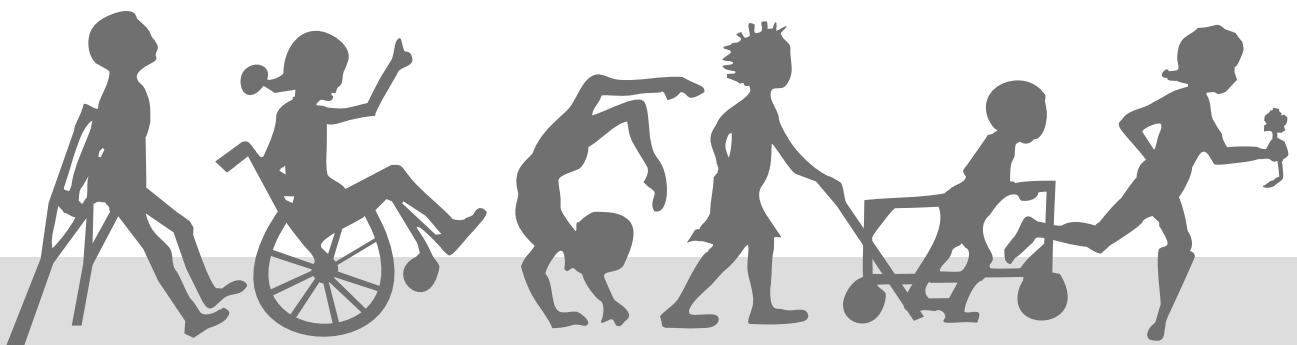# Behinderung und internationale Entwicklung

**Historie der Behindertenbewegung**
**History of the Disability Rights Movement**

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# Editorial

Liebe Leserinnen und Leser,

zunehmendes Engagement internationaler und die Entstehung lokaler NGOs haben seit den 1970er-Jahren zum Wachstum sozialer Bewegungen um Ethnizität, Gender, Behinderung etc. beigetragen. Insbesondere die Frauenbewegung, die UN-Dekade der Menschen mit Behinderungen und mehr politischer Raum für marginalisierte Gruppen haben weltweit das Wachstum der Behindertenrechtsbewegung mit befördert: Als Reaktion auf Exklusion und Diskriminierung haben sich AktivistInnen mit Behinderungen formiert, um ihre politischen, rechtlichen und sozialen Anliegen vorzubringen, was zu zunehmender gesellschaftlicher Sensibilisierung für Rechte von Menschen mit Behinderungen geführt hat. Mit der Verankerung der Bedeutung von Organisationen von Menschen mit Behinderungen in der BRK hat diese als treibende Kraft in der Förderung und Überwachung der Rechte von Menschen mit Behinderungen und deren Partizipation, zusätzliche Impulse in der Entwicklungspolitik und der Planung von Entwicklungsvorhaben geliefert

Die Bildung von Gruppen allgemein, insbesondere aber von Dachorganisationen ist angesichts der Komplexität des Gegenstands jedoch nicht einfach: Behinderung ist ein Querschnittsthema über Grenzen von z.B. Ethnizität, Gender, Lebensalter und sozialen Schichten hinweg und die gesellschaftliche *Gruppe* von Menschen mit Behinderungen sehr divers, z.B. im Hinblick auf Beeinträchtigungsart und Lebensumfeld mit entsprechend diversen Erfahrungen, Anliegen und Problemen. Dem zu Folge unterscheiden sich auch die Gruppen und Organisationen in Zielen, Ansätzen und Mitgliederzusammensetzung, unterschiedlich beeinflusst durch den jeweiligen sozialen, politischen, und ideologischen Kontext mit lokalen Chancen und Herausforderungen in unterschiedlichen Ländern. Vor dem Hintergrund dieser Diversität soll in dieser Ausgabe mit Beispielen aus Indien, Uganda und Äthiopien die uneinheitliche und facettenreiche Geschichte der Behindertenrechtsbewegung sowie Selbstvertretung von Menschen mit Behinderungen illustriert werden.

Mit der aktuellen Ausgabe verlassen gleich drei verdiente KollegInnen die Redaktionsgruppe. Mit großem Engagement haben sie neben ihrer beruflichen Tätigkeit dazu beigetragen, dass die Zeitschrift regelmäßig erscheinen konnte. Gleichzeitig war es ihnen ein wichtiges Anliegen, die Qualität der Zeitschrift zu verbessern. Der Herausgeber dieser Zeitschrift dankt den ausscheidenden Redaktionsmitgliedern *Stefan Lorenzkowski, Mirella Schwinge und Susanne Wilm* sehr für ihr jahrelanges und unermüdliches Engagement und bemüht sich derzeit um die Zusammenstellung einer neuen Redaktionsgruppe.

Ihre Redaktionsgruppe

Dear Reader,

Since the 1970s greater participation of INGOs and the emergence of local NGOs contributed to the growth of social justice movements, raising issues of ethnicity, gender, disability etc. Particularly the women's movement, the presence of international agencies which provided more space for (political) mobilisation of marginalised groups and the UN Decade of Disabled Persons facilitated the rise of the disability rights movement across the world: Responding to exclusion and discrimination, activists with disabilities formed groups and organisations to claim their political, legal and social objectives, increasingly rising awareness on disability rights. The CRPD created additional momentum, stipulating the role of organisations of persons with disabilities as a driving force in the promotion and monitoring of the rights of persons with disabilities and their participation in development planning & policy making.

Given the complexity of the issue, forming groups in general and cross-disability umbrellas in particular hasn't been a simple possibility: Disability cuts across ethnicity, gender, age, class divisions etc. Persons with disabilities are a diverse group, e.g. in terms of their impairment and the environment they live in, with equally heterogeneous experiences and needs. Likewise, groups and organisations of persons with disabilities vary in terms of their mandate, approach and membership. In addition, the movement in the different countries is shaped by ideological influences, the social and political contexts and local opportunities and challenges. It is in this diverse context that this issue aims to illuminate the chequered and multifaceted history of the disability rights movement and self-advocacy of persons with disabilities in low income countries, presenting examples from India, Uganda and Ethiopia.

With the current issue three longstanding members – *Stefan Lorenzkowski, Mirella Schwinge, and Susanne Wilm* – are leaving. With great dedication they contributed to the regular publication, quality assurance and improvement of this journal. The publisher would like to express her gratitude for years of tireless efforts and currently attempts to form a new editorial group.

Your editorial board

# Disability Rights Movement in India: Emerging Methods of Advocacy and Trends

Jagdish Chander

Despite its hierarchical and caste bound character, the Indian society has lately been witnessing the emergence out of the shadows of silent groups like women and the disabled. The passing of the first comprehensive disability rights legislation, popularly known as the PWD Act, 1995, is an example of the success of the movement of the disabled for their rights. Following the passage of this Act in 1995, the nature of disability rights movement underwent a change with the emergence of cross-disability alliance and the broadening of the agenda of struggle as well as the adoption of new methods of advocacy period. This article analyzes this change in the nature of disability rights movement with reference to the changing methods of advocacy as well as recent trends in the disability rights movement in India during the post-1995 period.

## Changing Methods of Advocacy: Struggle from the Streets to Courts, Quasi-Judicial Bodies and the Use of Internet

The passage of the PWD Act created a strong platform to enable disabled activists and their allies to approach the courts and quasi-judicial bodies. This law began to be used as an instrument to approach these institutions to address the issue of rights of the disabled people. The disabled activists along with their allies started to make frequent use of this law both on an individual basis as well as through advocacy organisations. The existence of the PWD Act enabled the disabled activists to have a strong basis for engaging in a struggle to press for the realisation of their rights in various spheres of life through implementation of its provisions. Thus, in the post-1995 period, law has become an instrument that can be used by any disabled person covered under it to seek the realisation of his or her rights.

As mandated in chapter XII of this law (PWD Act: Section 57, chapter XII) the Chief Commissioner on Disability (CCD), a quasi-judicial body, was established in 1998 to look into complaints regarding violations of the provisions contained in this law (Office of the Chief Commissioner for Persons with Disabilities 2008: 1). Subsequently, comparable counterparts were also established in various states (Office of the Chief Commissioner for Persons with Disabilities 2008: 1). Similarly, the PWD Act was also used by advocates to approach the courts in India to seek the realisation of the rights of the disabled in accordance with its provisions (Disability Manual 2005). At the same time, access to the Internet enabled the English educated disabled activists to connect with each other and lobby for implementation of the law in a unified manner. Thus, prior to the passing of the PWD Act the disabled activists (particularly the blind activists as the movement then was predominantly led by the blind) primarily relied on traditional methods of advocacy involving what Barnatt and Scotch (2001) describe as "contentious politics" or "contentious political action" which included sit-ins, rallies, road blocs, relay and indefinite strikes etc. However, the post-1995 period witnessed the continuation of struggle through new means, such as court cases, filing complaints in the offices of the State Commissioners and Chief Commissioner on Disability, and use of the Internet.

While contentious political action such as rallies and picketing took place sporadically, filing of law suits in the Courts of India and complaints in the offices of various quasi-judicial bodies, namely the State Commissioners on Disability, the CCD, and the National Human Rights Commission, were adopted as an important means of advocacy. Therefore, as a result of the use of the PWD Act as a tool to advocate for their rights, the post-1995 period was characterised by the use of a combination of methods of advocacy ranging from traditional contentious political action to legal approaches.

As elaborated in the next section, a number of lawsuits were filed by disability rights organisations predominantly including the organisation of the blind, deaf and the wheelchair users as well as individual disabled people in various High Courts and the Supreme Court of India in the post-1995 period. This is not to say that the disabled did not approach the courts in the past for their rights. There were a few lawsuits relating to the issue of disabled people's right to employment filed under the general principle of right to equality enshrined in the Constitution of India (Constitution of India 2004: 7-8) befo-

re the PWD Act was passed.

However, it should be emphasised that, prior to passage of the PWD Act, it was only in rare situations that the activists approached the courts to deal with the issue of discrimination and they primarily relied on contentious political action to advocate for their rights. In addition to the use of law as an instrument for the realisation of the rights of the disabled in the post-1995 period, it is worth noting that another important development which took place during this period in India, particularly since the first decade of the 21st century, is the proliferation of Internet services and their usage by disabled people, particularly the blind activists.

The advent of Internet services brought great change around the world and access to the World Wide Web and use of e-mail has been immensely influential in promoting the mobilisation of the disabled in the United States in the process of the struggle for their rights (Barnatt/Scotch 2001: 214); in particular, in India, it has helped the English-educated blind to be informed of developments at the international level and promoted interaction among the blind activists and their allies. The use of the Internet has thus enabled blind activists in India to exchange their ideas through e-mails, and to gain access to a wealth of information in electronic format through the use of screen reading software.

Several e-mail groups have been established by blind people in India to exchange ideas with each other related to specific areas of interest. One such group is the access India Yahoo Group; it was originally created on January 4th 2001, for blind computer users to discuss computer-related issues (Access India 2011). But over a period of time, the scope of discussion has expanded significantly. The Group has a very wide membership, which has connected a big group of blind people as well as their allies as it has now been joined by a large number of subscribers who regularly exchange their ideas and share relevant information among themselves. It has now become a forum for blind people as well as sighted allies working in the field of blindness from different parts of the country to exchange ideas on numerous issues including the issues of employment discrimination, obstacles to education, and the like. It has helped blind people join forces in order to deal with discrimination on the basis of blindness and implementation of the provisions of PWD Act, as well as initiating discussion of issues relating to the rights of the disabled not covered in this Act (Access India 2011).

The availability of e-mail groups like the Access India Yahoo Group as well as other Yahoo Groups and Google Groups has enabled blind people to exchange legal documents and to work collaboratively on the filing of law suits in various High Courts and the Supreme Court as well as on complaints to be registered in the offices of the Chief Commissioner and the State Commissioners on Disability. The access to e-mail has also facilitated their correspondence with government authorities, particularly when the lobbying for the revised disability law to replace the PWD Act has been going on recently. Hence, access to the Internet has in a number of ways enhanced the advocacy efforts of the blind in India.

In addition to the beginning of new methods of advocacy, the post-1995 period also witnessed a change in the nature of the disability rights movement in India. There are discernable trends that are distinguishable from trends in the earlier phases of this movement. The most important identifiable trend that distinguishes the nature of the disability right movement during the post-1995 period from the pre-1995 period is the broadening of the agenda of struggle and cross-disability participation as well as the acceptance of advocacy approach by middle-class disabled members leading to a change of their attitude toward advocacy. Since the PWD Act ensured a wide range of rights of the disabled in India, blind as well as other disability groups have now been getting a wide range of rights realised through implementation of the Act. This period has also witnessed an emergence of other disability groups that have adopted an advocacy approach and significantly contributed in providing a cross-disability character to this movement. Therefore, what follows next is an analysis of the recent trends in the disability rights movement in India in the post-1995 period due to the broadening of the agenda of struggle and the increasing participation of cross-disability rights groups. This is followed by a discussion of acceptance of the advocacy approach by the middle-class disabled members through an example of the composition of the Disability Rights Group, the first cross-disability alliance formed in the capital city of Delhi during early 1990s.

## Broadening the Agenda of the Struggle for Rights and Emergence of a Cross-Disability Character of the Movement

While there was always some sort of overlapping of issues for which struggle was carried

out in the pre-1995 period, the focus was basically on a specific demand and the movement was led by an impairment-specific group, particularly the blind activists. Thus, while the founders of the National Federation of the Blind (which spearheaded the self-advocacy movement of blind in India) were primarily focused on organisation building and engaged in mild forms of advocacy during the 1970s, the struggle for right to employment and the enactment of a disability law became the focal points of agenda of advocacy by them during the 1980sand early 1990s respectively.

The predominant agenda of the struggle carried out by the National Federation of the Blind (NFB) in the post-1995 period, particularly through contentious political action, was the implementation of section 33 of the PWD Act, which mandated three per cent quota for the disabled in government jobs. But it is worth emphasising that the struggle carried out by the NFB, as well as the other disabled people in their individual capacity and through advocacy organisations during this period, was very wide in scope. This struggle also involved several lawsuits filed in courts and complaints registered in the offices of various state commissioners on disability as well as the Chief Commissioner for Persons with Disabilities. These lawsuits and complaints have been related to a very wide range of issues including the right to housing, access to social security, and the right to education, among others (Disability and the Law 2005; Disability Manual; Office Of The Chief Commissioner for Persons with Disabilities 2008). However, it needs to be acknowledged that the majority of the lawsuits were still related to the issue of right to employment (Disability and the Law 2005; Disability Manual).

In addition to the broadening of the agenda of struggle by the disabled activists, the post-1995 period also witnessed the increasing participation of cross-disability groups in this struggle. It is true that the struggle led by the blind activists since late 1980s to 1995 aimed at accomplishing an agenda that is considered to be common to the interests of different categories of disability groups, namely, the passage of a comprehensive disability rights law. However, the major limitation of the self-advocacy movement of the blind prior to the passage of the PWD Act was that it lacked cross-disability participation. In contrast to this, the post-1995 period witnessed the beginning of participation of diverse disability groups in the struggle for their rights; this has contributed significantly to the enrichment of the disability rights movement.

A cross-disability rights group called the Disability Rights Group (DRG) was established in Delhi in March 1994 (Bhambhani 2004). This marked the beginning of a cross-disability rights alliance. While the NFB continues as a leading advocacy organisation addressing issues regarding the rights of blind people, increased participation of diverse disability groups, particularly the DRG, has made a significant contribution in strengthening this movement.

One of the leading member of DRG at the time of its founding in March 1994 was Javed Abidi, who happened to be a wheelchair user. Abidi was then heading the Disability Division of the Rajiv Gandhi Foundation, a foundation established by the family of the former Prime Minister of India in 1991 to carry out philanthropic work (Rajiv Gandhi Foundation 2011). Yet another leading member at the time of its founding was Lal Advani who had spearheaded the process of rehabilitation in the field of disability in India as a civil servant (Chander/ Baquer 2005: 4). The other core group members of DRG at the time of its founding included Sarvjit Singh, a wheelchair user, who was then serving as a high level civil servant in the Ministry of Railways, Ali Baquer who was heading an NGO engaged in the field of intellectual disabilities, and Jagdish Chander, a blind professor in the University of Delhi (Chander/ Baquer 2005: 4-5). This composition of the core group of DRG at the time of its founding in 1994 reflects the fact that there was beginning of a cross-disability alliance. It is also symbolic of a significant change in the approach of middle-class professionals engaged in the NGOs working in the field of disability, in contrast to their traditional approach of disregard for the contentious political action adopted by radical advocacy organisations like the NFB.

The contribution of the DRG is particularly crucial in two ways: First, the DRG succeeded in widening the scope of issues concerning various categories of disabled as it actively advocated for the rights of cross-disability groups instead of focusing on the rights of any disability specific group. Second, over time, DRG began to be essentially a one-person organisation, dominated by Javed Abidi who claimed to speak on behalf of all disabled people and who made unilateral decisions. But it must be acknowledged that this was for the first time that disabled activists with different types of disabilities had come together to advocate for their rights (Ray 2001). Some of the common issues addressed by DRG through contentious political action included:

- Appointment of the Chief Commissioner on

Disability in 1997 (Bhambhani 2004: 45);
- Inclusion of the disabled in the 2001 census (Disability Rights Group to Strike Over Census Issue 2000);
- Raising the limit of the income tax exemption for disabled people and parents of disabled children (Disabled Rights Activists Rally to Awaken Centre 2002);
- Exemption of customs/excise duties on aids and appliances used by the disabled (Rally to Make Govt. See Reason 2003);
- Right to accessible voting (Abidi to Fast Unto Death Over EC's Attitude 2004; *Dharna* Moves Election Commission to Action 2004; Protest Outside EC Office: Several Activists Detained 2004);
- Opposition to appointment of able bodied professionals as the head of the apex level institutions in the field of disability like CCD, the Rehabilitation Council of India, and the National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities (Bhambhani 2004: 50-52).

## Conclusion

In this paper, I have argued that, following the passage of the PWD Act, the disability rights movement in India witnessed the emergence of new trends in the post-1995 period. This period has been marked by a beginning of participation of different disability groups as well as advocacy for an expanding horizon of issues relating to the rights of the disabled through the traditional as well as new methods of advocacy through an increase in use of courts to litigate rights in India. This period also witnessed a drastic change in the attitude of the NGOs operating in the field of disability towards the advocacy-oriented approach. Thus, the rights based perspective is now widely embraced by the current generation of disability rights activists from cross-sections of disability and the non-governmental organisations. This perspective has evolved as a well-established and internalised approach that dominates the thinking of the disabled activists. It is likely to strengthen over time as it crystallises at the national and international levels. Disabled people are, therefore, no longer going to be passive recipients of services. Rather, they are active advocates for their rights and will emerge as the masters of their destiny.

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**Zusammenfassung:** *Trotz seines hierarchischen und kastengebundenen Charakters hat Indiens Gesellschaft in den letzten Jahren das Heraustreten aus dem Schatten von stillen Gruppen wie Frauen und Menschen mit Behinderung miterlebt. Die Verabschiedung der ersten umfassenden Gesetzgebung für die Rechte von Menschen mit Behinderung, allgemein bekannt als der PWD Act, 1995, ist ein Beispiel für den Erfolg der Bewegung behinderter Menschen für ihre Rechte. Im Anschluss an die Verabschiedung dieses Gesetzes 1995 hat die Art der Behindertenrechtsbewegung mit der Entstehung von Verbindungsnetzen und der Ausweitung der allgemeinen Anstrengungen als auch durch die Einführung neuer Methoden des Zeitalters der Interessensvertretung eine Veränderung erlebt. Dieser Artikel untersucht diesen Wandel in der Art der Behindertenrechtsbewegung mit Bezug auf verschiedene Methoden von Interessensvertreten als auch die jüngeren Entwicklungen in der Behindertenrechtsbewegung in Indien während der Periode nach 1995.*

**Résumé:** *Malgré son organisation hiérarchique et liée aux castes, la société indienne a vu ces derniers temps des groupes silencieux comme les femmes et les personnes handicapées sortir de l'ombre. La promulgation de la première législation complète sur les droits des personnes handicapées, communément connue comme le PWD Act de 1995, est un exemple du succès du mouvement des personnes handicapées en faveur de leurs droits. Suite à la promulgation de cette loi en 1995, la nature du mouvement pour les droits des personnes handicapées a changé, avec l'apparition d'une alliance inter-handicap et l'élargissement des thèmes de lutte ainsi que l'adoption de nouvelles méthodes de plaidoyer. Cet article analyse ce changement en faisant référence aux changements de méthodes de plaidoyer ainsi qu'aux tendances récentes du mouvement pour les droits des personnes handicapées en Inde depuis 1995.*

**Resumen:** *A pesar de su carácter jerárquico y de castas, la sociedad hindú ha sido testiga recientemente de que silenciosos grupos tales como el de las mujeres y los discapacitados han salido de las sombras. La aprobación de la primera ley general sobre discapacidad, popularmente conocida como PWD Act, es un ejemplo del éxito del movimiento de personas con discapacidad en su lucha por sus derechos. Después de la aprobación de esta ley, cambió la naturaleza de los movimientos por los derechos de las personas con discapacidad por el surgimiento de alianzas integrales y la introducción de nuevos métodos de persuasión. En este artículo se analiza el cambio en relación a los nuevos métodos de estos grupos para defender sus intereses, así como también las tendencias recientes en el movimiento de la discapacidad en el período posterior a 1995.*

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# Human Rights-Based Approach in the Ugandan Disability Movement: A Fairy Tale of Self-Determination and Self-Advocacy?

Hisayo Katsui/Jukka Kumpuvuori

This article is based on findings from the research project entitled, Human Rights-Based Approach to Disability and Development: Interplay of Disability-Sensitive Development Cooperation and National Policy in Uganda between 2007 and 2012. This is a multi-disciplinary project. Particular focus of this article is on ownership and prerequisites, without which self-advocacy work of persons with disabilities and their organisations (DPOs) is extremely difficult. The article starts by exploring the Ugandan disability movement. Subsequently a case study on Ugandan Members of Parliament as a form of representative democracy and its downside is introduced. The article concludes with some considerations on how self-determination and self-advocacy of persons with disabilities in Uganda could be promoted, including a future research agenda. All the arguments are based on empirical study findings under the aforementioned research project.

## Development of the Ugandan Disability Movement

In Uganda, the disability organisations started to be established during the 1970s. The idea of forming a national umbrella organisation of persons with disabilities started around 1976, but was hindered by the war between Uganda and Tanzania from 1979 to1987. In 1987, persons with disabilities in the *Ruti* Rehabilitation Centre in Mbarara and the *Kireka* Rehabilitation Centre in Kampala realised the idea of forming the organisation as the National Union of Disabled Persons of Uganda (NUDIPU) (Ndeezi 2004: 10-11). 17 DPOs joined NUDIPU. This was the first of its kind in the African continent (ibid.: 12). Without assets and money, voluntary work and contributions of members enabled the activities in the beginning. This spirit is said to have led the NUDIPU into "one of the strongest national advocacy and lobbying organisations championing the cause of marginalised groups in Uganda" (ibid.: 17).

Already in the beginning of the disability movement, Ugandan DPOs applied a human rights-based approach in their activities (DSI 2007: 21; Lang/Murangira 2009: 36). The Affirmative Action Policy 1989, for instance, promoted representation of marginalised groups including persons with disabilities to uplift them. In the Constituent Assembly for the formation of the Constitution in 1995, the late Eliphaz Mazima, a disability activist with a physical impairment and the first elected chairperson of the NUDIPU represented persons with disabilities. As a result, the Constitution included many clauses related to persons with disabilities. Consequently, the Constitution (1995) is cited as a "human rights charter" (Mawa 2003).

That is, they were applying a human rights-based approach even before they started to engage in development cooperation. This is an important piece of fact that is against the understanding that human rights discourse comes from the North (Kennedy 2004: 18; Uvin 2004: 17). In other words, it is misleading to presume that a human rights-based approach is an exclusively Northern concept. The Ugandan disability movement has deliberately used this approach for making political space even before the era of the UN Convention on the Rights of Persons with Disabilities.

The main achievements of the Ugandan disability movement include political representation. After the enactment of the Local Government Act of 1997, affirmative action policy has been introduced for politically marginalised groups including women, persons with disabilities, youth, workers and members of the army. Since then, all those groups are represented in Ugandan politics at all levels including the Parliament. Uganda has a quota system where five Members of Parliament represent persons with disabilities: Four Members of Parliament from four regions (Central, East, West, North) and one woman with a disability. An interesting fact is that in the 2011 election, two women with disabilities stood for the positions outside of the disability quota framework and also passed through (Margaret Baba Diri and Jessica Ababiku). Therefore, there are seven persons with disabilities in the Parliament linked to the disability movement today. Moreover, over 50,000 disabled councillors work in the local government structure (Lang/Murangira 2009: 37), of which half are women with disabilities at district and sub-county levels, while parish and village

have only one councillor representing persons with disabilities. That means, persons with disabilities were identified, mobilised and organised for elections (Ministry of Finance 2008: 122), which in itself has significant implications. "However, apart from the national level (parliament), at the lower levels representatives of persons with disabilities have not been successful in influencing decisions due to poor leadership and lobbying skills" (DSI 2007: 13).

In 1998, the State Minister for the Elderly and Disability Affairs was created under the Ministry of Gender, Labour and Social Development. This Department addresses the issues of disabilities, though it is resource constrained. In 2003, the National Disability Council was established to bridge communication gaps between the government and persons with disabilities. In 2006, the Persons with Disabilities Act was adopted which further stipulates the rights of persons with disabilities in Uganda. The Act articulates that Uganda is taking a human rights-based approach in its laws. Consequently, many signs of improvement on the grassroots have been observed over time (Ministry of Finance 2008: 104-107). Nevertheless, the majority of persons with disabilities remain unaffected (ibid.: 107) and implementation gaps are observed (Lang/Murangira 2009: 6). The Ministry Report (2008) introduces cases in which the councillors with disabilities "face with an uphill task" as their proposals are "watered down as 'un-researched' and in many cases they do not get implemented." The comparison on expenditure in fiscal year 2007-2008 between different National Councils for Children (41%), Women (21%), Youth (19%) and Disability (19%) (Lang/Murangira 2009: 21) implies low priority of disability in the government. In some cases, persons with disabilities are not representing in statutory committees due to lack of qualification of disability councillors (Ministry of Finance 2008: 81). Socially constructed roles for women also hinder women with disabilities to participate actively into politics (ibid.: 82). The National Council for Disability was established to monitor all national implementations including violations of the rights of persons with disabilities, and is supposed to have District and Sub-County Councils for Disability in all districts. The funding for their activities even gets diverted through Community Development Department to different sub-groups [1] (ibid.: 111-112). Moreover, the councils at district levels or lower are currently involved in implementation of policies, which is contrary to what they are supposed to do. In 2006, a National Policy of Disability in Uganda was also issued by the Ministry of Gender, Labour and Social Development. The visibility of persons with disabilities in the political space is an outstanding achievement of the disability movement in Uganda. Mainstreaming disability into politics succeeded in empowerment of persons with disabilities and reducing stigma against them particularly right after 1997 (Ministry of Finance 2008: 83), although the introduction of the multiparty politics in 2006 fragmented the disability movement to some extent. For instance, when he changed his political affiliation to an opposition party, a long-standing Member of Parliament lost in the election of 2006 despite of his popularity among the disability movement. "The challenge of the government is that it looks at NUDIPU as the key stakeholder in it, because when we approach them, they say, 'But what is NUDIPU doing? This is their work.' But you know, NUDIPU cannot reach each and everywhere, up to the last person in the village"[1]. Lack of clear guidance confused their roles and mandates, which has created the vacuum of monitoring and implementation mechanism and consequently resulted in little implementation of relevant laws and policies for persons with disabilities. DPOs, with the donor community, are expected to fill the huge gap between laws and implementation [2]. These are a few of the many practical challenges in general to the operationalisation of a human rights-based approach in the political practices, which will be investigated further in the following case on representative democracy and self-advocacy activities against the election practice of Members of Parliament representing persons with disabilities.

## Case Study on Representation by Members of Parliament and its Downside

The representative democracy has been perpetuated in the Ugandan disability movement with a number of reinforcing factors. One of the main factors is the heterogeneity of persons with disabilities which is challenging to fully recognise, while uniting voices of different categories of persons with disabilities is a useful strategy for making their voices heard. Secondly, the history of social movement is repeated in the Ugandan disability movement pertaining to "The Law of Michels', the Iron Law of Oligarchisation" (Michels 1911 cited in van Houten/Jacobs 2005). Van Houten and Jacobs (2005: 648) claim that social movement requires "a more bureaucratic form of leadership and some degree of specialisation and division

of labour" when gaining power and strengthening itself. Thirdly, development cooperation system that is largely controlled by donors has been pressuring the Ugandan disability movement to make decisions quickly and *efficiently* which is possible only by representatives. Fourthly, when it comes to legal system, it also requires certain procedures which are not often accessible for a majority of Ugandan persons with disabilities. People in Uganda are generally afraid to go to court (Ssengooba 2010) [3] and rather settle the cases out of court because they are too poor and some are illiterate, which helps to explain why there are so few court cases on disability rights. It can be argued that the incapability of the legal system to meet the needs and concerns of persons with disabilities has been one of the reasons for the emphasis on the popularity of the representative political system described above.

The political representation is definitely one of the biggest achievements of the Ugandan disability movement to date. Nevertheless, the majority of persons with disabilities at the grassroots still live in disabling environment. In other words, *self*-advocacy has been largely guaranteed by representatives of persons with disabilities only and not by many of their constituencies on the grassroots. In this regard, this political representation might be even contributing to reinforce the status quo with or without intention. On the one hand, the Members of Parliament have been making impacts for disability rights at the national level especially regarding law and policy enactment. On the other hand, the research project also observed the downside of the too powerful Members of Parliament in Uganda. This part elaborates mainly on this downside of the *representative democracy* and their elections in the Ugandan movement today.

Some Members of Parliament are playing big roles in the disability movement because they have very often experiences as chairpersons or board members in DPOs. As the NUDIPU electoral structure for its election for board members has been utilised for the national election for Members of Parliament representing persons with disabilities, board members of NUDIPU are likely to be elected by the same voters for elections of Members of Parliament. Hence, there have been visible interventions on DPOs by the Members of Parliament, particularly on general assemblies of NUDIPU. Many anonymous informants who were the delegates of the general assembly of NUDIPU in 2008 expressed that some Members of Parliament campaign for candidates who would not threaten

their positions as the Members of Parliament in the following national election. More precisely, the Members of Parliament bribed many delegates to vote for certain candidates for such individual gains rather than for the collective gain to develop and strengthen the Ugandan disability movement further.

Moreover, the voters are composed of four delegates from 56 districts following the old district system, while currently there are 112 districts. The four delegates should consist of a person with a physical impairment, a blind, a deaf and a woman. In the general assembly of NUDIPU in 2008, there were 243 eligible voters present, of which 113 were women. 116 were categorised as persons with physical impairments, 59 blind, 57 deaf and one represented three DPOs, namely Mental Health Uganda (MHU), Epilepsy Support Association of Uganda (ESAU) and Uganda Parents Association for Children with Learning Difficulties (UPACLED). Outgoing board members also had the right to vote, while two votes were additionally entitled to deaf and blind representatives each to give affirmative action to balance the dominance of persons with physical impairments. According to this electoral structure, many persons with other disabilities such as persons with psychosocial and intellectual disabilities are largely excluded in a systematic manner. At the same time, the number of voters is too few to represent a vast number of persons with disabilities in Uganda which is estimated to be as high as 20% of the population in the Uganda Demographic and Health Survey 2006. That is to say, the level of *representation* achieved by this representative democracy is questionable. In the aforementioned General Assembly, this was questioned but did not change the Constitution of NUDIPU to accommodate more voters. This decision is of benefit to the Members of Parliament firstly because it will not enlarge candidacy to persons with other disabilities and secondly because their supporters remain the same.

There are people trying to tackle the abovementioned deficiencies of the system. In 2006, there was also an electoral petition by three candidates that ran in the parliamentary elections; they alleged that the elections were not free and fair. Later, in September 2010, the Constitutional Petition No. 40/2010 "by the Disability Movement to the Parliament of Uganda for the amendment of Laws and Regulations providing for the electoral procedures for Parliamentary and Local Council representatives of persons with disabilities", prepared by a DPO Legal Action for Persons with Disabilities Ugan-

da (LAPD), was filed with the Constitutional Court of Uganda; the petition was scheduled on 22nd July 2011. The elections have become political power games of individuals, while disability substance has been undermined. In the petition, it is stated that many clients and partners of LAPD had expressed dissatisfaction with the current electoral system of their representatives to the Parliament and Local Councils; this was the root cause that initiated the process towards the petition. The purpose of the petition is to highlight the weaknesses in the electoral laws for representatives of persons with disabilities, as well as singling out the main challenges that persons with disabilities face in the electoral process.

The issues pertaining to the electoral process that were raised in the petition were twofold. The first issue the petition raises has to do with the fact that all five Members of Parliament representing persons with disabilities are elected by an Electoral College, as the current system requires formation of one National Electoral College, which elects all the five Members of Parliament. According to the petition, this rises *absurdities*, such as the deviation of the procedures from the regulations of the Constitution (which demarcates Uganda into constituencies) and the Electoral Commission Act (which gives a right to a voter to vote in a parish or ward in which he or she is registered); the phenomenon that candidates are voted on the basis of other factors and not expected effective representation (because the system requires delegates to vote for a candidate three quarters of whom he/she will not represent) and; the system imposes an unnecessary burden on the candidates who have to campaign in all the regions of the country (in order to get support). According to the petition, the current system favours sitting Members of Parliament and rich, well-resourced candidates, and that a new candidate with minimal resources will find it difficult to successfully compete.

The second issue the petition raises has to do with the involvement of the NUDIPU structure in the election process. Firstly, NUDIPU is a non-governmental organisation (NGO) registered under the NGO Board Act and the Companies Act, as a company limited by guarantee, and can be wound up by a resolution of members. Furthermore, it's internal management and democratic practices are not provided for by law and therefore it is not, according to the petition, suited for being part of an electoral process. Secondly, NUDIPU was formed by persons with disabilities as an activist organisation to fight for their rights and dignity, and therefo-

re its involvement in elections would, according to the petition, compromise the mandate for which it was formed. Further, the petition argues that from past experience of previous elections, the Electoral Commission does not provide sufficient funds to enable NUDIPU carry out election of delegates to the National Electoral College and at the end of the day NUDIPU gets blamed when delegates are not properly elected.

The petition also proposes recommendations of laws governing the electoral process, which basically emphasise the utilisation of Sub County, District, Regional and National Electoral Colleges, consisting of registered voters with disabilities. At each level it is emphasised that as the numbers of delegates are determined by the Electoral Commission, there needs to be consultation with the disability movement. The petition also recommends that: the National Council for Disability shall draw up voters registers of the Electoral Colleges and publish them as provided in the electoral laws; affirmative action pertaining to women with disabilities should be maintained; the relevant legislation should be amended to reflect the changes that are proposed in the petition and the Electoral Commission should start early the process of election of representatives of persons with disabilities to avoid mistakes resulting from conducting elections in a hurry. At the time of the writing of this article, no date has been fixed for the matter to be heard.

## Discussions and Concluding Remarks

Based on the principle of non-discrimination in a human rights-based approach, persons with disabilities have been finally mainstreamed into human rights and development discourses, at least in theory, and in the Ugandan political sphere in practice. The example of political representation in Uganda using the affirmative action policy has both positive and negative implications, based on the findings of our multidisciplinary project. A few negative aspects were described above. As for the positive ones, self-determination exercised in the elections is considered as the sign of democratic capacity, which is not a charity but an entitlement. Persons with disabilities who are too frequently and disproportionally at the bottom of the social stratification gain the decision-making power for their own representatives, as non-disabled peers do. Thus ownership and participation of persons with disabilities in the form of election activities is a process towards mainstre-

aming. Many voters as well as candidates were also empowered through role models, solidarity and/or entitlement. Experiences are mixed, which has led to discussions and dialogues of many stakeholders of the Ugandan disability movement so as to reassure better operationalisation of its human rights-based approach. Discussions on this theme have progressed to legal action in this specific case, though legal procedures are not necessarily the way forward, particularly in a non-confrontational context as Uganda. The article introduced this case not to promote legal action as a form of human rights-based approach but to illuminate the link among self-determination, self-advocacy and internal diversity of the Ugandan disability movement. Hence, not only the predominant twin-track approach of empowerment and mainstreaming, but the third track of continuous and constructive dialogues, negotiations and information dissemination has some practical implications. The third track has been promoted by the Finnish government particularly in the policy discussion at the diplomacy level to include disability into mainstream discourse (European Commission 2010: 122). However, the projects' findings highlight the significance of the third track at all levels including the grassroots level and also within the disability movement. Further research is needed to elaborate on this third track to articulate prerequisites for and to secure self-determination and self-advocacy of persons with disabilities.

## Notes

1 Acting chairperson of the National Council for Disability, personal interview by Katsui on 4.2.2008 at Kampala.

2 Chairperson of the NUDIPU, personal interview by Katsui on 31.1.2008 at Kampala.

3 Ssengooba, M, personal communication (e-mail) by Kumpuvuori on 25.7.2010 (on file).

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*Zusammenfassung*: Dieser Artikel basiert auf Ergebnissen des Forschungsprojektes „Human Rights-Based Approach to Disability and Development: Interplay of Disability-Sensitive Development Cooperation and National Policy in Uganda" im Zeitraum 2007 bis 2012. Das Projekt ist fachübergreifend und interdisziplinär angelegt. Dieser Artikel nimmt insbesondere die Identifikation und Voraussetzungen in den Blick, ohne die eine Selbstvertretungsarbeit von Menschen mit Behinderungen und der sie repräsentierenden Organisationen (DPOs) sehr schwierig ist. Zu Beginn des Artikels wird die Ugandische Behindertenbewegung untersucht. Im Weiteren wird eine Einzelfallstudie über Mitglieder des Ugandischen Parlaments als eine Form von repräsentativer Demokratie und ihrer Kehrseite vorgestellt. Der Artikel endet mit einigen Überlegungen darüber, wie Selbstbestimmung und Selbstvertretung von Menschen mit Behinderung in Uganda vorangetrieben werden kann, einschließlich eines Plans für zukünftige Forschung. Alle Erläuterungen basieren auf Ergebnissen der empirischen Studien aus dem vorher genannten Forschungsprojekt.

**Résumé:** Cet article se base sur les résultats de la recherche intitulée « Approche du handicap et développement basée sur les droits : interaction d'une coopération au développement et d'une politique nationale sensible au handicap en Ouganda », menée entre 2007 et 2012 comme projet pluridisciplinaire. Le focus est mis en particulier sur l'appropriation et les préconditions sans lesquelles les tâches d'autopromotion pour les personnes handicapées et leurs organisations (OPH) est très difficile. Cet article commence par explorer le mouvement des personnes handicapées en Ouganda. Une étude de cas sur des membres du parlement ougandais comme forme de représentation démocratique avec ses inconvénients est présentée. L'article conclut par des considérations sur comment l'auto-détermination et l'autopromotion des personnes handicapées en Ouganda pourraient être renforcées, y compris un calendrier pour des recherches futures. Tous les arguments sont basés sur les résultats empiriques du projet de recherche mentionné plus haut.

**Resumen:** Este artículo se basa en los resultados de un proyecto de investigación multidisciplinario sobre la discapacidad y el desarrollo en Uganda que se llevó a cabo entre 2007 y 2012. El objetivo particular de este artículo se refiere a las condiciones que son necesarias para el trabajo de auto-representación de las personas con discapacidad y sus organizaciones. El artículo comienza con una exploración del movimiento de la discapacidad en Uganda. Después se presenta un estudio de caso sobre los parlamentarios de Uganda como una forma de democracia representativa y sus desventajas. El artículo concluye con algunas reflexiones, como en Uganda la auto-determinación y auto-defensa para las personas con discapacida puede ser promovida, incluyendo una agenda de investigación futura. Todos los argumentos se basan en los resultados empíricos del estudio mencionado.

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# A Fair Share from the *Development Pie*: Disability in the Ethiopian Poverty Reduction Strategy Papers Process

Dagnachew B. Wakene

While a plethora of local and international development pundits have written, and continue to write, extensively on Ethiopia's ongoing *economic boom*, little has been said about if and how this acclaimed development enterprise aims to accommodate an often ostracised, cross-sectoral socio-economic theme, viz. disability. This article [1] provides an analytical glimpse at the extent of disability inclusion in the Ethiopian development agenda vis-à-vis the role and impact thereon of the country's disability movement [2], with a particular emphasis on Poverty Reduction Strategy Papers (PRSPs). The paper offers disability stakeholders in Ethiopia, as well as those in other countries with similar socio-economic stature to that of Ethiopia, a timely evidence that would encourage further research undertakings and inform relevant policy interventions.

## Background

"Where, after all, do universal human rights begin? In small places, close to home - so close and so small that they cannot be seen on any maps of the world. Yet they are the world of the individual person; the neighbourhood he lives in; the school or college he attends; the factory, farm, or office where he works. Such are the places where every man, woman, and child seeks equal justice, equal opportunity, equal dignity without discrimination. Unless these rights have meaning there, they have little meaning anywhere. Without concerted citizen action to uphold them close to home, we shall look in vain for progress in the larger world"
(Eleanor Roosevelt 1948: unpaged).

The above quote is, I believe, a brief, yet profusely illustrative, encapsulation of what it pragmatically means to create an all-inclusive society in which everyone can fully participate - the very premise on which this article bases itself.

The now Federal Democratic Republic of Ethiopia is a country of three thousand years old, located in East-Central Africa (commonly known as the *Horn of Africa* region). It covers an area of over 1,127,127 square kilometres, making it the ninth largest country in Africa (see Figure 1). According to the latest National Population and Housing Census carried out in 2007 by the Ethiopian Central Statistical Agency (CSA), Ethiopia is currently the second most populous nation in Africa with an estimated population of over 80 million, just next to Nigeria.

Poverty and inadequate socio-economic participation of persons with disabilities (PWDs) have, since time immemorial, been the distinctive features of the disability sector and movement in Ethiopia (ENAELP 2004). Persons with disabilities form part of every community and
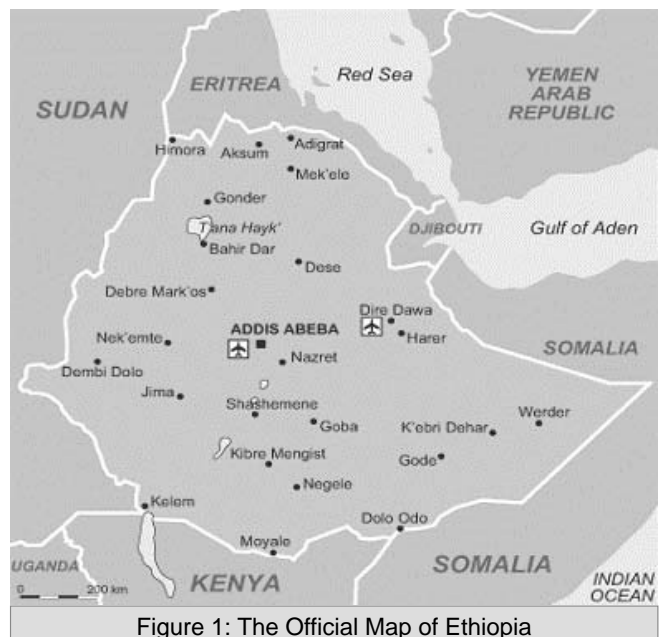

Figure 1: The Official Map of Ethiopia

often represent the majority of the most disadvantaged and underprivileged sections of society (Reed 2005). Studies have shown what they describe as the *intrinsic linkage* between poverty and disability, whereby the former can be considered as both the cause and consequence of the latter (UNCSD 2008). These factual assertions become evident when we look at the situation in Ethiopia - one of the least developed nations in the world where the bi-directional link between disability and poverty can noticeably be observed.

## Disability in Ethiopia: A Bird's Eye View

Needless to say, the definitions accorded to the term *disability* in the Ethiopian context, as in other countries, have significantly changed over the years in tandem with corresponding changes in international outlook and standards. The

earliest officially documented definition was incorporated in what was known as the *Rehabilitation Agency for the Disabled Order No.70/1971*, declared during the imperial regime of Emperor Haile Selassie I (1930-1974). This document defined PWDs as those "who, because of limitations of normal, physical or mental health, are unable to earn their livelihood and do not have anyone to support them; including any persons [sic] who are unable to earn their livelihood because they are too young or too old." This individualised and medically-charged definition had obviously dominated the general understanding of disability in Ethiopia, as it did elsewhere, up until a new, contemporary discourse emerged by virtue of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD). Thus, a recently enacted proclamation dwelling on the employment conditions of PWDs [3] has introduced a social-model oriented, albeit employment-specific, definition of disability as a cumulative effect of the interaction of one's "physical, mental or sensory impairments *in relation with* social, economic and cultural discriminations" (Proclamation No. 568/2008: Article 2(1), emphasis mine).

The absence of up-to-date statistical evidence on disability issues in Ethiopia makes it difficult to state specific figures that demonstrate the vicious cycle of relationships between poverty and disability prevalent in the country. What may be considered as the latest, relatively comprehensive, statistical data available is the nationwide disability-specific survey commissioned in the year 2002 by the Japan International Cooperation Agency (JICA), according to which PWDs constitute 7.6 per cent of the Ethiopian population (JICA 2002). Even this survey, however, was primarily based on an inadequate census input provided by the National Population and Housing Census conducted in 1994, which barely carried a credible data on disability. Some of the major factors that have curtailed the availability of reliable disability-specific information in Ethiopia are, *inter alia*, unscientific definitions accorded to disability and PWDs; confusion or misconception of terminologies; and the unwillingness of families, due to cultural reasons, to disclose their members with disabilities (FENAPD 2010).

Attempts to ensure the involvement of PWDs in socio-economic and political endeavours of the country have been paltry, if not inexistent, for decades. The current Ethiopian Constitution, promulgated in 1995, is said to be the first constitution ever to mention the word *disability* in one of its provisions: Article 41 of the Constitution of the Federal Democratic Republic of Ethiopia (1995) reads: "… the State shall, within its available means, allocate resources to provide rehabilitation and assistance to the physically and mentally disabled" (FDRE Constitution 1995: unpaged). Also, recognition accorded to disability matters by the government and other pertinent stakeholders in Ethiopia has indeed improved over the past few years. Nonetheless, the continued apparent exclusion of PWDs from socio-economic and political participation, coupled with entrenched anachronistic attitudes towards disability, are markedly constraining the disability sector and its contribution to development and poverty reduction efforts underway in the country to date, as evidenced in the following sections of this article.

## Role and Involvement of Persons with Disabilities and Disabled People's Organisations in the Ethiopian Poverty Reduction Strategy Paper Process

Two rather contradictory realities emerged from the views expressed by participants [4] of the study on which this article is based. On the one hand, it was admitted that Ethiopia has been undergoing a considerable process of development in the past decade or so, as also affirmed time and again by international development commentators. The 2011 Human Development Report (HDR), for instance, stated that although Ethiopia is still one of the least developed countries in the world its economic progress over the past ten years makes it one of the top ten *movers* in Sub-Saharan Africa (UNDP 2010). Additional literature shows that most, if not all, of the ongoing Ethiopian development policies, including the country's implementation of the United Nations Millennium Development Goals (MDGs), are underpinned by a pro-poor orientation (Porter 2009; ILO 2002). On the other hand, however, it is equally evident that these pro-poor policies have consistently precluded a segment of society that is known to constitute a substantial portion of the poor – namely, PWDs. And this is the point at which the factual paradox becomes apparent: *pro-poor* policies of poverty eradication that do not take the poorest of the poor, including PWDs, properly into account. An analysis of some key features explaining the status quo would be mandatory at this juncture.

### A Share from the *Development Pie*

Ethiopia was among the first subscribers to the Poverty Reduction Strategy Paper (PRSP) notion

since the very onset of this poverty alleviation model in 1999/2000. As Figure 2 illustrates, the PRSP process dictates that it be essentially predicated upon broad-based consultations of all layers of society, involving the poor themselves as its integral part (ILO 2002). A substantive reading of all of the PRSP regimes so far formulated and implemented by Ethiopia reveal that disability has hardly been considered as a matter of serious development concern. Three PRSP documents have been formulated by the Ethiopian government between 2000-2011. Representatives of PWDs interviewed in this study have all provided firsthand accounts of the actual level of involvement by PWDs and their organisations in the processes and subsequent adoptions of the three PRSP documents.



Figure 2: Stages in the PRSP Formation Process

According to these firsthand accounts, at the time when the first PRSP, known as the *Sustainable Development and Poverty Reduction Plan (SDPRP),* was released in 2000/01, the situation was such that the disability movement was not adequately aware of the existence of the PRSP process, which was a fairly new concept back then. Hence, PWDs and Disabled People's Organisations (DPOs) did not pursue the idea of partaking in that process, mainly because of their lack of awareness about PRSPs. Put otherwise those years were, as one of the participants described, "completely missed years" for the disability movement and its interests in the SDPRP. A somewhat similar phenomenon was recorded in other countries as well concerning the incorporation of disability in their respective first PRSPs (ILO 2002; Dube 2005).

When the second Ethiopian PRSP was introduced in 2005/06, a more vibrant and concerted effort of disability stakeholders was observed with a view to ensuring recognition of disability in the second document, named the *Plan of Action for Sustainable Development to End Poverty (PASDEP).* Due to lessons drawn from their passive reaction to the first PRSP, DPOs and other disability-focused Civil Society Organisations (CSOs) and Non Governmental Organisations (NGOs) had vigorously attempted to have their voices heard at various levels of the PASDEP formulation process. These efforts culminated in the establishment of a Task Force composed of most disability stakeholders and

relevant government departments in order to lobby the authorities involved in designing the PASDEP, primarily the Ministry of Finance and Economic Development (MoFED) – the Office in charge of PRSPs in Ethiopia. In response to these moves, official promises were said to have been made by some key government ministers to the effect that the PASDEP would eventually incorporate disability matters. But, as it turned out, promises were not kept and disability had once again remained invisible in the second Ethiopian PRSP, while similar documents developed in other African countries within this time frame had incorporated disability, effectively grasping their lessons from the failures and experiences of their first PRSPs (Dube 2005).

This study posits that the main reasons underlying the successive exclusion of disability issues from the first and second PRSPs of Ethiopia were, *inter alia*:

- Low level of awareness, both within the disability movement and among pertinent government officials, about disability inclusion in PRSPs;
- Lack of coordination and strategic discourse, again both within the disability movement and among relevant government offices alike;
- Capacity constraints (be they human and/or financial) permeating the country's disability movement;
- Inaccessibility of most of the PRSP discussion venues, hence indirect discrimination trends, which made it practically difficult for PWDs to engage in these fora, even in cases where they were invited to attend.

A PRSP Discussion Paper produced in 2002 by the International Labour Organisation (ILO) outlined some other factors generally leading to the exclusion of disability from PRSPs, which apply *ipso facto* to the Ethiopian situation as well; the Discussion Paper says "it might be that PWDs have not been able to formulate their needs and/or they were overruled by more powerful or vocal stakeholders when it came to negotiating a consensus. It might also be that they have not succeeded in convincing the government that practical solutions for socio-economic integration of PWDs are possible" (ILO 2002: unpaged).

When these factors are aggregated, they enunciate *voicelessness* as a principal facet of the poverty and exclusion of PWDs and the disability movement as a whole.

A recollection of pertinent provisions of the UNCRPD, which Ethiopia has ratified in July 2010, appears befitting at this point. The UNCRPD declares the "full and effective partici-

pation and inclusion of PWDs in society" as one of its foundational principles (UNCRPD 2006). The Convention demands that State Parties should "closely consult and actively involve PWDs through their representative organisations" in designing and implementing the Convention and in all other "decision-making processes concerning issues relating to PWDs" (UNCRPD 2006: Art. 4(3)). One of the main pieces of national policy that certainly is of concern to PWDs is the PRSP and decisions related thereto, including implementation of the MDGs, which are part and parcel of the tenets of poverty reduction. Thus, it follows, the full inclusion and effective participation of PWDs and DPOs in the preparation of these documents, from the very outset, is not only a fundamental right of PWDs but the legal duty of the government executing these development strategies.

In a rather striking development, the newest and third PRSP document of Ethiopia, called the *Growth and Transformation Plan (GTP)*, publicised in 2010, has alluded to disability in a manner never done before by its two predecessors - a phenomena perceived by the disability movement as an encouraging move in the right direction, notwithstanding the delays seen in getting to this stage.

The GTP addresses disability and PWDs solely as "welfare cases" conjoined with issues pertaining to the elderly (MoFED 2010). Admittedly, though, the points incorporated in this document make clear attempts to adhere to contemporary beliefs about disability as defined in the *social* and *human-rights based* models. A review of the relevant paragraphs of the GTP is important to further elaborate where and how exactly disability is addressed therein.

Section 8.3 (Social Welfare section) of the GTP sets the following as its "Strategic Direction":

"On the course of promoting the economic and social development of the country, the social welfare main emphasis lies in protecting rights and facilitating conditions which will enable persons with disability and older people to use their abilities as individuals or in association with others to contribute to the development of society as well as to be self-supporting in the political, economic and social activities of the country [...T]he programs that are implemented for people with disabilities (PWDs) are programs that aim in preventing disability by providing education and training for PWDs and rehabilitating them to have equal access and opportunities as well as by providing information

about disability and PWD, changing the society's attitude towards disability and PWDs positively." (MoFED 2010)

It appears, therefore, that the GTP does envisage the active participation and contribution of PWDs, and in stating its chief objectives, it says: "the objective of the sector's plan is [...] making sure the involvement of all relevant stakeholders in promoting social welfare services in an inclusive manner; identify social welfare problems and take corrective measures, in view of supporting the nation's poverty eradication endeavour to promote activities that will benefit people with disabilities and the elderly" (MoFED 2010).

As its *mechanisms of implementation*, the GTP outlines a list of strategies addressing a fairly wide spectrum of matters, such as, the effective integration and empowerment of PWDs, promotion of equal rights, accessibility and reasonable accommodation, as well as raising public awareness about disability. The document goes on to state that it will endeavour to boost social welfare services and research regarding welfare; although nothing has been explicitly said on the pressing need and promotion of disability-focused research.

When seen in the light of what a sufficiently disability-inclusive PRSP is supposed to contain, the following can be raised as shortcomings of the GTP:

1. Lack of a *cross-sectoral approach*, which is believed to be the "most preferred mechanism of disability inclusion in PRSPs" (ILO 2002: unpaged). We do not see disability mentioned in the sector-wide plans enumerated and detailed by the document;
2. Disability treated solely as a "welfare case", as opposed to a multi-faceted socio-economic condition;
3. Specific differences between disability and issues of the elderly not satisfactorily delineated, should the two be placed together in the first place.

## Government Bureaucracy and the Quest for Multi-Sectoral Integration

It was observed in this study that the Department of Rehabilitation at the Ministry of Labour and Social Affairs (MoLSA), which is the only office *de jure* in charge of disability affairs in Ethiopia, has not been active enough in meeting the increasing needs of PWDs. Participants underlined that a *multi-sectoral integration* of disability in the PRSP would provide sustainable solutions to a range of matters. It ensures, first and foremost, that PWDs would be able to meaningfully avail themselves of each sector in ac-

cordance with their respective needs. Thus, for instance, a DPO seeking the modification of a certain new road structure to fit to the needs of PWDs would no longer have to go to MoLSA looking for remedies; but instead to a pertinent department specialising in disability affairs at the Ethiopian Roads Authority. Such a practice would also relieve MoLSA of the overwhelming technical and budgetary pressure stemming from being the only government office in charge of a broad crosscutting theme such as disability, on top of several other social affairs (Wakene 2006).

Creating a disability-specific ministry can be another helpful and complementary measure, said participants of the study. The essential qualification required of such a ministry is to be knowledgeable about the different sector policies and programs relevant to disability, so as to be able to firmly advocate for the interests of its target group (PWDs) in negotiations with line ministries and the government as a whole. Hence, instead of being the specialist merely of disability matters, this ministry would have to be what some authors refer to as the *all-round connoisseur* of a whole set of sectoral policies and programs (ILO 2002). As such, it would have both the competencies and necessary access to the relevant information channels that would allow it to closely follow up on sector policies. It is, therefore, suggested that one of the interventions of a PRSP document that adequately appreciates the crosscutting nature of disability should be the redefinition of mandates and the consolidation of competencies of office(s) in charge of disability; or, perhaps, the creation of one.

It is worth noting here that both the multi-sectoral narrative as well as the creation of a disability-specific ministry entails their respective limitations in realistic terms. While the former could run the risk of inadequate expertise and specialisations in disability matters, the latter could often be too specific to be sufficiently reckoned with in macro-economic policy deliberations and planning. Maintaining a balance somewhere in between these ends is, therefore, of an inevitable importance. In what seemed to have been a potential proclivity towards multi-sectionalism, a legislation promulgated in 2010 by the Ethiopian government delineating the powers and duties of ministries alludes that all government ministries have the duties to "create conditions whereby persons with disabilities benefit from equal opportunities and full participation." [5] Whether this provision intends to introduce a cross-sectoral approach *strictosensu* is still subject to interpretations.

All in all, a disability-inclusive PRSP makes sense only as a *comprehensive and coherent whole* of different sectoral parts that incorporate disability and their representative organisations. The interrelation and systematic aspect is indeed decisive: programs designed to ensure access to education for PWDs would remain futile if the provision of assistive devices and appliances, the accessibility of schools, public and private facilities, and the employability of PWDs are not simultaneously ensured in a coherent manner. Each element depends on all the others, and all of them are directly or indirectly elements of the PRSP and its strategies (ILO 2002; Porter 2009). Introducing one or the other element into the PRSP is almost of no use without a comprehensive and coherent whole. It is of course true that in poor and developing economies like Ethiopia, it might be unavoidable to add one important dimension into the multi-sectoral ideology; that is, *prioritisation*. Given the various widespread socio-economic challenges that Ethiopia faces, we should not expect a scenario where the needs of PWDs would be met altogether. Be that as it may, though, the country's PRSP is supposed to serve as a progressive realisation tool in both recognising and prioritising the needs of PWDs in the development agenda, with the ultimate goal of ensuring a full-fledged inclusion of PWDs (Zeleke 2009).

## Imminent Challenges and Opportunities

Finally, this study analysed extant challenges and opportunities facing the Ethiopian disability movement and its role in the country's development arena. Ongoing trends of promulgating new disability-related laws, and reforming existing ones, were brought up by participants of the study as opportunities deserving recognition. Examples included accessibility provisions of the *Building Code* currently enacted at the Federal level [6], the employment proclamation on the rights of persons with disabilities [7], and the development of a draft framework of *special needs education* on Technical and Vocational Education Training by the Ministry of Education (MoE), in collaboration with DPOs. Advancements seen in the education sector, in particular, were underscored by participants as *role model*s that ought to be emulated by other sector-ministries in the country. The other progress highlighted as *breakthrough* was the mentioning of disability for the first time in the latest and third PRSP document of Ethiopia – the GTP. Participants said that, even though

disability was acknowledged in the GTP only as a matter of *social welfare* and far less than what they had hoped for, this document should be considered as a notable move in the right direction. In July 2010, the government of Ethiopia ratified the UNCRPD, which is also another cornerstone development, participants added.

In parallel with the foregoing opportunities *in* and *for* the disability movement, challenges facing the movement have also been patently pointed out by participants. Capacity restraints, insufficient coordination and discourse amongst disability stakeholders were highlighted as major challenges. But, most importantly, in a measure that created some real concerns about the very survival and functioning of DPOs in Ethiopia, the government has recently passed a legislation that virtually impels a fundamental reformation of all non-governmental organisations and civil society initiatives operating in the country. This law, called the *Ethiopian Charities and Societies Proclamation No. 621/2009*, declares that if a civil society organisation opts to work on issues akin to rights advocacy, and this obviously includes disability advocacy, it should generate 90 per cent of its budgetary demands *only* locally, and not from an international funding of any sort. The law goes on to say that organisations which would prefer procuring more than ten per cent of their budgets from foreign sources can only work as what it dubs as *Resident Charities* or *Societies* focusing merely on *relief and development* activities without any involvement in acts of advocacy (Proclamation 621/2009).

Knowing that most, if not all, DPOs in Ethiopia have been operating by virtue of various international working collaborations and the financial supports emanating thereof, the aforementioned new legal restrictions would without a doubt curtail their overall work on advocating for the rights of PWDs in Ethiopia. In the course of this study, I discovered that this impact has already begun to be felt within the Ethiopian disability movement in different forms; a case in point being the split currently occurring within the Federation of Ethiopian National Associations of Persons with Disabilities (FENAPD) – an umbrella organisation of national DPOs. As a direct consequence of the new law, the Federation faced the challenge of being divided into two, between its members wanting to stick to their advocacy work, and those considering their reformation as *development NGOs* since they cannot exist without some external funding. FENAPD is now re-registered as a *Resident Charity* deciding to become

more of a relief and development entity than one of advocacy; and its member associations that decided to follow this same path have continued to remain within the Federation. Consequently, some of the *bona fide* founding members of FENAPD that refused to abandon their work on advocacy for disability rights are leaving the Federation, thereby notably reducing the size and cogent influence of the latter.

It goes without saying that advocating for the rights of PWDs is considered to be an *inherent* ingredient of the activities of DPOs in any given nation. In a country like Ethiopia, where the rights, dignities and socio-economic participation of PWDs are still far from being well-recognised, there is no doubt that an increasingly larger scale of disability advocacy is indispensable. The UNCRPD, to which Ethiopia is a party, also vehemently calls for an elevated momentum of advocacy for the rights of PWDs between, among and within the jurisdictions of each State Party to the Convention. Thus, it can be concluded, the said new legal restraint in Ethiopia should be essentially revisited by the government in a manner that pre-empts the deterioration of the country's disability movement, which has only been burgeoning over the past decade or so.

## Acknowledgements

## Notes

1  The article presented herein is based on the author's graduate research conducted between January to December, 2011 (and updated in August, 2012) within the auspices of Stellenbosch University, South Africa. The full and original version of the research can be retrieved at www.scholar.sun.ac.za/bitstream/handle/10019.1/.../wakene_role_2011.pdf.

2  The term *movement* is generally described as "the organisation or gathering of people around a certain issue or set of issues; or around a set of shared concerns and common interest" (Campbell and Oliver, 1996). As such, for purposes of this article, a *disability*

*movement*, can be said to encompass all organisations, individuals and/or groups, the primary agenda of whom pertains to promoting the rights of persons with disabilities.

3  The *Right to Employment of Persons with Disability Proclamation* No. 568/2008.

4  Respondents were selected from various DPOs, relevant government ministries, disability activists, disability-focused and other pertinent local and international Non Governmental Organisations (NGOs), Community Based Organisations (CBOs), professional associations and other Civil Society Organisations (CSOs).

5  A Proclamation to Provide for the Definition of Powers and Duties of the Executive Organs of the Federal Democratic Republic of Ethiopia (Proclamation No. 691/2010, Article 10(5)).

6  The *Ethiopian Building Proclamation* No. 624/2009.

7  The *Right to Employment of Persons with Disability Proclamation* No. 568/2008.

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***Zusammenfassung:*** *Während eine Fülle von nationalen und internationalen Experten umfangreich über Äthiopiens anhaltenden ökonomischen Boom geschrieben hat und immer noch schreibt, ist wenig darüber gesagt worden, ob und wie diese Entwicklung ein oftmals ausgeschlossenes, sektorübergreifendes sozio-ökonomisches Thema, nämlich der Behinderung, berücksichtigt. Dieser Artikel [1] vermittelt einen analytischen Einblick auf das Maß der Inklusion behinderter Menschen in der äthiopischen Entwicklungsagenda im Vergleich zur ihrer Rolle und deren Auswirkungen auf die nationale Behindertenbewegung [2], mit dem Schwerpunkt auf den Strategiepapieren zur Armutsbekämpfung (PRSPs). Dieser Artikel bietet Interessensvertretern von Menschen mit Behinderung in Äthiopien, als auch denen in anderen Länder mit ähnlichen sozio-ökonomischen Gegebenheiten, zeitgemäße Anhaltspunkte, die weitere Forschungsvorhaben fördern und relevante politische Interventionen prägen wollen.*

***Résumé:*** *Alors que d'innombrables experts du développement ont écrit et continuent à écrire à satiété sur le boom économique éthiopien, il n'a pratiquement pas été dit si et comment cette très louée entreprise de développement entend prendre en compte un sujet socio-économique intersectoriel trop souvent ostracisé, en l'occurrence le Handicap. Cet article fournit un aperçu analytique sur l'ampleur de l'inclusion du handicap dans l'agenda de développement éthiopien, en particulier dans les stratégies de réduction de la pauvreté (PRSP), en regardant le rôle et l'impact du mouvement des personnes handicapées. Cet article apporte aux acteurs du handicap en Ethiopie ou dans les pays comparables des éléments opportuns pour encourager à entreprendre des recherches futures et informer les politiques actuelles.*

**Resumen:** *Mientras una variedad de desarrolladores locales e internacionales escriben extensamente sobre el boom económico de Etiopía, el tema de la discapacidad no tiene lugar aqui. Este artículo ofrece una mirada analítica al desarrollo de la inclusión de las personas con discapacidad, su integración en la agenda de desarrollo de Etiopía así como el papel y el impacto del movimiento de la discapacidad en el país. Una enfoque especial de atención reciben las estrategias de reducción de la pobreza. Los resultados del estudio indican la necesidad de intervenciones políticas y proporcionan sugerencias para futuras investigaciones.*

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# Disabled People's Organisations in India: Empirical Realities from the Grassroots

Nandini Ghosh

Over the past few years in India, alliances of persons with disabilities, termed as Disabled People's Organisations (DPOs) are being forged at the local levels in order to initiate localised disability advocacy struggles, in order to bring about a perceptible change in the status of disabled people. This paper explores the formation and genesis of such DPOs in different parts of India and the processes whereby these groups have engaged with the goals they were set up for. The paper attempts to assess the extent to which these groups have been able to achieve a movement for change of social attitudes at the grassroots level and the resultant effect it has on their identities.

## Introduction

In India the emergence of a disability rights movement has practically started post the 1995 landmark legislation that for the first time ensured some basic rights for disabled people. The politics of disability in India has followed a different trajectory in India, as the national level leadership of disabled people was unable to reach out to the people living at grassroots level. The void was filled up by Non-Government Organisations (NGOs) who took up the task of developing collectives of persons with disabilities at local level, who would then be able to rally against the oppression faced by them on a daily basis at the local level. The vision of the action taken up was to gather people with different impairments together, to help them to identify themselves as a disabled person and to understand the ways in which experience oppression as a consequence.

Disabled People's Organisations (DPOs) are usually collectives of disabled people operating at the grassroots level, who have come together for the specific purpose of combating the marginalisation they face in everyday life due to the social structures and systems within their own communities. Most of the DPOs in India are cross disability groups as it is difficult to find many members of one single disability in the same neighbourhood, locality or village. These people largely are affected by one or more of the ten impairments that have been listed in the two main laws for persons with disabilities in India. DPOs have a minimum membership of five disabled people but can go up to even 20 members – for federations of DPOs the numbers are higher and large Federation in the South have up to 1,000 members. Office bearers of the DPOs are usually selected from amongst the members, although in Federations there are elections held for each post. Most of these DPOs have codes of conduct and norms of functioning usually penned in the register in which they maintain the records of their meetings and other activities. Some of the DPOs are registered with the government either as co-operative societies or self-help groups depending on the terminology used or schemes for different marginalised groups.

This research study was undertaken with the major objective of examining the localised disability advocacy struggles in various parts of the country in order to gain a better and contextualised understanding of the key issues, important events and strategies being used to carve out a disability rights movement, based on development of collective identity for all persons with disability. The study sought to gain a deeper understanding of the processes through which alliances of persons with disabilities are being forged at the local levels – the ways in which NGOs are promoting formation of disabled people's organisations at the grassroots level, the reasons why disabled people are forming groups, and the ways in which they are organising themselves. Further the focus was on exploring the processes by which the DPOs are identifying key issues as concerns for their advocacy, the strategies used by these groups to negotiate the major challenges they face in terms of inclusion in the community in terms of education, health and livelihood as well as in other domains of social life. The aim was also to gain a deeper understanding of the processes of identity formation and reinforcement of certain identity markers for persons with disabilities brought about by the participation in the groups and in the larger movement. Finally the study looked to assess the impact the efforts of these groups has had on the lives of persons with disabilities in terms of changes in structures, systems and processes, and to determine their role in stimulating the disability rights movement at the local, regional and national level.

Data was collected from 19 Disabled Pe-

ople's Organisations (DPOs) from the rural areas of seven different states (Andhra Pradesh, Karnataka, Tamil Nadu, Orissa, West Bengal, Jharkhand, Nagaland) and one Union Territory (Pondicherry) in eastern, north-eastern and southern regions. The reason for selecting the DPOs from these three regions is to map the diversity of disabled people's collectives in India: the first being historical as DPO development in South India started nearly two decades ago while in the east and north east, the process has been initiated fairly recently. The second reason is cultural as South India has a strong movement by under privileged groups ranging from caste to religious minorities, whereas the other two regions, although witnessing social movements, are fairly reactive. Finally the geographical and development spread serve as indicators of civil society – in the south, mostly flat terrain and developed infrastructure poses a contrast against the east and north east where poor infrastructural development coupled with a harsh mountainous terrain pose larger challenges to the unifications of disabled people. However the selection of the DPOs was through key informant technique – through the network of NGOs working in the different areas, the groups were identified and then met in a face-to-face interaction during their group meetings. Data was collected mostly using qualitative techniques of unstructured interviews and focus group discussions with the group members and group leaders.

The member profiles of these DPOs reveal some predictable and some surprising trends. Almost in every group there are more men with disabilities than women. This reflects the Census of India 2001 figures of the total number of disabled men and disabled women in the country. Within the DPOs, as witnessed mostly in South India, the representation of women is less than that of men with the male – female ratio being roughly 60:40 in the groups. However while 80% of the men attend the meetings regularly, only 40% of the women are able to come to the meetings on a regular basis. This disproportionate representation of women in the DPOs has significant consequences with regard to raising and acting upon gender issues within the collectives. This means that issues that are concerned specifically with gender are often overlooked, as the disability oppression is the primary focus with little thought to other interconnecting identities that might lead to the oppression being aggravated. Because of the nature of their impairments and the voice that they have, most of the DPOs are dominated by persons with mild to moderate physical and vi-

sual impairments. The severely disabled people, persons with sensory impairments and mental challenges, remain marginalised within the group even though the groups purport to represent all categories of persons with disabilities. Overtly the group includes as members, people with all disabilities but actually participation and leadership is seen only among the persons with locomotor and visual impairments. Mentally retarded members hardly attend the meetings and are represented by their caregivers. There is very minimal presence of persons with mental health issues and their caregivers in most of the groups, except in some pockets in the south where NGO driven programmes have ensured inclusion of persons with mental illness in the groups.

## Nature and Functioning of the Grassroots Level DPOs

The task of uniting persons with disabilities and forging a common identity based on experience of impairment and discrimination in India has been taken up by grassroots level NGOs. The staff of the mentoring NGOs mention the major barriers they face while trying to organise disabled people into collectives. Their physical and social isolation enforced by combination of their impairments, the social and infrastructural barriers they encounter both inside and outside their homes and the resultant low self-esteem most of them have, influences the joining of groups by persons with disabilities. Lack of proximity becomes a major factor in their coming together as a group, and poses a challenge for mentoring NGOs in grouping them into functional units. "I thought how can I go? Who will take me? Will anyone have time? What can we discuss there? What can I contribute?" says Nishamani, woman leader of Pragati DPO Orissa.

The study reveals that the impetus of forming groups did not emerge from the people themselves. Reddy from the DPO *Vivekanand Viklang Samity* in East Godavari district stated, "The NGO staff told us to form groups as it would help us to fight collectively for our rights. They said that it would be easy to get our rights if we worked together as a group." Not all the disabled people in the area join the groups/DPOs. One person from the *Bharathiyar* disability group in Koppampathi said that there are 35 persons with disabilities in his village but only 13 joined in the group, out of which two attend only irregularly. In Keeranur, there are 80 people with disabilities identified but there are only 40 in the four DPOs working in the area. Within the DPOs there have been debates

about the inclusion of representatives of disabled people, in case of children and those with severe disabilities who might not be able to represent themselves adequately. The barrier to inclusion also comes from within the groups themselves as people with disabilities are also socialised in the same cultural values as rest of society.

## Concern for Livelihood

For many of the village level disabled people who become members of DPOs, the first and foremost concern is of financial security. Most of the disabled people are also living below the poverty line and hence one of the reasons for joining a DPO is to look for means of earning a living, increase their income and to have some savings. Members of the *Deep Jyoti Viklang Samity* in Icchak block of Jharkhand who came to the meeting of the DPO federation all claimed that they call their group a Self-Help Group (SHGs) [1] – "we do not think there is any difference between DPO and SHG. This language helps us to access grants from the state." Hence financial stability has been one of the major motivating factors for forming of DPOs. In Tamil Nadu, in 2004, when the state government decided to provide a sum of Rs. 10,000 to all SHGs in the state, in Tiruvallur for the first time disabled people came forward to form their own SHGs in order to claim the revolving fund. Most of the work done by the DPOs and the Federation in Icchak and Hazaribagh blocks of Jharkhand has been to consolidate and engage persons with disabilities in income generating activities. Moreover groups interested in livelihood activities either individually or even as a group, feel that advocacy for inclusion and equal rights is better achieved once they can secure their daily existence. Putting thrust only on advocacy over self-interest and financial security ensured that the group did not sustain for long.

Almost all the groups who participated in the study have the practice of saving money on a monthly basis, have bank accounts, and perform savings credit activities. Members take loans for various reasons ranging from running petty shop, buying books, school uniforms and paying fees for the children, medical expenses etc. These savings and credit activities have helped the members of DPOs to become self-dependent and earning members of the family and community. Most of the disabled people have actually been able to use the funds generated by the savings activities to either initiate new income generation activities or augment their already existing family businesses, ranging from setting up petty shops, to rearing livestock, to hiring out essential commodities to local workers. One group in East Khasi Hills district, Meghalaya, where most of the members are women, has taken up community kitchen, gardening and farming. In Orissa working together as a group, disabled people have been able to resist pressure of market forces that compel rural producers to sell at rates much below the market rate.

As economic empowerment remains one of the main thrusts, the DPOs have undertaken a lot of advocacy work on livelihood issues. Armed with the Persons With Disabilities (PWD) Act stipulation that disabled people are entitled to 3% reservation in all poverty alleviation schemes, the DPOs have been clamouring for inclusion in the National Rural Employment Guarantee Schemes being implemented in rural areas. These efforts have however met with limited success, depending on the people in charge of the programme in different districts. In the South, successful advocacy has meant that several states have passed exemplary legislation and framed inclusive rules to ensure disabled people enjoy the right to work. Under the National Rural Employment Guarantee Act [2] (NREGA) scheme in Andhra Pradesh, persons with disabilities are allocated work for 150 days for person with disabilities. So, instead of charitable incentives like paying equal wage for less work or paying lesser wages, the strategy has been to provide more work to benefit persons with disabilities and their families.

## Claiming Rights

The study reveals that for most of the disabled people who become members of DPOs, the group is a means to do something for disabled people. *Vasantham* Federation in Tiruvallur district of Tamil Nadu was formed with an objective to provide equal status, justice and equal opportunities to all persons with disabilities. Most of the members of the groups/federations speak in terms of forming a group to realise their rights – the understanding of rights is varied and connected mainly to their basic needs. Members of the *Vasantham* Federation in Tamil Nadu stated, "Rights is what should be provided to us by the government – food, house and shelter." The human rights jargon has percolated down to the grassroots level without proper understanding of what it entails in terms of rights holders and duty bearers and their corresponding obligations. For most group members, their entire life has been characterised by

poverty and thus, the term *rights* is interpreted as entitlements and schemes framed by either central or state government for person with disabilities.

Disabled people who become members of the groups also come to analyse their situation and realise that disabled people who benefit from different schemes are those who are proximate to people in positions of power, while such schemes remain unreachable for the vast majority of people, who are poor and more in need of such provisions. Budhadeb, a leader from the *Pragati* DPO BCpur Orissa, stated, "We had nothing. We didn't even know what provisions are there for disabled people in our country. We did not know there were laws to help us. After we heard from the staff of the NGOs we decided to form a group to ensure that we get the schemes meant for us." Finding comfort in a group or common identity helps disabled people to rally together to demand for their rights and entitlements. Karuppaiah from Keelyur said, "For each individual it is very difficult to get the rights individually, but through *Sanghas* together they can make the change." Disabled members of a *Sangha* in Themmavoor, Tamil Nadu said that they came together for unity and oneness. "If a group of persons together ask for any scheme/ benefits then there is a possibility of getting it." However the schemes that they talk about are mainly the social security schemes like scholarships and pensions, which do not instil empowerment or independence but rather create a sense of dependency among the disabled people. Most of the work has focused on entitlements for persons with disabilities available through various government schemes like pensions, scholarships and some loans through government agencies.

## Advocacy for Rights

The issues chosen for advocacy varying from group to group depending on their concerns but vary regionally as well, although there is some similarity based on the different schemes to be found. The age and maturity of the DPO also decides the range of advocacy activities that are taken up by them. Comparing the mission and vision statements of the 19 DPOs, it is evident that these disabled people's organisations in India have been formed around the issues of social and economic rights, with the major focus being on the access to different government entitlements ranging from scholarships, to mobility aids and appliances to loans and pensions as these are the easiest to lobby for and access. The relevance of the so-cial model and an increasing realisation about oppression has been translated into compensatory actions by the governments, whose duty is seen as protection of rights of people with disabilities. As a member of *Samakshya* Orissa explained, "At the Gram *Panchayat* level, we tried to influence the *Panchayat* and worked on issues like documents which have to be acquired from the *Panchayat* like residence certificate, bus pass etc., job cards, getting work under National Rural Employment Guarantee Scheme, entitlements like pensions. We have focussed mainly on disability certificate, aids and appliances, job cards, pensions etc. – helping each other in the group to get these benefits."

Some of the advocacy strategies used by these groups include information sharing, awareness raising discussions, petitions, rallies, blockades, etc. Groups in south India have achieved a reasonable amount of success in engaging government systems and non-governmental bodies to respond to their demands, especially with regard to access to entitlements and financial processes, mainly writing petitions, taking out rallies and staging *dharnas* to influence people in power in their favour. In the south, groups have advocated more aggressively on a range of issues, which has helped many of their disabled members. Members of the NGO Pondicherry Multipurpose Social Service Society (PMSSS) in Cuddalore came to know about the Tsunami Relief Fund and tried to mobilise this fund for persons with disabilities in the area, but were told that they would need a National ID card to claim the fund. The disability ID card was seen as insufficient to access this relief fund. As a member of the DPO facilitated by PMSSS said, "Ten members sat on the road in protest and all were beaten by police. The Government doctor was called by police and out of 250 people with disabilities, 50% got Tsunami Relief Fund. The government doctor signed the national ID card and each person with disabilities got Rs. 10,000/- through Tsunami Relief Fund."

Some of the DPOs, especially in South India, that have been operational for more than five years have taken up community level activities like awareness programmes for the teachers in village primary schools about inclusion of disabled children within the classroom. Thalumbu Differently Abled Group was formed with the objective of building unity among the group. Besides including disabled children in the school, they help other non-disabled drop outs and motivate them to go to school. Sasikumar said that in his group Ismail, a disabled boy studying in 10th was dismissed from school.

He had low vision with 75% disability. The group took this up as an issue and spoke with the management and principal and enabled Ismail to write the public exam. Thalambu Differently Abled Group Tamil Nadu has ensured that two of their members who are mentally ill receive free medicine from the government Primary Health Centre and that regular follow-up is done. Groups in the south have been better able to highlight and include issues of persons with mental illness in their agenda while the groups in the northern region remain confined to the issues of persons with visible disabilities.

With regard to selection of issues for advocacy within the groups, there is a clear trend of domination by certain groups of disabled people. Disability wise, the representation of issues within the DPO as well as actions taken up by them represents the core concerns of the dominant groups; while the concerns of the other groups of disabled people and some time that of parents receive less importance. Representation of persons with hearing impairments is minimal as communication is difficult, while parents of people with intellectual impairments are assigned a peripheral role within the groups. The concerns of people with severe disabilities are side-lined because most of these people do not attend the meetings and their representatives also attend only occasionally. In one of the groups in Tamil Nadu, when asked to reflect on what else could the group have taken up for addressing, one parent of a girl with mental retardation spoke aloud that probably the group should start thinking of long term living arrangements for people like his daughter – a statement that reflected that such needs had not been discussed before in the group. However, most of the other leaders of the group, especially the visually impaired and the locomotor disabled, immediately spoke against the idea, adding that it was the task of the government to provide such care, and the DPO could only petition the government to fulfil its role.

## Implications for Movement

In all social movements the process of involvement changes the participants. They become different in terms of their self-awareness and identity. What the efforts for advocacy and working together as a group has done is given confidence to the persons with disabilities, mostly from poor rural households, to press for their rights. Members from Annai Teresa Disabled Development Trust elaborated, "People thought that the persons with disabilities can do not-

hing, we thought of doing things for ourselves. And we have done many things." The secretary of Loving Self Reliance Group in Dimapur stated, "People with disabilities did not come out of their houses and felt ashamed to go out. Now they are coming out of the house. So they are very happy. Most of the people felt that people stared at them or treated them differently. Now they have the confidence to go out and ask for their rights."

Awareness about rights and their success in advocacy efforts, however small, has impacted the self-confidence of the members and developed their capacities to publicly deal with government officials to assert their rights. This has been particularly successful in the south where most of the groups have been working for the last eight to ten years. "When we go to the Block Development Office (BDO) [3], we ask the government officials about the provisions available for disabled people. If they say that there are no provisions we ask them to give in writing. On the basis of such a document we can fight further for our rights", says Livingstone from the *Vasantham* Federation, Tamil Nadu. As the groups gain recognition from people in the government offices, the attitudes of these officers have changed. Nishamani, woman leader of *Pragati* DPO, Orissa added, "If we went to the *Panchayat* [4] office, they would direct us to the block office, who would send us back to the *Panchayat* once again. They would harass us by making us go round and round from one office to another. We never received correct information regarding how to access the schemes." The Disabled People's federation promoted by PMSSS felt that the community's attitude towards them had changed significantly. One member cited the fact that previously women's self-help groups used to decline disabled women as members but are now allowing women with disabilities into all their activities. Another was of the opinion that as the federation has started working on different issues that affect disabled people, other persons with disability too approached the federation if they had any problems. This has brought recognition and respect from other community members.

For some of the older groups, there is a chance for stagnancy. DPOs like *Vasantham* Federation in Tamil Nadu and *Pragati* Federation in Orissa speak of a slowdown in their activities and in the enthusiasm of the members after the first spurt of activity and lobbying that resulted in most of the members claiming some entitlement or other. "We were all together when we were mobilising for benefits like disability certi-

ficate, scholarships and pensions etc. Once most of the members had received all the benefits they could receive, people's interest in the group went down." When asked many of the members said, "Now I have a certificate I got a BPL house [5] and I am getting a pension. These three were my demands and I have got all of them, so why should I go to the group now?"

Different DPOs react to this situation in different ways. The Annai Teresa Disabled Development Trust has been expanding its activities to newer *Gram Panchayats* and forming fresh groups along with extending their own activities to more varied services like vocational training etc. *Vasantham* Federation has moved to looking at mainstream policies and initiating advocacy to ensure disabled people are included in these programmes, while extending support services to any new disabled people in the area who approach them. Both these Federations dream of becoming NGOs themselves, with staff and funding to carry on their activities. One of the reasons for this is that the role model they follow is the NGO that mentored them and hence their aspiration is to be as structured as them. Livingstone of *Vasantham* Federation was clear about their objectives, "We will register as an NGO and get funds for our activities. Our Executive Committee members should be paid for the work they do and the time they devote for this work." On the other hand, *Pragati* Federation in Orissa was carefully steered by their NGO mentor towards looking not only at entitlements, but also towards solidarity, group feelings and cooperation. "We were asked to discuss on how many issues like health, education, livelihood affect our lives including those of disabled people."

## Conclusion

Thus, from the above discussion it is evident that the growth of Disabled Peoples' Organisations (DPOs) in India is the consequence of exclusion and discriminatory practices toward disabled people. Disabled people live isolated lives in their own communities, with the barriers they experience being not only attitudinal but also structural and systemic. The physical and social exclusionary environments breed discrimination and exploitation. People with disabilities and their families are often apprehensive of entering the social world for fear of ridicule, discriminatory and abusive behaviour and systemic rejection. The disability movement links the personal cultural realm to the political by raising issues that are often dismissed or igno-

red. Thus while the initial impetus was to encourage disabled people "to solve their problems themselves and not have them solved for them" there was also a further aim which was "to identify the needs of the membership as a whole and articulate them, both to statutory agencies and political parties at both a local and a national level" (Oliver and Hasler 1987: 116). Thus, disability politics in India has concentrated on changing government responses, changing relations at an interpersonal level and changing identities at a personal level.

It is quite evident from the DPOs that were part of this study that DPO development in India has been due to external stimulation of funding agencies working through NGOs. DPOs are usually seen as social (human rights) movements, though this review of community-based DPOs indicates that many of them are in fact self-help groups (SHGs), trying to promote usually some income generating activities for their members. Sometimes, SHGs may form federations, which can be observed in a number of States in India. Such federations have a stronger voice; they foster active citizenship and together or under a national umbrella organisation they may be very successful in combating injustices in society. What could have been, as in the west, a source of personal support and encouragement has remained mired in self-interest and individual development.

The second major reason for successful DPOs is the location within a larger framework of people's struggles. In the south where the *dalit* movement has been very strong, the groups have found it easier to internalise and rally using an identity marker with which they had not identified previously as a group. In Orissa also, the association with the land rights movement and farmers' struggles that have taken place in the area has helped the disabled people's organisations to benefit from their experience and strategies in successfully lobbying for their rights. People in the area have a pre-exposure to struggles and negotiations, which people in many other areas do not have and this predisposes them to take initiative on their own. On the other hand, in the north-east, disabled people are so isolated within their own communities because of the hilly terrain that they have not been able to capitalise on the experiences of the militants groups operating in the regions, especially Nagaland.

In India, the grassroots level DPOs have utilised a wide variety of strategies for advocacy to lay claim to their political rights, but most of these have been peaceful and placatory towards the people in positions of power. Thus,

the struggles around disability issues stimulated by these DPOs have never taken a radical form but remained at the periphery, mainly because the disabled members themselves doubt their own revolutionary potential. These groups and their disabled members, though united on the basis of identity, have not been able to develop a group pride in identity as in the west and in the case of other marginalised group movements. Moreover most of these DPOs still remain at the periphery of all social activities within the community, despite being looked upon as resource for persons with disabilities. DPOs themselves have rarely broadened their vision to move towards mainstreaming or inclusive societies.

## Notes

1   Self Help Groups at the grassroots level in India have been the hub of small-scale economic activities. There are different government and non-government schemes and programmes that provide training for income generation to SHGs, start-up loans and marketing support.

2   The scheme promises food for work for rural people during lean or non-agricultural season. The work, provided for 100 days every year to every household, is mainly infrastructural development like laying of roads, digging of ponds, clearing of jungles etc. Usually disabled people are excluded from this work. However advocacy by the DPOs has ensured that disabled people are included in the allotment of work and also led to policy changes in some states.

3   A block is a district sub-division in India.

4   *Panchayats* are local self-governments at the village or small town level in India.

5   Houses for Below Poverty Line families provided by the government.

## References

OLIVER, M./HASLER, F. (1987): Disability and Self-help: A Case Study of the Spinal Injuries Association. In Disability & Society, Vol. 2, Number 2, pp. 113-125.

***Zusammenfassung:*** *Während der letzten Jahre haben sich in Indien Bündnisse von Menschen mit Behinderungen, bezeichnet als Disabled People's Organisations (DPOs), auf lokalen Ebenen geformt, um ortsgebundene Bemühungen für die Interessensvertretung behinderter Menschen zu initiieren, um eine spürbare Veränderung im Status behinderter Menschen zu bewirken. Dieser Artikel untersucht die Entwicklung und Entstehung solcher DPOs in verschiedenen Teilen Indiens und die Prozesse, wodurch diese Gruppen sich für die Ziele einsetzen für die sie eingerichtet wurden. Der Artikel versucht, das Ausmaß einzuschätzen in dem es diesen Gruppen möglich war, eine Bewegung für eine Veränderung sozialer Einstellungen an der Basis zu erreichen und die daraus resultierenden Effekte, die dies auf ihre Identität hat, zu beleuchten.*

***Résumé:*** *Ces dernières années en Inde, des alliances de personnes handicapés, appelées Organisations de Personnes Handicapées (OPH) ont été créées au niveau local afin d'initier des actions de plaidoyer localisées, dans le but de favoriser un changement perceptible du statut des personnes handicapées. Cet article scrute la formation et la genèse de ces OPH en différents endroits de l'Inde et les processus que ces groupes ont mis en marche pour atteindre les buts de leur création. Cet article tente d'évaluer à quel point ces organisations ont réussi à créer un mouvement pour le changement des attitudes sociales depuis la base et quel en est le résultat pour leur identité.*

***Resumen:*** *En los últimos años han sido creadas cada vez más alianzas en India, formadas por personas con discapacidad, para iniciar actividades de la auto-representación en el ámbito local con el fin de mejorar significativamente su estatus social. Este artículo examina los orígenes y la génesis de tales organizaciones en diferentes partes de la India y los procesos con los cuales estos grupos persiguen sus metas. Se trata de valorizar si estos grupos han tenido éxito en lograr un movimiento por el cambio en las actitudes sociales y si eso tuvo efecto positivo en relación a su identidad.*

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# Mental Health Remains an Invisible Problem in Africa

As long as African states face the underlying problems of poverty and social stigma, they cannot address the issue of mental illness. The way language is used to conceptualise mental illness is essential to its understanding and treatment. In Lesotho, there is no Sesotho (the local language) equivalent for the English term *counselling*. Instead, a discussion among local health workers leads to a range of alternative expressions, from *Hotastaisamothofihelaqeto* (to guide someone to reach a conclusion), *Hothusamothohohlokomela* (to assist a person to realise his problem, to solve it and accept it), and *Hotsehetsamotho* (to support). A study in Uganda (Cross-Cultural Assessment of Trauma-Related Mental Illness (Phase II), available at: www.certi.org/publications/policy/ugandafinah report.htm) set out to assess levels of depression in a community, only to realise the term *depression* is not culturally appropriate. The terms *Yo'kwekyawa* - hating oneself - and *Okwekubagiza* - pitying oneself - are used instead.

A lack of mental health policy, as well as social stigma, has meant that in many parts of Africa mental illness is a hidden issue. Without developing a language to discuss the problem, avenues to treatment and understanding of the phenomena in an African context remain seriously under-addressed. In most African countries, mental health is seen as a peripheral and isolated issue. With other immediate physical health pressures, such as improving infant mortality and reducing AIDS rates, mental health does not necessarily rank as a priority. However, this approach is deeply misguided. 14% of the global burden of the disease is attributed to mental illness - which includes a broad spectrum of diagnoses, from common mental illnesses such as anxiety and substance abuse, to severe illnesses like psychosis. Mental health well-being is closely associated to several Millennium Development Goals, with areas as broad as education, maternal health, HIV and poverty all entwined with the problems of mental illness.

Dr Stevan Hobfoll, Professor and Chairperson at the Department of Behavioural Sciences at Rush University told me that, "mental health is a deeply stigmatised area in most if not all of Africa." One study in Nigeria (Perception and Beliefs About Mental Illness Among Adults in Karfi Village, Northern Nigeria, available at: www.biomedcentral.com/1472-698X/4/3) showed that the participants' primary response to a person with a perceived mental illness was fear, followed by avoidance and anger. This suggests a lack of education about the reality of mental illness. More seriously than this, sufferers of mental illness are vulnerable to human rights violations, to physical and emotional abuse and from discrimination both from health workers and the wider community. According to Vikram Patel, a Global Mental Health expert and Professor at the London School of Hygiene and Tropical Medicine, there is "no question that several forms of social disadvantage make people more vulnerable to a range of mental health problems." Mental ill-health and poverty exist in a "bi-directional relationship", he said. Crick Lund, professor and researcher at the Department for Psychiatry and Mental Health, agrees. He told Think Africa Press that poverty and mental health are "completely intertwined", so people living in poverty are more vulnerable to mental illness, whilst those with pre-existing mental illnesses are more likely to become trapped in poverty due to decreased capacity in everyday functions.

Post-conflict Sierra Leone has established child-soldier rehabilitation projects, which provide counselling and support to children traumatised by war, and the prevalence of gender-based violence in the Congo has resulted in the establishment of listening houses where women can talk through their experiences in a safe environment. However, Professor Patel suggests that though war, violence and insecurity lead to an increased risk of mental health problems, the strength of the community in which an individual lives is at least as important. Providing afflicted communities with practical as well as psychological support can mitigate the effects of instability. Traditional healers provide some support, with a range of treatments including the enactment of rituals, which try to maintain the well-being of a whole community. However, their role in healthcare is controversial. Their methods differ from conventional western approaches based on psychiatric science. This has provoked considerable debates about the cultural appropriateness of imposing western ideas about mental illness on Africa, and provoked challenges from western psychologists to the medical success and accountability of healers.

Vikram Patel is positive about the cooperation between traditional and conventional health workers. He says that "traditional medicine already exists alongside biomedical treatment,

and complementary healers should be working in a mutually respectful relationship with other health workers as part of the health system, sharing a common goal for helping people address their mental health problems." Dr Hobfall adds, "the West also have much to learn from Africa in terms of collective spirit and collective support. Often we should be looking at the most healthy communities and families in any culture and model care after them."

Importantly, the approaches of traditional healers hint at the differing conceptions of mental health throughout Africa. This is in turn indicative of a cultural diversity, which requires an equally diverse and sensitive response. The stigmatisation of mental illness is difficult to address, but can only be changed through increased awareness, greater prioritisation of treatment and enhanced support and education. Alongside the complex nature of mental illnesses themselves and their interaction with social situations, there is a need for "multi-sectoral development efforts", which means there is no quick-fix solution for the problem of mental health treatment in Africa.

Faced with the scale of the mental health treatment gap - most developing countries dedicate less than 2% of government health budgets to mental health care - the provision of services needs major development. According to a study by the Grand Challenges in Global Mental Health initiative, the biggest barrier to global mental healthcare is the lack of an evidence-based set of primary prevention intervention methods.

Starting to address the research gap is the University of Cape Town's recent Mental Health and Policy Project (MHaPP), which ran from 2005 to 2010. This aimed to "develop, integrate and evaluate mental health policy" in Uganda, South Africa, Zambia and Ghana. However, Crick Lund, Project Coordinator for MHaPP, explains that once policies are developed they will remain a "largely hypothetical concept" until important "intervention research" is completed to discover how to translate them best into practice.

Without engaging governments and integrating mental health treatment into pre-existing Primary Health Care, little change will occur. In order for integration to succeed, however, attitudes towards mental illness need to be transformed. Practices such as using community health workers and peer-based support to treat less severe mental illnesses offer pragmatic solutions to improving on the significant lack of trained psychiatric specialists. A cross-cultural approach, which takes into account the requirements of individual communities, is essential. It should also incorporate both local practices and the local languages used to express individual mental health needs. All this is only achievable if mental illness in Africa is promoted as a major health and social priority. The absence of the issue of mental illness from the Millennium Development Goals, the lack of mental health champions in Africa and the lack of a consistent and coherent message about mental ill-health have ensured it has remained untreated.

Slowly, the scale of the challenges posed by mental ill-health is being acknowledged. The World Health Organisation (WHO) recently published the Mental Health Gap Action Programme (mhGAP) Intervention Guide (available at: http://whqlibdoc.who.int/publications/2010/9789241548069_eng.pdf) for improving treatment, whilst in South Africa the upcoming conference African Footprint in Global Mental Health 2011 points toward the beginning of a public discussion. Yet this discussion needs to move beyond health specialists and into African governments, communities and the wider global media, so that, hopefully, the mental health treatment gap can be filled. Or as the Sesotho speaking health workers would say, "Hotastaisamothofihelaqeto."

**Information:** http://thinkafricapress.com/health/mental-health-remains-invisible-problem-africa
http://huff.to/S3tfi3.

*Anthea Gordon*

# Kurzmeldungen/Announcements

## Unser Klima – unser Leben



Begegnungen zwischen Kindern und Jugendlichen mit und ohne Behinderung sowie der Blick über den eigenen Tellerrand hinaus - diese beiden Aspekte verbindet das Klimaprojekt *Jugend inklusive - global engagiert!* der Organisation Behinderung und Entwicklungszusammenarbeit e.V. (bezev).

Ziel des Projekts ist es, lokale Vorhaben zum Thema Klima zu planen und durchzuführen, an welchen Kinder und Jugendliche mit und ohne Behinderung beteiligt sind. Im Rahmen dessen sucht *bezev* bundesweit Schulen und außerschulische Bildungseinrichtungen, die Interesse haben, sich innerhalb ihrer Stadt zu vernetzen, um ein gemeinsames Klimaprojekt im ersten Halbjahr 2013 zu entwickeln und umzusetzen.

Zur Unterstützung dazu kann das von *bezev* erstellte inklusive Bildungsmaterial *Unser Klima – unser Leben* genutzt werden, welches aus einem Handbuch, einer CD-ROM sowie einer Materialkiste besteht und für Kinder und Jugendliche von 10-16 Jahren einsetzbar ist. Es enthält vielfältige Sachinformationen über das globale Thema Klima sowie didaktisch-methodisch differenzierte Arbeitsmaterialien. Zudem gibt es Vorschläge für Klimaprojekte mit Kindern und Jugendlichen mit und ohne Behinderung. Bei Interesse bietet *bezev* einen ersten Vernetzungs-Workshops in Ihrer Stadt an und begleitet Sie gern bei der Planung Ihres Vorhabens.

**Information:** www.bezev.de/globales-lernen/jugend-inklusive-global-engagiert-klimaprojekt.html; Michaela Böhme (globaleslernen@bezev.de, Tel: 0201-17 88 963).

## Equal Chances for Fijian with Disabilities

In Fiji for the first time, the Australian Agency for International Development (AusAID)'s Disability Reference Group held high-level consultations on Disability Inclusive Development in the Pacific from 1st to 3rd August 2012. As part of its comprehensive program which involved meeting with national, regional and international stakeholders working to improve the lives of persons with disabilities, the Disability-Inclusive Development Reference Group (DRG) also initiated the first ever public forum in the Pacific on disability rights. AusAID collaborated with the University of the South Pacific (USP) to bring members of the Reference Group together with leaders in disability and inclusive education from the region, the majority of whom are persons with disabilities themselves. Over 100 participants attended the forum including students, academics, Disabled Peoples' Organisations and development partners. The inspiring panellists included members of the DRG and regional specialists working to enhance the lives of people with disabilities.

In his opening address, USP Vice Chancellor, Professor Rajesh Chandra acknowledged the university's important role in ensuring accessible tertiary education. He made particular mention of USP's Disability Inclusion Plan which, when finalised, will include commitments to appointing academic advisors for disability in each faculty and ensuring accessibility of facilities, the latter of which is a significant challenge for the Pacific. Speakers shared personal stories about how they came to be working in disability-inclusive development. "Women and girls with disabilities in Fiji are both brave and forgotten", said Naomi Navoce, a Gender and Youth Program Officer from the Pacific Disability Forum who offered examples from her own life to illustrate the challenges. DRG member Senator Buntan in his concluding remarks on the panel noted that "positive thinking and a fighting spirit" got him where he is today as the only person with a disability in the Parliament of Thailand.

AusAID will continue to take advice from the reference group on how to progressively improve the accessibility to ensure that people with disability benefit equally from Australia's assistance.

**Information:** http://globalaccessibilitynews.com/2012/08/06/equal-chances-for-fijian-with-disabilities/.

## Disability Teaching for School System in Fiji

The teaching of children living with disabilities will soon become part of Fiji's education system. Sixty-seven teachers from around the country are attending a three-day workshop in August at Suva's Holiday Inn to familiarise themselves with a pilot project to introduce disability inclusive education in primary schools. The project, an initiative of the Education Ministry and the Australian government, aims to increase access to education for children with disabilities in Fiji and increase retention and completion rates and learning outcomes.

Speaking at the launch of the project, AusAID counsellor Sarah Goulding said the access to quality education program (AQEP), disability inclusion strategy seeks to increase the options for education of children with disabilities. The project will be piloted at South Taveuni Primary School in the North, Tavua District School in the West, Adi Maopa Primary School in the Eastern Division, Ratu Latianara Primary School in the Central Division and the Arya Samaj Primary School in Suva.
**Information:** www.fijitimes.com/story.aspx?id=209836.

## Disability Still Seen as Bar to Motherhood in Kazakhstan

Enduring prejudices limit access to family planning and reproductive health services. Disabled women in Kazakhstan face many obstacles in fighting for their rights, not least when it comes to accessing reproductive health services in the state sector. Alima Beysenbaeva is deputy chair of the Shyrak Association of Disabled Women, and was confined to a wheelchair following a car crash more than 20 years ago. Now 42, she can talk from personal experience about the difficulty of simply seeing a doctor for a check-up. "When I went to see a gynaecologist, she looked at me with near-bewilderment, as if to ask why I'd come to see her," she recalled. "It was so humiliating." Beysenbaeva said some doctors believe that disabled women should not have children.

The Shyrak group commissioned a report last year that focused specifically on disabled women in Almaty, Kazakhstan's biggest city. Of the 300 women interviewed, six out of ten said their rights had been harmed in some way by hospitals and clinics. This included disrespectful and downright rude treatment by medical staff. Some reported that when they became pregnant, they were refused permission to register with maternity services and were referred for abortions instead.

A 2010 survey by Kazakhstan's Public Opinion Research Centre found that most of the 1,500 visually impaired and hard of hearing people it canvassed had limited access to information on reproductive and sexual health. Those seeking to have children were unaware of options that might be open to them, while the lack of family planning information led to a high incidence of abortion. Saida Abdrahmanova, a doctor at the municipal health centre in Almaty, acknowledged that some of her colleagues held negative attitudes towards persons with disabilities.

Particularly among the older generation who worked in the Soviet medical health system, there are some medics who see no need to offer a good service, provide a high standard of care and respect patients' rights, she said.

Abdrahmanova insisted that rather than persuading disabled women not to bear children, the role of doctors was to provide the right advice to inform their decisions. Kazakhstan has laws setting out the state's obligations to support disabled people, including legislation on social benefits and home care provision. As Shyrak has pointed out, the current legislative framework is limited to ensuring that the disabled get the basic essentials, but ignores other needs that they share with everyone else. Shyrak has organised training sessions for medical staff to improve access to reproductive and sexual health services for disabled women. In June, it held the first in a series of workshops which focused on encouraging health and social workers to offer the right kinds of treatment to disabled women, and to use the correct terminology when speaking to them. Doctors like Abdrahmanova argue that with the best will in the world, some disabled women are not up to having children. Viktoria Kuznetsova, 45, proves how wrong such attitudes can be.

A resident of Almalybak, a small town near Almaty, she has used a wheelchair since an operation to remove a tumour on her spine that she attributes to years of volleyball training. Her doctor supported her decision to have a child; and she gave birth by caesarean section. Things got harder when her husband died before the baby was born.

"No one helped me so I looked after the baby virtually on my own," she recalled, adding that her mother, who does not live nearby, would visit just to take the child out for some fresh air.

When her daughter Sofia was 18 months old, a ramp was fitted to allow Kuznetsova to take her daughter outside on her own. Before that, she said, "it was physically impossible for me to get downstairs and go outside".

Sofia is now eight. Alongside coping with single parenthood, Kuznetsova has won Kazakhstan's disabled table tennis championship several times, and recently took up archery.
**Information:** http://iwpr.net/report-news/kazakstan-disability-still-seen-bar-motherhood.

## WHO Launches Wheelchair Service Training Package

The wheelchair is one of the most commonly used assistive devices. It is estimated that 70 million people require wheelchairs worldwide, yet only 5% to 15% of people have access. In partnership with USAID, WHO released the "Wheelchair Service Training Package: Basic Level" whose main purpose is to develop the minimum skills and knowledge required by personnel involved in wheelchair service delivery.
**Information:** www.who.int/disabilities/media/news/2012/30_06/en/index.html.

## Adults and Children with Disabilities at Much Higher Risk of Violence

Both children and adults with disabilities are at much higher risk of violence than their non-disabled peers, according to two systematic reviews recently published in the Lancet. The reviews were carried out by Liverpool John Moores University's Centre for Public Health, a WHO Collaborating Centre for Violence Prevention, and WHO's Department of Violence and Injury Prevention and Disability. These are the first studies to confirm the magnitude of the problem and they provide the strongest available evidence on violence against children and adults with disabilities. They also highlight the lack of data on this topic from low- and middle-income countries. The review on the prevalence and risk of violence against children with disabilities, published in July 2012, found that overall children with disabilities are almost four times more likely to experience violence than non-disabled children. The review indicated that children with disabilities are 3.7 times more likely than non-disabled children to be victims of any sort of violence, 3.6 times more likely to be victims of physical violence, and 2.9 times more likely to be victims of sexual violence. Children with mental or intellectual impairments appear to be among the most vulnerable, with 4.6 times the risk of sexual violence than their non-disabled peers (Prevalence and Risk of Violence Against Children with Disabilities: A Systematic Review and Meta-Analysis of Observational Studies, available at: http://press.thelancet.com/childrendisabilities.pdf).

The systematic review on violence against adults with disabilities, published in February 2012, found that overall they are 1.5 times more likely to be a victim of violence than those without a disability, while those with mental health conditions are at nearly four times the risk of experiencing violence (Prevalence and Risk of Violence Against Adults with Disabilities: A Systematic Review and Meta-Analysis of Observational Studies, available at: www.who.int/disabilities/publications/violence_children_lancet.pdf).

"The results of these reviews prove that people with disabilities are disproportionately vulnerable to violence, and their needs have been neglected for far too long," notes Dr Etienne Krug, Director of WHO's Department of Violence and Injury Prevention and Disability. "We know that specific strategies exist to prevent violence and mitigate its consequences. We now need to determine if these also work for children and adults with disabilities. An agenda needs to be set for action".

Factors which place people with disabilities at higher risk of violence include stigma, discrimination, and ignorance about disability, as well as a lack of social support for those who care for them. Placement of people with disabilities in institutions also increases their vulnerability to violence. In these settings and elsewhere, people with communication impairments are hampered in their ability to disclose abusive experiences.

"The impact of a child's disability on their quality of life is very much dependent on the way other individuals treat them," stresses Dr Mark Bellis, Director of the Centre for Public Health at Liverpool John Moores University, a WHO Collaborating Centre for Violence Prevention, and lead researcher on the review. "This research establishes that the risk of violence to children with disabilities is routinely three to four times higher than that to non-disabled children. It is the duty of government and civil society to ensure that such victimization is exposed and prevented."

Proven and promising programmes to prevent violence against non-disabled children and adults – reviewed in WHO's Violence prevention: the evidence, preventing child maltreatment, and preventing intimate partner and sexual violence against women – should be implemented for children and adults with disabilities, and their effectiveness evaluated as a matter of priority.

The United Nations Convention on the Rights of Persons with Disabilities reinforces the need to protect the rights of children and adults with disabilities and ensure their full and equal participation in society. This includes avoiding the adverse experiences resulting from violence, which are known to have a wide range of detrimental consequences for health and well-being. When prevention fails, care and support for children and adults who are victims of violence are vital to their recovery. The WHO/World Bank World report on disability outlines what works in improving health and social participation of people with disabilities and promotes deinstitutionalisation.

**Information:** http://who.int/disabilities/violence/en/index.html.

## Inaugural Forum on the Global Partnership on Children with Disabilities

On September 14th to 15th, UNICEF hosted the first Forum on the Global Partnership on Children with Disabilities. 240 participants representing more than 100 organisations from across the world participated. They discussed how the rights and needs of children with disabilities should be prioritised in development efforts.

The Forum included a high-level panel discussion on how to realise equity and inclusion for children with disabilities in the post-2015 development agenda, as the target date for the Millennium Development Goals (MDGs) is fast approaching.

During the Forum partners identified concrete strategies to include disability on global agendas, in areas such as education, nutrition, and humanitarian action. Partners from seven countries (Azerbaijan, Bangladesh, Haiti, Malawi, Mozambique, Rwanda, Turkey) agreed on collaboration in the region covering Central and Eastern Europe and the Commonwealth of Independent States. Youth activists also made their voices heard. Abia Akram, the Coordinator of the Global Network of Emerging Young Women Leaders with Disabilities, spoke at the opening of the Forum saying, "Girls and women with disabilities should

be empowered to participate in decision making processes that impact their lives. Their voices must be heard so they can contribute to their community in the spirit of 'nothing about us without us'".

Ariel Ary Chinchilla, Special Olympics Athlete and International Global Messenger, also spoke about the challenges children with intellectual disabilities face in their daily lives in schools and in their communities. "Twenty years ago when I was born, doctors told my parents that my life was not worth saving. These people never thought I would finish school, as I did, graduating from a regular trilingual school. They never imagined I would be a full time staff member in a company like IBM."

The Forum allowed staff from country offices, regional offices and headquarters to learn more about: the rights and situation of children with disabilities; how to apply an inclusive development approach across policies and programmes; and to network and meet key players working in disability.

This Forum was held in conjunction with the Fifth Conference of States Parties to the Convention on the Rights of Persons with Disabilities.
**Information:** www.unicef.org/policyanalysis/index_65906.html; www.who.int/disabilities/media/news/2012/15_09/en/index.html.

## It's About Ability! Youth Video Contest

Each year, UNICEF publishes a report called State of the World's Children. In 2013, the theme is on children with disabilities. Children living with disabilities have the same rights as all children: the right to live in dignity and to grow up in an environment that allows them to reach their full potential. But too often, children with disabilities face difficulties that hold them back.

Filmmakers should take inspiration from the theme *It's About Ability!* which takes a positive approach to disability. Too often, children with disabilities are shown neglected, weak or in need of pity. But those images only perpetuate negative beliefs, which affect the way we behave. Instead, we are looking for perspectives that can be empowering, constructive and eye opening in their diversity. After all, children with disabilities are children first.
**Information:** www.unicef.org/videoaudio/video_videocontest.html.

## Making It Work Launches New Website

Making it Work is a methodology for documenting and promoting good practices in line with the principles of the Convention on the Rights of Persons with Disabilities. It aims to contribute to making this Convention a reality so that it impacts on people with disabilities' lives. On August 28th, the Making It Work International Coordination Team announced the launch of their new website including an online searchable databasewith over 100 good practice case studies on disability inclusion. The new website has been redesigned with a fresh new look and user-friendly navigation with a revised set of tools and the latest information about our work including:
General information about Making It Work; Specific information about completed projects that have used the Making It Work methodology from all around the world;
A revised set of tools and guidance on how to use Making it Work; A good practice database where you can search for and download case studies from the reports; A direct link to resources on disability issues.
**Information:** www.makingitwork-crpd.org/;
www.makingitwork-crpd.org/good-practice-database/.

## New Enable Map of Ratifications

The Map of Ratifications and Signatures, a much visited resource on the United Nations Enable website since 2007, has now been officially prepared and updated by the UN Cartographic Section. The map is colour coded to show ratifications and signatures of the Convention and its Optional Protocol. The detailed accessible list of ratifications and signatures is also available on the Enable website. As the Map is copyrighted by the United Nations, permission to use the Map in any publication should be made through the UN Cartographic Section.
**Information:** www.un.org/Depts/Cartographic/english/about.htm; www.un.org/disabilities/documents/maps/enablemap.jpg; www.un.org/disabilities/countries.asp?navid=12&pid=166.

# Literatur/Reviews

*US International Council on Disabilities*
## Global Disability Rights Library (GDRL)

Those working to promote the human rights of people with disabilities now have a new way to access information and digital resources - even if they are beyond the reach of the Internet.

The US International Council on Disabilities has helped to develop the Global Disability Rights Library (GDRL), a broad collection of critical resources for disabled people's organisations, women's rights groups, government agencies, academic institutions and others that advocate for disability rights.

As well, for the bulk of persons with disabilities living in areas where the Internet is non-existent, unreliable, or simply too expensive, there is a new offline option called the eGranary Digital Library.

The eGranary Digital Library is a four terabyte hard drive that contains 30 million electronic documents - over 2,000 Web sites, documents, videos, images and other materials - including over 2.5 million documents that make up the Global Disability Rights Library (GDRL). Hooked up to a single computer, the eGranary can be shared with thousands of people over local area networks. It has an interface that emulates the look and functioning of the Web - including built-in search tools - but it does not require any Internet connectivity to operate.

The Global Disability Rights Library (GDRL) project is a joint initiative of the US International Council on Disabilities and the Wider Net Project at the University of Iowa.

The GDRL project was initiated with the support of the American people via the US Agency of International Development. It has already been deployed to over 140 locations worldwide.

**Bezug:** www.usicd.org/index.cfm/global-disability-rights-library; www.widernet.org/egranary/gdrl,
www.eGranary.org, E-Mail: sales@egranary.org; http://gdrl.org.

*Disability Rights Fund (DRF)*
## Beyond Charity: A Donor's Guide to Inclusion - Disability Funding in the Era of the UN Convention on the Rights of Persons with Disabilities

On the occasion of the fifth conference of States Parties to the Convention on the Rights of Persons with Disabilities, the Disability Rights Fund (DRF) is promoting its guide, Beyond Charity: A Donor's Guide to Inclusion - Disability Funding in the Era of the UN Convention on the Rights of Persons with Disabilities. DRF – a groundbreaking collaborative to support the human rights of persons with disabilities around the world – commissioned the guide to encourage donor learning about the rights of persons with disabilities.

This informative guide introduces the Convention and its implications for donors and development practitioners. It captures and shares the experience of select donors and development agencies that are beginning to integrate the principles of the CRPD into their work. It also provides practical actions donors can take that will improve the way funding is promoted and managed so it becomes increasingly inclusive.

**Bezug:** www.disabilityrightsfund.org/donor/donorguide.html; info@disabilityrightsfund.org.

*The International Telecommunications Union (ITU) and the Global Initiative for Inclusive ICTs (G3ict)*
## Making Mobile Phones and Services Accessible for Persons with Disabilities

The International Telecommunications Union (ITU) and the Global Initiative for Inclusive Information and Communication Technologies (G3ict) published their latest report entitled: Making Mobile Phones and Services Accessible for Persons with Disabilities on 12 September. Despite the unprecedented rise in mobile phone subscriptions, senior citizens, people living with disabilities and the illiterate are often marginalised from the *mobile miracle* because devices are not equipped with the right accessibility features, or because the price of accessible mobile phones and services is prohibitive. Examples of pioneering solutions are highlighted in the report, as well as the role of the private sector and regulatory and policy measures to ensure that the accessibility needs of all people are met.

**Bezug:** www.itu.int/ITU-D/sis/PwDs/Documents/Mobile_Report.pdf.

*G3ict*
## 2012 CRPD ICT Accessibility Progress Report

The 2012 CRPD Progress Report includes the latest data on 52 countries representing 77.4 per cent of the World Population. The report offers disability advocates, governments, civil society and international organisations a unique benchmarking tool that collects data on country laws, policies, and programs pertaining to accessible and assistive Information and Communication Technologies (ICTs) around the globe. All results are available cross-tabulated by region, level of income per capita of Human Development Index to facilitate benchmarking by advocates and policy makers.

**Bezug:** http://bit.ly/SF3KFp; http://g3ict.org/download/p/fileId_936/productId_244.

*Working Group on Violence against Women with Disabilities*

**Forgotten Sisters - A Report on Violence against Women with Disabilities: An Overview of Its Nature, Scope, Causes and Consequences**

This report, prepared by scholars and human rights advocates who are members of the Working Group on Violence against Women with Disabilities, focuses on the prevalence and pervasiveness of violence against women and girls with disabilities.

**Bezug:** Stephanie Ortoleva, Women Enabled; Hope Lewis, Northeastern University - School of Law; Published: August 21, 2012; Northeastern University School of Law Research Paper No. 104-2012; http://papers.ssrn.com/sol3/papers.cfm?abstract_id=2133332; http://papers.ssrn.com/sol3/Delivery.cfm/SSRN_ID2133332_code605446.pdf?abstractid=2133332&mirid=1.

*Italian Association Amici di Raoul Follereau (AIFO)*

**Impact of Community-Based Rehabilitation: Impact of Community-Based Rehabilitation Programme in Karnataka India**

The main goal of the research was to understand and measure the overall role and impact of Community-Based Rehabilitation (CBR) in improving the quality of life of persons with different types of impairments, as well as different demographic, social and economic backgrounds. We therefore investigated the effectiveness of CBR programmes in improving the control that persons with disabilities have over their daily lives, their participation in different aspects of community life (i.e. combating stigma and prejudice) and their access to various services over the five domains of the CBR matrix (health, education, livelihood, social and empowerment).

**Bezug:** Biggeri, Mario et al.; Bologna: 2012; www.aifo.it/english/proj/research/sparkcbr/attachments/MandyaCBR_phase01_research_light_version.pdf

*Leonard Cheshire Disability and Inclusive Development Centre*

**Intergenerational Poverty and Disability: The Implications of Inheritance Policy and Practice on Persons with Disabilities in the Developing World**

In this paper, we examine the existing data and discuss the implications of current inheritance policies and practices that affect the lives of persons with disabilities and their families, arguing that when persons with disabilities are routinely denied equal rights to inherit wealth or property, this denial has a profound impact on their ability to provide for themselves and their families. The stigma, prejudice and social isolation faced by persons with disabilities and the widespread lack of education, social support networks, and the right to appeal injustices at the family, community or national level, further limits the ability of persons with disability to contest inequities encountered in inheritance policies and practices.

**Bezug:** Groce, Nora Ellen; London, Jillian; Stein, Michael Ashley: London, Leonard Cheshire Disability and Inclusive Development Centre, 2012; https://www.ucl.ac.uk/lc-ccr/centrepublications/workingpapers/WP17_Disability_and_Inheritance.pdf.

*Centre for Human Resource Development (CHRD)*

**The Darkest Corners: Abuses of Involuntary Psychiatric Commitment in China**

Every year, hundreds of thousands of people are detained against their will in China's psychiatric hospitals because they have or are alleged to have mental disabilities. The involuntary commitment and forced medical treatment of such persons is a violation of the principles of the Convention on the Rights of Persons with Disabilities.

CHRD's report, The Darkest Corners: Abuses of Involuntary Psychiatric Commitment in China, details the grim conditions and human rights abuses faced by these individuals. Patients brought to the hospital are denied of the right to make decisions regarding their own fate, including admission, discharge and treatment. Forced medical treatment, violence and mistreatment occur frequently. Hospitals restrict or prevent patients from communicating with the outside world, including with their family members and legal counsel

**Bezug:** http://deflect.chrdnet.com/wp-content/uploads/2012/08/CRPD_report_FINAL-edited2; http://deflect.chrdnet.com/wp-content/uploads/2012/08/Press-release-FINAL-082220121.pdf.

*World Bank Social Protection and Labor Unit, Human Development Network (HDNSP)*

**Disability and Poverty in Developing Countries: A Multidimensional Study**

About 20 % of the world population lives with some form of disability according to World Health Report (WHO 2011). Yet, little is known about the economic lives of persons with disabilities, especially in developing countries. The research study Disability and Poverty in Developing Countries - A Multidimensional Study aimed to shed some light on this matter. The study uses, for the first time, internationally comparable data to draw an economic profile of persons with disabilities in 15 developing countries. In most countries, disability is found to be significantly associated with higher multidimensional poverty as well as lower educational attainment, lower employment rates, and higher medical expenditures. Among persons with disabilities, persons aged 40 and above and persons with multiple disabilities were more likely to be multi-dimensionally poor.

**Bezug:** Mitra, S./Posarac, A./Vick, B. (2013): Disability and Poverty in Developing Countries - A Multidimensional Study. World Development, Volume 41, 1-18; www.sciencedirect.com/science/article/pii/S0305750X12001465; http://siteresources.worldbank.org/SOCIALPROTECTION/Resources/SP-Discussion-papers/Disability-DP/1109.pdf.

*Christoffel Blindenmission (CBM)*

**Inclusion Made Easy - A Quick Program Guide to Disability in Development**

Inclusion Made Easy is designed for program staff in international development organisations. It is a brief, practical guide on how to ensure programs are disability-inclusive. It offers basic inclusion principles, practical tips and case study examples. Part A focuses on disability-inclusive development principles and Part B on disability inclusion across a range of development sectors.

**Bezug:** www.cbm.org/Inclusion-Made-Easy-329091.php.

*Shaun Grech*

**Disability and the Global South (DGS): New International Journal**

Disability and the Global South (DGS) is a new journal committed to publishing high quality work focused exclusively on all aspects of the disability experience in the global South. It provides an interdisciplinary platform prioritising material that is critical, challenging, and engaging from a range of epistemological perspectives and disciplines.

The journal encourages contributions from disabled activists and theorists from the global South, providing a safe space to critique and challenge the Western centrism in dominant disciplines and practices, and the imperialism in the production of 'knowledge' and its dissemination.

**Bezug:** www.dgsjournal.org; Spanish version: www.dgsjournal.org/espanol.

*Human Rights Watch*

**Like a Death Sentence: Abuses against Persons with Mental Disabilities in Ghana**

Human Rights Watch has just released its report entitled: Like a Death Sentence: Abuses against Persons with Mental Disabilities in Ghana. The report notes that most persons with mental disabilities in Ghana have little access to mental health care or other support services. Those who receive treatment often do so without their consent, in overcrowded and abusive public psychiatric hospitals and prayer camps, which are spiritual healing centres run by a church. The lack of proper community support systems makes it so that those living outside of psychiatric hospitals or prayer camps cannot access medication, struggle to find food and other necessities of life, and are subjected to daily stigma and discrimination.

**Bezug:** www.hrw.org/reports/2012/10/02/death-sentence.

*Access Exchange International*

**New Guide on Paratransit for Mobility-Impaired Persons in Developing Regions**

Access Exchange International has prepared a new guide entitled: Paratransit for Mobility-Impaired Persons in Developing Regions: Starting Up and Scaling Up. The guide will assist practitioners around the world, especially in developing countries, to initiate or expand paratransit services that include persons with disabilities and seniors. This practical guide is results-oriented and works to help mobility-impaired persons to get to where they need to go.

**Bezug:** www.globalride-sf.org/paratransit/Guide.pdf.

*Water Engineering and Development Centre and WaterAid*

**Equity and Inclusion in Water, Sanitation and Hygiene (WASH)**

Water Engineering and Development Centre (WEDC) and WaterAid have developed practical training materials for WASH practitioners, to help them analyse and address the problems faced by the most disadvantaged people in accessing WASH services.

Extensively field-tested by WaterAid and WEDC in Africa and Asia, the materials are participatory and interactive, and are ideal to facilitate practical collaboration and problem solving between disabled people and technical service providers. They can be used as stand-alone activities, or as part of a broader training programme. Although rooted in the social model of disability, the scope of the analysis framework has been broadened to encompass exclusion of all kinds. This makes the materials useful in building alliances with groups working on other issues, e.g. gender, HIV, ageing.

**Bezug:** Hazel Jones, Assistant Programme Manager, Water, Engineering & Development Centre, John Pickford Building, Loughborough University, Leicestershire, LE11 3TU; https://wedc-knowledge.lboro.ac.uk/collections/equity-inclusion; https://wedc-knowledge.lboro.ac.uk/collections/equity-inclusion.

# VERANSTALTUNGEN/EVENTS

27.04. - 28.04.2013    29th Pacific RIM International Forum on the Rights of Persons with Disabilities, Honolulu, Hawai.
**Information**: www.pacrim.hawaii.edu; E-Mail: prinfo@hawaii.edu.

03.09. - 04.09.2013    Closing the Gap – Capacity Building for and with People with Disabilities on the Relationship between Disability and HIV, Durban, South Africa.
**Information**: www.usicd.org/detail/event.cfm?event_id=246&id=92; ; Contact: FarzanaAlli: E-Mail: Allif@ukzn.ac.za; Tel.: 031 260 8944.

16.10. - 18.10.2013    2nd International Conference of the World Federation of the Deaf, Sydney, Australia.
Theme: Equality for Deaf People. Registration will be open from 1 January 2013.
**Information**: www.wfdsydney2013.com; Contact: PO Box 1060, Parramatta NSW 2124; Tel.: (02) 8833 3600; E-Mail: info@deafsociety.com.

18.04. - 19.04.2013    Fortbildungsseminar: Inklusion von Menschen mit Behinderung in Projekten der Entwicklungszusammenarbeit, Berlin
**Information**: Institut für inklusive Entwicklung, Wandastr. 9, 45136 Essen, Tel.: 0201/17 89 123, Fax: 0201/17 89 026, E-Mail: inie-inid.org

17.05.2013    Fortbildungsseminar: Wirkungsmessung von Inklusion und Teilhabe, Köln
**Information**: Institut für inklusive Entwicklung, Wandastr. 9, 45136 Essen, Tel.: 0201/17 89 123, Fax: 0201/17 89 026, E-Mail: inie-inid.org

15.06. - 16.06.2013    Zukunftsworkshop *Zukunftsfähige Entwicklung inklusiv gestalten*, Düsseldorf
**Information**: Behinderung und Entwicklungszusammenarbeit, Wandastr. 9,. 45136 Essen, Tel.: 0201/17 88 963, Fax: 0201/ 17 89 026, E-Mail: kampagnen@bezev.de

28.06.2013    Fortbildungsseminar: Arbeit und Beschäftigung inklusiv gestalten, Köln
**Information**: Institut für inklusive Entwicklung, Wandastr. 9, 45136 Essen, Tel.: 0201/17 89 123, Fax: 0201/17 89 026, E-Mail: inie-inid.org

03.12.2013    Fortbildungsseminar: Menschenrechte, Behinderung und Entwicklungszusammenarbeit, Berlin
**Information**: Institut für inklusive Entwicklung, Wandastr. 9, 45136 Essen, Tel.: 0201/17 89 123, Fax: 0201/17 89 026, E-Mail: inie-inid.org

## Schwerpunktthemen kommender Ausgaben der Zeitschrift
## Focal Topics of Upcoming Issues

1/2013: Von CBR zu Community Based Inclusive Development/From CBR to Community Based Inclusive Development (verantwortlich/responsible: Gabriele Weigt)

2/2013: Inklusion von Menschen mit Behinderung in sozialen Sicherungssystemen/Inclusion of Persons with Disabilities in Systems of Social Protection (verantwortlich/responsible: Sabine Schäper)

3/2013: Inklusion in der Entwicklungszusammenarbeit/Inclusion in Development Cooperation (Arbeitstitel) (verantwortlich/responsible: Gabriele Weigt)

Interessierte Autorinnen und Autoren mögen sich für nähere Informationen und unseren *Leitfaden für AutorInnen* bitte an die oben genannten Verantwortlichen wenden. Darüber hinaus sind Vorschläge für weitere Schwerpunktthemen willkommen unter info@inie-inid.org.
If you are interested in contributing, please contact the respective member of the editorial board mentioned above for more information and our Guidelines for Submissions. Moreover, we welcome ideas and suggestions for future focal topics which you can submit to our editorship at info@inie-inid.org.

### Deadlines for the upcoming issues:

|  | 1/2013 | 2/2013 | 3/2013 |
|---|---|---|---|
| **Hauptbeiträge/Focal articles** | 15.03.2013 | 15.05.2013 | 15.08.2013 |
| **Kurzbeiträge/Other contributions** | 15.03.2013 | 15.06.2013 | 15.09.2013 |

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# Behinderung und internationale Entwicklung
# Disability and International Development

Die Zeitschrift *Behinderung und internationale Entwicklung* erscheint seit 1990 dreimal jährlich mit Beiträgen sowohl in deutscher als auch englischer Sprache. Ihr Anspruch ist es, ein Medium für einen grenzüberschreitenden Informationsaustausch zur Thematik zu bieten sowie die fachliche Diskussion zu pädagogischen, sozial- und entwicklungspolitischen sowie interkulturellen Fragen im Zusammenhang mit Behinderung in Entwicklungsländern weiterzuentwickeln. Jede Ausgabe ist einem Schwerpunktthema gewidmet, das durch Einzelbeiträge und einen aktuellen Informationsteil ergänzt wird.

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The journal *Disability and International Development* is published three times a year since 1990, featuring contributions in both English and German. Its objective is the scholarly and practice-oriented discourse on disability in low-income countries. The journal aims at providing a platform for a cross-border dialogue and promoting the professional discussion of related development policy, pedagogical/educational, socio-political and intercultural questions. Each issue is dedicated to a focal topic, complemented by single contributions on other subjects and up-to-date information.

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