**KEY CONCLUSIONS**

1- It was noted that the Arab region expressed the situation of PWD more than any other region and contributes to the global perspective through the production of comparable data in many countries of the region. It is equally important to mainstream disability perspective in the NSS to collect further information through available tools and provide a more comprehensive picture using data disaggregation to leave no one left behind. The meeting stressed on the importance of sharing the results with NSS and civil society as an instrument to advocate human rights of PWD.

2- In a global effort to fulfil the objective of Agenda 2030, a number of UN agencies such as ILO has revised related concepts to contribute to more visibility of vulnerable groups. Countries were encouraged to update and review their data collection methods to align their collection tools with the latest developments.

3- The countries realized that disability is a complex concept; however, data collection methods such as WG made the measurement process easier to reflect on the situation of PWD. It was also noted that asking questions on difficulties and analyzing them were important for policy making. NSOs, therefore, should not only produce data but also provide relevant analysis to policy makers to ensure effective use for evidence-based policy. Good practices on effective use of evidence in policy making are needed to demonstrate importance of demand as well as the supply of disability statistics.

4- The participants understood the concept and difference between disability data produced from population-based surveys and its advantages with regards to coverage, representation. Unlike administrative records used for the purpose of receiving disability services and benefits, population-based data anonymous in nature, reflect population needs without the expectation for any return.
5- The WG is not a medical module. It does not ask questions on medical conditions or attempt to make a diagnosis or look for impairment. Nor is the purpose of the WG questions to provide services for PWD, but rather attempts to identify limitations in basic, universal activities that put PWD at risk of participation restrictions in areas like education, employment, access, health etc. It highlights disparity and gaps with PWtD. NSOs need to clearly raise awareness of users on distinguishing between the two sources and use of each for different objectives.

6- Disability is conceived as a continuous measure; it is not naturally a dichotomy. The WG offers the calculation of disability at different levels of severity: disability as only those who are “unable at all” to do at least one of the 6 functional domains, those who have “a lot of difficulty” OR are “unable” to do at least one of the 6 functional domains, or those who have at least “some difficulty” on at least one domain of functioning. For reporting internationally, it is important to use a cut off level for disability at “unable at all” and “with a lot of difficulty”. Those cutoffs should be clearly stated when data are disseminated to the public.

7- The participants agreed that following the regional guidelines and using the AWG-SS+ of eight domains (the WG-SS plus the two upper body questions) are important to increase the coverage and reflect a better reality of PWD in future data collection tools such as 2020 population census.

8- The meeting also emphasized the importance of providing good training for field workers by using different tools such as use of PWD trainers. Good training would contribute to the collection of more accurate data.

9- It was also noted that the compounded questions on seeing or hearing may be divided into two separate questions, if space allows, for clarity. The questions should, however, begin by asking the respondent whether he/she uses an assistive device, followed by the question on “do you find difficulty when using the assistive device?” It is not correct to ask first if the persons had difficulty in seeing, for example.

10- The participants discussed the relevance of adding “cause of disability” and whether it contributed to preventive measures. It was explained that disability had already taken place and no preventive measure could change that. Asking about the “age of onset”, however, was considered more important and could be more informative to policy makers.

11- The WG questions would be more suitably placed at the beginning of the questionnaire with the demographic characteristics of the population under study.

12- It was also noted that a larger younger population would result in a lower prevalence rate compared to a larger elderly population. Disability rates increases with age.
13- Effective dissemination and communication of disability data is important to raise awareness and mobilize public discussion and action. The meeting commended on PCBS good practice in engaging PWD to disseminate disability survey results.

14- It was also noted the importance of collecting data on children to raise awareness, advocate for their rights, quantify their needs to prioritize interventions and monitor progress and outcomes. Therefore, countries were encouraged to collect data using CFM for 2-4 and 5-17 years old. It is not advisable to include children below 2 years.

15- Autism is diagnosis and therefore it is not included in the WG CFM questions. However, activities of functioning like controlling behavior and focusing attention etc. may be associated with autism and would be captured through those questions. It was noted that some persons with autism or other conditions/diagnoses could be fully functioning and therefore were characterized as being with no functional disability. In addition, many people specially those living in rural areas are unaware of autism and therefore would not be able to identify it. Those same people, however, would be able to identify behavior or attention problems.

16- Inclusive education module looks into participation of all children and the right to go to school. It investigates the barriers and environmental factors that prevent all children from schooling. Countries realized that collecting data using the inclusive education model requires the cooperation of the ministry of education, which may prove challenging. Therefore, it is essential to highlight that children with disabilities are out of school because of inaccessibility or adaptability of schools and not because of their disability but the inability of the school system to include them.

17- The meeting stressed that decent work and employment are essential for the well-being of all persons with disabilities, and that a number of indicators are needed in order to monitor the progress towards the SDG target 8.5: By 2030 achieve full and productive employment and decent work for all and equal pay for work of equal value 8.5.2 Unemployment rate, by sex, age and persons with disabilities does not provide a comprehensive picture of the participation of PWD in the labour market. For example, it does not take into account the fact that many PWD would like to be employed but do not seek employment, and therefore not counted as part of the unemployed. Therefore, it needs to be complemented with additional indicators (e.g. employment-to-population ratio disaggregated by sex, age and disability status).

18- It was also stressed that comparing labour market characteristics of people with and without disabilities is not sufficient. Disaggregating outcome indicators will allow identification of the gaps in the work experience between people with and without disabilities, but it will not provide the information necessary for uncovering the barriers and facilitators that drive those outcomes. This information is needed for the proper development of policies to rectify outcome gaps. Therefore, ILO in collaboration with the Washington Group on Disability statistics has developed an LFS module that collects
additional information regarding obstacles people with disabilities face in the labour market.

19- It was recommended that the module on obstacles persons with disabilities face in the labour market is periodically included in the on-going LFS and other household-based surveys with a module on employment.

20- The meeting recommend that stand alone specialized surveys on disability are important every 5 to 10 years to provide base line data and other cross-sectional information in all areas.

21- The meeting discussed the importance of collecting information on assistive devices and need of services by PWD along with the prevalence rates. Information on use and unmet need of assistive devices and service would provide policy makers with better information on PWD and allow them to plan effectively.

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