

**Economic and Social Commission for Western Asia (ESCWA)****MANAGING CHANGE: MAINSTREAMING DISABILITY
INTO THE DEVELOPMENT PROCESS***1. Embracing diversity*

Disability is a global concern. According to the World Report on Disability 2011, 10 to 15 per cent of the world's population lives with some form of disability as a result of ageing, the rise in non-communicable and chronic diseases and road traffic accidents. Although persons with disabilities are an integral part of societies, their needs are largely overlooked by policymakers and persons with disabilities deserve a more prominent position in public life.

Persons with disabilities need a supportive social and physical environment to lead a normal life. Persons in wheelchairs are able to work productively and integrate into social life if barriers in offices, public spaces and transport systems are removed. Blind people are able to read and write with Braille. Sports are an excellent platform to empower persons with disabilities and promote their inclusion. The extraordinary achievements of persons with disabilities in sports are widely respected.

Given the right opportunities, persons with disabilities have a lot to offer. Ultimately they are part of the entire diversity of life. Mainstreaming their needs will encourage communities and production processes to be more people-centred. To support persons with disabilities and the unique challenges they face, more attention must be given to promoting a healthy lifestyle and an enabling environment.

2. Managing change: from exclusion to inclusion

Contemporary research on disability and development has shown that persons with disabilities are one of the world's largest untapped human resources. It is estimated that the loss in gross domestic product (GDP) owing to the economic inactivity of persons with disabilities is approximately US\$2 trillion worldwide.¹ A study carried out in a number of Asian and African countries found that the exclusion of persons with disabilities from work resulted in losses ranging between 3 and 5 per cent of GDP.²

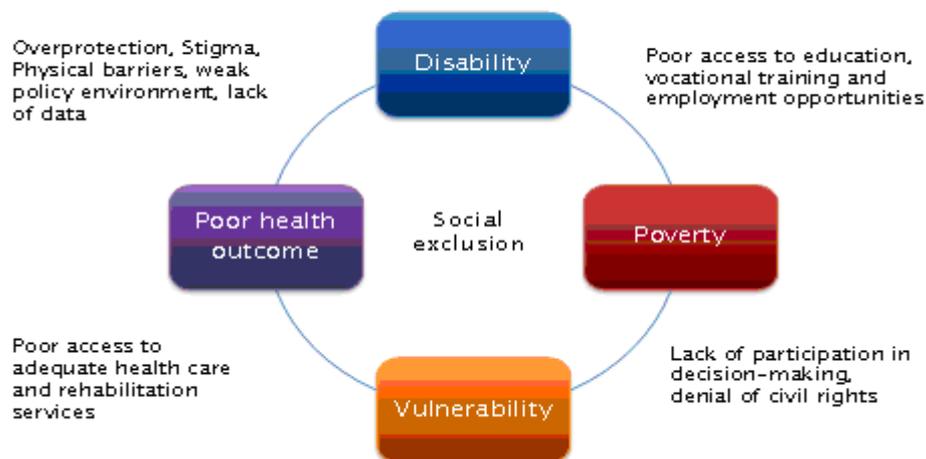
The costs of exclusion are also very high for the individuals themselves, their families and their communities. Persons with disabilities have poorer health outcomes, lower education attainment, higher unemployment and less participation in political and recreational activities. Care is often provided by a family member who must forego other employment. In addition, the cost of medical care and assistive devices can be burdensome for persons with disabilities and their families. These factors add to the

¹ G. Demarco, "Unlocking the Economic Potential of Persons with Disabilities in MENA," Knowledge and Learning Quick Notes Series, No. 9 (World Bank, August 2009).

² S. Buckup, "The Price of Exclusion: The economic consequences of excluding people with disabilities from the world of work," Employment Working Paper No. 43 (International Labour Organization, 2009).

difficulties of persons with disabilities. At the community level, the economic inactivity of persons with disabilities raises the cost of public welfare systems. The cumulative effects of deprivation, exclusion and disability result in a vicious circle of long-term disadvantage (figure 1).

Figure 1. Disability and Poverty: A vicious circle



Breaking this circle is only possible when people appreciate that adults and children with disabilities have the same rights as other individuals to access social services and participate fully and equally in public life. Awareness-raising is indispensable for reshaping negative attitudes towards persons with disabilities. Education, training and active labour-market policies can move persons with disabilities out of poverty and discourage welfare dependency. Strong regulations and laws can protect persons with disabilities from discrimination and exclusion and foster social justice.

To achieve inclusion, the Arab region must deal with several challenges

With the 2010 round of population censuses, a number of ESCWA member countries have included disability in their questionnaires. But more specialized disability-related data are needed. Few member countries have adopted the recommended set of questions developed by the Washington Group on Disability Statistics.³ The answers to these questions provide specialized disability-related data at the household level, and help policymakers identify the incidence of multiple disadvantages such as disability and poverty.

In addition, social stigma and the lack of public awareness have prevented persons with disabilities from claiming their rights. Stronger policy infrastructure and regulatory mechanisms are needed to protect them from discrimination and marginalization. In the absence of such policies and regulations, the State and persons with disabilities are dependent on family support and other care providers. Disabled women are often at a double disadvantage, facing discrimination based on gender and disability (box 1).

³ Available at http://www.cdc.gov/nchs/washington_group/wg_questions.htm.

Box 1. Disability from a gender perspective

International evidence suggests that women with disabilities are especially disadvantaged in terms of access to adequate housing, health services, education, vocational training and assistive devices. They are also more likely to be institutionalized. Women with disabilities face discrimination when being hired, promoted and paid for equal work, and rarely participate in public decision-making.

In the Arab region, women with disabilities are among the most vulnerable and marginalized social groups. In more conservative Arab communities, traditions and social norms trap women in a vicious circle of discrimination, thereby reducing their opportunities for marriage, access to adequate education and rehabilitation and participation in economic and social activities.

In the region, the risk of disability has increased because of an increasingly unhealthy lifestyle, political instability and armed conflict. Currently, the risks are partially masked by the large youth population of Arab countries, but Governments are well advised to plan ahead for the ageing of their populations, which will demand more care, especially health-care services.

Despite the commitments made by Arab countries in the Arab Decade for Persons with Disabilities (2004-2013) disability is not yet fully approached as a human-rights issue. The definition of disability varies from one country to another depending on such factors as the severity of the disability and the social perception of it. Likewise, the medical principles of rehabilitation and care still guide data collection and national policy response (box 2).

Box 2. The Arab Decade for Persons with Disabilities 2004-2013

The Plan of Action of the Decade focused on 11 disability-related areas, namely: education; health; legislation; rehabilitation and employment; disabled women; disabled children; accessibility and transport; globalization; poverty and disability; information and awareness; and recreation and sports.

The Plan of Action establishes national committees composed of representatives from concerned governmental agencies, non-governmental organizations and disabled peoples organizations to monitor the implementation of the Arab Decade and report annually to the Technical Secretariat of the Council of Arab Social Affairs Ministers.

In the region, the social protection systems are fragmented and reflect the segregated nature of the labour market. Social protection systems often exclude those who work in the informal sector, the sector in which the majority of economically-active persons with disabilities are employed.

The interplay between all these challenges results in limited social participation and autonomy for persons with disabilities.

To achieve inclusion, the Arab region must build on positive initiative and successful practices

Several Arab countries have begun to reform their disability policies. Table 1 presents the Arab countries that have signed and/or ratified the Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol (for a summary of CRPD see box 3). Guided by CRPD, Bahrain, Kuwait, the Syrian Arab Republic and the United Arab Emirates are enacting new disability laws and Jordan is revamping existing laws. Countries are also developing disability strategies using a participatory approach and awareness-raising strategies promoting inclusion (Lebanon, Palestine) (box 4).

TABLE 1. SIGNATORIES AND RATIFICATION OF THE CONVENTION AND ITS OPTIONAL PROTOCOL AS OF MAY 2012

Country	Convention signature date	Protocol signature date	Convention ratification date	Protocol ratification date
Algeria	30/03/2007	30/03/2007	04/12/2009	
Bahrain	25/06/2007		22/09/2011	
Egypt	04/04/2007		14/04/2008	
Jordan	30/03/2007	30/03/2007	31/03/2008	
Lebanon	14/06/2007	14/06/2007		
Libya	01/05/2008			
Mauritania			03/04/2012	03/04/2012
Morocco	30/03/2007		08/04/2009	08/04/2009
Oman	17/03/2008		06/01/2009	
Qatar	09/07/2007	09/07/2007	13/05/2008	
Saudi Arabia			24/06/2008	24/06/2008
The Sudan	30/03/2007		24/04/2009	24/04/2009
Syrian Arab Republic	30/03/2007		10/07/2009	10/07/2009
Tunisia	30/03/2007	30/03/2007	02/04/2008	02/04/2008
United Arab Emirates	08/02/2008	12/02/2008	19/03/2010	
Yemen	30/03/2007	11/04/2007	26/03/2009	26/03/2009

Box 3. The Convention on the Rights of Persons with Disabilities

On 13 December 2006, the General Assembly adopted the Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol. The Convention entered into force on 3 May 2008 making it the first major human rights treaty of the twenty-first century and the first legally binding instrument with comprehensive protection of the rights of persons with disabilities. The Convention embodied the shift from considering persons with disabilities as objects of charity and medical care towards considering them as holders of rights and active agents of development.

The Convention goes beyond other human rights treaties in identifying the rights of persons with disabilities and delineating the obligations of States parties to CRPD to promote and protect those rights. The obligations include fighting discrimination against persons with disabilities and enabling their access to social services, justice and opportunities on an equal footing with other individuals.

The Optional Protocol is aimed at strengthening the implementation and monitoring of CRPD. Once the Optional Protocol is ratified by a country, individuals from that country are allowed to bring complaints to the Committee on the Rights of Persons with Disabilities if they believe their rights have been violated. It also permits the Committee to undertake inquiries in the event of grave or systematic violations of CRPD.

The Committee reviews periodic reports submitted by States on the progress they have made to implement CRPD. The Conference of States Parties to CRPD was established to examine matters related to the implementation of the Convention, to debate and adopt amendments to it and to elect the members of the Committee on the Rights of Persons with Disabilities. More information on the Convention and its Optional Protocol is available at <http://www.un.org/disabilities/default.asp?navid=24&pid=151#iq4>.

Box 4. Practices promoting the inclusion of persons with disabilities in Jordan and Lebanon

Jordan has demonstrated high political buy-in to support persons with disabilities and shift from a welfare approach to a rights-based approach. The National Disability Strategy explicitly strives to achieve greater social inclusion of persons with physical disabilities by promoting their rights and enhancing the availability and accessibility of social services.

Lebanon is often cited as a model for participatory decision-making in the field of disability. Lebanon formed the National Committee for the Disabled, and members of the Committee are directly elected and represent associations of persons with disabilities and the disabled themselves. The Rights and Access programme, which was created in 1994, helped to shift the approach to disability from care to rights. The Disability Card allows direct targeting of the needs of persons with disabilities and facilitates their access to services provided by public and private organizations.

The majority of countries have implemented specific measures to provide free health-care services, to support rehabilitation programmes and encourage small income-generation activities. They also introduced tax exemption measures aimed at increasing accessibility to transport and assistive technologies. It is also noteworthy that all 14 ESCWA member countries have established 2 to 5 per cent quotas for employing persons with disabilities. Bahrain, Jordan, Kuwait, Lebanon, the Sudan and the Syrian Arab Republic have established inter-agency bodies and councils in charge of implementing and monitoring the Convention. The establishment of such councils is expected to synchronize the efforts of different institutions working in the field of disability and improved the quality and accessibility of services.

To achieve inclusion, the Arab region must ensure that remaining barriers are removed

Despite increased awareness and promising initiatives, greater commitment from the Governments of ESCWA member countries is needed to deal with disability affairs. This commitment should not only address the socioeconomic rights of persons with disabilities but also devise and champion legislative mechanisms to protect those rights. Some programmes in Jordan, Lebanon and the Syrian Arab Republic are shifting from a welfare-based to a rights-based approach to disability. The rights-based approach and the removal of discriminatory, environmental and social barriers will reduce the vulnerability of this group and facilitate social integration. In parallel, existing disability-related policies should be strengthened. Quotas for employing persons with disabilities, for example, need to be complemented by anti-discrimination laws and enforcement measures.

Governments also need to articulate a clear vision of inclusiveness and establish monitoring, coordination and consultative mechanisms between the State and representatives of persons with disabilities to achieve it. At the same time, raising social awareness and improving data collection on disability are needed for informed policymaking and to remove barriers that prevent the economic, social and civic participation of persons with disabilities.

3. The work of ESCWA to mainstream disability into the development process

The relationship between disability and development is integral to the mission of ESCWA, which aims to support member countries in achieving inclusive and sustainable growth. Within ESCWA, the Social Development Division is the focal point on issues and policies related to persons with disabilities. A major role of the division is to promote the development of people-centred and participatory policies and advocate and support the implementation of international group-specific frameworks and instruments, including those targeting persons with disabilities. This is achieved through normative and consultative processes, technical support and field projects.

Global and regional disability frameworks

The work of ESCWA on disability originally stemmed from the World Programme of Action Concerning Disabled Persons (1982),⁴ the United Nations Standard Rules on the Equalization of Opportunities for Persons with Disabilities (1993)⁵ and CRPD (2006).

Within the United Nations system, ESCWA is a member of the Inter-agency Support Group for CRPD. This group is composed of over 25 United Nations system agencies, funds and programmes and provides advice and assistance in mainstreaming the actions laid out by the Convention into the strategic plans, policies and programmes of the United Nations system. This group also provides a forum for member organizations of the United Nations and other agencies to exchange information and strengthen cooperation in relation to the rights of persons with disabilities and other development concerns.⁶

As the regional arm of the United Nations, ESCWA plays an important role in rallying all stakeholders around social development priorities, including disability. Working alongside the League of Arab States and the Arab Organization for Disabled People, the efforts of ESCWA culminated in proclaiming the period 2004-2013 as the Arab Decade of Disabled Persons during the Arab Summit in Tunis in 2004. The translation of the Decade into a comprehensive Plan of Action provided a regional framework for cooperation on the different priority areas. The Plan of Action called for concrete actions to ensure that Arab persons with disabilities were aware of and able to exercise their social, economic and civil rights.

Data collection and the rights-based approach

Over the past decade, the United Nations General Assembly called for urgent attention to specific disability priority areas, including the “full and effective participation of persons with disabilities, building a knowledge base of disability data and facts and promoting accessibility of the built environment and of information and communications technology.”⁷ Accordingly, ESCWA examined national statistics and policies related to persons with disabilities and their integration in public life, while advocating a rights-based approach. The results of that effort include the following:

- A country study on disability policy in Jordan:⁸ the study adopted a rights-based approach to map the access of persons with physical disabilities to education and health services, employment and social protection;
- A report on proposed methods to combat poverty among persons with disabilities:⁹ this report looked into the interlinkages between disability and factors that lead to poverty and social exclusion;
- A paper on the regional and international practices that foster the inclusion of persons with disabilities in the labour market:¹⁰ the paper examined international and regional experiences in promoting the inclusion of persons with disabilities and provisions for enhancing their employment and social protection;

⁴ A/RES/37/152 of 3 December 1982.

⁵ A/RES/48/96 of 20 December 1993.

⁶ More information available at <http://www.un.org/disabilities/default.asp?navid=46&pid=323>.

⁷ Report of the Secretary-General, “Realization of the Millennium Development Goals and other internationally agreed development goals for persons with disabilities”, 2011, (A/66/128), para. 9.

⁸ E/ESCWA/SDD/2009/7.

⁹ E/ESCWA/SDD/2011/IG.1/4.

¹⁰ E/ESCWA/SDD/2010/WP.4.

- The eighth session of the ESCWA Committee on Social Development: the meeting was held in Beirut in March 2011 and provided a forum for government representatives of ESCWA member countries to discuss key issues on disability.

Strengthening knowledge and policy infrastructure

Gathering statistics and information is crucial to enable policymakers, researchers and disability advocates to engage in a collective learning process on and adopt appropriate policy options. Accordingly, ESCWA is launching a new project comprising a database on disability statistics and an inventory of national disability policies. The project will contribute to a regional policy debate that will culminate in a regional conference on the goals, objectives and the progress made in implementing the Plan of Action of the Arab Decade for Persons with Disabilities and CRPD.

Ultimately, the project aims at improving policies that serve persons with disabilities in the region, and increasing the commitment of Governments towards mainstreaming disability into the development process through a time-bound Plan of Action. It is anticipated that the Plan of Action will highlight gaps and capacity-building needs of Arab countries to implement the Convention and devise a framework to meet those needs. In that respect, ESCWA is reaching out to member countries and partnering with concerned national and regional stakeholders, including civil society, to inform the project process. Civil society has an important role to play in promoting the rights of persons with disabilities and in monitoring the implementation of CRPD.¹¹ Furthermore, ESCWA will use its convening power to facilitate the transfer of knowledge and best practice from other developed regions to foster the civic participation of persons with disabilities and enable them to influence decisions that affect their lives.

Alignment with the Millennium Development Goals

Disability gains new significance in the light of efforts to achieve the Millennium Development Goals (MDGs) by 2015. Governments are recognizing that the failure to mainstream disability into the development process will hinder progress towards MDGs. At present, the General Assembly is recommending the inclusion of persons with disabilities in reviewing progress towards all MDGs. Table 2 shows the close connection between all MDGs and persons with disabilities, exposing the fact that the needs of persons with disabilities must be considered in all MDG efforts.¹² Therefore, mainstreaming disability into development planning is crucial to achieve equal opportunities for persons with disabilities and ensure that development benefits are equitable, sustainable and available to all members of society.

TABLE 2. DISABILITY AND THE MILLENNIUM DEVELOPMENT GOALS

Goals	Linkage with disability
MDG 1: Eradicate extreme poverty and hunger	Hunger, disability and poverty form a vicious circle in which malnutrition causes disability and disability causes and deepens poverty. Labour-force participation of persons with disabilities is significantly lower than for persons without disabilities.
MDG 2: Achieve universal primary education	The United Nations Educational, Scientific and Cultural Organization estimates that of the 75 million children of primary school age who are out of school, one third are disabled and that over 90 per cent of children with disabilities in developing countries do not attend school. The literacy rate for adults with disabilities is as low as 3 per cent in some countries. Without an education, persons with disabilities have far lower capacity for employment and independence, posing an additional burden on the supporting community.

¹¹ More information available at <http://www.un.org/disabilities/default.asp?navid=24&pid=151#sqc13>.

¹² United Nations Department of Economic and Social Affairs, "Disability and the Millennium Development Goals", 2011.

TABLE 2 (continued)

Goals	Linkage with disability
MDG 3: Promote gender equality and empower women	Disabled women face discrimination based on gender and disability. Literacy rates for disabled women are as low as 1 per cent in some countries, and disabled men are almost twice as likely to have jobs as disabled women. Women who give birth to disabled children have additional care responsibilities and face social stigma.
MDG 4: Reduce child mortality	Mortality for disabled children can be as high as 80 per cent even in countries where mortality under 5 years of age is below 20 per cent.
MDG 5: Improve maternal health	The United Nations Population Fund estimates that as many as 20 million women per year suffer disability and long-term complications as a result of pregnancy and childbirth. Abnormal prenatal or perinatal events are a major cause of disability in children. A large number of perinatal disabilities in children can be prevented by access to skilled midwives and birth attendants.
MDG 6: Combat HIV/AIDS, malaria and other diseases	HIV/AIDS, malaria and tuberculosis are the first, sixth and ninth most frequent causes of disability-adjusted life years (DALYs) in high mortality countries. One in ten children suffers neurological impairment after cerebral malaria, including epilepsy, learning disabilities and loss of coordination. Disabled people are particularly vulnerable to HIV/AIDS but they typically lack access to information about how to protect themselves or obtain treatment.
MDG 7: Ensure environmental sustainability	Poor environmental quality is a significant cause of illness and disability. During a crisis, people with disabilities are doubly vulnerable as a result of impairment and poverty. They are often overlooked or excluded from disaster preparedness, mitigation and intervention.
MDG 8: Develop a global partnership for development	Global coordination on disability issues include the United Nations Convention on the Rights of Persons with Disabilities; Biwako Millennium Framework for Action towards Inclusive, Barrier-free and Rights-based Society for Persons with Disabilities in Asia and the Pacific 2003-2012; the African and Arab Decades of Persons with Disabilities; and the World Bank Global Partnership for Disability and Development. International agreements and coalitions are needed to guide development.

Source: ESCWA, "Proposed Methods to Combat Poverty among Persons with Disabilities" (E/ESCWA/SDD/2011/IG.1/4, 2011, Part I), adapted from: Report of the Secretary-General, "Realizing the Millennium Goals for persons with disabilities through the implementation of the World Programme of Action concerning Disabled Persons and the Convention on the Rights of Persons with Disabilities" (A/64/180, 2009, pp. 6-8); and P. Thomas, "Disability, Poverty and the Millennium Development Goals: Relevance, Challenges and Opportunities for DFID", (*GLADNET Collection*, Paper 256, 2005, pp. 7-9).

Latest United Nations Resolutions on disability (2010-2012)

- Convention on the Rights of Persons with Disabilities (CRPD) and the Optional Protocol thereto (A/RES/66/229);
- High-level Meeting on Realization of the Millennium Development Goals and Other Internationally Agreed Development Goals for Persons with Disabilities (A/RES/66/124);
- Realizing the Millennium Development Goals for persons with disabilities towards 2015 and beyond (A/RES/65/186).

Upcoming United Nations Events on disability (2012-2013)

- Fifth Conference of States Parties to CRPD New York, 12-14 September 2012; Civil Society Forum 11 September 2012;
- International Day of Persons with Disabilities, 3 December 2012 Removing barriers to create an inclusive and accessible society for all;
- High-level Meeting on Disability and Development, 23 September 2013.