

AusAID: Development for All

Towards a disability-inclusive Australian aid program 2009–2014

Ministerial foreword

We are very proud to present the Australian aid program's disability-inclusive development strategy, Development for All. This is the first strategy to guide Australia's overseas aid program towards development that includes, and deliberately focuses on, people with disability.

We are concerned that people with disability in developing countries are doubly disadvantaged—first by poverty and then by social and economic exclusion. Overcoming the obstacles facing people with disability is often challenging. Indeed, in Australia we are still learning. Physical, cultural and economic barriers to social participation are not easily broken down. Beliefs and attitudes that marginalise or ignore peoples' diverse needs and skills are difficult to change.

It is not acceptable that children with disability are deprived of an education, or that people with disability are denied employment opportunities. It is not acceptable that communities are left without the resources to help their most vulnerable, or that the appalling rates of impairment through road accidents, poor nutrition or land mines continue unabated.

This is why the Australian Government will work with our partners in Asia and the Pacific region to make disability a development priority. We will develop practical, innovative and collaborative approaches to disability issues. Our

education programs will be adapted to meet the diverse needs of people with disability, particularly children. Access for all to the built environment, crucial to social participation, will be integrated throughout the aid program's infrastructure programs. Preventable blindness will be reduced through better eye health services. Investment in better understanding of how gender affects the social participation of people with disability will help promote women's rights and maximise their opportunities. A solid knowledge base will be built on which the disability and development community can together achieve its objectives.

This focus on people with disability is essential if we want to see progress against the Millennium Development Goals. People with disability are often amongst the poorest and most vulnerable in developing countries. They need both protection from the risks that poverty brings, and the chance to make contributions and enjoy the opportunities that come through strong communities that embrace all members.

There is much to do, but we are not alone. Many countries in the region are making real progress towards ensuring their citizens with disability are respected and equally included. There is rich community experience to be tapped. Just as we strived to do in developing this strategy, we are determined that people with disability and their organisations, families and carers take the lead in shaping the activities that affect their lives. Their central role will strengthen our efforts and help us achieve the goals and outcomes we have outlined in our strategy.

For our part Australia will take a leadership role in promoting disability and development. There are many ways we will do

this: through advocacy in international forums, through building partnerships to shape development thinking and through practical action and on-the-ground results.

This is an exciting task, but not an easy one. It involves changing the structures, practices and attitudes that create 'disability.' We have made a good start: the strategy development process has been quite exceptional in the way it has put people with disability, their organisations, their families and their carers, at the centre of the consultation process. This depth of involvement of people with disability has given the strategy the foundation it needs to be dynamic and relevant.

There are many good reasons why we must do more to support people with disability to meet their full potential—social reasons, economic reasons and building better communities for all. But the most compelling reason is the most fundamental: it is simply the right thing to do.

The Hon Stephen Smith MP
Minister for Foreign Affairs

The Hon Bob McMullan MP
Parliamentary Secretary for International Development Assistance

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Executive summary

Development for All: Towards a Disability-Inclusive Australian Aid Program 2009–2014 sets out practical approaches to guide the Australian aid program in meeting the needs and priorities of people with disability, who are often among the poorest, most vulnerable and excluded members of developing countries. This strategy reflects the Australian Government's commitment to extending the benefits of development to all, and to promoting the dignity and well-being of people with disability.

Disability and impairment in Asia and the Pacific are expected to increase over the coming decades as a result of population growth, ageing, lifestyle diseases (for example, diabetes), conflict, malnutrition, traffic accidents, injuries, HIV, and medical advances that preserve and prolong life.

Strengthening Australia's focus on disability in the aid program is integral to sustainable development and an essential part of achieving the Millennium Development Goals (MDGs) designed to improve the well-being of the world's poorest people by 2015. The focus also supports Australia in meeting its obligations under the recently adopted United Nations (UN) Convention on the Rights of Persons with Disabilities (CRPD).

The Development for All strategy was developed through comprehensive consultations with stakeholders in disability and development from across the Pacific, Asia and

Australia, with a focus on people with disability and their representative organisations, families and carers. The consultations revealed significant levels of existing activity in disability and development in the region and encouraging progress. However a lack of coordination and quality data, large gaps in service provision, high levels of stigma and a lack of understanding of the 'lived realities' facing people with disability are striking.

The strategy's primary outcome is to support people with disability to improve the quality of their lives by promoting and improving access to the same opportunities for participation, contribution, decision making, and social and economic well-being as others. The initial activities outlined in the strategy reflect the priorities identified through the consultations. They include:

- comprehensive support for partner governments' efforts towards disability-inclusive development (implemented in two countries initially)
- a focus on promoting and facilitating better access to education and to infrastructure for people with disability across the aid program
- capacity development of Disabled Peoples' Organisations (DPOs)
- fostering initiatives through a range of flexible, and responsive support programs such as volunteers, Non-Government Organisation (NGO) agreements, research, leadership awards and scholarships, sports and small grants.

While supporting people with disability to improve the quality of their lives is the strategy's principal objective, reducing

preventable impairments was also identified as a priority in consultations. Prevention can equally sit under ‘mainstream’ health or infrastructure programs, but there are compelling humanitarian, social and economic reasons for increasing efforts in this area. The strategy focuses initially on avoidable blindness and road safety—two areas where, with careful investment, significant progress can be made. AusAID will work in partnership with key stakeholders to reduce these and other types of preventable impairments while addressing contributing social and environmental factors. However, most resources available under the strategy will be directed towards improving the quality of lives of people with disability.

Leadership in disability and development will be strengthened in part by building the capacity of people with disability and their organisations. People with disability are proven advocates for advancing the issues that affect them. Australia will also develop its own international leadership capacity in disability-inclusive development by modelling good practice in disability-inclusive development, by forging strategic partnerships at regional and international levels to leverage action, and through agency leadership in international forums to increase the priority on disability and development.

Disability and development issues are wide ranging and complex and this is a new area of focus for the Australian aid program. This strategy takes a targeted and sequenced approach, initially building a strong foundation and then scaling up over time as Australia’s aid program’s capacity and knowledge grows. Two enabling outcomes will also support implementation: strengthening AusAID’s capacity to promote, manage and monitor disability-inclusive

development as a central aspect of the aid program, and working strategically with partners to build robust data on disability, poverty and development and to strengthen knowledge management, use and flow.

How the aid program works is as important as what we do. Implementation of the strategy will be guided by the UN Convention on the Rights of Persons with Disabilities. In line with the rights-based approach adopted in the Convention, we have identified six principles to underpin and guide AusAID's work. The overarching principle is to respect and value the contribution and perspectives of people with disability. People with disability will play an active and central role in our work as a result. In addition, we will promote the rights and respect the diversity of people with disability, take gender influences into account, focus on children and promote people-to-people links and partnerships.

Progress towards disability-inclusive development—including our adherence to the strategy's guiding principles—will be measured at strategy, country and sector program levels. Intermediate and activity level outcomes, targets and indicators will be developed in line with program planning. Systems will also be established to ensure people with disability participate in collecting, analysing and providing feedback on performance information.

This strategy forms an important part of the broader re-orientation of the Australian aid program and the Australian Government's social inclusion agenda towards more inclusive, barrier-free and just societies for all. Support for the most vulnerable in society will also work to reduce

poverty and hasten progress towards the Millennium Development Goals.

The challenge

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

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

It is important to note that national prevalence estimates of disability are speculative and vary widely (for example, from more than 20 per cent in New Zealand to less than 1 per cent in Kenya and Bangladeshⁱⁱⁱ). The variation of reported prevalence is more the result of the scope, integrity and sensitivity of how, what and where disability prevalence is

measured, as well as a range of social factors such as cultural views on what constitutes disability and the stigma associated with certain impairments. All these factors can result in under-reporting.

The extent of impairments and subsequent disability is a growing issue in Asia and the Pacific, and the numbers of people with disability will increase because of a range of factors: population growth, ageing, lifestyle diseases (for example, diabetes), conflict, malnutrition, traffic accidents, injuries, HIV, and medical advances that preserve and prolong life.^{iv} Impairments, be they physical, mental, intellectual or sensory, can be caused before or during birth and might have been avoided if parents had access to appropriate information and care. They can also be acquired through accidents such as stepping on landmines, falling from a bicycle or motorbike when not wearing a helmet, or from illnesses such as malaria or diabetes.

In Asia and the Pacific region, increasing numbers of governments have committed to dealing with disability issues by adopting the Biwako Millennium Framework (BMF) for Action: Towards an Inclusive Barrier-free and Rights-based society for Persons with Disabilities in Asia and the Pacific (2003–2012) and the United Nations (UN) Convention on the Rights of Persons with Disabilities (CRPD). People with disability and their organisations have become increasingly active in policy discussions and decision-making processes at regional and national levels and a growing number of international aid agencies have moved towards disability-inclusive development.

Despite these advances, many challenges remain to

improving the lives of people with disability: lack of financial and human resources, lack of assistive devices and technologies, technical knowledge and capacity hinders the implementation of national disability plans and regional frameworks, while the paucity of available, quality data on disability continues to hamper understanding, planning and monitoring efforts. People with disability in rural and remote areas struggle to access social services, and those with psycho-social, intellectual, or multiple disabilities frequently remain marginalised. Much work is needed to achieve the region's goals of halving extreme poverty, improving the well-being of the world's poorest people and creating an inclusive, barrier-free and just society for all.

Box 1: Disability is created by attitudes and exclusion

The World Bank defines disability as the result of the interaction between people with different levels of functioning and an environment that does not take these differences into account.^v People with physical, sensory, mental or intellectual impairments are often disabled not because of a diagnosable condition, but because they are denied access to education, health, employment, and participation in political and public life. This exclusion may be due to barriers in the social, cultural, economic, political and/or physical environment and can lead to poverty. In a vicious circle, poverty can then lead to more disability by increasing people's vulnerability to malnutrition, disease, and poor living and working conditions.^{vi}

Australia's vision: Development for All

The Australian Government is increasing the focus of its aid program on practical development outcomes, including faster progress towards the MDGs, with substantially increased attention to the most vulnerable and excluded. In recognition that people with disability are often among the poorest of the poor, the Government is determined to see a much higher profile on people with disability in the aid program.

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

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

Why disability-inclusive development?

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

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

- The Australian Government's national **social inclusion** agenda, which is based on the premise that all citizens should be able to recognise their full potential and have the opportunity to live a rewarding social and economic life, and share in the nation's prosperity
- The **Biwako Millennium Framework (BMF)** for

Action: Towards an Inclusive Barrier-free and Rights-based society for Persons with Disabilities in Asia and the Pacific (2003–2012) and the **Biwako plus Five** have been adopted by Australia and many countries in the region and provide guidance for the action needed to create an inclusive society for people with disability in the Asia and Pacific region^{vii}

- **The United Nations Convention on the Rights of Persons with Disabilities (CRPD)**, which was adopted by the UN General Assembly on 13 December 2006 and which came into force on 3 May 2008. Australia ratified the Convention on 17 July 2008, one of the first developed countries to do so. This affirmed Australia's long-standing commitment to upholding and safeguarding the rights of people with disability

- **Article 32 of the CRPD**, dealing with **international cooperation**, states that countries agree it is important to work together to ensure the Convention is put into practice in each country by:
 - making sure international development programs and other international cooperation activities include people with disability and can be accessed by them
 - helping each other, including by sharing information, experiences, training and best practice
 - cooperating with each other in researching and accessing scientific and technical information
 - providing, as appropriate, technical and financial assistance, such as sharing technologies.

The strategy

Our approach

Our strategy recognises four important realities:

- 1 intentionally involving people with disability and comprehensively addressing their needs and priorities is a new way of working for AusAID
- 2 the challenges are significant, and comprehensive change will take time
- 3 there is a range of organisations already taking a disability-inclusive approach, including NGOs and other donors
- 4 Australia's aid program will need time to build its capacity in disability-inclusive development.

To achieve sustainable outcomes we will start in a modest but focused way, build strong foundations and scale-up activities over time as our experience and capacity in disability-inclusive development grows. Our efforts will be guided by the CRPD and the BMF. Where possible and appropriate we will make use of the CRPD and BMF as programming frameworks and support partner government efforts to ratify and act in accordance with the CRPD. In striving for sustainable outcomes we will promote ownership at national levels, more coordinated responses, alignment of donor projects with national development priorities and harmonisation with other donor work.

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

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

Guiding principles

How we work will be as important as what we do. The strategy's principles will guide all aspects of AusAID's work and we will measure our success in part by how we act in accordance with them:

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

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

2. Our work will recognise, respect and promote rights

People with disability hold the same rights and freedoms as others.

3. Our approaches will respect and build understanding of diversity

The lived experiences and perspectives of people with disability are diverse, and effective approaches for improving outcomes will vary in different contexts. Better understanding of the lived experience of people with disability will help break down the attitudes that create and reinforce disability, and build respect for diversity.

4. We will take into account the interaction of gender and disability

Inequality may be experienced between men and women or boys and girls, whether they are people with disability or family members or carers. Women and girls with disability often face multiple forms of discrimination due to their gender, disability and economic status and often face a greater risk of abuse and violence. Gender inequalities impact on access to education, employment, health services and decision making. Women and girls are over-represented amongst those living in poverty.

5. We will focus on children

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

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

The combined commitment, influence and experience of many, including DPOs, government bodies, civil society organisations, faith-based organisations, NGOs, education and training institutions and the emerging and potentially powerful role being played by the private sector will ensure development is more effective because it includes people with disability.

Box 2: Living our principles: An active and central role for people with disability

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

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

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

What we will do

AusAID's disability-inclusive strategy focuses on achieving three core outcomes:

- 1 improved quality of life for people with disability
 - 2 reduced preventable impairments
 - 3 effective leadership on disability and development.
- 1 These core outcomes will be enabled by:
- 4 creating a development organisation that is skilled, confident and effective in disability-inclusive development
 - 5 improving our understanding of disability and development by focusing on the lived experiences of people with disability.

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

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

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

Box 3: Existing AusAID activities focusing on people with disability and prevention of impairments

The aid program will build on existing efforts and opportunities, lessons and successes, including:

Mine action activities: supporting survivors through the provision of rehabilitation, reducing the threat of explosive remnants of war to civilian populations, and improving efficiency and effectiveness of mine action.

Volunteer programs: assignments include sports for people with disability; rehabilitation training and services (occupational therapy, physiotherapy, speech therapy, audiology); sign language development; disability-awareness programs for families/carers; community-based rehabilitation programs; computer training for DPOs; special-needs training; early intervention programs; youth drug and alcohol awareness.

AusAID-NGO Cooperation Program: funding for AusAID accredited Australian NGOs to implement development,

relief and rehabilitation activities in developing countries.

Scholarships/Fellowships: support to nationals in Asia Pacific for disability-related short- and long-term research, study and professional attachments in Australia.

Access to education and infrastructure: through the Australia-Indonesia Basic Education Program (AIBEP) we are supporting relevant ministries and authorities to improve access to basic education for marginalised or excluded groups, particularly those located in poor or remote areas. This includes helping the Government of Indonesia prepare a ministerial regulation, guidelines and a policy on inclusive education and modifying construction standards for schools to accommodate children with mobility challenges. Implementation training is being provided to district education officials and school communities and new construction standards are being applied at all sites financed under the AIBEP.

Health-sector initiatives: programs to address priority health needs of women and children including reproductive health needs, nutrition and preventative and care needs for childhood diseases; programs to support country-specific priorities to address high-burden health problems such as malaria, and regional initiatives such as The Pacific Framework for Prevention and Control of Non-Communicable Diseases (NCDs) which focuses on modifiable risk factors which lead to NCDs such as diabetes and subsequent impairments that can be disabling.

Australian Sports Outreach Program: managed by partner government and local communities in the Pacific and southern Africa in partnership with the Australian Sports Commission. The Australian Sports Outreach Program has a strong focus on community-based rather than elite sports. The participation of a wide range of community members in sport is encouraged, including people with disability.

Humanitarian assistance: protecting communities in the wake of disasters (for example, developing the technical capacity of primary health care workers, schools and workplaces in China to protect and restore the mental health of vulnerable communities post disasters).

Small-grants schemes: small-scale funding for human rights and other activities (for example, supporting the Fiji Disabled Peoples Association to develop resource materials on disability rights, and the Cambodia Land Mine Assistance Fund).

Regional and multilateral assistance: core funding for regional and UN agencies supporting disability activities, including Pacific Islands Forum Secretariat and the World Health Organization (WHO).

Outcomes

Outcome 1: Improved quality of life for people with disability

This—the strategy’s principal outcome—involves direct support for people with disability to improve the quality of their lives. Australia will expand on a number of existing initiatives under the aid program such as survivor assistance in mine action and sports initiatives for children with disability. In addition, we will adopt four new approaches to achieve Outcome 1:

Comprehensive support for national government efforts

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

The design and approach to implementation will vary depending on context, needs and priorities and will be determined jointly with the leadership of the national partner

country, national DPOs and in consultation with other key stakeholders, including donor partners involved in this area. The CRPD and BMF will provide important guidance.

We will focus deeply and build on efforts in two countries initially and, if successful and judged by other partner governments and DPOs to be useful, we will expand this approach to other countries.

Box 4: Likely outcomes of a successful comprehensive country approach

- leadership, collaboration and coordination between government agencies, DPOs, donor partners, NGOs, civil society organisations, faith-based organisations, service providers and the private sector
- people with disability and representative DPOs who know and understand their rights and put them into practice
- international and regional instruments and frameworks (CRPD and BMF) to inform and guide priorities and approaches
- a national policy and/or guiding framework on disability
- resources and capacity to ensure coordinated implementation, measurement, evaluation and reporting on national policies and programs
- information and knowledge about disability that is of

high quality and accessible

- service providers with the capacity and resources to deliver accessible, relevant and sustainable practice
- locally available, appropriate and affordable equipment, assistive devices and technology
- improved quality of life for people with disability through accessing the same opportunities for participation, contribution, decision-making and social and economic well-being as others
- international and regional links and exchanges.

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

Toshin comes from a small village in Samoa. He is 10 years old and has cerebral palsy. Although he has a physical disability, Toshin's mind is active and he wants to learn. However, because of society's attitudes and other barriers such as lack of appropriate wheelchairs, lack of trained teachers and inaccessible transport, Toshin's family assumed he would never be able to attend school. This kept him isolated from his peers and denied him valuable years of learning. Today, Toshin's life is different. With the support of a local physiotherapist, Toshin and his family have support and encouragement. He now has an appropriate wheelchair and is able to do things he previously only dreamed of. This year, for example, he started school and catches a bus with his friends. Toshin's mother is a big support, and sometimes attends school with him to provide assistance to his teachers in including

him in activities. It did not take long before Toshin began to blossom. He has made new friends, is enjoying school routines and loves learning to read: 'My favourite part of school is singing, playing soccer and learning with my friends.' Toshin hopes to access vocational training, get a job and participate in the cultural and social life of his community.

Inclusive education and accessible infrastructure across all country programs

Our disability-inclusive development strategy will initially build on existing investments, commitments and progress in the education and infrastructure sectors of Australia's aid program. During the consultations for this strategy people with disability consistently raised the need for better access to education and improvements to the built environment as top priorities. Education and infrastructure are the foundation for economic growth and self reliance and act as a springboard for increased access and opportunities in other areas.

Efforts towards becoming disability-inclusive are already underway in both these sectors in AusAID. Both sectors will be a major focus in scaling-up the aid program and therefore have the potential to bring fast and significant impacts to the lives of people with disability in many of the countries with which AusAID works.

Education

The Government recognises that education is a great enabler, opening two doors—social inclusion and economic success. Education is the platform for all other development objectives. For that reason, and for equity reasons, it is not acceptable that so many children in Asia and the Pacific are deprived of an education. The UN estimates that less than 10 per cent of children and youth with disability in the region have access to primary education, compared to 70 per cent of those who do not have a disability.^{viii} In many countries girls with disability and girl carers are not sent to school resulting in higher rates of illiteracy. They are not trained for economic self-sufficiency and as adults often do not marry, rarely inherit or own property and are excluded from social and community activities.^{ix}

Quality education requires the involvement of teachers and the education system but also children, parents and the wider community. It also requires an integrated approach addressing the relationships between early childhood development, school and health, teacher education and accessibility of the school environment. This integrated approach needs to address specific needs of children with disability including those with physical, vision, hearing, learning, intellectual, and multiple impairments and mental health issues.^x The benefits of education not only maximise life opportunities of individuals but also extend to other sectors such as health and the wider economy as fewer people with disability and their families will depend on health and welfare systems for support.^{xi}

Australia will direct the increasing resources in the aid budget to help get all children into school, including those with disability, and to support staff at all levels of the education system to improve access to quality education opportunities.

Increased focus and investment through our disability strategy will enable Australia to help partner countries implement inclusive development policies. The aid program will help expand accessible, quality and inclusive education, including vocational education and training. This will include support to address the social and attitudinal barriers to accessing quality education through advocacy and disability awareness training for and by children, parents, teachers, communities and policy-makers alike. Australia's aid program will build on partner country efforts to provide a quality education to all children and young people—girls and boys—including those with disability, and those who have missed out on opportunities to develop the skills necessary for a reasonable livelihood.

Infrastructure

The Australian Government recognises that access to education, employment, and health services, efficient water and sanitation services, roads, transport, government and social facilities reduce poverty by enabling a more productive, healthy population capable of contributing to sustained economic growth. However, many people with disability cannot access schools, workplaces, or basic services nor participate fully in their communities because of

inaccessible built environments, roads and transport.**xii**

An accessible, barrier-free built environment which accommodates the needs of people with disability in urban and rural areas is critical for ensuring people with disability can enjoy their right to participate in all areas of community life.**xiii** Accessible infrastructure also provides a safer environment for all (including older people, pregnant women and parents with young children) and it helps reduce accidents.

Accessible infrastructure requires development and implementation of appropriate standards and guidelines for accessible buildings and facilities, incorporation of inclusive design at planning stages, construction that complies with standards, and training and awareness-raising for stakeholders.**xiv**

Where Australia's aid program has a role in the planning and/or construction of new roads, buildings, facilities and transport, including in the recovery from natural disasters or post-conflict situations, we will work with partners, including people with disability, to ensure that, where possible, these are accessible for people with disability. We will build on existing efforts in infrastructure, including leveraging our partnerships with multilateral agencies to improve access to essential infrastructure and services. These include education and health facilities, water supply and sanitation, transportation and energy.

Box 5: The impact of education and infrastructure

Education

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

The needs of deaf children, blind children, children with intellectual disabilities and children with learning disabilities are specific, and often not catered for. Training and equipping teachers to be more flexible in teaching practices and accommodating different learning styles will benefit all children.

The built environment

During consultations in Vanuatu, a woman shared how her

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

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

Why not health?

While focussing initially on education and infrastructure, Australia recognises the importance of addressing the needs of people with disability in other critical sectors, such as health. The strategy avoids an initial major focus on health for two reasons:

- 1 to steer clear of an overly medical focus (that is, to

- overcome the common but mistaken belief that support for people with disability is primarily a medical issue)
- 2 because there is already a great deal underway for people with disability in the Australian aid program's health sector support.

Over time, however, we will include and support other key sectors, such as health, to become increasingly disability-inclusive in their approaches.

Disability-specific initiatives

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

Many types of initiatives were identified as priorities by people with disability during strategy consultations, including capacity development for DPOs, support for women with disability, support and self-help groups for parents and carers of people with disability, community-based rehabilitation, teacher assistants to ensure effective inclusion and instruction of students with disability, sign language and Braille instruction, construction and provision of assistive devices, mobility aids and assistive technologies to facilitate access to education, employment and community services by people with disability, and specific vocational training.

Throughout the consultation the lack of capacity in DPOs was raised as a major obstacle to empowering people with disability and building their capacity to raise awareness and advocate effectively. DPOs are organisations established and run by people with disability that work towards inclusive, barrier-free, socially just, and gender-equitable societies that recognise the human rights, citizenship, contribution and potential of people with disability. They play an essential role in giving a voice to people with disability and influencing national decision making in development.

Capacity development support for Disabled Peoples' Organisations

The first disability-specific initiative will be to support DPOs. An early and strong focus on assisting DPOs to strengthen their capacity is critical in establishing the foundation for disability-inclusive development. Development of sound leadership, management and organisational capabilities, in addition to effective advocacy skills, were raised as critical areas for support. Support will also be provided for basic literacy, numeracy and computer literacy skills for adults with disability who have had limited or no access to education. Effective DPOs will become catalysts for other positive changes in inclusive development.

The scope and approach to this initiative will be developed in close consultation with key partners and, in particular, will be guided by major regional DPOs. The firmly expressed preference for resources and/or technical assistance to be

‘on tap’ and not ‘on top’ will be respected.

Flexible support mechanisms through Australia’s aid program

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

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

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

Box 6: Leadership by people with disability

Philippines: AusAID scholar—an advocate of change

Despite his delayed enrolment in the Philippine's education system due to disabling physical and social barriers, Rex Adivoso Bernardo became an active leader establishing his college's first organisation for people with disability. He is a founding member of the Alyansang May Kapansanan sa Pilipinas (***Alliance of People with Disabilities in the Philippines***). In 2000, Rex was awarded an AusAID scholarship to study a Master of Arts in Human Resources Management at the University of Sydney. After further study, Rex continued to work for the advancement of people with disability in the Philippines. In 2008, in recognition of his exceptional contributions to the field Rex received the Apolinario Mabini Presidential Award from the Philippine's President Gloria Macapagal Arroyo. When accepting his award Rex said: '***... at the age of 20, I was still unschooled just like the situation of the majority of people with disabilities in this country ... I persevered to study and gain knowledge and in the process, had to endure the ridicule and insults of the unbelievers and insensitive segment of our society ... but just like any individual, I still have my dreams and best of all, the human spirit that cannot be crippled by my frail physical condition.***' Rex is now the Director for Research and Development, Marketing and Promotions at the Mabini College in Daet, Camarines Norte.

Box 7: Disability-inclusive volunteering

Fiji: A sign language dictionary and interpreter training course

Australian volunteer, Kate Nelson, recounts: ‘I went to Fiji on a two-year placement with Australian Volunteers International (AVI). The Fiji Association of the Deaf specifically requested a volunteer who was deaf and fluent in Australian Sign Language, perfect for me! My job was to create a Fiji sign language dictionary and establish an interpreter training course. AVI gave me autonomy to get my work done—my primary relationship was with the people I was working for and with. Challenges, and benefits, for me was establishing relationships of trust for sharing. Funds from the AusAID small grants scheme also assisted the sign language dictionary project. Outcomes included a consolidation of the Fiji deaf community, an official name for the sign language, recognition of sign interpreting as a profession, employment for full-time interpreters, increased awareness and pride of sign language, deaf culture and community, and an increase in local staff skills—all of which continues to grow and expand.’ The outcome of this volunteer assignment has had even broader impacts on employment and education in Fiji. Schools are increasingly employing trained sign interpreters to maximise the academic and social development of children with hearing impairments in the country.

Outcome 2: Reduced preventable impairments

Throughout the consultations, people with disability and their families highlighted the need for this strategy to focus on reducing the occurrence of preventable impairments. There are undeniable humanitarian reasons for taking this approach and also significant economic benefits from reducing the strain on health services over time.

Box 8: Impact of preventable impairments on poverty

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

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

Both parents now dedicate their time to caring for her, without a regular source of income or social security. This

little girl and her family struggle and make great sacrifices to access the limited services available in East Timor. It is uncertain if she will get any form of education and it is likely she will always rely on her family to provide care.

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

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

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

Our strategy will begin with support for reducing preventable impairments in two areas—avoidable blindness and impairments caused by road traffic accidents. These are already the subject of major global campaigns in response to the existing scope, growing nature of the problems, and the impact on and costs to development. In addition, both are areas where Australia has considerable experience and expertise to contribute.

Over time this strategy will also ensure that the causes of other major impairments, in addition to avoidable blindness and impairments caused by road traffic accidents, are increasingly addressed through the aid program's sectoral and country program approaches, such as work already underway to improve women's and children's health and to fight non-communicable diseases such as diabetes.

Box 9: Costs of preventable impairments

Road traffic accidents cost developing countries up to US\$100 billion each year, a figure equivalent to all official overseas aid. Currently 90 per cent of the world's 1.2 million fatalities per year are in low- and middle-income countries. Tens of millions are injured and the road toll is forecast to double by 2030. A large proportion of crash victims in developing countries are the more vulnerable road users (for example, pedestrians, cyclists, other non-motorised transport users, motorcyclists and street vendors). Many are poor, or likely to be pushed into poverty by their trauma becoming the casualties of progress.**xv**

Road traffic accidents are the leading cause of death for young people aged 10 to 24.^{xvi} The World Bank estimates that by 2015, the target year of the MDGs, road traffic accidents will be the leading health impact for children aged 5 and above in developing countries. With the road toll forecast to double by 2030, the vulnerable and poor are worst affected, having few economic options to cope with disability and death of breadwinners resulting from traffic accidents.

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

Avoidable blindness

The Avoidable Blindness Initiative (ABI) announced in the Australian Government's May 2008 budget gives effect to the election commitment to invest \$45 million over two years to help eliminate avoidable blindness in the Pacific and in Asia.

The World Health Organization (WHO) estimates there are 314 million people around the world whose vision is impaired due to eye diseases or uncorrected refractive error.^{xviii} Of this number, 153 million simply require glasses to see properly; and 45 million are blind. The WHO estimates that up to 75 per cent of this blindness could have

been prevented.**xix** WHO's studies also show that 90 per cent of the world's population with vision impairment live in developing countries, 500,000 children become blind each year with approximately 40 per cent of childhood blindness being preventable or treatable. Studies also show that women in poorer societies are at higher risk of vision impairment than men.

Many causes of avoidable blindness in developing countries can be directly related to poverty, including malnutrition, limited access to health, education, water and sanitation. Without appropriate health services, human resources, infrastructure, awareness and policies, millions of people are being deprived of being educated, employed and fully participating in community life.

The ABI is being developed with key partners, including Vision 2020 Australia, to improve the quality of life of people with low vision and blindness through better diagnosis, prevention of avoidable blindness, treatment, and rehabilitation. The initiative will strengthen existing eye-care training institutions and health care workers, build partnerships with key regional organisations, support the scaling up of existing efforts by NGOs and others providing quality eye-health services, and support a two-year comprehensive needs assessment to inform future programming. Through the ABI, the strategy aims to increase the opportunity for people with low vision and blindness to access the same rights and freedoms as others.

Road safety

Road safety is a major global health issue that will continue to magnify with growth in traffic volume and traffic speed in developing countries. Australia is committed to working with the international community to improve road safety in Asia and the Pacific region and prevent accidents that may lead to disability.

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

- National Helmet Wearing Campaign in Vietnam
- Transport Sector Support Program in Papua New Guinea, which supports priority maintenance and rehabilitation works
- Eastern Indonesia Road Improvement Project, which supports improvements and upgrades of deteriorated roads and bridges throughout the east of Indonesia
- funding for the World Bank Global Road Safety Facility to help improve road safety and awareness in the region.

Outcome 3: Effective leadership on disability and development

Australia is well placed to have a direct, practical impact on the quality of lives of people with disability in Asia and the Pacific. Developing and implementing this strategy enables us to join with others to exert influence and demonstrate leadership in disability and development.

During implementation, we will look for strategic opportunities to play a catalytic role in mobilising action and the resources of the global community. Australia will contribute to leadership on disability and development by acting at five levels:

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

international organisations and events

- Australian government representatives will take a strong leadership role in advocating increased priority on disability and development at every strategic opportunity.

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

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

Fostering a culture of excellence in disability and development is essential to successfully implementing our strategy and will involve strengthening both our understanding of disability and development and our processes. AusAID is committed to continuing the openness, inclusion and collaboration that characterised the consultation process in the design, delivery and measurement of initiatives arising from this strategy. AusAID will deliver this outcome by:

- establishing senior leadership with responsibility for steering and overseeing the inclusion of disability throughout the aid program
- embedding accountability for disability-inclusive development in quality reporting processes
- establishing a disability and development capacity that involves and draws on the experience and expertise of people with disability and is able to:
 - manage the implementation, monitoring and evaluation of the strategy and provide flexible, responsive and accessible guidance and support to AusAID staff
 - provide ongoing advice and support to AusAID’s People and Planning Branch to ensure disability and development is effectively included in staff development materials and training sessions
 - provide ongoing advice and support for the development and implementation of disability and development guidelines and tools for all AusAID staff and development partners such as NGOs, contractors and other Australian government partners involved, including awareness raising and information for the general public such as through AusAID’s Global Education Program.

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

needs of, people with disability.

Outcome 5: Improved understanding of disability and development

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

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

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

Delivering results

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

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

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

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

- undertaking thorough evaluations of our disability initiatives
- participatory tools to measure the impact of development on people with disability.

A performance assessment framework for the strategy

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

This table lists some of the questions we will ask when assessing our performance against strategy-level outcomes.

Indicative Performance Assessment Framework—Strategy-Level

Question	Areas of assessment, methodologies for information collection and analysis
CORE OUTCOMES	
1	<p>How have the lives of people with disability improved?</p> <p>Result areas will include levels of poverty of people with disability, education and health outcomes, gender equality, access to services, whether people with disability have greater sense of dignity and social inclusion and are equal participants and decision makers.</p> <p>Method Impact-level information will be periodically analysed by independent experts, based on AusAID’s annual performance reports from country, regional and thematic programs and drawing on partner government information systems, initiative-level reporting, monitoring and feedback processes involving people with disability, commissioned research, and initiative evaluations.</p>

Question		Areas of assessment, methodologies for information collection and analysis
2	To what extent has the strategy contributed to the prevention of impairments?	<p>Result areas will include change in occurrence, type and severity of impairments (for example, traffic accident injuries and rates of avoidable blindness), in line with activities implemented.</p> <p>Method Information will be analysed in annual AusAID reporting based on specific initiatives and partner government information systems.</p>
3	How have international perspectives and action on disability and development been positively influenced?	<p>Result areas will include the extent and nature of Australia's influence on policies and programs implemented in disability by other international agencies and partner governments.</p> <p>Method Feedback will be obtained periodically from international agencies, other donors, DPOs and other relevant stakeholders.</p>

Question	Areas of assessment, methodologies for information collection and analysis
ENABLING OUTCOMES	
4	<p data-bbox="236 517 608 842">To what extent is disability embedded in AusAID's development practice?</p> <p data-bbox="695 517 1493 954">Result areas will include the degree to which disability-inclusive development has become the way in which AusAID does its work and will be assessed against identified sector and program priorities (for example, progress towards inclusive education).</p> <p data-bbox="695 1010 858 1055">Method</p> <p data-bbox="695 1066 1485 1503">Drawing on mandated annual reporting, AusAID will monitor and report on progress in programming (related to program strategies and specific disability initiatives) and at a corporate level (inclusion of people with disability and the accessibility of the work place).</p>

Question	Areas of assessment, methodologies for information collection and analysis
<p>5 Is there a greater understanding of disability and development in Australia and in our region?</p>	<p>Result areas will include the quality and quantity of information on identified disability priority research areas generated through the strategy and available from international, academic and partner government sources.</p> <p>Method AusAID will maintain a knowledge hub and analyse and report on the type and quality of information available and its use.</p>

Question	Areas of assessment, methodologies for information collection and analysis
PRINCIPLES	
1	<p>Do people with disability feel they are active and central participants and contributors to the Australian aid program?</p> <p>Result areas will include how and the extent to which people with disability have been able to participate in and contribute to Australia’s development programs.</p> <p>Method Feedback will be sought from people with disability through regular open consultations, informal and formal feedback from AusAID Posts, and through an annual formal process.</p>

Question	Areas of assessment, methodologies for information collection and analysis
<p>2 Does the Australian aid program recognise and respect the rights of people with disability?</p>	<p>Result areas will include the level, scope and quality of AusAID's understanding and implementation of the disability strategy using the CPRD framework, and key benchmarks for diversity, gender and children's concerns.</p> <p>Method AusAID will monitor progress in implementing the strategy and identify emerging issues according to the principles set out in the strategy and relevant international frameworks. Ongoing advice and support to AusAID program areas will be provided in developing country, regional and thematic strategies and in designing individual initiatives. Independent periodic analyses of AusAID's performance against these principles will be commissioned.</p>
<p>3 Does the Australian aid program promote better understanding and respect for diversity among people and of situations and demonstrate this in its approaches?</p>	<p>Result areas will include the level, scope and quality of AusAID's understanding and implementation of the disability strategy using the CPRD framework, and key benchmarks for diversity, gender and children's concerns.</p> <p>Method AusAID will monitor progress in implementing the strategy and identify emerging issues according to the principles set out in the strategy and relevant international frameworks. Ongoing advice and support to AusAID program areas will be provided in developing country, regional and thematic strategies and in designing individual initiatives. Independent periodic analyses of AusAID's performance against these principles will be commissioned.</p>

Question		Areas of assessment, methodologies for information collection and analysis
4	Do women and men equally participate, contribute and benefit in Australia's disability-inclusive development programs?	<p>Result areas will include the level, scope and quality of AusAID's understanding and implementation of the disability strategy using the CPRD framework, and key benchmarks for diversity, gender and children's concerns.</p> <p>Method</p>
5	Does the Australian aid program address the barriers impeding children's enjoyment of the same rights as their peers?	<p>AusAID will monitor progress in implementing the strategy and identify emerging issues according to the principles set out in the strategy and relevant international frameworks. Ongoing advice and support to AusAID program areas will be provided in developing country, regional and thematic strategies and in designing individual initiatives. Independent periodic analyses of AusAID's performance against these principles will be commissioned.</p>

Question	Areas of assessment, methodologies for information collection and analysis
<p>6 To what extent does the Australian aid program support people-to-people links and promote partnerships?</p>	<p>Result areas will include the strategic nature, clarity of purpose, quality and results of partnerships and people-to-people links in the area of disability and development.</p> <p>Method AusAID will maintain an information database on partnerships and linkages established through the strategy. An ongoing consultation process will be used to obtain feedback from stakeholders, particularly DPOs, on the impact of these linkages and reporting conducted internally and externally.</p>
<p>Reporting The information and analysis conducted annually against the key performance questions will be reported in AusAID's Annual Report to Parliament and the Annual Review of Development Effectiveness.</p> <p>A mid-term review and final evaluation of the strategy will be conducted, drawing on internal reporting and external feedback from stakeholders (as described above), including DPOs, other donors, and partner governments in the region.</p>	

Appendix 1

Consultation process: what we heard

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

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

Consultations concluded with the draft strategy being presented for final consideration by Mr McMullan at an

international conference in Canberra on Disability, Disadvantage and Development in the Pacific and Asia, at the end of September. Many people consulted on the strategy were present.

Almost 500 written submissions were received responding to issues in the Disability Strategy Consultation Paper, with the majority strongly supportive of the Australian Government's engagement in the area and of the open consultation process undertaken. Key issues that arose in discussions included:

Approaches

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

Quality of life

- Lack of most basic services and equipment prevents active participation and inclusion for people with disability and even creates disability, but many opportunities exist for simple, low-cost, scaled-up efforts to address these needs
- Fundamental lack of awareness and understanding about disability at all levels—especially family and community levels—leads to lack of action and reinforces exclusion. Initiatives are needed to reduce stigma and promote inclusion
- Increased access to education and the built environment are priorities
- DPOs are functioning with minimal resources and capacity, but with increased support there is enormous potential for them to raise awareness and lead change
- National disability policies and/or legislation exist, but countries often lack the capacity, resources and coordination needed to drive real change for people with disability
- Significant opportunities exist to strengthen prevention of impairment through support for unexploded ordnance, road safety and improved health care programs.

International influence

- Many international organisations work in various ways in the area of disability, but their work is limited when it comes to creating the real change necessary for inclusion
- International efforts suffer from lack of coordination, duplication and lack of scale and resources to progress agendas
- Multilateral organisations face a disconnect between policy and practice—they are willing to change at the local level, but cannot succeed without senior commitment and leadership action
- Australia could exert considerable international influence and leadership in the region.

Research

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

AusAID fit-for-purpose (inclusive development)

- Inclusive development is a new focus for AusAID staff—many have limited understanding of disability as a key development issue
- Lack of technical knowledge and skills in AusAID to translate the disability strategy into program action and change
- In all large agencies there is a need for guidance materials and to embed disability inclusive thinking and practice into implementation processes, awareness raising and staff training.

Appendix 2

What we have learned from other donors

- Several major donors already have policies or strategies highlighting the need to include disability in their development programs and corporate policies, including the UK Department for International Development (DFID), the European Union, the United States Agency for International Development (USAID), Gesellschaft für Technische Zusammenarbeit (GTZ) and Finland. Other donors refer to disability in their development or sectoral policies, including Japan International Cooperation Agency (JICA), New Zealand's International Aid & Development Agency (NZAID) and the World Bank
- Disability is viewed by many partners as an issue of social exclusion, requiring a rights-based framework, and most donors aim to mainstream or integrate disability throughout their development agendas
- Many donors follow what has become known as a 'twin-track' approach in implementing their objectives for disability, which accepts that both disability-specific and mainstreamed interventions have their place and neither is superior to the other
- There is relatively little review and documentation of the impact of bilateral programs in disability and development and there remains limited information on lessons learnt and best-practice approaches
- Disability-specific initiatives or projects have been more successful than attempts to integrate or mainstream disability into country approaches or

across aid programs. However they may have best effect when integrated into a comprehensive program strategy or linked with mainstreaming goals and in a context of addressing broader societal issues.

Translating disability-inclusive policy into practice has been slow and challenging for donors. Some of the challenges and lessons learnt with respect to implementing policies are included in the following table:

Challenge	Lessons learnt
Disability is not explicit in the MDGs and therefore has no automatic profile or priority	Make disability visible by establishing an explicit policy and implementation strategy. Communicate commitment to the policy and implementation strategy from the highest level.
Lack of broad institutional support—organisations and agencies often resist incorporating disability into what they do because of the lack of institutional support	Establish a specialist team, create agency-specific and practical guidance materials for staff to implement the organisation’s disability strategy and communicate the availability of these materials to staff at all levels. Embed disability-inclusive development thinking and practice into implementation processes, awareness raising and staff training.

Challenge	Lessons learnt
<p>Staff may be resistant due to lack of understanding, lack of confidence or skills in knowing how to address the issues and/or pressure of existing workloads or prejudice</p>	<p>Identify and establish drivers or ‘sentinels’ of disability-inclusive development as well as initiatives to increase awareness and understanding of policy and issues, to create accountability, and to facilitate implementation processes and strategies that are practical and easy to understand.</p>
<p>Lack of commitment or priority on the part of partner governments</p>	<p>Incorporate disability issues in all areas of policy dialogue, support efforts of people with disability and others in partner countries to raise the profile of disability and engender commitment on the part of their national governments to furthering disability objectives and support the development of a knowledge base on disability.</p>

Challenge	Lessons learnt
An increasing focus on Poverty Reduction Strategy Papers (PRSPs) and Sector Wide Approaches (SWAs)	Emphasise the role of DPOs in achieving inclusion in PRSP processes, support capacity building of DPOs, with particular reference to the skills required to participate in PRSPs and SWAs.
Lack of resources for programming initiatives and monitoring progress	Provide initial seed funding, incorporate disability aspects at the design stage and ensure disability-inclusive approaches are measured and adopted. Disability issues may be embraced with great effect in the recovery from either natural or post-conflict devastation.
Lack of accountability mechanisms for monitoring progress	Adopt systems to facilitate reporting on disability, use guidelines for good practice in monitoring and evaluating disability initiatives, develop specific objectives and indicators (qualitative as well as quantitative) relating to disability and develop statistical measures that support the building of an appropriate knowledge base and measurement of performance against outcomes.

General lessons for programming

Key general lessons for effective programming particular to disability include the need for:

- involving people with disability at all stages from policy development, program planning through design, implementation and evaluation
- designing programs for identified barriers to participation
- developing a knowledge base on disability to support and inform policy development and program design, implementation and evaluation
- incorporating gender issues into disability program design (and disability issues into gender program design)
- fostering the formation of support groups and advocacy
- supporting and strengthening existing disability and development structures, networks and mechanisms.

While there are few partnerships and little collaboration between bilateral donors in the area of disability, there remains scope to foster greater partnerships (for example, Norway and Sweden have collaborated in support of World Bank activities and the Global Partnership for Disability and Development).

There is a need to ensure disability is addressed in monitoring and evaluation to ensure effectiveness and to

adopt systems to facilitate reporting on disability, supported by appropriate information-gathering systems. Good practice should include a mechanism to enable the responsible reporting area of an agency to gather the appropriate information on an ongoing basis, to report on the agency's mainstreamed as well as disability-specific experience. Other lessons include the need to:

- use guidelines for good practice in monitoring and evaluating disability initiatives (for example, the World Bank (2007)~~xx~~ has established some elements of good practice for monitoring and evaluating disability development initiatives)
- use specific objectives and indicators (qualitative as well as quantitative) relating to disability to assist monitoring, particularly in relation to quality of life
- develop statistical measures for disability to support building an appropriate knowledge base, and measuring performance against outcomes.

Appendix 3

Contents of 'Development for All' Companion Report

In addition to the many important issues and priorities arising during the consultations and analysis of close to 500 written submissions—which significantly informed the strategy's development—considerable research and analysis was undertaken on the critical frameworks for action and treaties. Research and analysis also included the

experiences of other donor partners, and a stock-take of AusAID's past and current disability activities. This strategy is also informed by the findings of this analysis. Summary reports and organisations and individuals consulted are in the Companion Report which is a valuable resource for those involved in implementing the strategy. The Companion Report, published separately to the strategy, includes:

- 1 The Disability Strategy Consultation Paper
- 2 List of organisations, groups and key stakeholders consulted
- 3 Priority issues arising from consultations
- 4 Other donor activity in disability in the region
- 5 Lessons learnt from other partners in disability and development
- 6 A summary of AusAID's disability activities to date
- 7 UN Convention on the Rights for People with Disabilities
- 8 Biwako Millennium Framework for Action
- 9 Summary analysis of UNCRPD and BMF.

Abbreviations and glossary

ABI	Avoidable Blindness Initiative
ADDC	Australian Disability and Development Consortium
AVI	Australian Volunteers International
AusAID	Australian Agency for International Development
BMF	Biwako Millennium Framework for Action: Towards an Inclusive, Barrier-Free and Rights-based Society for Persons With Disabilities in Asia and the Pacific
CBR	Community-based rehabilitation
CRPD	United Nations Convention on the Rights of Persons with Disabilities
DfID	Department for International Development (United Kingdom)
DPO	Disabled People's Organisation (a not-for-profit representative member organisation made up of, and governed by, people with disability)
GTZ	Gesellschaft für Technische Zusammenarbeit (Germany's international development agency)

JICA	Japan International Cooperation Agency
MDGs	Millenium Development Goals
NGO	Non-Government Organisation
NZAID	New Zealand's International Aid and Development Agency
UN	United Nations
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
WHO	World Health Organization

Glossary

Biwako Millennium Framework for Action: Towards an Inclusive, Barrier-Free and Rights-based Society for Persons With Disabilities in Asia and the Pacific—

Adopted by 28 governments at the conclusion of the Asian and Pacific Decade of Disabled Persons Conference in October 2002. This regional framework for action covers 2003–2012 and sets out a rights-based approach to achieving seven priority areas for action to progress rights and address the significant poverty faced by people with disability in Asia Pacific.

(www.unescap.org/esid/psis/disability/bmf/bmf.html)

BMF plus 5—The framework adopted at the High-Level Intergovernmental Meeting on the Midpoint Review of the Asian and Pacific Decade of Disabled Persons, 2003–2012, held in Bangkok, Thailand, 19 to 21 September 2007. Provides for supplemental strategies for further implementation of the BMF by 2012.
(www.worldenable.net/bmf5/bmf5adopted.htm)

Community-based rehabilitation—A strategy for the rehabilitation, equalisation of opportunities, poverty reduction and social inclusion of people with disability. Involving people with disability and their families is at the heart of CBR. CBR is implemented in more than 90 countries through the combined efforts of people with disability, their families, communities, organisations and the relevant government and non-government health, social, education, vocational and others services. It focuses on enhancing the quality of life for people with disability and their families, meeting basic needs and ensuring inclusion and participation. The CBR adopts a multi-sectoral approach and has five major components—health, education, livelihood, social and empowerment.
(www.who.int/disabilities/cbr/en/)

UN Convention on the Rights of Persons with Disabilities—An international human rights treaty providing for the rights of people with disability which came into force on 3 May 2008, and to which Australia is a party.
(www.un.org/disabilities/default.asp?id=259)

Disability—The World Bank defines disability as the result of the interaction between people with different levels of functioning and an environment that does not take these differences into account. People with physical, sensory, mental or intellectual impairments are often disabled not because of a diagnosable condition, but because they are denied access to education, health, employment, and participation in political and public life. This exclusion may be due to barriers in the social, cultural, economic, political and/or physical environment and can lead to poverty. In a vicious circle, poverty can then lead to more disability by increasing people's vulnerability to malnutrition, disease, and poor living and working conditions. (<http://go.worldbank.org/OCFI93GX30>; www.un.org/disabilities/default.asp?id=223)

Impairment—refers to any limitation to, loss of, or abnormality of body structure or function, whether permanent or temporary, and which may fluctuate over time. Impairments may be physical, sensory, intellectual, psychological or neurological in nature, and include learning disabilities. (www.who.int/classifications/icf/en/)

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

End notes

- i United Nations 2008, **Mainstreaming disability in the development agenda** (E/CN.5/2008/6), www.un.org/disabilities/documents/reports/e-cn5-2008-6.doc

- ii Department for International Development 2000, **Disability, poverty and development**, www.dfid.gov.uk/pubs/files/disability.pdf; Asian Development Bank 2005, **Disability Brief: Identifying and Addressing the needs of Disabled People**, www.adb.org/Documents/Reports/Disabled-People-Development/disability-brief.pdf

- iii Mont, D. 2007, **Measuring Disability Prevalence**, <http://siteresources.worldbank.org/DISABILITY/Resources/Data/MontPrevalence.pdf>

- iv Thomas, P. 2005 **Disability, Poverty & the Millennium Development Goals: Relevance, challenges and opportunities for the United Kingdom** Department for International Development, www.addc.org.au/disabilitypoverty.html

- v World Bank 2008, **What is Disability?** <http://go.worldbank.org/OCFI93GX30>

- vi United Nations 2007, **Handbook for parliamentarians**, www.un.org/disabilities/default.asp?id=223

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- vii For further information, refer to this strategy's Compendium Volume.
- viii UNESCAP 2006. **Disability at a Glance: A profile of 28 countries and areas in Asia and the Pacific**, www.unescap.org/esid/psis/disability/publications/glance/disability%20at%20a%20glance.pdf
- ix UNESCAP 2003, **Biwako Millennium Framework for Action**, www.worldenable.net/bangkok2003/biwako4.htm
- x World Bank, 2008, **Education and Disability**, <http://go.worldbank.org/DK7TDH96P0>
- xi Lynch, J. 2004, **Provision for children with special educational needs in the Asia region**, World Bank Asia Technical Series, <http://siteresources.worldbank.org/DISABILITY/Resources/280658-1172610312075/ProvisionforChildLynch.pdf>
- xii UNESCAP 2003, **Biwako Millennium Framework for Action**, www.worldenable.net/bangkok2003/biwako4.htm
- xiii World Bank, 2008, **Accessibility**, <http://go.worldbank.org/MQUMJCL1W1>
- xiv United Nations 2006, **Convention on the Rights of Persons with Disabilities: Article 9**, www.un.org/disabilities/convention/conventionfull.shtml

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- xv** World Bank 2008, **World Bank Global Road Safety Facility**, <http://go.worldbank.org/9QZJ0GF1E0>
- xvi** World Health Organization 2007, **Youth and Road Safety Initiative**,
www.who.int/violence_injury_prevention/publications/road_traffic/youth_roadsafety/en/index.html
- xvii** Frick, K. D. & Foster, A. 2003, **The magnitude and cost of global blindness: An increasing problem that can be alleviated**, American Journal of Ophthalmology, 135(4):47, pp. 1–47.
- xviii** World Health Organization (Press release 11 October 2006), **Sight test and glasses could dramatically improve the lives of 150 million people with poor vision: WHO releases new global estimates to mark World Sight Day**,
[www.who.int/media
centre/news/releases/2006/pr55/en/print.html](http://www.who.int/media_centre/news/releases/2006/pr55/en/print.html)
- xix** International Agency for Prevention of Blindness, Vision 2020 & WHO 2007, **Global Initiative for the elimination of avoidable blindness: Action plan 2006–2011**, World Health Organization, Geneva.
- xx** World Bank 2007, **Social analysis and disability: A guidance note**, <http://go.worldbank.org/Q4PN46QPK0>