disabilities should be based, therefore, on a thorough analysis of the afore-mentioned factors. A development and human rights approach to disability as opposed to a welfare, charity and philanthropic approach promotes the creation of equal opportunities. Disabilities in Malawi have to be enumerated and their scope (geographic, age categories, ethnic inclinations) as well as intensity of occurrence, determined. To tackle disabilities issues effectively their causal factors, effects on society, and on those with disabilities need to be fully explored and appreciated.

Malawi as a member of the United Nations system and other international and sub-regional bodies, such as the SADC, has acceded to several international and sub-regional agreements, declarations, protocols and other instruments that bind it to implement certain actions and follow certain norms of import to people with disabilities in the country. The UN put in place the principles of participation, integration and equalisation of opportunities in the World Programme of Action Concerning Disabled Persons. It also set the UN Standard Rules for the Equalisation of Opportunities for People with Disabilities. In addition there is Article 2 of the ILO Convention No. 159 on the Vocational Rehabilitation and

Employment of Disabled Persons. The UN Standard Rules which recognize the necessity of addressing both the individual needs of people with disabilities and the short comings of society provided a very useful tool in the development of the policy.

The situation analysis that follows shows that there are a number of stakeholders trying to address disability issues in Malawi. Their efforts are aimed at ensuring that people with disabilities can lead decent lives. These stakeholders face various challenges. The institutional arrangements for dealing with issues of disability need to be examined to ensure capacity building and effective utilisation of the scarce resources.

One of the weaknesses of the institutional set-up is the absence of a national disability policy. This has resulted in the lack of sound direction for all stakeholders. Thus, the development of this *National Disability Policy* is a milestone in government's efforts to mainstream disability issues. An Act of Parliament to provide the legal basis for this Policy would signify to all the ultimate resolve of Malawians to effectively address the issues and problems that affect people with disabilities.

Through the situation analysis the status of people with disabilities is analysed resulting in the identification of challenges and the key policy areas. The identified policy areas include disability prevention, early identification and intervention, rehabilitation, accessibility, transport, information and communication, education and training, employment, social welfare and social protection; self representation and participation, sports, recreation and entertainment, housing and research and appropriate technology. The need for capacity building and wide public education is also highlighted. The policy has developed objectives and strategies for each of these areas.

1.1   Development of the Disability Policy: The Consultative Process

This policy document is a product of broad-based bottom up consultative process. The process started with the establishment of a core team which conducted the literature review and produced a working document. An

external consultant was engaged to facilitate the consultative process which involved individual interviews; focussed group discussions, three regional and one national consultative workshops. In all these phases of the process, people from various levels and sectors of the community were involved reflecting the cross cutting nature and prevalence of disability in Malawi. The people involved in the processes included:

- People with disabilities themselves in their individual capacity or as representatives of organisations of people with disabilities.

- Government officers from different ministries and agencies.

- Key stakeholders that included different development agencies, non-governmental organisations (NGOs), the civil society, the private sector, and development partners.

The process provided valuable input to shape the strategic orientations of the Policy.

2.0 SITUATION ANALYSIS

2.1 NATURE AND MAGNITUDE OF THE PROBLEM

Malawi has people with various kinds of disabilities. There is no up to date statistics on the prevalence of disability in the country. The last study done in 1983 revealed that 2.9 % of the population composed of people with disabilities, 54% being males and 46% being females. It was also found that 45% were in the 15 – 45 age category and 24% were 50 years or older. The majority (over 90%) lived in rural areas with little or no access to rehabilitation services. The WHO projects that 10% of any population comprise of people with disabilities. Based on this it can be estimated that there are close to 1 million people with disabilities in the country. There is need therefore to conduct a disability survey in order to determine the

accurate numbers of people with disabilities, types of disabilities and their prevalence, geographic coverage and age distribution.

2.2   BARRIERS

Disability itself is not the major obstacle but rather it is the environmental, institutional, attitudinal and economical barriers that prevent people with disabilities from living fulfilling lives and exclude them from the mainstream of society. Following are examples of known barriers:

a) Environmental Barriers: These are inaccessible public and private buildings, schools, offices, factories, shops, transport, information and communication systems. These shut the people with disabilities out and restrict their movements and freedom of association. Below are other related issues:

- Most public buildings are not easily accessible to people with disabilities, for instance, there are no ramps in most buildings.

- The educational, social, health, transport and residential arrangements made by local and central governments or voluntary organisations are often inadequate and uncoordinated. They also do not meet the actual needs of people with disabilities. As a result people with disabilities are not empowered and continue to be dependent.

- As a group, people with disabilities do not have equal access to services and facilities available to the rest of society. Consequently, they are among the least nourished, healthy, educated and employed. They are subjected to a long history of neglect, isolation, segregation, poverty, deprivation, charity and pity.

b) Institutional Barriers: These include expulsion, exclusion and segregation from key social institutions, such as education, employment, health, law and recreation. Direct and indirect discrimination against people with disabilities prevent them from participating fully in all spheres of life. Other limitations are:

- The lack of reliable information on disability issues has affected planning and management of disability related programmes. There is limited awareness on disability issues among policy makers, planners, community leaders and the general public. Consequently, most people with disabilities continue to be marginalized, discriminated against, and lead a very poor quality of life.

- Public information is not readily available in accessible formats for people with different disabilities, for instance, HIV/AIDS information is not available in braille.

- The public transport system does not have reserved seats for people with disabilities and those who use wheel chairs are made to pay double fares.

- Disability is not integrated in most government development plans, policies, and programmes at both district and national levels. Similarly, institutions of higher learning like universities, research institutions and government parastatals do not have deliberate policies on disability.

- The existing institutional framework for disability management is not strong enough in terms of funding, staffing and legal backing. Existing mechanisms for collaboration, co-ordination and networking among the different stakeholders in service delivery are weak.

- There are some ministerial policy guidelines on disability in the Ministries of Gender Youth and Community Services; Labour and Vocational Training, Health and Population, Education Science and Technology and Sports and to a limited extent, Transport and Public Works, Housing and Communication. These policy guidelines are however, not comprehensive and cover only one or a few departments of the respective ministry's programmes.

c) <u>Attitudinal Barriers:</u> People with disabilities in our country are treated with prejudice and, in varying degrees, regarded as incapable, inadequate, resentful, bitter, pathetic, tragic, pitiable, abusive,

aggressive, criminal, unhealthy, dependent on charity, costly for society to support, drain on family resources, inferior, unemployable. Other related issues are as follows:

- Most of the problems that are experienced by people with disabilities, their families and the community are a result of the myths and retrogressive beliefs that are held about disability like the view that disability is a curse from God. This results into social stigmatisation of people with disabilities which in turn forces them into exclusion from mainstream public life. The excessive over-protection of some people with disabilities lead to the development of a dependency syndrome which further prevent them from accessing social-economic services. This does not only affect the individuals but also their families. Economically, disability may affect the family in the following ways:

  (i)   Minimal contribution by the people with disabilities to the family income;
  (ii) Diversion of the labour force within the family in caring for the people with disabilities;
  (iii) Straining limited family resources to provide special care for some people with disabilities.

- In the majority of cases, people with disabilities are treated as sick people who deserve sympathy, care and cure. The end result is that people with disabilities are marginalized.

d) <u>Economic Barriers</u>: People with disabilities are disadvantaged in terms of access to loans; land and property ownership; business ventures and employment avenues resulting in the majority of people with disabilities living in abject poverty with no access to resources and income.

- Poverty alleviation programme in most cases fail to specifically identify people with disabilities as a target group. In the instance, where they have been targeted, people with disabilities still face lots of obstacles in being recognised as a group with entitlements.

2.3   DISABILITY AS A DEVELOPMENT AND HUMAN RIGHTS ISSUE

The advent of the multiparty system of government has brought forward issues of human rights i.e. rights that an individual is born with and are inalienable. This has led to a paradigm shift from viewing disability as a welfare and charity issue to a human rights and development issue. The welfare and charity approach to disability sees people with disabilities as objects of pity and charity who are always in constant need of caring. The human rights and development approach on the other hand, recognises that people with disabilities have a right to respect and human dignity and should therefore be empowered so that they can play their rightful role in society.

As a human rights issue, the policy recognises that to compete favourably, people with disabilities should have equal access to education, training, employment, health and other aspects of life.

As a development issue the policy recognises that people with disabilities live in abject poverty. In line with government's poverty reduction policy the challenge is to develop strategies to empower people with disabilities and reduce their poverty so that they can be self-reliant and contribute towards national development.

3.0 CHALLENGES

Challenges for the disability sector are many and varied. They are a consequence of both domestic and international factors. The following challenges are the basis of the issues of concern.

3.1 Institutional challenges: Capacity building

Among the stakeholders in the disability sector are people with disabilities and their associations, service providers both in government and non governmental organisations. These play various roles and the policy aims at cementing these roles and giving them a strategic direction.

- Capacity needs to be built for the disability sector to be able to analyse its situation and status in society, to present its issues effectively to the larger society and to lobby various stakeholders locally and internationally in order to enact appropriate legislation to guide citizens, private sector and all other stakeholders in responding to the needs of people with disabilities.

- Capacity needs to be raised in various skills and technical capabilities such as resource mobilisation, networking and programme analysis and implementation.

- Although the majority of people with disabilities are found in rural areas the services have tended to be urban based. There is need to consolidate and extend CBR program to rural areas where the majority of the people live.

- Due to the lack of capacity to deliver services as required by people with disabilities, there is need for a *"Minimum Disability Package"*. This will ensure provision of a range of basic services and support systems to enable people with disabilities cope with the demands of their daily living. This calls for the allocation of necessary resources based on data and information on disability types and on affordable cost effective interventions.

- To ensure effective and sustainable planning, management and implementation of disability programes it is imperative that the disability stakeholders endeavour to strengthen their capacity in the following priority areas:

  o Research – To establish adequate, appropriate, quantitative and qualitative information on disability in Malawi.

  o Trained personnel – To implement and extend programmes to people with disabilities.

  o Management – within stakeholder structures to enable efficient co-ordination and collaboration of disability services with people with disabilities themselves taking the lead.

3.2 SOCIO-ECONOMIC CHALLENGES

3.2.1 Poverty and Under Development

In line with government's poverty reduction policy the challenge is to develop strategies to empower people with disabilities in order to reduce their poverty. To compete favourably, people with disabilities should have access to education, skills development, employment, loans and grants for income-generating activities. The challenge is how to empower people with disabilities to live fulfilling lives thereby contributing to national development.

3.2.2 Attitudinal Problems and Negative Beliefs

The environmental, institutional, attitudinal and economic barriers, as well as many others facors are the result of prejudice born out of ignorance and misconceptions. It is imperative that strategies for public awareness be developed to eradicate misconceptions about disability. People with disabilities must also be offered wider and just opportunities to live independently in society with dignity and freedom to contribute to the richness of society.

3.3 Global and Regional Challenges

Periodically, Malawi is called upon to give an account of its actions under the following UN declarations.

- Universal Declaration on Human Rights
- International Convenant on Human Rights
- Convention on the Rights on the Child
- Declaration on the rights of mentally Retarded
- Declaration on Social progress and Development
- Declaration on the Rights of the Disabled.

Since many of these agreements are not specifically targeted at people with disabilities but at development, human rights and governance in general, the disability sector needs to build capacity to analyse these agreements and determine how they affect issues of disability. Similarly the sector needs capacity to present and negotiate with the government and the international

community on its interpretation of these agreements and how they can be enforced.

4.0 THE POLICY
4.1 POLICY STATEMENT

The National Disability Policy is to *"integrate fully people with disabilities in all aspects of life thereby equalise their opportunities in order to enhance their dignity and well being so that they have essentials of life."*

4.2 Priority Policy Areas:

- *Prevention, Early Identification and Intervention*
- *Rehabilitation*
- *Accessibility to the Physical Environment*
- *Transport*
- *Information & Communication*
- *Education and Training*
- *Employment*
- *Social Welfare & Social Protection*
- *Self Representation and Participation*
- *Sports, Recreation & Entertainment*
- *Housing*
- *Research and Appropriate Technology*

4.3 SECTORAL OBJECTIVES AND STRATEGIES

The overriding **end goal** of the Policy is the equalisation of opportunities, abilities and capabilities of people with disabilities to live and participate fully as other persons in society. To achieve this end goal, it is important to ensure actions in the following *Sectoral priority policy areas*:

PRIORITY POLICY AREA 1:
Prevention, Early Identification and Intervention
Objective

Ensure that systems are in place for prevention, detection and intervention of disabilities and reduction of secondary disabilities.

Strategies

- Undertake research to continuously update disability information
- Ensure current information is made accessible to planners and stakeholders for appropriate interventions and programmes
- Develop and implement appropriate screening tools for identification of disabilities
- Ensure training and availability of personnel to implement screening and health care messages.
- Increase capacity of trained medical and rehabilitation personnel
- Promote occupational health and safety in the work place
- Strengthen measures to prevent risky social activities and practices
- Encourage mass awareness about the causes and prevention of disabling conditions.

PRIORITY POLICY AREA 2:

Rehabilitation

Objective

- Ensure the necessary equipment, skills and services are available to all people with disabilities to enable them to achieve and maintain their optimum physical, sensory, intellectual and social functional level.

Strategies

- Ensure access and availability of trained rehabilitation personnel

- Ensure adequate and accessible medical and rehabilitation services and facilities are available

- Equip social workers with counselling techniques targeting health, social education and employment.

- Ensure quality production and availability of adaptive equipment and assistive aids.

- Promote access to vocational training and socio-economic advancement.

- Provide minimum disability package

- Consolidate and extend CBR programmes

PRIORITY POLICY AREA 3:

Accessibility

Objective

- Ensure easy access to the physical environment

Strategies

- Develop building standards and guidelines including internal furnishings that are appropriate and accessible for people with disabilities.

- Enforce stakeholders in the building industry to comply with the required standards and guidelines.

- Encourage owners of public property to adapt existing buildings in accordance with the building standards and guidelines.

PRIORITY POLICY AREA 4:

Transport

Objective

- Develop an accessible, appropriate and affordable transport system for people with disabilities.

Strategies

- Ensure public transport facilities and internal furnishings are designed to allow easy access and convenience for people with disabilities
- Support innovative designs for accessible modes of transport for private use.
- Ensure travel information, signs, symbols and warning signals are available and accessible for all users with disabilities.
- Promote disability awareness among public transport staff and encourage the use of sign language and alternative communication systems
- Ensure that appropriate and adequate road safety measures are installed for people with disabilities.
- Allocate appropriate parking lots for people with disabilities in public and private car parks.

PRIORITY POLICY AREA 5:

Information and communication

Objective

- Promote disability awareness in society and ensure that people with disabilities have full access to public information and communication.

Strategies
- Provide guidelines on disability friendly terminology for use by the media and general public.
- Ensure public communication and service points are available and accessible for people with disabilities.
- Ensure public information and education materials are available in accessible formats to people with disabilities.
- Establish a national sign language.
- Research and develop alternative communication systems for people with communication difficulties.
- Provide equipment and technology to reproduce accessible materials.
- Promote public awareness disability.

PRIORITY POLICY AREA 6
Education and Training
Objective
- Ensure equal access and inclusion of people with disabilities in education and training programmes

Strategies

- Design and develop appropriate technologies, assistive devices and learning materials.
- Provide free appropriate technology, equipment and resources to assist people with disabilities with their learning needs

- Review and reform the national curriculum and examination system to include the needs of learners with disabilities
- Adapt and adopt communication systems appropriate for learners with special education needs in all centers of learning
- Implement appropriate education and training mechanisms for people with learning difficulties.
- Train specialist educators and ensure that their training is recognized.
- Ensure that special needs education is incorporated in the teacher training curriculum.
- Establish accessible specialist education resource centers through out the country.
- Support and encourage inclusive education.
- Promote research in special needs education.

PRIORITY POLICY AREA 7:

Employment

Objective

Ensure that people with disabilities have equal access to employment opportunities.

Strategies

- Ensure that systems are in place to avoid discriminatory practices against people with disabilities from employment opportunities and in the work environment
- Encourage employers to comply with the stated quotas
- Provide access to business loans

- Ensure that employers provide the necessary adaptive equipment to enable people with disabilities to do their jobs effectively.
- Ensure that employers adapt the work premises to guarantee safe access for employees with disabilities.
- Provide training for people with disabilities in special and marketable skills
- Maintain a data bank of available services capturing the level of job placement.
- Create sheltered and self-employment schemes.

PRIORITY POLICY AREA 8:
Social Welfare and Social Protection
Objective

Ensure that welfare systems are in place to enable people with disabilities to live self sufficient, independent and inclusive lives.

Strategies
- Develop an effective referral system for people with disabilities to access services
- Provide a co-ordinated and equitable system of social security to meet the basic needs of people with disabilities
- Ensure that people with disabilities are informed and have access to benefits that they are entitled to.
- Ensure that there are effective feedback mechanisms and co-ordinated social protection and safety nets.
- Enforce systems to protect the rights of people with disabilities against any form of discrimination and abuse in society.

PRIORITY POLICY AREA 9:

Self-Representation and Participation

Objective

- Ensure that people with disabilities are represented, included and participate at all community levels in decision-making, planning and development activities.

Strategies

- Support and promote the work of organizations of people with disabilities
- Empower people with disabilities through counselling, education and training
- Encourage public awareness campaigns
- Encourage representation of people with disabilities in leadership structures
- Promote the involvement of people with disabilities and their families in the provision of services
- Ensure that mechanisms are in place for their access to election polls
- Create avenues for self-expression.

PRIORITY POLICY AREA 10:

Sports, recreation and entertainment

Objective

Ensure the participation and inclusion of people with disabilities in sports, leisure, entertainment and the arts.

Strategies

- Ensure the provision of adequate numbers of competent teachers and trainers in sports and the arts for participants with disabilities

- Ensure that sports, entertainment and arts facilities are accessible to people with disabilities.

- Improve access and availability to sports and leisure equipment for people with disabilities.

- Increase public awareness and profile of people with disabilities in sports and the arts.

PRIORITY POLICY AREA 11:
Housing
Objective

Ensure that people with disabilities have access to adequate housing.

Strategies

- Provide building materials at subsidized costs for people with disabilities.

- Provide people with disabilities with access to secure land tenure, housing, finance and property rights.

- Eliminate prejudice and discrimination in housing transactions and provision of services.

PRIORITY POLICY AREA 12:

Research and Appropriate Technology
Objective

- Promote and support disability research and the developments and application of appropriate technologies for disability programmes

Strategies
- Ensure that financial and technical assistance is available to key stakeholders, university and other research institutions to conduct disability related research
- Encourage innovations in appropriate technologies
- Facilitate the co-ordination and integration of disability data collection and research in national census, house hold surveys and other relevant studies
- Ensure that research findings are accessible and available to planners and stakeholders of disability programmes
- Establish a national disability user-friendly information management system.

5.0   IMPLEMENTATION ARRANGEMENTS

The overall goal of the policy objectives is to strive for their implementation with plans envisaged for short, medium and long terms in consonant with the country's socio-economic status. The National Disability Policy therefore needs to be coordinated with existing and new policies and legislation in the various areas that impact on people with disabilities.

The successful implementation of the policy strategies will require substantial amount of financial and material resources. These resources are expected to come from Government and other development partners. The use of existing and available resources and facilities is encouraged as the most cost-effective way of implementing the policy.

It is logical, therefore, to assume that coordinated efforts of several governmental and non-governmental organizations are imperative for the successful realization of the policy objectives. To achieve this, it is

important to revitalize the National Coordinating Committee on Disability Issues (NACCODI), under the leadership of the Ministry Responsible for People with Disabilities. The responsibilities of the Committee are to:

- Coordinate policy and implementation
- Ensure the availability and commitment of resources
- Negotiate key performance indicators with all role players
- Ensure effective reporting and monitoring

5.2 Key Roles and Responsibilities

An appropriate and efficient administrative structure and system shall be put in place to manage, coordinate and oversee implementation of the National Policy. The following are the roles and responsibilities of structures at macro level, namely, Ministry, MACODA, FEDOMA and NACCODI and Local Government.

5.2.1 The Ministry

The Ministry as the political and government administrative head on disability issues shall be responsible for policy formulation and review; and oversee policy implementation. It will also ensure that disability issues are mainstreamed in all sectors.

5.2.2. MACODA

The Malawi Council on Disability Affairs (MACODA) shall be the main regulatory and implementing agency of government policy on disability issues. It will also register NGOs dealing with disability issues.

5.2.3. FEDOMA

FEDOMA as an umbrella organisation of all DPOs will act as a watchdog and a voice on behalf of people with disabilities. It shall coordinate, monitor and oversee the planning and implementation of policies and programmes of DPOs as well as register them and submit this register to MACODA. It shall also be responsible for the enhancement of the well-being of people with disabilities and enable them to play their rightful role in society

5.2.4 NACCODI

This is a forum for all stakeholders on disability issues that provides an opportunity for networking and resource mobilisation.

5.2.5 SERVICE PROVIDERS

These are organisations that provide specialist services to people with disabilities such as Cheshire Homes, Sue Ryder Foundation, Malawi Against Physical Disabilities.

5.2.6 DPOs - ORGANISATIONS OF PERSONS WITH DISABILITY

These are FEDOMA affiliates formed according to the type of disability, whose role is to advance the issues and welfare relevant to their membership. However, there may also be DPOs whose membership cuts across disability groups.

5.2.7 LOCAL GOVERNMENT/ STRUCTURES

The assemblies and local structures represent people at the grass root level. Disability issues shall be reported through these channels. The assemblies shall then implement necessary interventions to address the issues and only seek outside assistance if the problems cannot be handled locally.