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GUIDANCE NOTE

Applying the Convention on the Rights of Persons with Disabilities in UNDP Programming

3 December 2012

United Nations Development Programme

Summary

The main objective of these guidelines is to provide guidance on how to contribute to realizing the rights of persons with disabilities through the United Nations Development Programme's (UNDP) policies, projects and programmes. The guidelines are primarily addressed to UNDP staff at the country, regional or global level who are tasked with the design, implementation and monitoring of policies and programmes in support of national partners' development priorities. They may also serve as a reference for governmental or non-governmental national partners as well as other development partners.

Chapter 1 describes the international legal framework on which the United Nations (UN) system and UNDP base their work on disability and explains why it is important for UNDP to engage in promoting the rights of persons with disabilities. It highlights, in particular, how the inclusion of persons with disabilities is essential for the realization of human development and the equitable achievement of the Millennium Development Goals (MDGs).

Chapter 2 provides practical guidance on how to integrate the rights of persons with disabilities in UNDP's work. First, it shows how, during the conceptualization stage, UNDP's five steps for planning can be used to assess and address the situation of persons with disabilities. Then it offers examples from UNDP's different areas of work. Finally, it provides basic guidance on how to address the rights of persons with disabilities during implementation, monitoring and evaluation (M&E) and day-to-day operations.

Chapter 3 maps the stakeholders who need to be involved when addressing the situation of persons with disabilities, with a specific focus on Disabled Persons' Organizations (DPOs).

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List of Acronyms

CSOs	Civil Society Organizations
CCA	Common Country Assessment
CRDP	Convention on the Rights of Persons with Disabilities
CPD	Country Programme Document
CPAP	Country Programme Action Plan
DPOs	Disabled Persons' Organizations
ICF	International Classification of Functioning, Disability and Health
ILO	International Labour Organization
MDGs	Millennium Development Goals
M&E	Monitoring and Evaluation
NHDRs	National Human Development Reports
NHRI	National Human Rights Institutions
NGOs	Non-governmental Organizations
UN	United Nations
UNCTs	United Nations Country Teams
UNDAF	United Nations Development Assistance Framework
UNDG	United Nations Development Group
UNDP	United Nations Development Programme

Introduction

The 2011 *World Report on Disability* (WHO and the World Bank) estimates that persons with disabilities represent about 15 percent (1 billion people) of the world's population. Of those, between 110 million and 190 million people face significant barriers in performing basic functions to meet their daily needs. Globally, half of persons with disabilities cannot afford health care, compared to a third of those that do not have a disability, and persons with disabilities are twice as likely to find health care providers' skills inadequate. In addition, employment rates are lower for men and women with disabilities than for non-disabled men and non-disabled women (53 percent and 20 percent, respectively, versus 65 percent and 30 percent). Persons with disabilities have worse living conditions—including insufficient food, poor housing, lack of access to safe water and sanitation—than non-disabled people. Because of extra costs associated with various barriers such as medical care, assistive devices or personal support, persons with disabilities are generally poorer than non-disabled people with similar income.¹ Moreover, 98 percent of children with disabilities in developing countries do not attend school.²

The *World Report on Disability* states that developing countries have a higher prevalence of disability than higher-income countries, and disability is more common among women, older people, children and adults who are poor. Although quantitative research on the socio-economic status of persons with disabilities in developing countries is limited, available data suggest that “persons with disabilities are at a disadvantage in educational attainment and labour market outcomes.”³ Studies in a number of countries indicate that there is a higher level of poverty among households with disabilities (for example, Vietnam, Bosnia and Herzegovina etc).⁴ The lack of rehabilitation services remains also highly problematic. For instance, data from four Southern African countries (Malawi, Namibia, Zambia and Zimbabwe) found that only 26–55 percent of people received the medical rehabilitation they needed; 17–37 percent received the assistive devices they needed; 5–23 percent received the vocational training they needed; and 5–24 percent received the welfare services they needed.⁵

While any form of disability is associated with disadvantages, some people face more challenges than others: women and girls with disabilities also experience gender discrimination in both public and private spheres, and the most excluded, especially from the labour market, are those with psychosocial or sensory impairments, compared to persons with physical impairments.⁶

The issue of persons with disabilities becomes relevant also in contexts of armed conflict and natural disasters. In Haiti, for instance, approximately 200,000 people are expected to live with long-term disabilities as a result of injuries suffered from the 2010 earthquake. Persons with disabilities are usually more likely to be left behind or abandoned during evacuation operations due to a lack of preparation and planning, as well as inaccessible facilities and services and transportation systems. Most shelters and refugee camps are not accessible, and persons with disabilities are often even turned away from shelters and refugee camps due to a perception that they need ‘complex medical’ services.⁷ Families with a newly disabled family member face an additional challenge of care and may experience deeper poverty if the former breadwinner is disabled.

Disability has a significant economic and social impact on persons with disabilities and their families, as well as on their communities and society. According to the *World Report on Disability*, despite difficulties in estimating the impact of disabilities, the main costs arise because of inaccessible environments, products, services and processes and could be significantly reduced if accessibility standards were applied systematically to make health and education services as well as employment opportunities more inclusive of persons with disabilities.

The United Nations Convention on the Rights of Persons with Disabilities (CRPD), adopted in 2006, is a human rights instrument and one of the core human rights treaties. It aims to “promote, protect and ensure the full and equal enjoyment of all human rights

1 WHO and World Bank, *World Report on Disability*, 2011.

2 UNESCO, Education and Disability, www.unesco.org/education/efa/know_sharing/flagship_initiatives/disability_last_version.shtml.

3 WHO and World Bank, *World Report on Disability*, 2011, p. 39.

4 Ibid, pp39–40.

5 Summary of the *World Report on Disability*, p. 9.

6 WHO and World Bank, *World Report on Disability*, 2011.

7 UN Enable: Disability, natural disasters and emergency situations, www.un.org/disabilities/default.asp?id=1546.

and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.” It reflects the efforts of States Parties, the disability community, the UN system and civil society to change the attitudes and approaches of our society towards persons with disabilities. The Convention promotes the social model of disability and reflects a major shift in the global understanding of disability, stressing the need for societies to change and become more inclusive, while providing, at the same time, a road map for such change.⁸ The Convention does not provide an explicit definition of disability but refers to persons with disabilities as “those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.” The CRPD clarifies and qualifies how all categories of rights apply to persons with disabilities and identifies areas where adaptations have to be made for persons with disabilities to effectively exercise their rights and areas where their rights have been violated, and where protection of rights must be reinforced.⁹

UNDP recognizes the importance of identifying persons with disabilities as a key group and focuses on disability as a major issue in the context of its broader work on inclusive development. UNDP’s *Strategic Plan 2008–2011* promotes the inclusion of marginalized groups and mentions persons with disabilities explicitly. Addressing the challenges faced by persons with disabilities, and ensuring the full enjoyment of their human rights, is an important aspect of the overarching mission of UNDP to enhance human development and the equitable achievement of the MDGs.

After the CRPD came into force in 2008, the United Nations Development Group (UNDG) adopted a Guidance Note on the implementation of the CRPD for the United Nations Country Teams (UNCTs) and implementing partners in 2010.¹⁰ It provides guidance to the UNCTs on mainstreaming the rights of persons with disabilities in country-level programming, i.e. in Country Analysis, Strategic Planning (development of the United Nations Development Assistance Framework (UNDAF) and its results matrix) and M&E. Used in conjunction with the more generic *UNDAF Guidelines and UNDAF Technical Guidance* for UNCTs, the Guidance Note thus helps with applying the human-rights-based approach — one of the five principles of engagement at the country level.

In addition, UNDP aims to provide additional practical guidelines on the implementation of the CRPD and ways to mainstream the rights of persons with disabilities in UNDP’s own programming, i.e. in the Country Programme Document (CPD), as well as in projects. The present document thus builds on and complements the UNDG Guidance Note, by providing more specific guidance on UNDP’s areas and modalities of work.

8 OHCHR, ‘Monitoring the Convention on the Rights of Persons with Disabilities Guidance for human Rights Monitors’, *Professional training series*, No. 17.

9 Un Enable, CRPD, www.un.org/disabilities/default.asp?navid=14&pid=150.

10 UNDG, *Guidance Note: Including the rights of persons with disabilities in United Nations programming at country level*, Annexes — Appendices and Toolkit, www.un.org/disabilities/documents/iasg/undg_guidance_note.pdf.

Chapter 1 — WHY Does UNDP Need to Apply the CRPD in its Programming?

As a result of discrimination, segregation, economic, political and social marginalization, as well as lack of participation, persons with disabilities are often left out of development processes. UNDP regards the inclusion of persons with disabilities in the development agenda as instrumental to the achievement of human development, the MDGs and UNDP's objectives across its areas of work. Equally importantly, UNDP is institutionally required to mainstream human rights in all its activities. The rights of persons with disabilities are a core part of international human rights law, and UNDP, as part of the UN system, has the mandate to promote and protect human rights.

"The fight against poverty cannot be won by charity but by a restructuring of the economic process that leads to much greater inclusion [...]" (para 29).

"UNDP supports governments in the identification of effective interventions strengthening participation by the poorest social sectors, as well as by women, youth, persons living with disabilities, and indigenous people" (para 88).

UNDP Strategic Plan 2008–2011

1.1 Inclusion of persons with disabilities is required to fulfill UNDP's mandate (institutional value)

UNDP, as part of the UN system, is required to promote and mainstream human rights in all its work. The CRPD adapts general human rights principles (non-discrimination, participation, accountability) and standards (spanning across different civil, cultural, economic, political and social rights) to the specific context of persons with disabilities. Reflecting the standards and principles enshrined in the CRPD in development programming is thus part of the UN's overall human-rights-based approach to development and essential for fulfilling UNDP's institutional mandate. This mandate derives, among other things, from:

UN Charter (1945): The UN Charter lists human rights among its three main pillars. Human rights are at the heart of the work of the UN. Promoting and encouraging respect for human rights and for fundamental freedoms for all without distinction as to race, sex, language or religion is one of the UN's purposes.¹¹

Universal Declaration of Human Rights (1948): The Declaration stipulates that "everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control."¹²

UN Secretary-General's Reform Programme (1997): The Reform Programme called for the integration/mainstreaming of human rights throughout the activities of the UN system and the development of practical tools to implement programmes that contribute to the advancement of human rights.

Accra Agenda for Action (2008): The Accra Agenda for Action stipulates that developing countries and donors will ensure that their respective development policies and programmes are designed and implemented in ways consistent with their agreed international commitments on gender equality, human rights, disability and environmental sustainability.

UNDP's Strategic Plan 2008–2011: The Strategic Plan highlights the inclusion of so-called marginalized groups as an area for review. Protecting and ensuring the rights of persons with disabilities is an important part of achieving the overarching vision of the

¹¹ UNDP, *Human Rights in UNDP, Practice Note*, 2005.

¹² UN, *Universal Declaration of Human Rights*, 1948, www.un.org/Overview/rights.html.

Strategic Plan to promote inclusive development. It is explicitly UNDP's commitment to support governments to identify effective interventions to strengthen the participation of persons living with disabilities and other marginalized groups.

MDG Summit 2010: The Outcome Document of the MDG Summit 2010 makes special reference to the inclusion of persons with disabilities, recognizing that "policies and actions must focus on the poor and those living in the most vulnerable situations, including persons with disabilities, so that they benefit from progress towards achieving the Millennium Development Goals."¹³

General Assembly resolution 65/186 on 'Realizing the Millennium Development Goals for persons with disabilities towards 2015 and beyond (2011)': The resolution urges the UN system to make a concrete effort to integrate disability issues into its work, and in this regard encourages the UN agencies to continue working to ensure that development programmes, including MDG policies, processes and mechanisms, are inclusive of and accessible to persons with disabilities.

Convention on the Rights of Persons with Disabilities (adopted in 2006, entered into force in 2008): The Convention is one of the newest core human rights treaties. It provides, among other things: a definition of concepts related to disability; guiding principles on the realization of the rights of persons with disabilities; a framework for international cooperation on disability rights; a framework for the establishment of monitoring mechanisms at the national and international levels. More information on the CRPD is provided in the FAQ section.

1.2 The inclusion of persons with disabilities is necessary to achieve human development, the MDGs and UNDP's objectives (instrumental value)

1.2.1 Importance in achieving human development

The *Human Development Report 2010* restates human development as follows:

*Human Development is the expansion of people's freedoms to live long, healthy and creative lives; to advance other goals they have reason to value; and to engage actively in shaping development equitably and sustainably on a shared planet.*¹⁴

Enhancing human development is about expanding women's, men's and children's capabilities to lead the lives they value and have reason to value or, put differently, creating the environment for people to be all they can be. The realization of the rights of persons with disabilities, who are among the most marginalized groups of society, is critical to the achievement of human development.

Persons with disabilities face numerous barriers that impede their functionalities including:

- *Institutional:* for example, legislation that would prevent discrimination and allow the integration of persons with disabilities in society may be inexistent or may not be implemented;
- *Attitudinal or social:* persons with disabilities may be systematically discriminated against and socially stigmatized;
- *Physical:* in many parts of the world persons with disabilities are confined within their home environment and do not enjoy freedom of movement because of the lack of safe and accessible facilities;
- *Communicational:* information may not be available in accessible formats, which prevents persons with disabilities from accessing information that is presumed to be available to everyone.

Due to these and other constraints, very often persons with disabilities do not have access to public services and thus to adequate education and employment opportunities that would allow them to use and expand their capabilities, gain self-confidence and live a productive and dignified life, as full members of the society.

¹³ UN General Assembly, *MDG Summit 2010, Outcome Document*, para. 28.

¹⁴ UNDP, 'The Real Wealth of Nations: Pathways to Human Development', *Human Development Report 2010*, p. 22.

In Africa national studies on living conditions of people with disabilities were conducted between 2001 and 2006 in Malawi, Namibia, Zambia and Zimbabwe. Across the four countries the only sector that met more than 50 percent of reported needs for people with disabilities was health care. The studies revealed large gaps in service provision for people with disabilities, with unmet needs particularly high for welfare, assistive devices, education, vocational training, and counselling services (*World Report on Disability*, 2011).

Moreover, the exclusion of persons with disabilities from the social, economic and political life of their communities significantly impacts the life and welfare of their families. The lack of an accessible environment, for instance, can create dependence of persons with disabilities on the members of their families, and in many cases in developing countries family members who need to support persons with disabilities are themselves excluded from livelihood opportunities.

As pointed out in the *Croatia Human Development Report 2006*: “The social exclusion of people with physical disability in Croatia is closely intertwined with their insufficient and inadequate representation in the political process. However, there is a substantial segment of this population that does not feel excluded from society, because of the support afforded to them by family and friends. Family that acts as the main support for the disabled person also requires support from the community, and from the state.”¹⁵

In addition, the marginalization of persons with disabilities affects the communities where they live, as well as the whole society. For example, the high rate of unemployment of persons with disabilities hinders the economic advancement of families, as well as overall society, which provides support through the welfare systems (if at all available). If employment opportunities for persons with disabilities were improved, the financial support allocated to them and their families (when this is the case) could instead be used to make the environment more accessible or for other social benefits.

What is the cost of inclusion?

Ensuring the full inclusion of persons with disabilities may involve costs. The costs of inclusion, however, should not be seen as a barrier to ensuring full accessibility either in principle or in practice. Not only is the principle of inclusion now an obligation under international human rights law, but also the costs are often negligible when inclusion is considered at planning and budgeting stages in all new programmes and processes, compared to costs that are necessary to make later adjustments. In addition, these costs should be considered as an investment that leads to the participation of persons with disabilities in the social and economic life of the country.

- It has been estimated that the cost impact to ensure that new buildings are accessible to persons with disabilities is on average 1.12 percent of the total cost, ranging from 0.1 percent for public buildings to 3 percent for individual homes.¹⁶ Other studies indicate “in new construction, full compliance with all the requirements of accessibility standards is generally feasible at 1 percent of the total cost.”¹⁷
- For projects, although the percentage for ensuring accessibility will vary with the type of activities, Mobility International suggests 1–3 percent for administrative costs and 5–7 percent for operational costs.
- A US survey of employers conducted in 2003 found that in most cases the cost of individual accommodation when employing persons with disabilities was only USD 500 or less; 73 percent of employers reported that their employees did not require special facilities at all.¹⁸

15 UNDP, ‘Unplugged: Faces of Social Exclusion in Croatia’, *Croatia Human Development Report 2006*, p. 70.

16 European Commission/ECHO, *Review of Core Cross-Cutting Issues and Key Objectives affecting Persons in Humanitarian Crises*, 2005, p. 48.

17 WHO and World Bank, *World Report on Disability*, 2011, p. 173.

18 Dixon, K.A., Kruse, D. and Van Horn, C.E., *Restricted Access: A Survey of Employers about People with Disabilities and Lowering Barriers to Work*, 2003. Cited in UN Enable factsheet. See UN Enable factsheets on Disability and Employment for further examples.

While more research needs to be undertaken to estimate costs and benefits at the macro level over a longer period of time, the lack of inclusion is likely to be more expensive to society in the long run than the cost to ensure the full participation of persons with disabilities in societies and economies.

1.2.2 The inclusion of persons with disabilities is necessary to achieve the MDGs equitably

“The message for the MDGs is clear: putting persons with disabilities and their communities at the heart of our efforts is a proven way to advance the development agenda.”

UN Secretary-General Ban Ki-moon, 3 December 2009

Adopted by world leaders in 2000 and set to be achieved by 2015, the MDGs are both global and local goals, tailored by each country to suit specific development needs. Progress has been made on a number of goals, and if they are achieved, world poverty will be cut by half, tens of millions of lives will be saved, and billions more people will have the opportunity to benefit from the global economy. However, the MDGs are average and aggregate targets which could be nominally achieved without benefitting some of the most marginalized groups, such as persons with disabilities. This would be, of course, inequitable from both a human development and a human rights perspective — both of which stress the importance of focusing on the most vulnerable and marginalized.

Based on this recognition,¹⁹ the Outcome Document of the MDG Summit in 2010 emphasizes that policies and actions must ensure that marginalized groups such as persons with disabilities benefit from progress towards achieving the MDGs.²⁰ This should be achieved not only through the inclusion of persons with disabilities in MDG strategies but also through indicators tracking MDG progress.

The CRPD addresses issues directly related to all MDGs — for example:

Goal 1 — Eradicate extreme poverty and hunger: Lack of income and exclusion from economic activities is a key cause of higher rates of poverty, particularly among persons with disabilities. The CRPD calls for persons with disabilities to have access to and be included in poverty and hunger eradication programmes as well as efforts to achieve decent work for all (Article 28 (2) (b), 27 CRPD).

Goal 2 — Achieve universal primary education: The Education for All Global Monitoring Report 2008 estimates that children with disabilities constitute one third of the 75 million children not attending primary school. This is not only of profound impact on the goal of primary education for every child but also has serious implications for the ability of the excluded children to realize their potential as adults. The CRPD calls for access to and inclusion in universal primary education, keeping in mind the multiple barriers faced by girls with disabilities (Articles 3 (h), 7 & 24 CRPD).

Goal 3 — Promote gender equality and empower women: Women and girls with disabilities face multiple discrimination based on their gender and their society's attitudes towards their impairment. They face significantly more difficulties in attaining access to adequate housing, health, education, vocational training, employment, credit and other productive resources.²¹ The CRPD calls for women and girls with disabilities to have access to all services, particularly education, health, and employment (Articles 6 & 16 CRPD).

19 “There is an urgent need to address the absence of more than 10 percent of the world's population in the implementation, review and evaluation of the [Millennium Development] Goals and their targets, evaluation mechanisms and indicators. The lack of a disability perspective is undermining the objective of the Goals, which is to measure human development benchmarks on the way to more inclusive and equitable global development” (UN Secretary General, *Fifth quinquennial review and appraisal of the World Programme of Action concerning Disabled Persons*, 28 July 2008).

20 UN General Assembly, *MDG Summit 2010, Outcome Document*, para. 28.

21 UN Enable, *Women and girls with disabilities*, www.un.org/disabilities/default.asp?id=1514.

Disability indicators have already been developed for each of the MDGs, and the following are a few examples (the actual list includes specific indicators for all targets):²²

Goals and targets		Indicators for monitoring progress	Disability indicators
Goal 1: Eradicate extreme poverty and hunger	Target 1A. Halve, between 1990 and 2015, the proportion of people whose income is less than USD 1 a day	1.1. Proportion of population below USD 1.25 per day	Proportion of population with disabilities below USD 1.25 per day
Goal 2: Achieve universal primary education	Target 2. Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	2.3. Literacy rate of 15–24 year-olds, women and men; net enrolment ratio in primary education	Literacy rate of 15–24 year-olds with disabilities, women and men
Goal 3: Promote gender equality and empower women	Target 3. Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	3.1. Ratio of girls to boys in primary, secondary and tertiary education	Ratio of girls with disabilities to boys with disabilities in primary, secondary and tertiary education; ratio of girls with disabilities to boys without disabilities in primary, secondary and tertiary education
Goal 4: Reduce child mortality	Target 4. Reduce by two thirds, between 1990 and 2015, the under-five mortality rate	4.1. Under-five mortality rate	Under-five mortality rate for all children with disabilities
Goal 5: Improve maternal health	Target 5A. Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio	5.2. Proportion of births attended by skilled health personnel	Proportion of births among women with disabilities attended by skilled health personnel
Goal 6: Combat HIV/AIDS, malaria and other diseases	Target 6B. Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it	6.5. Proportion of population with advanced HIV infection with access to antiretroviral drugs	Proportion of population with disabilities with advanced HIV infection with access to antiretroviral drugs
Goal 7: Ensure environmental sustainability	Target 7C. Halve by 2015 the proportion of people without sustainable access to safe drinking water and basic sanitation	7.8. Proportion of population using an improved drinking water source	Proportion of population with disabilities using an improved drinking water source should be proportionate to improved drinking water available to the general population
Goal 8: Develop a Global Partnership Development	Target 8A. Develop further an open, rule-based, predictable, non-discriminatory trading and financial system (includes a commitment to good governance, development and poverty reduction — both nationally and internationally)	8.1. Net ODA total and to the least developed countries, as a percentage of Organisation for Economic Co-operation and Development/Development Assistance Committee (OECD/DAC) donors' gross national income	Develop further an open, rule-based, predictable, non-discriminatory trading and financial system (includes a commitment to good governance, development and poverty-reduction — both nationally and internationally) and ensure that persons with disabilities are routinely considered in each and all development goals and objectives

22 UN Secretary General, *Fifth quinquennial review and appraisal of the World Programme of Action concerning Disabled Persons*, 28 July 2008, Annex II— Selected examples of and guidelines for mainstreaming disability in monitoring and evaluation of the MDGs.

1.3 Frequently Asked Questions about the CRPD

1.3.1 Who are persons with disabilities?

The CRPD stresses that disability is an **evolving** concept and results from the **interaction** between persons with long-term impairments and attitudinal and environmental barriers that hinder full and effective participation in society on an equal basis with others. This approach, referred to as the social model of disability, points to the need to explicitly recognize disability as a human rights issue, stressing that societies, not individuals, need to change to realize truly inclusive communities.²³

The International Classification of Functioning, Disability and Health (ICF), adopted as the conceptual framework for the WHO *World Report on Disability*, defines disability as an “umbrella term for impairments, activity limitations, and participation restrictions.²⁴ In other words, disability refers to the negative aspects of the interaction between individuals with a health condition (such as cerebral palsy, Down syndrome, depression) and personal and environmental factors (such as negative attitudes, inaccessible transportation and public buildings, and limited social supports).”²⁵

This social definition of disability also highlights that—while stereotypical views of disability emphasize wheelchair users and a few other ‘classic’ groups such as blind people and deaf people—persons with disabilities are a **diverse and heterogeneous group**. Disability encompasses the child born with a congenital condition such as cerebral palsy or the young soldier who loses his leg to a landmine, or the middle-aged woman with severe arthritis, or the older person with dementia, among many others. Impairments can be visible or invisible; temporary or long term; static, episodic or degenerating; painful or inconsequential.²⁶

1.3.2 What is the Convention on the Rights of Persons with Disabilities and the Optional Protocol?

The CRPD is an international treaty that addresses the rights of persons with disabilities as well as the obligations on States Parties to promote, protect and ensure those rights. It also establishes a monitoring mechanism, the Committee on the Rights of Persons with Disabilities, in charge of monitoring the implementation of the Convention. The Committee, similarly to other human rights treaty bodies:

- Reviews how States Parties fulfill their obligations in relation to the Convention (i.e. it receives periodic reports from the government and its members, after reviewing the reports along with information from other sources, prepares **Concluding Observations**, which provide an analysis and recommendations to the country).
- Issues **General Comments/Recommendations** that clarify how the CRPD’s provisions should be interpreted and implemented by States Parties.

The Optional Protocol is also an international treaty, which establishes two procedures aimed at strengthening the implementation and monitoring of the Convention:

- The first is an individual communications procedure which allows individuals to submit complaints to the Committee against a State Party when they feel that specific rights in the treaty have been violated.
- The second is an inquiry procedure giving the Committee authority to undertake inquiries of grave or systematic violations of the Convention.

23 OHCHR, ‘Monitoring the Convention on the Rights of Persons with Disabilities Guidance for human Rights Monitors’, *Professional training series*, No. 17.

24 This reaffirmation of a social rather than medical model of disability is often referred to as the ‘paradigm shift’ reflected in the CRPD.

25 WHO and World Bank, *Summary of the World Report on Disability*, 2011.

26 WHO and World Bank, *World Report on Disability*, 2011.

1.3.3 What are the human rights of persons with disabilities?

Persons with disabilities have all human rights that everyone else has, based on international human rights treaties (for example, the Universal Declaration on Human Rights, the Convention of Economic, Social and Cultural Rights or the Convention on the Eradication of all Forms of Discrimination Against Women) and national legislation (for example, constitutional fundamental freedoms or discrimination legislation). For instance, persons with disabilities have the right to be free from discrimination on the basis of disability, but also on any other basis such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

The CRPD is, therefore, complements existing international human rights treaties. It reinforces the existing human rights, ensures that they apply equally to persons with disabilities (right-holders) and clarifies the relevant obligations and legal duties of States to respect and ensure these rights (duty-bearers). In addition, it broadens the definition of certain rights and identifies areas where adaptations have to be made, in accordance with the priorities of persons with disabilities, so that they can exercise their rights (such as the right to live independently and be included in the community, right to mobility, right to habilitation and rehabilitation).

To this end, the CRPD includes the following provisions:

- Equality before the law without discrimination (Article 5)
- Rights of women with disabilities (Article 6)
- Rights of children with disabilities (Article 7)
- Accessibility (Article 9)
- Right to life, liberty and security of the person (Articles 10 & 14)
- Equal recognition before the law and legal capacity (Article 12)
- Freedom from torture or cruel, inhuman or degrading treatment or punishment (Article 15)
- Freedom from exploitation, violence and abuse (Article 16)
- Right to respect physical and mental integrity (Article 17)
- Freedom of movement and nationality (Article 18)
- Right to live independently and in the community (Article 19)
- Right to personal mobility (Article 20)
- Freedom of expression and opinion (Article 21)
- Respect for privacy (Article 22)
- Respect for home and the family (Article 23)
- Right to education (Article 24)
- Right to health (Article 25)
- Right to habilitation and rehabilitation (Article 26)
- Right to work (Article 27)
- Right to an adequate standard of living (Article 28)
- Right to participate in political and public life (Article 29)
- Right to participation in cultural life (Article 30).

1.3.4 What are the main principles that guide the CRPD?

Article 3 of the CRPD lists its main guiding principles as:

Respect for inherent dignity, individual autonomy, including the freedom to make one's own choices, and independence of persons: Everyone has the right to make their own choices, to develop their own opinions and make decisions. The CRPD enshrines the concept of 'independent living', which is based on making choices equal to others.²⁷

Non-discrimination: "Discrimination on the basis of disability means any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation."²⁸

Reasonable accommodation: "necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms."²⁹ The Convention, therefore, calls on States to ensure the provision of reasonable accommodation for persons with disabilities.

Full and effective participation and inclusion in society: In addition to the obligation to include persons with disabilities and their representative organizations in all policy processes,³⁰ the CRPD highlights the need for inclusion of persons with disabilities:

- In political and social life (Article 29);
- in cultural life, recreation, leisure and sport (Article 30); and
- in the development and implementation of legislation and policies to implement the present Convention, and in other decision-making processes concerning issues relating to persons with disabilities.

Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity: Addressing a major challenge in ensuring non-discrimination and overcoming social barriers, as well as the diversity also among persons with disabilities, the CRPD calls for accepting the diversity of humanity as a general principle.

Equality of opportunity: The core message of human rights refers to the process through which the various systems of society and the environment, such as services, activities, information and documentation are made available to all.

Accessibility: Accessibility appears both as a general principle (Article 3) as well as a stand-alone article (Article 9). It is essential to enable persons with disabilities to live independently and participate fully in life³¹—it is, therefore, an end in itself as well as a means to enjoy other rights. Accessibility has different dimensions:

- Physical accessibility—for example, to buildings and transport, to facilitate access to schools, courts, hospitals, workplaces.³²
- Information and communication accessibility such as electronic accessibility, given the importance of the Internet, but also accessibility to documentation (Braille) or to aural information (sign language).

In particular, access must be ensured to:

- Justice (Article 13)

27 Article 19 CRPD.

28 Article 2 CRPD.

29 Ibid.

30 Article 4 (3) CRPD.

31 Article 9 CRPD.

32 UN Enable, Convention in Brief, www.un.org/disabilities.

- Living independently and being included in the community (Article 19)
- Information and communication services (Article 21)
- Education (Article 24)
- Health (Article 25)
- Rehabilitation (Article 26)
- Work and employment (Article 27) in human resource policies and practices
- Adequate standard of living and social protection (Article 28).

Equality between men and women: This core principle is also reflected in a stand-alone provision highlighting the marginalization of women³³ and underlines the issue of multiple and aggravated forms of discrimination.

Evolving capacities of children: The best interest of the child and respect for the evolving capacity of children is included as a stand-alone provision on children with disabilities.³⁴ It is also elaborated on in the Convention on the Rights of the Child.³⁵

In addition, the Convention addresses accountability as a general principle under Article 4 (General Obligations). In this context, accountability entails:

- Adoption of legislative, administrative and other measures for the implementation of the CRPD rights;
- measures to modify or abolish existing laws, regulations, customs and practices that constitute discrimination against persons with disabilities;
- inclusion of the protection and promotion of the human rights of persons with disabilities in all policies and programmes;
- ensuring that public authorities and institutions act in conformity with the Convention's obligations and that officials working on disability issues receive appropriate training; and
- promotion of research and development that would support the adaptation of persons with disabilities.

1.3.5 What does the Convention say about the involvement of persons with disabilities and Disabled People's Organizations?

Nothing about us without us—a principle and an obligation: In addition to highlighting general human rights principles such as equality, non-discrimination, participation and inclusion, the CRPD includes the inclusion of DPOs as a general obligation in Article 4 (3).

Persons with disabilities have firsthand knowledge and experience of the different barriers which prevent them from having equal access to their rights and opportunities and to choices in shaping their lives. Also, they often know best whether approaches work (or not) in their country context. Self-representation and self-advocacy are rights under the Convention which promise more effective participation.

Globally, there is a growing disability rights movement, which includes many organizations and individuals ready to collaborate with and assist government and UN agencies in the development process.

³³ Compare Article 6 CRPD.

³⁴ Article 7 CRPD.

³⁵ Article 23 of the Convention on the Rights of the Child.

1.3.6 What does the CRPD say about international cooperation?

Recognizing the importance of international cooperation, the CRPD features a stand-alone provision entitled ‘international cooperation’. It calls on States Parties and others, including relevant international organizations, to ensure the inclusion of persons with disabilities in international cooperation through technical and economic assistance, as well as by facilitating and supporting capacity-building, information-sharing, supporting training programmes, documenting best practices and fostering cooperation in research and access to scientific and technical knowledge.³⁶

There are further direct references to international cooperation in the CRPD—for instance, there is a specific reference to accessibility for and inclusion of persons with disabilities in poverty reduction programmes.³⁷ This also underlines the importance of ensuring the inclusion of persons with disabilities in processes such as those to achieve the MDGs and other internationally agreed development goals.

Humanitarian emergencies and other situations of risk, including armed conflict and natural disasters, diminish the protection and safety of persons with disabilities. The CRPD obliges States Parties to take all necessary measures to address this challenge, taking into account both international humanitarian law and international human rights law.³⁸

1.3.7 How do States Parties monitor the implementation of the CRPD by other States Parties at the national level?

As the first human rights treaty of the 21st century, the CRPD builds, and innovates, on the experience of the core human rights treaties. In particular, the monitoring of implementation efforts at national level has been significantly strengthened.

The CRPD requires the establishment of the following monitoring mechanisms at the local level:

- Focal points within government
- Coordination mechanism within government (optional)
- Independent monitoring body

Importantly, the CRPD requires that persons with disabilities and DPOs are fully involved in the monitoring mechanisms.³⁹

The **focal points** ensure that an executive authority (such as a department or a dedicated section housed within the government) is responsible for CRPD implementation, and fulfill various functions such as ensuring policy alignment with the CRPD.

The **coordination mechanism** could take various forms—for example, a body composed of representatives from relevant government departments or a combination of government and civil society representatives—and could perform various functions related to coordinating the implementation of the CRPD.

The **independent monitoring body** should be established in accordance with the principles related to the status and functioning of national institutions for the protection and promotion of human rights (the Paris Principles), which set out the role, functions and requirements for independence and plurality of such institutions. The body must protect, promote and monitor the CRPD and should have a broad mandate that could include receiving complaints, undertaking studies and awareness-raising activities, suggesting legal and policy reform, undertaking surveys and feeding into international monitoring processes.⁴⁰ UNDP can provide support to establish and increase capacities of such bodies, in the framework of its active role in strengthening the capacities of National Human Rights Institutions (NHRI).

³⁶ Article 32 (1) CRPD.

³⁷ Article 28 (2) CRPD.

³⁸ Article 11 CRPD.

³⁹ Article 33 (3). See also Article 4 (3), and *How to Work with Disabled Peoples’ Organizations* below.

⁴⁰ DP/OHCHR, *UNDP-OHCHR ToolKit for Collaboration with National Human Rights Institutions*, 2010.

The CRPD includes a separate provision that requires States Parties to specifically ensure that the independent authorities monitor all facilities and programmes designed to serve persons with disabilities, to prevent “the occurrence of all forms of exploitation, violence and abuse”.⁴¹

General resources on the CRPD

- **UN Enable:** [Frequently Asked Questions regarding the Convention on the Rights of Persons with Disabilities](#)
- **UN Enable:** [Factsheet on Persons with Disabilities](#)
- **UN Enable:** [Relationship between Development and Human Rights](#)
- **UNDP:** [Q&As—Basic Ratification Guidelines for the Convention on the Rights of Persons with disabilities](#)
- **IDA:** [The United Nations International Convention on the Rights of Persons with Disabilities commented by its Protagonists](#) (Down España)
- **Marianne Schulze:** [Understanding The UN Convention On The Rights Of Persons With Disabilities, A handbook on the rights of persons with disabilities](#)

⁴¹ Article 16 (3) CRPD.

Chapter 2 — HOW to Apply the CRPD in UNDP’s Programming

Persons with disabilities are among the most marginalized and excluded members of society. They are often left out of national development processes and frequently overlooked in development programmes. This leads to further discrimination and prevents them from fully enjoying their human rights. Some international cooperation programmes may also be supporting initiatives that do not conform with the CRPD (for instance, by financing schools, public transportation, public buildings, communication infrastructure, employment and vocational training services that are not designed in an accessible or inclusive way, thus excluding most people with disabilities). In addition, data on the number of persons who have an impairment, the variety of impairments, barriers to access and measures to ensure inclusion are usually scarce, incomplete or non-existent.

Another major issue is that the few programmes that include or focus on people with disabilities tend to focus on the ‘typical’ or ‘visible’ groups (for instance, landmine survivors or persons with physical impairments rather than cognitive impairments), which creates competition for scarce resources and perpetuates the invisibility of certain groups of persons with disabilities.

To address these issues, two types of interventions are usually adopted:

- **Mainstreaming** the rights of persons with disabilities in existing policies, programmes, and services: According to the *World Report on Disability*, “mainstreaming is the process by which governments and other stakeholders ensure that persons with disabilities participate equally with others in any activity and service intended for the general public, such as education, health, employment and social services.”⁴²
- Investing in **specific or targeted** programmes and services: In addition to mainstreaming, some persons with disabilities, depending on the form and degree of impairment, may require specific services such as rehabilitation, support services or training.⁴³ Targeted interventions may also focus on the empowerment of persons with disabilities and DPOs.

Using these two types of interventions is usually referred to as the ‘twin-track approach’.



UNDP’s work can and should incorporate both targeted interventions and the inclusion of persons with disabilities in mainstream development initiatives. And, in both cases, the participation and issues of women and girls with disabilities should be ensured.

These guidelines are structured around four key principles of the CRPD which are seen as critically relevant to UNDP’s development programming (non-discrimination, participation and inclusion, accessibility, and accountability). From the analysis of these principles, a framework is derived for key issues that should be considered during the main stages of the UNDP project cycle—justification, defining and initiating a project; implementation and monitoring; and project closure, including evaluation—as defined by the UNDP’s Programme and Operations Policies and Procedures (POPP), in accordance with UNDP Programme Strategic Planning.

The **first section** of the chapter focuses in greater detail on the main issues related to the inclusion of persons with disabilities during the planning stage (justifying, defining and initiating a programme/project), aiming to explore the kind of interventions that can be undertaken within UNDP’s main areas of work.

Although the planning stage is very important for determining the course of action of any intervention, the consideration of CRPD’s principles is equally important during the implementation, monitoring and evaluation stages. Therefore, the **second section** provides a brief overview of relevant questions that need to be raised during these stages of the project cycle, followed by a number of issues to be considered in UNDP’s internal policies and administrative procedures.

42 WHO and World Bank, *World Report on Disability*, 2011, p. 264.

43 Ibid. p. 265.

2.1 Justifying, defining and initiating a programme/project

2.1.1 Addressing disability in UNDP's five steps for programme/project planning

The *UNDP Handbook on Planning, Monitoring and Evaluating for Development Results* outlines how the planning process helps stakeholders design programmes or projects that address the right problems and the right causes of those problems. Stakeholders should thus undertake a thorough problem and situation analysis before developing goals and objectives or planning programmes or projects. A problem analysis, which is sometimes referred to as a cause–effect analysis, is a requirement for all UN and UNDP programming. The Handbook suggests five specific steps that should be followed during the planning exercise:⁴⁴

Step 1 — Identifying main problems: Stakeholders begin looking at the problems to be addressed. The aim is to identify the critical issues requiring attention.

Step 2 — Organizing and prioritizing main problems: After identifying the main problems, stakeholders start to prioritize and focus on the issues that are most directly related to national priorities and most effectively addressed by the development programmes.

Step 3 — The problem analysis: For each priority problem selected, stakeholders undertake a problem (cause–effect) analysis. This generally requires additional data. There are many different types of problem analysis models, including the problem tree analysis, which is used as a model in the UNDP Handbook.

Step 4 — Creating the vision of the future: The aim of this process is to visualize what the future would look like if the problems were resolved. The objective of the visioning exercise is for stakeholders to come up with a clear and realistic vision of how things will have positively changed in a period of time (normally five to 10 years), more precisely how the region, society, community or affected people's lives will have improved within the time period.

Step 5 — Creating the draft result map: The results of the problem analysis and the vision of the future will inform the formulation of the programme or project results framework (Impact, Outcome, Outputs, Activities, Indicators and Means of Verification). The fundamental question that stakeholders in the planning session should answer is 'What must be in place for us to achieve the vision and objectives that we have developed in the particular problem area?'

An important part of this process, throughout the five steps, is to consider the situation of all persons affected by the development issue, and especially the marginalized groups, including persons with disabilities. The following table offers a tool to help UNDP staff and other stakeholders take into account the specific circumstances of persons with disabilities at each stage of the planning process in the context of UNDP programming. This tool can be used for either mainstreaming or targeted interventions. In the former case, the questions that help identify main problems during the first step might be combined with questions related to other marginalized groups. Finally, it is important to note that persons with disabilities or representatives of organizations of persons with disabilities and other stakeholders should be involved throughout this process.

For an overview of key stakeholders with regard to the situation of persons with disabilities, including organizations of persons with disabilities, please refer to Chapter 3—WHO needs to be involved? (Stakeholders).

44 UNDP, *Handbook on Planning, Monitoring and Evaluating for Development Results*, 2010, pp32–48. Should the link be shown here not in text.

Step 1 Problem identification WHAT is happening to WHOM?	Step 2 Prioritization What should be addressed by UNDP?	Step 3 Problem analysis WHY is this happening?	Step 4 & 5 Vision of the future and result map HOW can we contribute to addressing the problem?
<p><i>Identify the problems facing the region, country or community</i></p> <p>Non-discrimination:^a</p> <ul style="list-style-type: none"> • Do existing disaggregated data show how persons with disabilities are affected by the problem? • Is this information sex-disaggregated so that it is known how women and girls with disabilities are affected? • Do persons with particular disabilities (e.g. physical, sensory, mental or intellectual impairments) face particularly severe challenges? • Do some persons with disabilities face additional challenges because of their gender, ethnicity, age, location or other status? 	<p><i>Solving this problem would bring significant value to the community.</i></p> <p><i>For example:</i></p> <ul style="list-style-type: none"> • Addressing the situation of persons with disabilities responds to a national or regional concern (e.g. social inclusion, social justice, equity, solidarity) • Addressing the situation of women with disabilities responds to a national or regional concern with gender inequality <p><i>We would have support to work towards solving this problem.</i></p> <p><i>For example:</i></p> <ul style="list-style-type: none"> • The government is seeking support to sign and ratify the CRPD • The government is seeking support to align relevant policies with the provisions of the CRPD • The government is seeking support to ensure its disability policies and programmes are gender sensitive 	<p><i>Undertake a problem (cause–effect) analysis, e.g. by using the three-step analysis^b</i></p> <div data-bbox="743 457 1190 766" style="text-align: center;"> </div> <p>STEP 1 — CAUSAL ANALYSIS: <i>Who has been left behind and why?</i></p> <p>With the help of a problem tree, explore the immediate, underlying and root causes of the identified problem/s:</p> <ul style="list-style-type: none"> • What are the immediate^c reasons for (some) persons with disabilities not being able to enjoy their rights on an equal basis with others? • What are the underlying^d causes of this issue/s (e.g. availability of resources, lack of relevant regulation etc.)? • What are the structural or root causes^e of the issue/s (e.g. common patterns of discrimination, including on the basis of gender, stigma, poverty, cultural beliefs)? 	<p><i>Focus on what the future would look like if the problems were resolved: How have things improved for men/women/marginalized groups? What must be in place for us to achieve the vision and objectives that we have developed in the particular problem area?</i></p> <p>To formulate the Results and Resources Framework,</p> <ul style="list-style-type: none"> • Turn the initial problem statement/s into result/s. Does this describe the desired overall outcome well (in line with the country programme action plan (CPAP))? • Use the identified capacity gaps to formulate immediate outcomes and outputs • Formulate activities by asking ‘What needs to be done to produce these outputs?’ • Formulate indicators by asking: ‘How will we know if we are on track to achieve what we have planned?’

a The guidance in this column is derived from four key CRPD principles (see details on the principles on p. 13/14).

b The three-step analysis suggested here is a tool that is used for UNDAF and agency planning (e.g. see [UN Common Learning Package on an HRBA, UNFPA, A Human Rights Based Approach to Programming](#)). Detailed instructions on the steps, including on how to use a simple problem tree analysis can be found [here \(under session 5\)](#). The questions provided here are indicative, not prescriptive or exhaustive. They are meant to complement the usual questions that programming teams ask in the planning stage of a programme or project.

c **Immediate causes** determine the current status of the problem and usually describe how the problem is experienced by the individual.

d **Underlying causes** are often the consequence of policies, laws and availability of resources. They may reveal related complex issues and require interventions that take significant time in obtaining results.

e **Root/structural causes** reveal conditions that require long-term interventions to change societal attitudes and behaviour at different levels, including those at the family, community and higher decision-making level.

Step 1 Problem identification WHAT is happening to WHOM?	Step 2 Prioritization What should be addressed by UNDP?	Step 3 Problem analysis WHY is this happening?	Step 4 & 5 Vision of the future and result map HOW can we contribute to addressing the problem?
<p>Participation and Inclusion:</p> <p>Do both women and men with disabilities participate in decision-making processes related to the problem, including in consultations on relevant sectoral or national development strategies or in elections in general?</p> <p>Accessibility:</p> <p>Are relevant facilities, goods and services—whether provided by public or private actors—accessible to persons with different disabilities?</p> <p>Accountability and Rule of Law</p> <ul style="list-style-type: none"> • Does the constitution contain a norm on non-discrimination? • Does anti-discrimination legislation taking into account persons with disabilities exist? • Do poverty reduction strategies and other development planning instruments aim to address the situation of persons with disabilities? 	<ul style="list-style-type: none"> • There are communities mobilized/energized/motivated to work around issues of disability rights (e.g. after a disaster or near landmine fields) in relation to the problem <p><i>We would have the capacity and comparative advantage to work on the problem. For example:</i></p> <ul style="list-style-type: none"> • We are perceived as a facilitator of government–civil society–grassroots/community collaborations • Stakeholders value our focus on human development and social inclusion as necessary and complementary to other partners’ approaches • We have experience in translating normative frameworks into policy guidance 	<p>STEP 2 — ROLE ANALYSIS:</p> <p><i>What are people (rights-holders) entitled to? Who has to do something about it (duty-bearers)?</i> In relation to each cause identified in the problem tree, consider:</p> <ul style="list-style-type: none"> • What are the laws and policies in the country addressing discrimination in general and disability in particular? What do they provide for or guarantee to whom? • Which roles and responsibilities does the applicable administrative or legal framework give to relevant state authorities? In other words, which entities at different levels of the state are responsible for addressing the causes of the problem? <p>STEP 3 — CAPACITY GAP ANALYSIS:</p> <p><i>What do duty-bearers and right-holders need to take action?</i> Bearing the role analysis in mind, explore:</p> <ul style="list-style-type: none"> • Are the relevant state structures/actors (as mandated by the state’s national and international obligations) in place? For example, focal points, ministry departments etc. If not, is there awareness of the need to establish them and willingness to do so? • Are the relevant national or subnational government actors given the authority (within the relevant administrative and legal framework) to act as required? • Do the relevant authorities know about those responsibilities? • Are public servants, especially those who work directly on policies and services relevant for persons with disabilities, familiar with the CRPD and national policies on discrimination? • Can relevant authorities draw on adequate resources to implement these laws and policies? • Can persons with disabilities access information on, and can they participate in, decisions that affect them? • Are persons with disabilities adequately organized to participate in these processes? Do some persons/groups of persons with disabilities participate less or not at all? In this case, what do they need to do so? 	<ul style="list-style-type: none"> • Establish Means of Verification by asking: ‘What precise information do we need to measure our performance? How will we obtain this information? How much will it cost? Can the information be monitored?’
<p>f The UN Common Learning Package on HRBA divides capacity gaps of duty-bearers into: Can? (e.g. knowledge, human/technical/financial resources, organizational abilities); Want? (e.g. responsibility, motivation, leadership); and Should? (e.g. authority); capacity gaps of right-holders are grouped into: Can? (e.g. knowledge, resources, individual abilities); Want? (e.g. security, motivation); and Enabling environment (e.g. access to information, freedom of association and expression).</p>			

These steps can be applied in all areas of UNDP's work and for mainstreaming as well as targeted interventions. Here is an example of using the steps in the design of a programme or project which supports the development of effective **electoral systems and processes** in a given country.

The **Problem Identified** (Step 1) may be that voter turnout among certain population groups, including persons with disabilities, is very low. During **Prioritization** (Step 2) stakeholders may agree to focus on the voting patterns of persons with disabilities, since — also due to a recent armed conflict — there is a large number of persons with different kinds of disabilities, and no other UN agency is focusing on this. Another reason for prioritizing this problem may be that a number of DPOs and other civil society organizations (CSOs) in the country are actively advocating on this issue, and the government has expressed its will to address it. The three-step **Problem Analysis** (Step 3) may help:

- **Unpack the causes of the problem** (immediate, underlying, structural): The low level of voting among persons with disabilities may be due to inaccessible polling stations and a lack of accessible voter education and voting materials in alternative formats for persons with different impairments (immediate cause) or because persons with disabilities are not aware of their right to vote or deprived of the legal capacity to vote. Underlying causes may be the lack of resources to produce alternative voting materials for persons with disabilities or the lack of consultation with persons with disabilities during electoral reform processes. This may be a result of a widespread understanding in the country that persons with disabilities are home-bound and dependent on others (root/structural cause);
- **Establish the roles of duty-bearers and the rights of rights-holders**, based on the relevant legal and policy framework. In this case, stakeholders may need to review existing anti-discriminatory legislation, as well as the electoral legislation, both to assess whether the legislation conforms with the CRPD and to identify the responsible authorities at the central and local levels, such as the Ministry of the Interior or central and local election committees.
- **Assess the capacities required for both actors to act to solve the problem.** The analysis of the legal framework may reveal that the election legislation does not explicitly prohibit discrimination on the ground of disability and does include excessively restrictive provisions on legal capacity, or that the central election committee has not allocated any funds for accessible polling stations and voting materials in alternative formats (lack of financial resources). Another capacity gap may be that election authorities are not knowledgeable about alternative voting materials and that persons with disabilities are not aware of the complaint mechanisms when their right to vote has been denied unjustly.
- Finally, during **Visioning and Results Mapping** (Steps 4 and 5) a number of interventions could be derived from the analysis. If, for example, the capacity gap analysis reveals a lack of authority to act and a lack of knowledge among authorities, one possible project outcome could be increasing capacities of election authorities to make election accessible to persons with disabilities; project outputs could be the review of relevant national or subnational legislation with relevant ministries and CSOs/DPOs, sensitization of DPOs on complaint mechanisms such as the relevant ombudsman or cross-country exchange on accessible voting materials. In addition, it is important that indicators and targets allow the impact to be measured, with disaggregated data on men and women with disabilities. A relevant outcome indicator in the above example may be the percentage change in the number of men and women with disabilities that are inscribed in voter registries within five years.

Relevant organizations that provide research reports and data sources

The following sources can provide key data on persons with disabilities at the national level:

National Statistics Offices	Equal Treatment Offices
Organizations of Persons with Disabilities	National Think Tanks
National Human Development Reports	Social Policy Research Units
Human Rights NGOs	NHRI and National Commission/Council/ Ombudsman

Where necessary, collaboration with official statistics entities should be sought to support the generation of data on persons with disabilities, causes of exclusion and related factors, also keeping in mind the need for sex-disaggregated data.

2.1.2 Addressing disability in UNDP's different areas of work

UNDP works around the world to support the development of national capacities to fight poverty, build democratic societies, prevent crisis and enable recovery, protect the environment, halt and reverse HIV/AIDS and address gender issues in all these areas.

The following section offers examples of how the step-by-step guidance provided above can more generally address the rights of persons with disabilities in the planning of interventions across UNDP's areas of work. However, it is important to bear in mind that every country, as well as the respective UNDP Country Office, has different priorities in terms of areas of engagement. Also, the situation of persons with disabilities will vary from country to country. Therefore, while these guidelines aim to offer staff a starting point in their everyday work based on the main areas of UNDP's work, the guidance provided needs to be refined to capture the specific country context.

Democratic governance

UNDP works on different initiatives to support the establishment of effective governance systems, including access to information; access to justice and rule of law; anti-corruption; civic engagement; electoral systems; local governance and local development; parliamentary development; and the realization of gender equality and women's empowerment and human rights as cross-cutting issues. Persons with disabilities face serious challenges that exclude them from fully participating in political and public life. In all these situations, women with disabilities, even more so if they belong to a minority group, tend to face the most severe marginalization. Therefore, efforts to develop institutions and processes that are more responsive to the needs of citizens cannot be fully successful if they leave behind persons with disabilities and ignore their challenges.

Problem identification (Step 1): Possible identified problems within democratic governance may include the inability of persons with disabilities to access information, underrepresentation in government and a lack of participation in decision-making processes and elections, inaccessible public services and administrative procedures, inaccessible justice systems and a lack of remedies when the rights of persons with disabilities are not respected.

Prioritization (Step 2): The prioritization of identified problems depends on many context-specific factors.

Problem analysis (Step 3): The causal analysis may reveal immediate causes such as the lack of public documents and public websites in accessible and alternative formats (Braille, sign language, easy reading formats) or inaccessible public buildings (e.g. central and local government buildings including social services and courts). Additional underlying causes could be the lack of regulations to protect the rights of persons with disabilities; lack of sufficient funds to make the environment (including public buildings and information) accessible; lack of awareness or knowledge from authorities at different levels on the rights of persons with disabilities and their challenges; lack of expertise or resources to implement or monitor the implementation of the CRPD if the country has signed and ratified the Convention. Finally, the root or structural causes could relate to the fact that persons with disabilities have been traditionally marginalized and neglected and there is a lack of political will to improve their situation, coupled with gender-based discrimination in the case of girls and women with disabilities, and/or with other forms of discrimination (intersectional discrimination) — for example, for indigenous communities. Based on different causes, the role analysis helps identify the relevant authorities in charge to act in the selected area of work. Finally, the capacity gap analysis will help establish what authorities need to take action, such as more autonomy or a better understanding of their roles and responsibilities, increased awareness on the rights of persons with disabilities. On the other hand, persons with disabilities and DPOs might need to be more aware of their rights as well as more empowered to demand what are they entitled to.

Results (Steps 4 and 5): The result of the three-step analysis can inform the formulation of the intervention and the results framework. Some interventions (further formulated in concrete outcomes and outputs) may include support to the government to undertake legislative reforms to make the legislation compatible with the CRPD, and ensure clear responsibilities for relevant authorities, as well as activities that aim to increase public awareness on the rights of persons with disabilities — for instance, through programmes and projects that focus on the training of civil servants, especially those that work directly on issues related to persons with disabilities, on the general principles of the Convention, as well as on accessible formats for government publications. Other interventions could be, for example, in the justice sector with programmes and projects that contribute to make existing civil and criminal procedures

accessible to persons with disabilities, allowing them full access to justice, such as including sign language interpreters available in criminal proceedings; providing access to adequate legal aid; increasing capacities of pre-detention centres, prisons and other penitentiary facilities to accommodate the needs of inmates with disabilities etc. Others may include initiatives that aim to empower persons with disabilities and their DPOs, to increase their engagement and influence in policy dialogue, participatory and gender budgeting, public expenditure tracking, monitoring and evaluation of public service delivery, as well as to seek redress when their rights are affected.

Resources:

- **UN-DESA, OHCHR, Interparliamentary Union:** [Handbook for Parliamentarians on the Convention on the Rights of Persons with Disabilities](#)
- **UNDP:** [Political Participation of Women with Disabilities in Cambodia](#)
- **OHCHR:** [Monitoring the Convention on the Rights of Persons with Disabilities Guidance for human Rights Monitors](#)
- **OHCHR:** [Convention on the Rights of Persons with Disabilities, Advocacy Toolkit](#)
- **Disabled Peoples' International (DPI):** [Toolkits on Ratification and Implementation of the Convention](#) (English, French, Spanish)
- **UN DESA:** [Expert Group Meeting on Making it work: civil society participation in the implementation of the Convention on the Rights of Persons with Disabilities](#)
- **UNESCO:**
 - [Guidelines for Inclusive Access to Digital Office Documents](#) (developed with other partners)
 - [Consultative meeting on mainstreaming information and communication technologies \(ICTs\) for persons with disabilities to access information and knowledge, 22–23 February 2010, UNESCO Headquarters Paris, France](#)
 - [Policy brief ICT for Inclusion: Reaching More Students More Effectively, UNESCO Institute for Information Technologies in Education, Moscow \(IITE\)](#)
 - [Review of promising practices on ICT usage in Education for People with Disabilities](#)
- **The Global Initiative for Inclusive Information and Communication Technologies:** [Inclusive ICTs, G3ict](#)
- **International Telecommunication Union (ITU):** [Module on Using ICTs to promote education and job training for persons with disabilities on the Toolkit: Connect a School, Connect a Community](#)
- **International Disability Alliance (IDA):**
 - [Guidance document on parallel reporting](#)
 - [Ratification Tool Kit: Disability Rights = Human Rights \(DPI\)](#)
 - [Implementation Tool Kit: Disability Rights = Human Rights \(DPI\)](#)
 - [Priorities for People with Intellectual Disabilities in Implementing the United Nations Convention on the Rights of People with Disabilities: The Road Ahead \(II\)](#)
 - [Implementation Manual for the United Nations Convention on the Rights of Persons with Disabilities \(WNUSP\)](#)
 - [Training Manual on the Human Rights of Persons with Disabilities—The participation of the organizations of people with disabilities and their families, in the process of ratifying, monitoring and implementing the CRPD \(DPI Italia & AIFO\)](#)
 - [Guidance document on the Convention on the rights of persons with disabilities \(EDF\)](#)

Poverty reduction

To address poverty, UNDP provides support to its national partners in different areas including in the development and implementation of poverty reduction strategies/MDGs strategies; national poverty assessments and monitoring; development of inclusive social protection mechanisms; promotion of employment; and promotion of equal access to social services. According to the 2011 *World Report on Disability*, empirical evidence on the causal relationship between poverty and disability is seldom available even in industrialized countries. However, the available data indicate that persons with disabilities experience higher rates of poverty than non-disabled people. “On average persons with disability and households with a disabled member experience higher rates of deprivations including food security, poor housing, lack of access to safe water and sanitation, and inadequate access to health care — and fewer assets than persons and households without a disability.”⁴⁵

Problem identification (Step 1): Depending on the country context, problems related to poverty may include a lack of information and data on the socio-economic situation of persons with disabilities; lower levels of income compared to the rest of the population; lack of participation of persons with disabilities in the development and implementation of poverty reduction policies and programmes; exclusion from social protection mechanisms; a low level of employment; and limited access to public services such as health, education, water and sanitation.

Prioritization (Step 2): The prioritization of identified problems depends on a number of context-specific factors.

Problem analysis (Step 3): The causal analysis of these problems may reveal various causes (immediate, underlying, structural) related to a lack of financial resources; exclusion of persons with disabilities from national development/poverty reduction/MDGs strategies or problems during the implementation process of these strategies; lack of regulations (or failure to implement existing ones) on employment and protection of persons with disabilities from discrimination in the workplace in the public and private sector; misconception among potential employers who might believe that hiring persons with disabilities is too difficult or too expensive; or weak eligibility criteria or lack of accessible information on social protection mechanisms. The role analysis may point to a number of relevant actors with responsibilities to address the socio-economic situation of persons with disabilities (e.g. line ministries, local government departments, teachers, health care providers), as well those right-holders that are most affected (persons with disabilities living in remote areas, women or children with disabilities or persons with certain forms of impairments). Capacity gaps may be various and may relate to a lack of involvement in legislation and policies, a lack or mismanagement of resources or a lack of knowledge — for example, on how to make information and public services accessible to persons with different impairments — or even simply a lack of data on the number and situation of persons with disabilities.

Results (Steps 4 and 5): Depending on the problem identified, a desired result may be a more inclusive National Development Strategy/Poverty Reduction Strategy/MDGs Strategy or sectoral strategy (such as on employment, education, social protection, micro finance etc). Based on the capacity gap analysis, required outputs may be the collection and analysis of data disaggregated by form of disability with the statistics office or the review of different social protection programmes with the relevant national or subnational government entity or the participation of persons with disability in developing or reviewing relevant policies. If the main identified area is employment, a starting point could be to provide support in collaboration with the International Labour Organization (ILO) to review labour legislation in the country to ensure that it prohibits discrimination on the basis of disability in both the public and private sector and removes legal barriers for the employment of persons with disabilities. Some interventions in this respect could try to ensure that employment programmes, including vocational training, are accessible to persons with disabilities. This may also require data on the employment and the working conditions of persons, both men and women, with disabilities in the public and the private sector.

Resources:

- **UNFPA:** [Disability Rights, Gender, and Development A Resource Tool for Action](#)
- **WHO/ILO/UNESCO/IDDC:** [Community-Based Rehabilitation Guidelines](#)
- **World Bank:** [Disability and Poverty: A Survey of World Bank Poverty Assessments and Implications](#)

⁴⁵ WHO and World Bank, Summary of the *World Report on Disability*, 2011, p. 11.

- **Economic and Social Commission for Western Asia (ESCWA):**
 - Working paper on ‘[The regional and international practices fostering the inclusion of persons with disabilities in the labour market](#)’
 - Policy report on ‘[Proposed methods to combat poverty among persons with disabilities](#)’
- **German Federal Ministry for Economic Development and Cooperation, GTZ: [Disability and Development: A contribution to promoting the interests of persons with disabilities in German Development Cooperation, Policy Paper](#)**
- **Disability Rights Fund: [MDGs and Disability](#)**
- **Handicap International: [Good Practices for the Economic Inclusion of People with Disabilities in Developing Countries: Funding Mechanisms for Self-Employment](#)**
- **Engineering and Development Centre (WEDC): [Water and Sanitation for Disabled People and Other Vulnerable Groups — Designing services to improve accessibility](#)**
- **End the Cycle: [Making National Poverty Reduction Strategies Accessible](#)**

Crisis prevention and recovery

UNDP’s work in this area includes conflict prevention, disaster risk reduction, post-conflict and disaster recovery. Natural disasters or violent conflicts cause casualties, frequently leaving many people temporarily or permanently impaired. Those who already had impairment before the crisis are often neglected if rescue measures do not take into account their needs.

Problem identification (Step 1): The problem identification exercise may disclose a number of issues including persons with disabilities being more affected and finding it more difficult than others to cope with a crisis situation, or even among persons with disabilities women and children and those with certain disabilities being more vulnerable than others; exclusion of persons with disabilities, their families and DPOs from evacuation plans; inaccessible evacuation centres, shelters, water and sanitation facilities; lack of access to food supplies; inaccessible information delivered to the population in cases of disasters (especially information about evacuation).

Prioritization (Step 2): Prioritizing the main problems depends very much on the county context; for example, the political situation makes the country volatile to armed conflicts or frequent natural disasters. In this regard, it is particularly important that UNDP collaborate with the relevant humanitarian and other development actors.

Problem analysis (Step 3): The causal analysis will help reveal immediate, underlying and structural causes of the problems such as a lack of safe and accessible shelters and evacuation facilities or a lack of specific regulations/strategies/plans for the evacuation of persons with disabilities. In addition, in a crisis, previous livelihoods for persons with disabilities may no longer exist, and traditional livelihood support may not offer necessary accommodation for persons with disabilities, which may affect entire families. The role analysis will help identify the specific authorities in charge of responding to crises, and their specific responsibilities to ensure that persons with disabilities are considered in crisis response. The capacity gap analysis may show that the relevant authorities lack overall awareness or the authority to address specific needs of persons with disabilities in crisis situations or lack the knowledge on low-cost assistive technologies or methodologies to ensure basic physical and information accessibility.

Results (Steps 4 and 5): Depending on the identified capacity gaps, required results may be to ensure that disaster risk reduction or recovery strategies take into account the environment/communication/attitudinal barriers of persons with disabilities. Especially those entities in charge of economic recovery programmes⁴⁶ may benefit from sensitization in this regard to ensure that both women and men with disabilities benefit equally from employment and other opportunities. Other desirable results may include increased technical knowledge on how to make evacuation centres, shelters, water and sanitation facilities and other services such as rehabilitation and psychological support and information delivered in cases of emergency safe and accessible to all.

⁴⁶ Economic Recovery Plans are not about restoring pre-war/conflict economic or institutional arrangements but about transformation and policy reforms that allow especially war-torn countries to re-establish the foundations for self-sustaining development.

Resources:

- **WHO/ILO/UNESCO/IDDC:** Community-Based Rehabilitation Guidelines
- **Women Refugee Commission**
- **Atlas Alliance**
- **Handicap International**
- **World Disasters Report 2007:** [Focus on Discrimination by International Federation of Red Cross and Red Crescent Societies](#)
- **Global Partnership for Disability and Development (GPDD):** [Conflict and Disability](#)
- **Inter-Agency Standing Committee (IASC):** IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings, Geneva, 2007
- **CBM Australia:** Fact Sheet: [Disability Inclusion in Drought and Food Crisis Emergency Response](#)
- **UNHCR:** Conclusion on refugees with disabilities and other persons with disabilities protected and assisted by UNHCR

Environment and energy

In relation to environment and energy, UNDP works on a number of areas including sustainable energy, water and land governance, climate change, and chemical and waste management, many of which have a considerable impact on the situation of persons with disabilities and other marginalized groups.

Problem identification (Step 1): Depending on the country context, this exercise may reveal a number of problems such as persons with certain impairments being more vulnerable than other groups to environmental devastation caused by human exploitation and climate change; lack of data on the effects of environmental changes and of impacts of environment interventions on persons with disabilities; exclusion of persons with disabilities and DPOs from the development and implementation of strategies/programmes that aim to address issues related to environment and energy; inability of systems managing chemical and other pollutants to address the risks for persons with disabilities; and inaccessibility of water and sanitation structures for persons with different physical, mental, sensorial and intellectual impairments.

Prioritization (Step 2): The prioritization of identified problems depends on a number of context-specific factors.

Problem analysis (Step 3): Following the prioritization of the main problems, the causal analysis helps stakeholders to first understand why this is happening—for example, a lack of financial resources and funds or a lack of will to include persons with disabilities in environmental and energy initiatives. Second, the role analysis, after identifying the responsible authorities, helps them better understand their duties and obligations. Finally, the capacity gap analysis helps to concretely find what exactly needs to be done by both right-holders and duty-bearers to change the situation.

Results (Steps 4 and 5): Positive results could be achieved through a number of interventions including adoption (revision) of national policies/strategies/legal framework on climate change and sustainable energy, conducive to the challenges and situation of persons with disabilities, or creation of opportunities for both men and women with disabilities to benefit equally from initiatives and programmes on environment and energy, including poverty-environment initiatives or the Global Environment Facility (GEF)'s Small Grants Programme (SPG). Other activities may support persons with disabilities to have access to affordable electricity and alternative energy programmes.

Resources:

- **World Bank:** [Beyond DALYs: Developing Indicators to Assess the Impact of Public Health Interventions on the Lives of People with Disabilities](#)
- **M/C Journal:** [A Culture of Neglect: Disabled Persons and Climate Change](#)
- **Engineering and Development Centre (WEDC):** [Water and Sanitation for Disabled People and Other Vulnerable Groups—Designing services to improve accessibility](#)

HIV/AIDS

UNDP promotes multi-sector responses that mainstream HIV/AIDS into national development strategies, sector programmes and decentralized plans and provides support to countries to mitigate the impact of HIV/AIDS on human development. In partnership with the Global Fund to Fight AIDS, Tuberculosis and Malaria, UNDP also provides support for the implementation of HIV, TB and malaria programmes in low- and middle-income countries. In addition, it helps increase capacities of national partners to provide accessible treatments and education initiatives. HIV/AIDS can lead to temporary or permanent impairment, and at the same time persons with disabilities may often find themselves at a greater risk of contracting HIV.

Problem identification (Step 1): Problems related to HIV/AIDS may include increased risk factors for persons with disabilities, especially for women and groups with certain forms of impairments; lack or low participation of persons with disabilities and DPOs in the development and implementation process of national prevention and treatment strategies/plans; exclusion of persons with disabilities from HIV/AIDS treatment or education programmes; lack of effective complaint mechanisms or lack of knowledge about the complaint procedures (or resources to access these procedures) against discrimination due to HIV/AIDS status.

Prioritization (Step 2): The prioritization of identified problems depends on a number of context-specific factors.

Problem analysis (Step 3): The causal analysis helps stakeholders better understand the immediate, underlying and root causes, which may include inaccessible treatment or testing facilities; increased risks for persons with disabilities because of their sexual activity being a taboo in the communities where they live, and their increased vulnerability to rape and substance abuse, which might be of a particular concern for women and children with disabilities; lack of regulations or anti-discriminatory legislation to protect persons with disabilities affected by HIV/AIDS; stigma associated with both HIV/AIDS and disability; and lack of awareness among government officials, health workers, educators and communities in general about the risks faced by persons with disabilities. The role analysis helps identify actors that have responsibilities regarding the situation of persons with disabilities affected by HIV/AIDS (or being at risk of infection)—for example, different line ministries and local authorities. The capacity gap analysis helps reveal what obstacles those responsible to act face, such as a lack of knowledge about their responsibilities; an inability to draw on adequate resources to implement relevant strategies and regulations that would include persons with disabilities in HIV treatment and education programmes; and a lack of training among medical personnel about the special attention that persons with disabilities affected by HIV/AIDS require. In addition, the analysis also helps to understand what persons with disabilities affected by or at risk from HIV/AIDS and their DPOs need to do to participate and be more active in advocating for their inclusion in HIV/AIDS treatment and education programmes.

Results (Steps 4 and 5): Finally, by drawing on the capacity gap analysis, the result framework can help address these gaps through various interventions including those that aim to adopt/amend/implement relevant regulations, strategies and programmes and remove discriminatory barriers; raise awareness of the relevant authorities and other stakeholders on disability and HIV/AIDS-related problems; assist authorities and health care service providers to improve the management and allocation of resources to ensure that persons with disabilities benefit equally from HIV/AIDS programmes, including those in the framework of the Global Fund to Fight AIDS, Tuberculosis and Malaria; empowering initiatives for persons with disabilities and DPOs; activities that aim to raise the awareness of the communities on the rights of persons with disabilities to be treated equally when it comes to HIV/AIDS prevention and treatment.

Resources:

- **UNAIDS:** [Policy Brief: Disability & HIV](#)
- **WHO/UNFPA:** [Guidance Note — Promoting sexual and reproductive health for persons with disabilities](#)
- **UNAIDS/WHO/OHCHR:** [Disability and HIV Policy Brief](#)
- **UNAIDS:** [Advancing the Sexual and Reproductive Health and Human Rights of People Living with HIV](#)
- **World Bank:** [Disability and HIV/AIDS Fact Sheet](#)

- **World Bank/Yale University**
 - [HIV/AIDS and Disability: Capturing Hidden Voices](#)
 - [Global Survey on HIV/AIDS and Disability](#)
- **Global Partnership for Disability and Development (GPDD):**
 - [Rape of Individuals with Disabilities: AIDS and the Folk Belief of Virgin Cleansing](#)
 - [Disability in National Strategic Plans on HIV and AIDS: A Review on the National Response to the Interrelations of Disability and HIV in Eastern and Southern Africa](#)
- **Netherlands Ministry of Foreign Affairs—VSO's Right to Life Programme: A Handbook on Best Practices Regarding HIV and AIDS for People with Disabilities: Services, Policy Advocacy, Programming**
- **Health Canada: HIV/AIDS and Disability: Final Report of the 4th International Policy Dialogue**
- **Health Economics and HIV/AIDS Research Division (HEARD):**
 - [HIV, Disability and Rehabilitation: Considerations for Policy and Practice](#)
 - [National Responses to Disability and HIV in Eastern and Southern Africa](#)
- **Journal of International AIDS Society:**
 - [HIV, disability and discrimination: making the links in international and domestic human rights law](#)
 - [Meeting report of the International Policy Dialogue on HIV/AIDS and Disability](#)
 - [The Fields of HIV and Disability: Past, Present and Future](#)
- **African Campaign on AIDS and Disability**
- **Disabled Peoples' International: List of Articles relating to the topic of HIV/AIDS and Disability**
- **The Forgotten: HIV and Disability in Tanzania**
- **Kampala Declaration on Disability and HIV/AIDS (2008)**
- **Leonard Cheshire Disability East and North Africa**

Recommendations that are critical across practice areas

Specific consideration of women and girls with disabilities

Programmes and policies addressing the rights of persons with disabilities should both ensure the equal participation of women and girls with disabilities and consider both the inter-sectional or multiple forms of discrimination that women and girls with disabilities face as well as other gender-related dimensions (including, for example, the disproportionate role that women and girls play in providing care for persons with disabilities within their families and communities). Women tend to have even less access to early intervention, adequate housing, education, rehabilitation and training, education, employment opportunities, credit and other productive resources and often suffer even more from stigmatization and exclusion. In other cases, they experience disability related to pregnancy and childbirth and are more vulnerable to sexual and gender-based violence. In addition, the governance and decision-making structures of DPOs are often male dominated and do not always reflect specific barriers for women and girls with disabilities. Therefore, it is critical that disability initiatives within both the national and the UNDP framework take into account gender dimensions. Some of the issues that could be considered are:

- Anti-discriminatory legislations have to provide specific protection for women and girls with disabilities, and UNDP can support partners to ensure such legal protection.
- All data on persons with disabilities has to be sex-disaggregated.

- National gender policies have to consider the needs of persons with disabilities and interlinked issues of discrimination, participation and equitable access to resources.
- Women with disabilities have the same sexual and reproductive rights as all women.
- While interacting with regional and national DPOs, national partners and UNDP country offices have to find out if these organizations represent also the interests of women and girls with disabilities. It is important that women and girls with disabilities participate meaningfully in the governing structures and decision-making processes of the DPOs, and UNDP initiatives have to ensure that women and girls benefit equally from programmes that focus on capacity-building and empowerment of DPOs.
- Development interventions have to take into account that mothers of children with disabilities may also be excluded by their own community based on beliefs and cultural traditions.
- National development strategies, including those specifically addressed to persons with disabilities, as well as gender-equality initiatives (legislative and policy) have to specifically include women and girls with disabilities.
- The national monitoring systems on both gender and disabilities need to reflect and report on the situation of women and girls with disabilities.
- Women and girls with disabilities have to have access to remedies and to broader justice mechanisms, including police protection, when their rights have been abused.

Resources:

- **WHO/ILO/UNESCO/IDDC:** [Community-Based Rehabilitation Guidelines](#)
- **UN Enable:**
 - [Women and girls with disabilities](#)
 - [Women with disabilities fact sheet](#)
- **UNDP Pacific Centre:** [Pacific Sisters with disabilities; at the intersections of Discrimination](#)
- **Women Refugee Commission**
- **OCHA/IRIN:** [Shame of war: Sexual violence against women and girls in conflict, 2007](#)
- **UNFPA:** [Disability Rights, Gender, and Development A Resource Tool for Action](#)
- **Women with Disabilities Australia (WWDA):** [Women with Disabilities and the Human Right to health, Policy Paper](#)
- **USAID:** [Guide on How to Integrate Disability into Gender Assessments](#)
- **UNDP:** [UNDP's Eight-Point Agenda for Women's Empowerment and Gender Equality in Crisis Prevention and Recovery](#)

Assist national partners in adopting a disability national strategy and plan of action

One of the recommendations of the *World Report on Disability* (WHO and World Bank) is the adoption of a national disability strategy and plan of action. The strategy is key for setting out a comprehensive and long-term vision to improve the situation of persons with disabilities. The report recommends that the strategy and action plan should cover mainstreaming policies and programmes as well as specific interventions when they are needed. The importance of the national strategy was specifically addressed under the Democratic Governance and Poverty Reduction practice areas. However, the involvement of other UNDP areas is essential for the adoption of a comprehensive document. UNDP and other UN agencies could provide support to their national partners, especially on the application of a human-rights-based approach, gender mainstreaming, and of the principles of the CRPD in the adoption process of the strategy.

Improve information and evidence base on disability

Better statistics will help inform national planning processes and facilitate advocacy on disability. As a first step, national population census data can be collected in line with recommendations from the United Nations Washington Group on Disability (DISTAT)⁴⁷ and the United Nations Statistical Commission.⁴⁸ A cost-effective and efficient approach is to include disability questions—or a disability module—in existing sample surveys. Data also need to be disaggregated by population features to uncover patterns, trends and information about subgroups of persons with disabilities. Dedicated disability surveys can also gain more comprehensive information on disability characteristics such as prevalence, health conditions associated with disability, use of and need for services, quality of life, opportunities and rehabilitation needs.⁴⁹ In addition:

- UNDP can support countries in drafting National Human Development Reports (NHDRs) which analyse, either specifically or inter alia, the situation of persons with disabilities;⁵⁰
- UNDP country offices can support governments in developing capacities to collect data on persons with disabilities—for example, through census or existing household surveys; and
- UNDP country offices can support DPOs in developing capacities to undertake their own research.

A particular challenge arises in the definition of disability; the Washington Group proposes a method based on the ICF⁵¹ which goes beyond narrow clinical assessment and can allow for internationally comparable data.

Increase awareness and identify the ‘champions’ and drivers for disability inclusion

The inclusion of persons with disabilities and DPOs in programmes and initiatives that promote their rights is crucial to their success. In addition, the impact of these initiatives could be enhanced through public awareness campaigns using media, including social media, and other forms of communication. The success stories of persons with disabilities, and collaboration with public figures, possibly members of the disability community, that are well known and admired by the public for their contribution to art, science, literature, sports or politics can be useful to change attitudes and raise awareness on the potential of persons with disabilities. More important, these public campaigns can help increase the self-confidence of persons with disabilities. Therefore, it is important to ensure that both the public messages and the public figures from the disability community are representative of the diversity inherent in that community in terms of age, impairment, gender, ethnic groups, education levels etc.

2.2 Applying the principles of the CRPD during implementation and monitoring, and closure and evaluation of a programme/project

The previous section provided insights into what UNDP can do to include the rights of persons with disabilities in its work during the planning phase. However, it is equally important that the subsequent stages of the programme/project cycle—as well as UNDP’s internal administrative procedures—are guided by, and reflect, the CRPD’s principles in either mainstream or targeted interventions.

47 unstats.un.org/unsd/methods/citygroup/washington.htm.

48 unstats.un.org/unsd/demographic/sconcerns/disability/disab2.asp.

49 WHO and World Bank, *World Report on Disability*, 2001, Chapter 9, Recommendation 8.

50 See, for example, *NHDR Bosnia and Herzegovina (BiH) 2007*, *NHDR BiH 2009*, *HDR Kazakhstan 2009*, *NHDR Croatia 2006*, *NHDR Montenegro 2009* and *NHDR Ghana 2007*.

51 www.who.int/classifications/icf/en/.

2.2.1 An initial checklist for implementing, monitoring, closing and evaluating a project

Implementation and monitoring

The following checklists with generic questions (which are not exhaustive) capture some of the issues to consider during the implementation and monitoring of programmes or projects, in accordance with the main principles of the CRPD. The questions are also interrelated, and one question may reflect more than one CRPD's principle.

- **Non-discrimination:**

- Will persons with disabilities benefit on an equal basis with others from the expected results of the programme or project?
- Is the concept of intersectional or multiple discrimination reflected in the activities of the programme? For example, are issues of women with disabilities or issues of indigenous women with disabilities specifically addressed?
- Can statistics on the results of the project—for example, on the population impacted or 'beneficiaries' reached—be disaggregated (including through gender-disaggregation) to show how persons with disabilities have benefitted?
- Have steps been taken to raise awareness about potential stigma and stereotypes on persons with disabilities?

- **Participation and inclusion in society:**

- Have DPOs, representing both women and men with disabilities, been meaningfully included in the various stages of the programmes and projects that address their challenges, both in targeted and mainstreaming interventions?
- Is there a proactive effort to involve persons with disabilities? How can the planned activities contribute to the participation of persons with disabilities and DPOs in government-led initiatives?
- Does the programme/project consider the inclusion of caretakers/parents/family/community members, taking into account that they play an important role in the life of persons with disabilities and are themselves very often excluded from development initiatives?
- Has a budget been considered to enable greater participation by people with disabilities—for example, for sign interpreters, alternative formats, travel assistants where needed?

- **Accessibility:**

- Has the need to change the attitudes of public officials and other stakeholders toward persons with disabilities been addressed in the activities of the programme?
- Does the programme/project ensure that interventions and services provided within the programme area are accessible to all persons with disabilities?
- Are official documents (including any law, policy, regulation) adopted in the framework of the programme/project being made available in accessible formats? Is the project/programme website accessible to persons with disabilities?
- Are efforts being planned to reach remote/isolated groups such as those in rural areas, homebound persons with disabilities or persons with disabilities with low literacy?

- **Accountability:**

- Are the programme/project outcomes contributing to the realization of national strategies/policies/plans with regards to persons with disabilities?
- Does the programme support the capacity development of implementing partners to successfully mainstream or include disability concerns in the national or sectoral policies and plans?
- Are project progress and risks monitored to assess their impact on persons with disabilities?
- Are all project resources managed effectively to avoid any deviation from initial plans and outcomes related to persons with disabilities?

Clarification: Project Monitoring vs. CRPD Monitoring

Project monitoring and evaluation is to be distinguished from monitoring the overall implementation of the CRPD at national level. The latter is an obligation in the CRPD that countries themselves need to fulfill.⁵² In practice, this monitoring at national level is often being carried out by existing national institutions at country level — National Human Rights Institutions (NHRI), Equal Rights Commission etc. The CRPD encourages the participation of civil society and stresses in particular the need for persons with disabilities and their representative organizations to participate fully in this monitoring process (Article 33 (3)). UNDP is well positioned to support the national government in undertaking a thorough monitoring of its work to implement the CRPD. This type of targeted intervention is described further in the previous chapter on UNDP Practice Areas (under 'Democratic Governance').

Closing and evaluating a project

Human rights, including the rights of persons with disabilities, are considered one of the four key principles under UNDP's 2011 evaluation policy, which highlights particularly the importance of selecting evaluators that are sensitive to and address issues of discrimination and gender inequality.⁵³ Standard programme evaluation Terms of Reference can easily be adapted to measure the impact of programmes on persons with disabilities. Specific questions can be included in the Terms of Reference that ask about inclusion, accessibility, participation of persons with disabilities, impact on persons with disabilities.

- **Non-Discrimination:**

- Did persons with disabilities benefit on an equal basis with others from the programme/project, including persons with disabilities from rural and remote areas?
- Did women and men with disabilities and persons with various forms of disability benefit on an equal basis with others from specific interventions?

- **Participation:**

- Are persons with disabilities or DPOs involved in external project evaluations? How?
- Does the project review/evaluation assess the degree of participation of persons with disabilities and DPOs in the previous stages of the programme/project cycle?
- Are the views and perceptions of persons with disabilities on the programme outcome reflected in the Evaluation Report?

- **Accessibility:**

- Are the services provided in the framework of the programme/project accessible to persons with disabilities?
- Has the programme helped to make public information, services and facilities more accessible to persons with disabilities?
- Did the programme/project have any impact on enabling persons with disabilities to live independently?
- How did the project ensure that accessible services to persons with disabilities are sustainable and that national partners will continue to provide services accessible to all persons with disabilities?
- How did the project ensure that new barriers were not created to persons with disabilities?

- **Accountability:**

- How did the programme contribute towards the realization of the rights of persons with disabilities, as envisioned by the CRPD?

⁵² Article 33 (2) CRPD.

⁵³ UNDP, Evaluation Policy, www.undp.org/evaluation/documents/Evaluation-Policy.pdf.

- How well was information about a situation analysis of persons with disabilities used in the planning process and integrated into programme/projects outcomes and outputs?
- Was there a specific budget allocated to ensure that persons with disabilities benefitted from the project outcomes/outputs, and what impact did the spending of this budget have?
- Are the relevant authorities and other stakeholders more aware of the barriers faced by persons with disabilities, and do they plan to further the realization of the rights of persons with disabilities?
- Has the inclusion of persons with disabilities had effects on inclusion beyond the envisaged project results (for example, did it make any impact in changing general attitudes towards persons with disabilities)?
- What are the effects of not having included persons with disabilities in projects where they should have been included?
- Which are key lessons for the inclusion of persons with disabilities in future projects?

UNDP's Programme and Operations Policies and Procedures stresses that a final Lessons Learned Report should be prepared at the end of the project as a component of the final project review report, and experiences should be shared with colleagues on the Practice Knowledge Networks. In as far as lessons relate to activities targeted at persons with disabilities or mainstream activities that have had an effect on persons with disabilities, they should also be shared with the disability focal point at headquarters and/or on the Teamwork space on Disabilities. For more information, please refer to Section IV of this chapter: How can UNDP's internal processes support inclusive programming?

2.2.2 If nothing else, how can we apply the CRPD in our day-to-day operations?

In addition to contributing through UNDP's programming, there are many small ways in which an office or even an individual staff member can start to promote the rights of persons with disabilities in UNDP's day-to-day work. The following section provides some examples. While they are not comprehensive and require further refinement in the future, they represent a starting point.

When planning an event (regardless of whether it is disability-related or not):

- Select an accessible location, including accessible toilets; book a sign language interpreter if people with hearing impairment are expected or invited to participate.
- Be explicit that persons with disabilities or DPOs are welcome, and check what, if any, accommodation of their needs would be helpful, such as alternative formats of written materials.
- Send invitations through disability networks/ mailing lists/ channels.

When preparing written materials:

- Use a large (minimum 12 point) sans serif font for ALL emails, letters, leaflets, business cards, reports etc.
- Make sure presentations are accessible—font size, good colour contrast, and, if there are visually impaired people in the audience, give clear descriptions of any diagrams, photos or other visual effects (and avoid phrases such as 'this is very different from that').
- Ensure electronic files are in accessible formats/software.
- Where photos are chosen depicting poverty reduction programmes etc., include positive images of persons with disabilities included in mainstream programmes.

When procuring/tendering:

- Include accessibility in specifications—whether software, buildings or business cards.

- Work with the procurement department to make sure they are aware of the issue — for example, they should be able to procure disability-inclusive and -accessible support services (buildings for meetings, hotels, restaurants, Braille printers, sign translators etc).
- Work with the procurement unit to develop a database or roster of experts on disability mainstreaming, including technical advisers, trainers, service suppliers, venues, transport etc.⁵⁴ at global, regional or Country Office level.⁵⁵ Ensure that the roster or database is centrally managed/updated and available to all departments. When developing the database, outreach to DPOs and disability service providers will be important.

When raising internal awareness and capacity:

- Provide disability awareness-raising and disability equality training: all UNDP staff members are now required to take the compulsory disability awareness training ‘[Persons with Disability — Ability. Capability. Employability](#)’. The training uses interactive media to illustrate a recruitment process in a fictitious Country Office. It is the first training in the UN system that has built in accessibility features so that people with visual, hearing, motor and cognitive impairments can also take the training. In addition, DPOs in country may be able to provide more comprehensive disability-awareness training. It is also useful to encourage staff members to share their existing knowledge and experiences on how to include persons with disabilities in programmes or in the office environment.
- Include a diversity clause in all UNDP internal and external vacancy announcements for staff positions as well as announcements for consultancies: *“UNDP is committed to achieving workforce diversity in terms of gender, nationality and culture. Individuals from minority groups, indigenous groups and persons with disabilities are equally encouraged to apply. All applications will be treated with the strictest confidence.”*
- Appoint a disability focal person and/or disability adviser at corporate, regional and Country Office level to ensure the systematic inclusion of persons with disabilities in UNDP’s programming. The focal point should be visible in the organization and should be tasked with advising project or programme development as well as with encouraging a continuous communication and consultation channel with DPOs. The focal point should have solid knowledge of the disability movement, other stakeholders and CRPD processes in country as well as general expertise in mainstreaming human rights in UN programming. A disability adviser should have in-depth technical expertise on disabilities. It is, however, very important to ensure that working to promote inclusive development remains the responsibility of everyone — it can be supported by but not delegated to one specific person.

When (re)constructing or considering premises:

- Apply the Premises Relocation Committee requirements for physical accessibility for relocating offices.
- Review the Security Office’s Standard Operating Procedures for evacuating persons with disabilities from a building in case of an emergency or crisis.

⁵⁴ See complete list in *How to work with DPOs*.

⁵⁵ Suggestion: Link to UNDP Procurement Guidance.

Chapter 3 — WHO needs to be involved? (Stakeholders)

The stakeholder analysis is an important process, relevant to all stages of the programme cycle. In each country there is a range of different organizations and actors working with people with disabilities and it is important to understand the different roles that each plays and to distinguish between them. The following is a general list of stakeholders, which however differs from country to country.

3.1 Civil society

Disabled people's organizations

A DPO is a membership organization run by persons with disabilities; it represents the interests of persons with disabilities, assuming that they are governed in a representative and inclusive manner. DPOs usually undertake advocacy activities, promoting the rights of persons with disabilities and representing their interest in relations with service providers/government officials. Some of these organizations are also involved in direct service provision. The forms and organizations of DPOs depend on the country context. However, the following types of DPOs are common in many countries:

- National-level organizations representing a single impairment group; these may manage or coordinate regional or district sub-groups
- National-level organizations representing persons with disabilities in general
- National-level organizations of women with disabilities
- Municipal-level DPOs based on disability
- Small community-based organizations with limited geographic coverage
- Cross-disability organizations, which use a human-rights-based approach to advocate for disabled people's rights.

When deciding which DPOs to work with, key considerations will be the nature of their representation (impairments represented and whether they reach and represent the interests of rural grassroots members, whether they equally represent women and men with disabilities, and include gender equality issues within their priorities) and their capacity, in particular their understanding of governance processes. Each national context will be different. However, it is important to guarantee broad participation in all of them.

The following questions should be considered in the process of engaging with DPOs:

Related to scope and nature of representation:

- Do the DPOs involved represent all disability groups? Do women and men with disabilities equally participate in decision-making bodies and processes, or is there a mechanism to ensure the equal participation of women with disabilities in decision-making bodies and processes in the DPO?
- Do they have the expertise to ensure that issues of all people with disabilities, including gender equality issues, are addressed?
- Do they reach and represent the interests of rural grassroots members?
- Are they connected with other civil society groups?

Related to capacity:

- Are persons with disabilities and DPO representatives fully aware of their rights; do they know the State's obligations?
- Do they have the capacity to participate in policy development?
- Do they have experience in coordination with other civil society actors?
- Does the UNDP Country Office have knowledge of the CRPD and the rights of persons with disabilities?
- Does the UNDP Country Office organize consultations in formats enabling participation (language, communication etc.)?
- Does the UNDP Country Office appreciate and promote the participation of DPOs and other excluded groups in dialogue processes?
- Is an accessible venue available?

National disability DPO umbrella organizations

Forums or federations to which a plurality (although not necessarily always all) of the DPOs belong. In recent years, DPOs are increasingly aware of the importance of working together in alliances and of coordinating their advocacy work. However, they will not always have a unified voice: it remains a diverse community with a variety of different perspectives and, sometimes, competing demands.

Disability activists

Individual persons with disabilities (or not) who actively campaign on disability issues; while both knowledgeable and speaking from experience, a disability activist does not formally represent a community of persons with disabilities or a DPO—unless they have been specifically mandated to do so. It is important to establish their legitimacy and on whose behalf they are speaking: this will vary with different people and circumstances.

Disability-focused international and local NGOs

Organizations whose mandate focuses, among other issues, on disability and usually involves working in partnership with DPOs and the provision of support or services for persons with disabilities or to government duty-bearers providing services. They often undertake organizational capacity-building work with DPOs and can be useful sources of knowledge and expertise. In addition to the national federation or umbrella organization of DPOs, international and local NGOs may be able to provide an overview of the local disability sector and the different actors.

Participation in national processes

The disability movement's principle 'Nothing about us without us' is reflected in the CRPD, which enshrines an obligation of States to involve persons with disabilities in decision-making processes that affect their situation and suggests doing so through representative organizations (Article 4.3), which are referred to as DPOs.⁵⁶

3.2 State institutions

The rights of persons with disabilities are either directly or indirectly included in the mandate of various State structures and public institutions.

Legislative branch

The legislature plays a crucial role in the adoption of the legal framework on the protection and prohibition of discrimination against persons with disabilities, including the legislation on the implementation of the CRPD, in countries that have ratified the conventions (or ratification in countries that have not done so). Various parliamentary committees could also have a role to play in promoting and protecting the rights of persons with disabilities. In addition, in many countries, members of the legislature have the power to request inquiries, have access to institutions and can verify the conditions for persons with disabilities living in these facilities. Finally, depending also on the political system in the country, members of the parliament are also direct representatives of persons with disabilities in legislative forums and mandated to promote and protect their interests, as for other groups in society.

Executive branch

Several institutions in the executive branch play a key role in the design, implementation and monitoring of policies on the rights of persons with disabilities. The roles and responsibilities of the various line ministries vary from country to country. Even in countries where the full responsibility for the political and policy work is taken by one line ministry (usually social affairs/social welfare/employment), it is important to address other line ministries such as those of health, justice and education to be inclusive in their work. Another key institution for promoting inclusive budgeting is the Ministry of Finance. Many countries establish a planning unit

⁵⁶ Engaging with civil society organizations (CSOs), including DPOs, in the decision-making process is different from drawing on them to deliver basic services. In the former, CSOs act as 'checks and balances' for government action; in the latter they are effectively contracted to carry out certain state functions. The CRPD and thus the present guidelines focus on the former, i.e. involving DPOs in decision-making.

in one of the line ministries to coordinate the overall longer-term planning of policies, acting as direct interlocutors for bilateral and multilateral donors on country strategy development.

Local and provincial government

In addition to the national level, it is important to engage with local-level government. The content and nature of this engagement will largely depend on the form of the State—federal or otherwise—as well as the specific prerogatives of different levels of government in a given context.

Judicial system

Finally, the judiciary plays an important role in protecting the rights of persons with disabilities, especially in cases of discrimination, thus improving the accountability systems at the central and local levels.

3.3 Other national actors

National Human Rights Institutions

Under Article 33 (2) of the CRPD, there is an obligation to establish an independent mechanism that monitors its implementation. This may be the mainstream NHRI or a different specific body mandated to monitor implementation of the CRPD: each country will be different. In any case, NHRIs retain a critical role in driving the full implementation of the CRPD.

Election commissions

The election commissions are important partners to ensure political participation of persons with disabilities. They play a particularly important role in ensuring that election education programmes are accessible to and inclusive of persons with disabilities, and that election facilities are fully accessible to all persons with disabilities (physical accessibility, accessible formats for persons with visual impairments etc.).

National Statistics Offices

National Statistics Offices are instrumental in data collection through national censuses and provision of disaggregated data on persons with disabilities.

Service providers and suppliers

Organizations or institutions, public or private sector, which provide services or supplies responding to the needs of persons with disabilities, for example: Braille presses, wheelchair technicians, prosthetics clinics, sign-language interpreters, architects, community-based rehabilitation workers, inclusive day care centres, inclusive kindergartens and schools etc.

3.4 Other UN organizations

Collaboration among UN agencies (i.e. at the country level within the UN Country Team and with non-resident agencies) is critical for the promotion and protection of persons with disabilities. To ensure that the rights of persons with disabilities are an integral part of UN country planning, including in the common country assessment (CCA) and UNDAF, in 2010 the undg adopted a **Guidance Note on the implementation of the CRPD for United Nation Country Teams and implementing partners**,⁵⁷ and the **Guidance Note Annexes—Appendices and Toolkit**.⁵⁸ At the UNCT level, this document provides detailed guidance and is recommended as the main framework for inter-agency collaboration on disability rights.

⁵⁷ undg, *Guidance Note*, www.un.org/disabilities/documents/iasg/undg_guidance_note.pdf.

⁵⁸ www.undg.org/docs/11534/Disability---GN-Annexes.pdf.

Annex — Key Resources

In addition to the specific resources mentioned in this document, the following is a list of additional resources, including on development programming and more broadly on the realization of the rights of persons with disabilities.

- **Committee on the CRPD:** [Guidelines on treaty-specific document to be submitted by states parties under article 35, paragraph 1, of the Convention on the Rights of Persons with Disabilities](#)
- **Disability Statistics Database (DISTAT)** to keep track of data on disability, and recently also developed a *questionnaire* on human functioning and disability
- **EDAMAT:** [European Disability Mainstreaming Tool \(Various languages\)](#)
- **ESCWA:** [Accessibility for the Disabled: A Design Manual For A Barrier-Free Environment](#)
- **European Coalition for Community Living (ECCL):** [An advocacy manual for disability organizations and service providers](#)
- **European Commission; European Foundation Centre:** [Study on Challenges and Good Practices in the Implementation of the UN Convention on the Rights of Persons with Disabilities, summary](#)
- **German Federal Ministry for Development Cooperation (GTZ):** [Integrating Appropriate Measures for People with Disabilities in the Infrastructure Sector](#)
- **Handicap International:**
 - [Strengthening civil society influence on the disability issue](#)
 - [Principal international actors and networks of civil society](#)
 - [Disability in Development; Experiences in Inclusive Practices](#)
 - [Strengthening civil society influence on the disability issue,](#)
 - [Principal international actors and networks of civil society,](#)
- **Inter-American Institute on Disability and Inclusive Development**
- **International Disability Alliance (IDA):**
 - [Towards an Inclusive Society \(EBU\)](#)
 - [A Universal Voice \(WBU\)](#)
 - [Deaf People and Human Rights \(WFD\)](#)
- **International Disability and Development Consortium (IDDC):** [How to include the perspectives of persons with disabilities in the project cycle management guidelines of the EC; Practical Manual and Toolbox](#)
- **Italian Development Cooperation:**
 - [Guidelines for the introduction of the disability issue within the policies and activities of the Italian Cooperation](#)
 - [Disability and International Cooperation and Development: A review of Policies and Practices Volume](#)
- **Japan International Cooperation Agency (JICA):**
 - [Thematic Guidelines on Disability](#)
 - [Making Development Projects Inclusive/Accessible for Persons with Disabilities in ODA Loan Operations](#)
 - [Human Rights Reports/Country Specific Reports, Country Profile on Disability: Asia/Pacific region; Middle East/Africa/Latin America region](#)
- **Special Rapporteur on Right to Education,** [Report on the right to education of persons with disabilities](#), [Report on Inclusive Education](#)

- **Swedish International Development Cooperation Agency:**
 - [Disability as a Human Rights Issues: Conducting a Dialogue](#)
 - [Base line study of Sida funded interventions on disability and Sida’s capacity to work effectively with disability issues— Final report](#)
- **United Kingdom’s Department of International Development (DFID):** [How To Note—Working on Disability in Country Programmes](#)
- **UNDG:**
 - [Guidance Note: Including the rights of persons with disabilities in United Nations programming at country level](#)
 - [Strategy and Plan of Action of the United Nations Inter-Agency Support Group for the Convention on the Rights of Persons with Disabilities and its Optional Protocol](#)
- **UNDP:**
 - [Online Training on Disability](#)
 - [A Multi State Socio Economic Study of Women With Disabilities in India](#)
- **UN Enable**
- **UNESCO:**
 - [Embracing Diversity: Toolkit for Creating Inclusive, Learning-Friendly Environments](#)
 - [New Opportunities for Children and young people with disabilities. Everyone has the right to education. \(CD format\)](#)
- **UNICEF:** [It’s About Ability— a child friendly version of the CRPD \(English, French, Spanish\)](#)
- **United States Agency for International Development (USAID):**
 - [USAID Policy Paper on Disability](#)
- **WHO:**
 - [World Report on Disability](#)
 - [Resource book on mental health, human rights and legislation](#)
 - [Mental health and development: targeting people with mental health conditions as a vulnerable group](#)
 - [Atlas: Global Resources for Persons with Intellectual Disabilities, 2007](#)
 - [Guidelines on the Provision of Manual Wheelchairs in Less Resourced Settings](#)
 - [Training in the community for people with disabilities](#)
- **WHO/ESCAP:** [Training Manual on Disability Statistics](#)
- **WHO/ILO/UNESCO/IDDC:** [Community-Based Rehabilitation Guidelines](#)

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