

**Development for All:**  
A Disability Strategy for the  
Australian Aid Program  
2009–2014

# **Ministerial foreword**

## **Executive summary**

# **Development for All: A Disability Strategy for the Australian Aid Program 2009– 2014**

## **CORE OUTCOMES**

### **1. Improved quality of life for people with disability**

#### **Focused and targeted:**

- support for partner government's efforts towards disability-inclusive development in two countries [initially]

#### **Targeted sectoral focus across all country programs:**

- inclusive education and accessible infrastructure.

#### **Disability-specific initiatives:**

- capacity development of Disabled People's Organisations

#### **Flexible support mechanisms for all countries:**

- Non Government Organisation agreements, volunteers, scholarships, leadership awards, small grants

### **2. Reduced preventable impairments**

#### **Preventable impairment-specific initiatives:**

- avoidable blindness
- road safety.

Reducing the demand on existing health care and rehabilitation services.

### **3. Effective international leadership on disability and development**

- support leadership of people with disability
- model good practice in disability inclusive development
- forge strategic partnerships to leverage action
- build political and senior agency leadership in regional and international forums.

## **ENABLING OUTCOMES**

### **4. AusAID skilled and confident in disability-inclusive development**

- strengthen AusAID's capacity to successfully promote, manage and monitor disability as a central aspect of Australia's aid program
- ensure AusAID is an open and accessible organisation

### **5. Improved understanding of disability and development**

- build strategic partnerships to strengthen efforts to capture robust quantitative and qualitative data on disability, poverty and development with a strong focus on the lived experiences of people with disability
- strengthen knowledge management, coordination, dissemination, accessibility and application

## GUIDING PRINCIPLES

1. **Active central role by people with disability:** Promote and enable active participation and contributions by people with disability.
2. **Recognise and respect rights:** People with disability hold the same rights as others.
3. **Respect and understand diversity:** The lived experience and views of people with disability may vary in different cultural, social and economic contexts.
4. **Recognise and take account of gender influences on participation in disability inclusive development:** Inequality may be experienced between men and women who are people with disability, family members and carers.
5. **Focus on children:** Children with disability face major barriers to enjoying the same rights and freedoms as their peers and may often face greater risks of abuse.
6. **Support people-people links and promote partnerships:** The combined commitment, influence and experience of Disabled People's Organisations, government, civil society, faith-based and Non-Government Organisations and private sector will ensure effective development inclusive of disability.

# Contents

|  |    |
|--|----|
| 1. The challenge .....   | 7  |
| 2. Australia’s vision: Development for All.....  | 9  |
| 3. Why disability-inclusive development? .....   | 10 |
| 4. The strategy .....  | 12 |
| Our approach .....   | 12 |
| Guiding principles.....  | 14 |
| What we will do .....  | 17 |
| Core outcomes .....  | 18 |
| Outcome 1: Improved quality of life for people with<br>disability .....                                    | 18 |
| Outcome 2: Reduced preventable impairments .....   | 27 |
| Outcome 3: Effective international leadership on<br>disability and development .....                       | 32 |
| Enabling outcomes .....  | 34 |
| Outcome 4: AusAID is skilled, confident and effective in<br>disability-inclusive development practice..... | 34 |
| Outcome 5: Improved understanding of disability and<br>development .....                                   | 35 |
| 5. Delivering results .....  | 37 |
| 6. Attachments .....   | 43 |
| 6.1 Consultation process: What we heard .....  | 43 |
| 6.2 What other donors have learnt.....   | 46 |
| 6.3 Contents of the Disability Strategy Companion Report<br>.....  | 48 |
| 7. Abbreviations and glossary.....   | 49 |

# 1. The challenge

People with disability are among the poorest and most vulnerable in developing countries. They face many barriers preventing them from fully participating in society and they are the most likely to face an increased risk of social exclusion, including the inability to access education, health services, earn a living or participate in decision making like others in their communities. Social exclusion is a major contributor to the levels of poverty faced by people with disability, particularly those living in developing countries.

The United Nations estimates that approximately 10 per cent of the world's population, or around 650 million people, have a disability and about 80 per cent of the population with a disability live in developing countries.<sup>1</sup> The Asia-Pacific region is home to two-thirds of this population. The circumstances experienced by people with disability also impact on their families and communities. One third of people with disability are children, two thirds of whom have preventable disabilities. Women and children with disability often face the greatest barriers. It is believed that at least half the causes of disability can be prevented.<sup>2</sup>

[<sup>1</sup> UN Secretariat Disability Paper (E/CN.5/2008/6 available at [www.ods.un.org](http://www.ods.un.org))]

[<sup>2</sup> Department for International Development 2000 **Disability, poverty and development**; Asian Development Bank 2005 **Disability Brief: Identifying and Addressing the needs of Disabled People**]

It is important to note that national prevalence estimates of disability are speculative and vary widely [from over 30% in Norway to less than 0.5% in Yemen]. Reported prevalence and its variations is more a product of the scope, integrity and sensitivity of how, what and where disability prevalence is measured, as well as the product of a range of social factors such as cultural views on what constitutes disability and stigma associated with certain impairments. All these factors can result in underreporting.

Impairments and subsequent disability is a growing issue in the Asia-Pacific region, and the numbers of people with disability will increase because of a range of factors: population growth, ageing, lifestyle diseases (for example, diabetes and heart disease), conflict, malnutrition, traffic accidents, injuries, HIV/AIDS, and medical advances that preserve and promote life.<sup>3</sup> Impairments can be caused before or during birth and might have been avoided had the mothers had access to appropriate information and care. Or they can be acquired through accidents like stepping on landmines or not wearing a helmet and falling from a bike or motorbike, or from illnesses such as malaria or diabetes.

[<sup>3</sup> Thomas, P 2005 **Disability, Poverty & The Millennium Development Goals: Relevance, challenges and opportunities for DFID** Disability KaR  
<http://www.addc.org.au/disabilitypoverty.html>]

In the Asia and Pacific region, increasing numbers of governments have committed to dealing with disability issues by adopting the Biwako Millennium Framework (BMF) for Action and the United Nations (UN) Convention on the Rights of Persons with Disabilities (CRPD). People with disability and their organisations have become increasingly active in policy discussions and decision-

making processes at both regional and national levels, while a growing number of international aid agencies have moved towards disability-inclusive development.

Despite these advances, many challenges remain: lack of financial and human resources, technical knowledge and capacity hinders the implementation of national disability plans and regional frameworks, while the paucity of available, quality data on disability continues to hamper understanding, planning and monitoring efforts. People with disability in rural and remote areas still struggle to access social services, and those with psycho-social, intellectual or multiple disabilities frequently remain marginalised. Much work is needed to achieve the region's goals of creating an inclusive, barrier-free and just society for all.

## **2. Australia's vision: Development for All**

The Australian Government is increasing the focus of its aid program on practical development outcomes, including faster progress towards the Millennium Development Goals (MDGs), with a substantially increased attention to the most vulnerable and excluded. The Government recognises that people living with disability are in large measure among the poorest of the poor and as such is determined to see a much higher profile on disability in the aid program.

**This strategy will support people with disability to improve the quality of their lives through accessing the same opportunities for participation, contribution, decision making, and social and economic wellbeing as others.**

**By including people with disability in the development process, recognising their potential, valuing and respecting their contributions and perspectives, honouring their dignity, and effectively responding to their needs, this strategy will be part of the broader reorientation of the Australian aid program started by the Government.**

### **3. Why disability-inclusive development?**

Development processes and programs have not always benefited all. People with disability have often been excluded, even if unintentionally. Actively including people with disability and creating more accessible and inclusive communities will not only benefit them, it results in more successful and sustainable development for everyone in society. For example improving access to buildings and transport also benefits frail and elderly people and those with acute injuries such as broken legs. There is also strong anecdotal evidence that where teachers involved in inclusive education adopt different instruction styles all children benefit. Enabling people with disability to fulfil their potential and achieve desired levels of independence, including employment, will also reduce the strain and limitations experienced by other family members, often mothers and sisters, who are primary carers. Disability-inclusive development significantly contributes to achieving the MDG targets for alleviating poverty.

This disability-inclusive development strategy is aligned with, guided by, and supports national, regional and international action:

- The Australian Government's national **social inclusion** agenda, which is based on the premise that all citizens should be able to recognise their full potential and have the opportunity to live a rewarding social and economic life, and share in the nation's prosperity.
- **The Biwako Millennium Framework (BMF) for Action: Towards an Inclusive Barrier-free and Rights-based society for Persons with Disabilities in Asia and the Pacific (2003–2012)** and the **Biwako plus Five** have been adopted by Australia and by many countries in the region and provide guidance for the action needed to create an inclusive society for people with disability in the Asia and Pacific region.<sup>4</sup>

[<sup>4</sup> For further information, refer Strategy Compendium Volume, Section xxx.]

- **The United Nations Convention on the Rights of Persons with Disabilities (CRPD)** was adopted by the United Nations General Assembly on 13 December 2006 and came into force on 3 May 2008. Australia ratified the Convention on 17 July 2008, one of the first Western countries to do so. Ratifying the CRPD affirmed Australia's long-standing commitment to upholding and safeguarding the rights of people with disability.
- **Article 32 of the CRPD**; dealing with **international cooperation**, states that countries agree it is important to work together to ensure the convention is put into

practice in each country. Each country is therefore to take appropriate steps, including:

- making sure international development programs and other international cooperation activities include people with disability and can be accessed by them
- helping each other, including by sharing information, experiences, training and best practice
- cooperating with each other in researching and accessing scientific and technical information
- providing, as appropriate, technical and financial assistance, such as sharing technologies, that assist people with disability.

## **4. The strategy**

### **Our approach**

Our strategy responds to four factors:

1. this is a new way of working for AusAID
2. the challenges are significant and comprehensive change will take time
3. there are a range of players already involved in this type of work, including Non Government Organisations (NGOs) and other donors
4. the aid program cannot do everything at once.

To achieve sustainable outcomes we will start in a modest but focused way, build strong foundations and scale up activities over time as our experience and capacity in disability-inclusive development grows.

Our approach will be practical and focused on achieving our overall goal of better lives for people with disability in recognition that they hold the same rights as all others. We will work in partnership with key stakeholders to reduce preventable impairments where possible and appropriate while at the same time seeking to address the environmental factors that cause disability. We believe disability is exacerbated by attitudinal, environmental and social barriers, which prevent people accessing services and opportunities and participating like others in society. Alleviating these barriers can promote and, enable participation, inclusion and equality.

Providing access to services and opportunities that enable people with disability to achieve their desired levels of independence are necessary and important. These include early identification and intervention, and where possible prevention, of impairments, and provision of rehabilitation services and assistive equipment, access to education, work and social security. However, these services will be of limited benefit without a change in the environment in which the person with disability lives. Similarly, creating a barrier-free environment will have limited impact unless the person with disability has the ability and means to access that environment. For example a child who is blind might have learned to read using Braille and might have had mobility education. But if the attitudes of her parents, teachers or peers do not support her going to school, or the learning materials, curriculum and classroom are not accessible, she will not be able to learn like other children.

## **Guiding principles**

How we work will be as important as what we do. These principles will guide all aspects of AusAID's work and we will measure our success in acting in accordance with them:

### **1. People with disability will play an active and central role**

Promote and enable active participation and contributions by people with disability.

### **2. Our work will recognise, respect and promote rights**

People with disability hold the same rights as others.

### **3. Our approaches will respect and build understanding of diversity**

Lived experiences and perspectives of people with disability are diverse. Effective approaches for improving outcomes for them will vary in different cultural, social and economic contexts.

### **4. We recognise and will take into account the gender influences on participation in disability-inclusive development**

Inequality may be experienced between men and women or boys and girls, whether they are people with disability or family members or carers. Women and girls with disability often face multiple forms of discrimination due to their gender, disability and economic status.

## **5. We will ensure a focus on children**

Children with disability face significant barriers to enjoying the same rights and freedoms as their peers and often face greater risks of abuse.

## **6. We will actively promote and support people-to-people links and partnerships**

The combined commitment, influence and experience of Disabled People's Organisations (DPO), government bodies, civil society organisations, faith-based organisations, NGOs and the emerging and potentially powerful role being played by the private sector will ensure that development is more effective because it includes people with disability.

### **Box: An active and central role for people with disability—living our principles**

We will take forward the strategy's first and most critical guiding principle by continuing to build on the approach taken during the consultation phase, where steps were taken from the outset to create a central role for people with disability to be involved. The participation of representative national and regional DPOs greatly strengthened the consultation process.

The importance of this principle was borne out during consultations in Fiji. **The Pacific Disability Forum, the Pacific Islands Forum Secretariat, the Fiji National Council for Disabled Persons and the Fiji Disabled People's Association** took sole responsibility for facilitating a workshop with a broad range of national stakeholders on behalf of AusAID. This was one of the most inclusive and comprehensive parts of the consultation process. It was an efficient process enabling a range of issues to be covered in depth and confirming the widely-quoted DPO motto '**nothing about us without us**'. Similar central roles were played by DPOs or peak bodies in other countries including Vanuatu, Samoa, Laos, Bangladesh and Pakistan.

We will recognise, respect and use the expertise and authority of people with disability on matters affecting them.

## What we will do

Australia's aid program will work towards three core outcomes:

1. improved quality of life for people with disability
2. reduced preventable impairments
3. effective international leadership on disability and development.

We will work towards these outcomes by:

- creating a development organisation that is skilled, confident and effective in disability-inclusive development practice
- improving our understanding of disability and development with a focus on the lived experiences of people with disability.

We will take a sequenced approach to each outcome area, starting in a focused and modest way, building on existing efforts and opportunities, lessons and successes, and introducing new priorities and action areas as our experience, expertise and partnerships grow.

In focusing on improving access to opportunities and existing services for people with disability and on reducing preventable impairments we will ensure that the allocation and balance of resources between the two is carefully considered, based on sound analysis and dialogue, and that the paramount priority of improving the quality of lives of people with disability is upheld.

Decisions about future priorities and activities to be supported under the strategy will be informed by strengthened research and guided by priorities of partner NGOs and DPOs.

## **Core outcomes**

### **Outcome 1: Improved quality of life for people with disability**

This - the strategy's principal outcome - involves direct support for people with disability to improve the quality of their lives. Australia will expand on a number of existing initiatives under the aid program such as survivor assistance in mine action and sports initiatives for children with disability. In addition, four new approaches will be adopted to achieve this outcome:

#### **1. Comprehensive disability programs in two partner countries at the outset**

Many countries in the region already have existing or draft plans of action and other key building blocks to effectively include people with disability in the processes and benefits of national development. However they often lack the resources and capacity to take these forward. Australia will support partner country efforts towards disability-inclusive development where there is evidence of strong national commitment and existing efforts towards addressing the needs and priorities of people with disability.

The design and approach to implementation will vary depending on context, needs and priorities and will be determined jointly with the leadership of the national partner country, national DPOs and in consultation with other key stakeholders, including donor partners involved in this area.

We will focus deeply and build on efforts in two countries initially and, if successful and judged by other partner governments and DPOs to be useful, we will then roll out support to other countries in the region.

### **Box: Likely outcomes of a successful comprehensive country approach**

- leadership, collaboration and coordination between government agencies, DPOs, donor partners, NGOs, civil society organisations, faith-based organisations, service providers and the private sector
- representative DPOs with capacity and resources to influence, inform and advocate
- international and regional instruments and frameworks (CRPD and Biwako Millennium Framework for Action) to inform and guide priorities and approaches
- a national policy and/or guiding framework on disability
- resources and capacity to ensure coordinated implementation, measurement and evaluation, and reporting on national policies and programs
- quality information and knowledge about disability that is available and accessible
- service providers with the capacity and resources to deliver accessible, relevant and sustainable practice
- locally available and affordable equipment, assistive devices and technology
- people with disability who know and understand their rights and who put these into practice

- facilitation of and support for international and regional links and exchanges

### **What a comprehensive approach to disability might mean for a person with a disability.**

Toshin comes from a small village in Samoa. He is 10 years old and has cerebral palsy. Although he has a physical disability, Toshin's mind is active and he wants to learn. However, because of society's attitudes and other barriers such as lack of wheelchairs, lack of trained teachers and inaccessible transport, Toshin's family assumed he would never be able to attend school. This kept him isolated from his peers and denied him valuable years of learning. Today, Toshin's life is different. With the support of a local physiotherapist, Toshin and his family have support and encouragement. He now has a wheelchair and is able to do things he previously only dreamed of. This year, for example, he started school and catches a bus with his friends. Toshin's mother is a big support, and often attends school with him to ensure he is fully included in all activities. It did not take long before Toshin began to blossom. He has made new friends, is enjoying school routines and loves learning to read: "My favourite part of school is singing, playing soccer and learning with my friends." Toshin hopes to access vocational training, get a job and participate in the cultural and social life of his community

### **Targeted sectoral focus across all AusAID country programs: Education and infrastructure**

Our disability strategy will initially build on existing investments, commitments and progress in the education and infrastructure sectors of Australia's aid program. During the regional consultations for this strategy people with disability consistently raised the need for better access to education and improvements to the built environment as top priorities. Education and infrastructure are the foundation for

economic growth and self reliance and act as a springboard for increased access and opportunities in other areas. Efforts towards becoming disability-inclusive are already underway in both these sectors in AusAID. Both sectors will be a major focus in scaling up the aid program and therefore have the potential to bring fast and significant impacts to the lives of people with disability.

### **Box: Examples of Australia's existing efforts towards disability-inclusive development in Education and Infrastructure**

#### **Australia-Indonesia Basic Education Program: Inclusive Education**

The Australia-Indonesia Basic Education Program is improving access to basic education for groups who are marginalized or excluded due to their disability (physical or intellectual), social and economic background, language, ethnicity, gender, health and HIV status. A more accessible and equitable education program is being promoted through development of inclusive education policies, support for local initiatives that address the educational needs of marginalised groups, updating specialist training curricula, linking training institutions to better share knowledge and expertise, and integrating pupil disability data into school records and national information systems.

Infrastructure example

The Government recognises that education is a great enabler – opening two doors: social inclusion and economic success. Basic education is the platform for all other development objectives and for that reason and for equity reasons it is not acceptable that so many children in the

Asia and Pacific region are deprived of an education. Australia will apply the increasing resources in the aid budget to get children into school, including those with disability who normally have severely limited educational opportunities.

Infrastructure investment is a significant part of development. However many people with disability cannot access schools, employment, basic services or participate fully in their communities because of inaccessible environments. Where new roads, buildings and transport are planned and built we will work with partners to ensure that where possible these are accessible for people with disability.

### **Box: The realities of education and infrastructure**

#### **Education**

In Laos, a deaf man shared, through sign language, that he had stopped attending school because he could not follow what was being said by the teacher or participate in classroom activities. Where he lived there were no specially trained teachers or disability-specific supports. He had learned sign language very late in life, and with the aid of a sign language interpreter was participating in society more. He believed it was vitally important for deaf children in his country to access full education and be able to learn in sign language. His dream was to learn more, to undertake more vocational training and to improve the lives of other deaf people.

The needs of deaf children, blind children, children with intellectual disabilities and children with learning disabilities are specific, and often not catered for. Training and equipping

teachers to be more flexible in teaching practices and accommodating different learning styles will benefit all children.

## **The built environment**

During consultations in Vanuatu, a woman shared how her mother—with a mobility disability—faced multiple barriers because of the built environment. She had a wheelchair, and strong family support. However, the physical environment was rugged, roads were poor and there was no accessible public transport. She could not enter shops to buy things because of the steps leading up to the shops. The family had spent significant sums of money to hire a private vehicle and driver, just to transport her to hospital so she could receive regular treatment for her chronic illness. She dreamt of a world with smooth roads and footpaths, buildings with wheelchair access and accessible toilets, so she could access basic services on an equal basis with other people.

Improving accessibility of transport and the built environment will benefit people at all stages of life—small children, women who are pregnant, people who are sick or injured, and increasing numbers of older people. Improving roads also has other benefits such as reducing transport accidents.

Increased focus and investment through our disability strategy will enable Australia's aid program to expand accessible, quality and inclusive education and accessible infrastructure across multiple countries. In education this will build on efforts to extend education to the last 5-10 per cent of children not in school in those countries that have already achieved very high net primary enrolment rates such as Vanuatu, Fiji, Samoa, Indonesia, Philippines, Vietnam, Tonga and Nauru. Many of these countries have already adopted an inclusive development policy. These

investments will seek to promote gender equality, and will be undertaken in a considered manner that avoids distortion and ensures effective integration.

## Why not health?

This initial focus on education and infrastructure does not mean that Australia is not seeking to recognise and address the needs of people with disability in other critical sectors, such as health. This strategy deliberately avoids an initial major focus on health for two reasons: firstly to steer clear of an overly medical focus (ie overcome the common but mistaken belief that support for people with disability is primarily a medical issue); and secondly because there is already much happening through Australia's health sector. This includes:

- Programs to address priority health needs of women and children including reproductive health needs, nutrition and preventative and care needs for childhood diseases
- Programs to support country-specific priorities to address high-burden health problems such as malaria
- The Pacific Framework for Prevention and Control of Non-Communicable Diseases has a strong focus on modifiable risk factors which lead to NCDs such as diabetes and subsequent impairments that can be disabling.

Over time other key sectors including health under Australia's aid program will be targeted and supported to take a progressively stronger disability-inclusive focus.

## **Disability-specific initiatives**

While it is essential that the needs of people with disability are recognised and addressed through existing country and sector programs in Australia's aid program, there is still a clear need for disability-specific initiatives designed to decrease the barriers people with disability experience.

Many of these types of initiatives were identified as priorities by people with disability during strategy consultations. Examples included capacity development for Disabled People's Organisations (DPOs), support for women with disability, support and self help groups for parents of people with disability, community-based rehabilitation, teacher's assistants to ensure effective inclusion and instruction of students with disability, sign language and Braille instruction, construction and provision of assistive devices to facilitate access to education, employment and community services by people with disability, and specific vocational training.

Throughout the consultation the lack of capacity in DPOs was raised as a major obstacle to empowering people with disability and building their capacity to raise awareness and advocate effectively. DPOs play an essential role in giving a voice to people with disability and influencing national decision making in development.

## **Capacity development support for Disabled People's Organisations**

The first disability-specific initiative will be to provide support to DPOs. An early and strong focus on assisting DPOs to strengthen their capacity is critical in establishing the foundation for disability-inclusive development. It will also become a catalyst for other positive changes in inclusive development. The scope and approach to this initiative will be developed in close consultation with key partners and, in particular, will be guided by major regional DPOs.

## **Flexible support mechanisms through Australia's aid program**

Supporting people with disability so they can make their own decisions and assume an active leadership role in the policy and planning processes affecting them is fundamental to improving their quality of life.

There are already a range of small-scale, but responsive and effective, aid mechanisms under Australia's aid program—NGO cooperation agreements, volunteer programs, in-country small grants schemes, scholarships and leadership awards etc.—available to people with disability, DPOs, NGOs, service providers and community groups.

We will review, refocus, and expand upon these flexible aid mechanisms and provide accessible information about them to people with disability and associated grassroots organisations.

### **Box: Disability-inclusive volunteering in Fiji**

Australian Volunteer, Kate Nelson, explains: “I went to Fiji on a two year placement with Australian Volunteers International (AVI). The Fiji Association of the Deaf specifically requested a volunteer who was deaf and fluent in Australian Sign Language, perfect for me! My job was to create a Fiji sign language dictionary and establish an interpreter training course. AVI gave me autonomy to get my work done - my primary relationship was with the people I was working for and with. Challenges - and benefits - for me was establishing relationships of trust for sharing. Funds from the AusAID small grants scheme also assisted the sign language dictionary project. Outcomes included a consolidation of the Fiji deaf community, an official name for the sign language, recognition of sign interpreting as a profession, employment for full time interpreters, increased awareness and pride of sign language, deaf culture and community, and an increase in local staff skills - all of which continues to grow and expand”.

## **Outcome 2: Reduced preventable impairments**

Throughout the consultation process, people with disability and their families highlighted the need for this strategy to focus on reducing the occurrence of preventable impairments. There are undeniable humanitarian reasons for taking this approach, but in addition there are significant economic benefits to be gained by reducing the strain on health services.

We recognise that this is an area of considerable sensitivity and undertake to approach this aspect of the strategy with caution and on the basis of explicit ethical principles. In considering options for reducing preventable impairments we recognise that the spectrum of human diversity is virtually infinite and every person is born with dignity and with rights. Efforts will be directed towards the prevention, amelioration or correction of high-prevalence preventable impairments such as those caused by malaria, traffic accidents, blinding conditions, land mines and diabetes.

### **Box: Costs of preventable impairments**

**Road crashes cost developing countries up to \$100 billion each year**, a figure equivalent to all official overseas aid. Currently 90% of the world's 1.2 million fatalities per annum are in low and middle income countries. Tens of millions are injured and the road toll is forecast to double by 2030. A large proportion of crash victims in developing countries are the more vulnerable road users – i.e. pedestrians, cyclists, other non-motorized transport users, motorcyclists, street vendors, etc. Many are poor, or likely to be pushed into poverty by their trauma becoming the casualties of progress,<sup>5</sup>

[<sup>5</sup> World Bank, Global Road Safety Facility,  
<http://go.worldbank.org/9QZJ0GF1E0>]

Road crashes are the leading cause of death for young people aged 10-24.<sup>6</sup> The World Bank estimates that by 2015, the target year of the Millennium Development Goals, road crashes will be the leading health impact for children aged 5 and above in developing countries. With the road toll

forecast to double by 2030, the vulnerable and poor are worst affected, having few economic options to cope with disability and death of breadwinners resulting from traffic accidents.

[<sup>6</sup> World Health Organisation (2007). Youth and Road Safety, [http://www.who.int/violence\\_injury\\_prevention/publications/road\\_traffic/youth\\_roadsafety/en/index.html](http://www.who.int/violence_injury_prevention/publications/road_traffic/youth_roadsafety/en/index.html)]

**The costs of global blindness and low vision in 2000 was US\$42 billion.** Without a decrease in the prevalence of blindness and low vision, it was projected that the total annual costs globally would rise to US\$110 billion by 2020. However, if VISION 2020 goals are achieved, this will be reduced to US\$57 billion in 2020. This would equate to overall global savings of US\$223 billion over 20 years. <sup>7</sup>

[<sup>7</sup> Frick KD, Foster A The magnitude and cost of global blindness: An increasing problem that can be alleviated. **American Journal of Ophthalmology** 2003; 135(4) :47 pp. 1–47.]

People living in lower socio-economic groups in developing countries are at greater risk of the range of factors causing impairment, such as higher risk of disease, poor maternal and child health, poor nutrition and diet, and poor access to water and sanitation and immunisations. These factors are compounded by lack of accessible quality medical services, diagnostics and drug regimes. In many emerging economies health and safety in the workplace, and increased traffic on poorly built roads are contributing to increasing levels of impairments. Conflict and humanitarian and natural disasters also often contribute.

## **Box: Impact of preventable impairments**

In many countries, preventable impairments are a major cause of disability, and people affected by conflict and emergencies are often at greatest risk.

During our consultations in Dili, East Timor, a father recounted how his daughter had contracted cerebral malaria while the family was living in an internally displaced people's camp in 2006. Because they had only limited access to quality and early medical services, their daughter, now four, has severe, multiple impairments. She cannot sit or move alone, use her hands to feed herself or play and has limited vision. While she can recognise familiar people and expresses some of her needs by crying or smiling, she cannot speak.

Both parents now dedicate their time to caring for her, without a regular source of income or social security. This little girl and her family struggle and make great sacrifices to access the limited services available in East Timor. It is uncertain that she will get any form of education and it is likely she will always rely on her family to provide care.

Ensuring good living conditions and medical care for people affected by conflict can have a big impact on preventing impairment and the resulting disabilities.

Our strategy will begin with support for reducing preventable impairments in two areas—avoidable blindness and impairments caused by road traffic accidents; both are the subject of major global campaigns in response to the existing scope, growing nature of the problems, and the impact on and costs to development. Additionally both are

areas where Australia has considerable experience and expertise to contribute.

## **Avoidable Blindness**

The Avoidable Blindness Initiative announced in the May 2008 budget gives effect to the Government's election commitment to invest \$45 million over two years to help eliminate avoidable blindness in the region.

Up to 75% of blindness is preventable or treatable and more than half of the world's 160 million people with vision impairment live in Asia and the Pacific<sup>8</sup>

[<sup>8</sup> IAPB, Vision 2020: The Right to Sight (2005)]

ABI is a preventable impairment-specific initiative being developed with key partners, including the Vision 2020 Australia Consortium, to improve the diagnosis, prevention and treatment of vision impairments and help eliminate avoidable blindness. The initiative will strengthen existing eye care training institutions, health care workers, build partnerships with key regional organisations; support the scaling up of existing efforts by NGOs and others providing quality eye health services, and support a two year comprehensive needs assessment to inform the future programming in relation to avoidable blindness.

## **Road Safety**

Road safety is a major global health issue that will continue to grow in magnitude along with growth in traffic volumes and speed in developing countries. Australia is committed to

working with the international community to improve road safety in the Asia-Pacific region and prevent accidents that may lead to disability.

The strategy will build on road and transport infrastructure activities that Australia is already undertaking which focus on road safety, such as:

- the National Helmet Wearing Campaign in Vietnam.
- the Cambodia Road Asset Management Project for road maintenance and capacity development
- the Transport Sector Support Program in Papua New Guinea providing support for priority maintenance and rehabilitation works
- the Eastern Indonesia Road Improvement Project which supports improvements and upgrades of deteriorated roads and bridges throughout the east of Indonesia.

Over time the strategy will also ensure that the causes of other major impairments are increasingly addressed through the aid programs sectoral and country program approaches, such as work already underway to improve women and children's health and non-communicable diseases such as diabetes, heart disease, and respiratory diseases.

### **Outcome 3: Effective international leadership on disability and development**

Australia is well placed to have a direct, practical impact on the quality of lives of people with disability in the Asia Pacific region. By developing and implementing our comprehensive disability-inclusive development strategy we are in a position

to join with other partners to exert influence and demonstrate leadership in the area of disability and development internationally.

As the strategy is implemented, we will look for a catalytic role in mobilising action in and the resources of the global community. Australia will contribute to leadership on disability and development by acting at four levels:

1. support **leadership development and efforts of people with disability** to be advocates and leaders in their own right, such as through the Australian Leadership Award Fellowships
2. set an example for others by **modelling good practice in disability-inclusive development**, adhere to aid effectiveness principles, and effectively communicate lessons and outcomes from our efforts
3. identify opportunities to **build strategic partnerships** through which Australia can support and strengthen efforts of international and other potentially influential partners
4. bring our growing awareness and understanding of the importance of disability-inclusive development to all our **partnerships and our leadership and governance roles in strategic regional and international organisations and events.**

## **Enabling outcomes**

### **Outcome 4: AusAID is skilled, confident and effective in disability-inclusive development practice**

Ultimately our strategy will see disability explicitly and systematically integrated into all relevant aspects of the processes and programs that form Australia's development assistance. This will include measuring and evaluating the impact of Australia's aid for people with disability as standard practice. AusAID has been supporting activities that help people with disability for some time but we need to build on this work, learn from our experience, deepen our understanding of disability, poverty and development, and strengthen our approaches.

Fostering a culture of excellence in disability and development is essential to successfully implementing our strategy and will involve strengthening both our understanding of disability and development and our processes. AusAID will deliver this outcome by:

- Establishing senior leadership with responsibility for steering and overseeing the inclusion of disability within the aid program
- Establishing a disability and development capacity that is able to;
  - manage the implementation, monitoring and evaluation of the strategy and provide flexible, responsive and accessible guidance and support to AusAID staff

- provide ongoing advice and support to AusAID's People and Planning branch to ensure that disability and development is effectively included in relevant staff development materials and training sessions
- provide ongoing advice and support for the development and implementation of disability and development guidelines and tools for all AusAID staff and development partners, including awareness raising and information for the general public such as through AusAID's Global Education Program.

We acknowledge and welcome the reality that in developing and committing to implement this strategy we are holding a mirror up to ourselves as an organisation. We will seek to strengthen our corporate policies and practices, communication strategies and training programs to ensure that AusAID is an open and accessible organisation that provides an accessible workplace and actively promotes the inclusion of people with disability. We will also look to ensure that our communications are accessible to and meet the needs of people with disability.

## **Outcome 5: Improved understanding of disability and development**

The availability of data, information and quality of understanding on a) the prevalence of disability, b) the relationship between disability and poverty and c) other dimensions of disability and development is limited in the international community generally, but particularly in the Asia Pacific region. The lack of quality, internationally comparable information further weakens the evidence base for informed decision making, including allocation of

resources. It also constrains informed policy and programming decisions about disability and development.

Australia is committed to improving the evidence base and understanding around disability and development, and ensuring that research activities are sensitive to local context and cultural systems. In line with our guiding principles, Australia will ensure people with disability – including women with disability, their families and carers – have a key role in enquiry, analysis and dissemination of information and can access and make full use of the knowledge gained to support their work as participants in the development process. We will achieve this outcome by:

- Developing strategic partnerships to capture robust quantitative and qualitative data on disability, poverty and development with a strong focus on the lived experiences of people with disability. This will include:
  - a targeted research program that complements the work of partners such as: in-country research organisations, international think-tanks; and DPOs in developing countries and in Australia
  - supporting robust national monitoring and evaluation systems in partner countries
  - establishing participatory feedback mechanisms to capture research findings and other information gleaned through disability initiatives in the region, and apply these lessons learnt to program management.
- Implementing effective knowledge management, coordination, and dissemination processes, to ensure information is widely available and accessible within and integrated in the aid program.

## 5. Delivering results

Australia is committed to gaining maximum benefit from the funding it provides for disability and development initiatives and maximum positive change for people with disability. We want to be certain our funds are used wisely and to best effect.

Measuring our strategy's effectiveness will take place in many ways, including through the contribution of a range of stakeholders. Of particular importance is involving people with disability as the primary stakeholders when assessing effectiveness. We are committed to sharing our results with development partners, external stakeholders and our taxpayers. Sharing results and lessons learnt within AusAID is also important and will support ongoing improvement of our work.

The aid program will promote quality performance information on its disability and development initiatives by:

- strengthening existing monitoring and evaluation systems and capacity in partner countries
- drawing on independent technical expertise in disability and development
- looking for opportunities to measure the impact of existing aid activities on people with disability
- developing performance assessment processes and regular feedback mechanisms that include people with disability and their organisations, including at community level
- undertaking thorough evaluations of our disability initiatives.

## **Possible performance assessment framework for the strategy**

Progress towards disability-inclusive development will be measured at the strategy and sector and country program levels. Performance measures, including targets and indicators, will be developed for each level in line with activity plans.

The following table lists some questions that will be asked to assess our performance against strategy outcomes.

## Suggested Performance Assessment Framework for the Disability Strategy

| Question             |   | Areas of assessment, methodologies for information collection and analysis.  |
|----------------------|---|--|
| <b>CORE OUTCOMES</b> |   |  |
| 1                    | How have the lives of people with disability improved?                        | <p>Result areas will include levels of poverty of people with disability, education and health outcomes, gender equality, access to services, whether people with disability have greater sense of dignity and social inclusion, and are equal participants and decision makers.</p> <p>Method: impact level information will be periodically analysed by independent experts, based on AusAID annual performance reports from country, regional and thematic programs drawing on partner government information systems, initiative level reporting, monitoring and feedback processes involving people with disability, commissioned research, and initiative evaluations.</p> |
| 2                    | To what extent has the Strategy contributed to the prevention of impairments? | <p>Result areas will include change in occurrence, type and severity of impairments, eg traffic accident injuries, rates of avoidable blindness, in line with activities implemented.</p> <p>Method: information will be analysed in annual AusAID reporting based on specific initiatives and partner government information systems.</p>   |

| <b>Question</b>          |  | <b>Areas of assessment, methodologies for information collection and analysis.</b>  |
|--------------------------|--|---|
| 3                        | How have international perspectives and action on disability and development been positively influenced? | Result areas will include the extent and nature of Australia's influence on policies and programs implemented in disability by other international agencies and partner governments.<br>Method: feedback will be obtained periodically from international agencies, other donors, Disabled People's Organisations and other relevant stakeholders.  |
| <b>ENABLING OUTCOMES</b> |  |   |
| 4                        | To what extent is disability embedded in AusAID's development practice?                                  | Result areas will include the degree to which disability inclusive development has become the way in which AusAID "does its work" and will be assessed against identified sector and program priorities eg progress towards inclusive education.<br>Method: drawing on mandated annual reporting, AusAID will monitor and report on progress in programming (related to program strategies and specific disability initiatives) and at a corporate level (the inclusion of people with disability and the accessibility of the work place). |
| 5                        | Is there a greater understanding of disability and development in Australia and in our region?           | Result areas will include the quality and quantity of information on identified disability priority research areas generated through the strategy and available from international, academic and partner government sources.<br>Method: AusAID will maintain a knowledge hub and analyse and report on the type and quality of information available and its use.   |

| <b>Question</b>   |   | <b>Areas of assessment, methodologies for information collection and analysis.</b>  |
|-------------------|---|---|
| <b>PRINCIPLES</b> |   |   |
| 6                 | Do people with disability feel that they are active and central participants and contributors to the Australian aid program?                | Result areas will include how and the extent to which people with disability have been able to participate in and contribute to Australia's development programs.<br>Method: feedback will be sought from people with disability through regular open consultations, informal and formal feedback from AusAID Posts, and through an annual formal process.  |
| 7                 | Does the Australian aid program recognise and respect 'rights' of people with disability?   | Result areas will include the level, scope and quality of the agency's understanding and implementation of the disability strategy using the UN Convention on the Rights of Persons with Disabilities (CPRD) framework, and key benchmarks for diversity, gender and children's concerns.<br>Method: AusAID will monitor progress in implementing the strategy and identify emerging issues according to principles set out in the strategy and relevant international frameworks.<br>Ongoing advice and support to AusAID program areas will be provided in developing country, regional and thematic strategies and in designing individual initiatives. Independent periodic analyses of AusAID's performance against these principles will be commissioned. |
| 8                 | Does the Australian aid program understand and respect 'diversity' amongst people and of situations and demonstrate this in its approaches? |   |
| 9                 | Do women and men equally participate, contribute and benefit in Australia's disability-inclusive development programs?                      |   |
| 10                | Does the Australian aid program address the barriers impeding children's enjoyment of the same rights as their peers?                       |   |

| <b>Question</b> |   | <b>Areas of assessment, methodologies for information collection and analysis.</b>  |
|-----------------|---|---|
| 11              | To what extent does the Australian aid program support people-to-people links and promote partnerships? | Result areas will include the strategic nature, clarity of purpose, quality and results of partnerships and people-to-people links in the area of disability and development.<br>Method AusAID will maintain an information database on partnerships and linkages established through the strategy. An ongoing consultation process will be used to obtain feedback from stakeholders, particularly Disabled People's Organisations, on the impact of these linkages and reporting conducted internally and externally. |

## **Reporting**

The information and analysis conducted annually against the key performance questions will be reported in the **AusAID Annual Report to Parliament** and the **Annual Review of Development Effectiveness**.

A **mid-term review** and **final evaluation** of the Strategy will be conducted drawing on internal reporting and external feedback from stakeholders (as described above), including Disabled People's Organisations, other donors, and Partner Governments in the region

## **6. Attachments**

### **6.1 Consultation process: What we heard**

Consultations on a disability strategy for Australia's aid program took place in the majority of developing countries Australia works with, and with key disability and development stakeholders in Australia during July and August 2008. Stakeholders included people with disability, their families and carers, government, NGOs, service providers and other donors.

A Disability Strategy Consultation Paper, prepared by AusAID in conjunction with key regional, Australian and international stakeholders, was widely distributed before the consultations and available electronically on the Agency's Internet in accessible formats including large print, audio and Braille. AusAID's Disability Taskforce led consultations in Samoa, Vanuatu, Thailand, Lao PDR and East Timor and observed consultations in the Philippines. Consultations led by AusAID Posts took place in 14 other countries. Two small focused events were held for leading disability stakeholders from the region and Australia to enable them to brief The Hon. Bob McMullan, MP, Parliamentary Secretary for Development Assistance, directly on key issues that arose during consultation.

The initial consultation stage concluded with public meetings in Sydney and Melbourne. More than 400 written submissions were received responding to issues in the Disability Strategy Consultation Paper, with the majority strongly supportive of the Australian Government's

engagement in the area and of the open consultation process undertaken. Key issues that arose in discussions included:

## **Approaches**

- Start in a focused way and build on early successes (where doors are open) rather than trying to do everything at once.
- Strengthen and build on local/regional experiences, expertise and linkages.
- Ensure people with disability understand and actively contribute to the development process and decisions about programming.
- Take a long-term perspective, recognising the time realistically needed to bring about real and sustainable changes in the lives of people with disability.
- Adopt national approaches over regional approaches for most issues.

## **Quality of life**

- Lack of most basic services and equipment prevents active participation and inclusion for people with disability and even create disabilities, but many opportunities exist for simple, low-cost scaling up efforts to address these needs.
- Fundamental lack of awareness and understanding about disability at all levels—especially family and community levels—leads to lack of action and reinforces exclusion.
- Increased access to education and the built environment are priorities.

- Disabled People's Organisations are functioning with minimal resources and capacity, but with increased support there is enormous potential for them to raise awareness and lead change.
- National policies and/or legislation exists for people with disability, but countries often lack capacity, resources and coordination to enable them to drive real change for people with disability.
- Significant opportunities exist to strengthen prevention of impairment through support for unexploded ordnance, road safety and improved health care programs.

## **International influence**

- There are many international players involved in many ways in the area of people with disability, but their work is not resulting in a great deal of real change.
- International efforts suffer from lack of coordination, duplication, and lack of scale and resources to progress agendas.
- Multilaterals face a disconnect between policy and practice—they are willing to change at the local level, but cannot succeed without senior commitment and leadership action.
- Australia could exert considerable international influence and leadership in the region.

## **Research**

- Lack of information or quality information about disability and poverty (for example, there is no standard definition of disability in the region).
- Limited or poor access to, and effective use of, existing information (particularly lived experiences of people with disability) to inform policy development and planning of services.

## **AusAID fit-for-purpose (inclusive development)**

- Inclusive development is a new focus for our staff—they have limited understanding of disability as a key issue.
- Lack of technical knowledge and skills in the Agency to translate the disability strategy into program action and change.

## **6.2 What other donors have learnt**

- Several major donors already have policies or strategies highlighting the need to include disability in their development programs and corporate policies, including the UK Department for International Development (DFID), European Union, United States Agency for International Development (USAID), Gesellschaft für Technische Zusammenarbeit and Finland. Other donors refer to disability within their development or sectoral policies, including Japan, New Zealand's International Aid & Development Agency (NZAID) and the World Bank.

- Disability is viewed by many partners as an issue of social exclusion, requiring a rights-based framework, and most donors aim to mainstream or integrate disability throughout their development agendas.
- There is relatively little review and documentation of the impact of bilateral programs in disability and development. Finland, USAID and DFID have reviewed their work, but there remains limited information on lessons learnt and best-practice approaches.
- Disability-specific initiatives or projects have been more successful than attempts to integrate or mainstream disability into country approaches or across aid programs.
- Translating disability-inclusive policy into practice has been slow and challenging. Reasons for failure to deliver more quickly include:
  - o Lack of broad institutional support: organisations and agencies resist incorporating disability into what they do because it is not a MDG and is therefore easily overlooked and also because of the lack of general awareness and understanding of the issue. Drivers or 'sentinels' of disability-inclusive development may be needed.
  - o Lack of communication: guidelines and policies for disability-inclusive development and mainstreaming need to be agency specific, practical and clearly communicated, not 'soft-peddled'.
  - o Lack of political will and adequate resourcing for implementation.
  - o Lack of accountability mechanisms for monitoring progress.
- DFID has identified challenges in delivering an effective disability- inclusive strategy through bilateral programs:

- ministries which tend to drive disability and budgets (for example, the Ministry of Social Welfare) are typically under resourced and have low capacity
- SWaPs in sectors such as health and education often do not include People With Disability and the issue of disability is seen as an add-on and not as integral to sector-wide approaches.
- There are few partnerships and little collaboration evident between bilateral donors in the area of disability. However, Norway and Sweden have collaborated in support of World Bank activities and the Global Partnership for Disability and Development.

## **6.3 Contents of the Disability Strategy Companion Report**

1. Consultation Paper
2. UN Convention on the Rights for People with Disabilities (UNCRPD)
3. Biwako Millenium Framework for Action (BMF)
4. Summary analysis of UNCRPD and BMF
5. List of organisations and individuals consulted
6. Priority issues arising from consultations
7. Other donor activity in disability in the region
8. Lessons learnt in disability and development
9. AusAID's disability activities to date.

## 7. Abbreviations and glossary

### ABBREVIATIONS ...

|               |   |
|---------------|---|
| <b>BMF</b>    | <b>Bikawo Millenium Framework for Action</b>  |
| <b>UNCRPD</b> | <b>United Nations Convention on the Rights of Persons with Disabilities</b>   |
| <b>Dfid</b>   | <b>Department for International Development (UK)</b>  |
| <b>DPO</b>    | <b>Disabled People’s Organisation (a not-for-profit representative member organisation made up of, and governed by, people with disability)</b> |
| <b>MDGs</b>   | <b>Millenium Development Goals</b>  |
|               |   |
| <b>NGO</b>    | <b>Non-Government Organisation</b>  |
| <b>UN</b>     | <b>United Nations</b>   |
| <b>UNICEF</b> | <b>United Nations Children’s Fund</b>   |
| <b>USAID</b>  | <b>United States Agency for International Development</b>   |
| <b>WHO</b>    | <b>World Health Organization</b>  |

### GLOSSARY

**Biwako Millennium Framework**—A Framework for Action Towards an Inclusive, Barrier-Free and Rights-Based Society for Persons With Disabilities in Asia and the Pacific. Adopted by 28 governments at the conclusion of the Asian and Pacific Decade of Disabled Persons conference in October 2002. This regional framework for action covers the period 2003–2012, and sets out a rights-based approach to achieving seven priority areas for action to progress rights

and address the significant poverty faced by people with disability in Asia Pacific.

(<http://www.unescap.org/esid/psis/disability/bmf/bmf.html>)

**BMF plus 5**—The framework adopted at the High-Level Intergovernmental Meeting on the Midpoint Review of the Asian and Pacific Decade of Disabled Persons, 2003–2012, held in Bangkok, Thailand, 19 to 21 September 2007.

Provides for supplemental strategies for further implementation of BMF by 2012.

(<http://www.worldenable.net/bmf5/bmf5adopted.htm>)

**Community-based rehabilitation**—focuses on enhancing the quality of life for people with disability and their families, meeting basic needs and ensuring inclusion and participation. Adopts a multi-sectoral approach and has five major components—health, education, livelihood, social and empowerment. CBR is implemented in more than 90 countries through the combined efforts of people with disability, their families, communities, government organisations and NGOs working in disability and development. Involvement and participation of people with disability and their families is at the heart of CBR.

(<http://www.who.int/disabilities/cbr/en/>)

**UN Convention on the Rights of Persons with**

**Disabilities**—An international human rights treaty providing for the rights of people with disability which came into force on 3 May 2008, and to which Australia is a party.

(<http://www.un.org/disabilities/default.asp?id=259>)

**Disability**—includes physical, sensory, neurological, intellectual, psychiatric or psycho-social impairment or condition that may occur at any age and may be short or long term. In combination with social, cultural, economic,

attitudinal, physical, communication, legal, and institutional barriers, impairments can act to hinder the full and effective participation in society of people with disability on an equal basis with others. (<http://www.un.org/disabilities/>)

**Millennium Development Goals**—a series of eight goals set out in the United Nations Millennium Declaration, adopted in September 2000. Goals include eradication of extreme poverty and hunger, achievement of universal primary education, improving child and maternal health, combating HIV/AIDS, malaria and other diseases, promoting gender equality, environmental sustainability, and development of a global partnership for development. (<http://www.un.org/millenniumgoals/>)