



United Nations

Department of
Economic and
Social Affairs

Global Forum on the COVID-19 crisis and persons with disabilities Building back better towards an inclusive, accessible and sustainable world for all

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Intervention of Ms Maria Gomes Do Valle Ribeiro UN Resident Coordinator for Zimbabwe

The 2030 Agenda for Sustainable Development commits to “leave no one behind towards a peaceful and prosperous world, where dignity of an individual person and equality among all is applied as the fundamental principle. It is critical to ensure, in this regard, the full and equal participation of persons with disabilities in all spheres of society and create enabling environments by, for and with persons with disabilities, in line with the Convention on the Rights of Persons with Disabilities.

In Zimbabwe, the COVID-19 pandemic is occurring against a backdrop of increased vulnerabilities attributable to a challenging macro-economic environment and climatic shocks from cyclone Idai and an el-nino induced drought. The exceptional measures introduced to prevent and contain the spread of COVID-19 have exacerbated an already dire situation adversely impacting livelihoods and access to basic services. Consequently, the challenges facing persons with disabilities as a vulnerable group are heightened.

So what have been the key challenges and gaps facing Governments in ensuring that persons with disabilities are included and protected in the pandemic response? Let me mention three salient concerns here:

1. **Firstly, there is a Planning challenge on disability inclusion.** That holds true in terms of disability public policy in general, but it becomes a glaring gap in times of emergency. The government is currently developing a national policy and bill on disability, which the UN is supporting, with a specific advocacy on including Risks Management provisions. Weakness in planning stems from a lack of a centralized and accurate data collection mechanisms on disability, which is rendering the humanitarian interventions very complicated, including in the context of COVID-19 pandemic. In April, the High Court compelled the Government to provide information on COVID-19 in formats accessible to persons with disabilities and to ensure that COVID-19 response centres and services are tailored to meet the unique needs of persons with disabilities
2. **Secondly, there is a lack of systematic collaboration between the government and the Organizations of persons with Disabilities (OPDs),** especially the Umbrella organizations. Stronger collaboration could have tremendously facilitated more strategic

efforts including a rapid need assessment, targeting the most vulnerable, facilitated risks communication and enhanced coordination. I wish to commend the efforts of the two umbrella organizations; the Federation of Organizations of Disabled People in Zimbabwe (FODPZ), and the National Association of Societies for the Care of the Handicapped (NASCOH).

3. **Thirdly, there is still a general ignorance of what disability is.** In times of the pandemic, societies tend to make hierarchy in prioritizing needs and interventions. Unfortunately, persons with disabilities still remain left behind in Zimbabwe, and there is a strong need to continuously raise awareness on the inclusion, rights and dignity of all.

Now, what practices have we set in place as the UN, in partnership with the government?

Here again, let me highlight three main undertakings:

1. In April 2020, as part of mitigation measures when the country still counted very little cases, we launched two series of [Awareness-raising](#) and [Advocacy Videos](#) in accessible format. The first series provides basic information on the pandemic and explain the specific needs of persons with disabilities in terms of prevention and treatment. The second features seven famous disability advocates, calling on the governments and all actors to specifically address the needs of persons with disabilities, along the International Disability Alliance (IDA)'s recommendations. A [checklist of human rights standards](#) for the COVID-19 response in Zimbabwe was translated into formats accessible to persons with disabilities.
2. In developing the Humanitarian Response Plan for Zimbabwe and including its addendum on the COVID-19 response, as well as the Global Humanitarian Response Plan (GHRP), and the Socioeconomic Framework (SEF), we systematically mainstreamed disability rights across sectors, with specific targets and funding requirements. Of course, we placed particular attention to an inclusive recovery, including issues relating to labour, livelihoods, as well food security of persons with disabilities.
3. Lastly, in June 2020, we received assistance from the UN Partnership for the Rights of Persons with Disabilities (UNPRPD), to conduct an in-depth situational analysis on disability and COVID-19, which should feed into the CCA and Cooperation Framework which we are in the process of drafting. This support from the UNPRPD is quite timely and will go a long way to ensuring that the UN Cooperation Framework for Zimbabwe is truly and thoroughly inclusive, with evidence and learning from the pandemic we are grappling with.

How inclusive have we been in undertaking all these initiatives? We have indeed worked in a very close partnership with persons with disabilities themselves and their organizations, and this is extremely important as per the spirit of the Convention on the Rights of Persons with Disabilities (CRPD). And here again, I shall mention that the support we are receiving from the UNPRPD also aims at specifically improving collaboration with Organizations of Persons with Disabilities (OPDs) and ensure their inclusion in the decisions around the COVID-19 response and building back better.

Finally, my key messages for us to “building back better” after this crisis revolve around three ideas:

1. **In times of pandemic, while it is essential to save *life*, it is also key to save the dignity of *all lives*!** Therefore, ethical thinking and deliberations are critical even – or especially – when dealing with emergencies, to make sure that no hierarchy is drawn between the different categories of the population, or to ensure that good intentions do no harm to the most vulnerable.
2. **We must act at the upstream level to continue combating stigma and discrimination** against persons with disabilities, and especially women and girls with disabilities. The

qualitative studies undertaken by UNESCO in Zimbabwe reveal that negative and harmful beliefs, practices, and misconception about disability are a serious issue in marginalized communities. Wrong social perceptions dictated by cultural norms contribute to perpetuating all forms of violence and further exclude them from due attention in times of emergency. We should also be alive to the fact that persons with disabilities are not a homogenous group and our interventions should reflect that. They face multiple and compounding forms of discrimination, on the basis of disability but also on other grounds, which may lead to situations of exclusion.

3. **Persons with disabilities and their Organizations must be in the driving seat.** Nothing significant can be ‘done for the without them’, especially in times of emergency – Persons with Disabilities know their needs, concerns and experiences better, they know their communities, and they are the experts in their own right. Therefore, the UN and the international community should help the local actors to elaborate and sustain trustworthy and fluid platforms of dialogue and collaboration between the government and OPDs.

We, as the UN must continue to advocate for the acceptance of the human diversity – this is really the idea behind the 2030 Agenda. As the Autism Movement says it very nicely – “I am Different, Like You”!

Background Information for the Q&A

- Zimbabwe ratified the CRPD and its Optional protocol in 2013
- There is 9% of persons with disabilities in Zimbabwe (2017 Inter-Census). OPDs contest this low rate, as compared to the global average of 15%
- The *Zimbabwe Disabled Persons Act* of 1992 is not compliant with the CRPD, and the Government has engaged in a revision process in 2019
- Persons with disabilities are at greater risk of contracting COVID-19 because of several factors:
 - They have difficulties in practicing basic WASH measures that help prevent the disease;
 - They are at greater risk of developing more severe health conditions and dying from COVID-19, because of comorbidity diseases;
 - They lack access to basic information about the disease and its prevention measures;
 - They are at greater risk of discrimination in accessing healthcare and life-saving procedures during the COVID19 outbreak;
 - They are particularly disadvantaged by the socio-economic consequences of COVID-19 and measures to control the pandemic;
 - Those living in institutions are more likely to contract the virus and have higher rates of mortality.¹

Looking forward, what are the priority areas on Disability Inclusion in Zimbabwe?

¹ UN Policy Brief on A Disability-Inclusive Response to COVID-19, May 2020, <https://unsdg.un.org/sites/default/files/2020-05/Policy-Brief-A-Disability-Inclusive-Response-to-COVID-19.pdf>

Building back better after this crisis needs continuous work on Disability inclusion. Therefore, the humanitarian and development linkage is very important to achieve real and meaningful inclusion. Some of the key areas of interventions are:

1. **Fighting Stigma and Discrimination.** The Community leaders as Gate keepers, as well as the media should be targeted more specifically to change the narrative and call for social changes.
2. **Empowering the OPDs,** particularly those working with women and girls with disabilities, to have a stronger presence and voice across all levels (national to grassroots) in all spheres of development. Without this condition, effective and meaningful participation of persons with disability cannot be achieved in society.
3. **Improving the livelihood of persons with disabilities,** through skills development and TVET, inclusive education, and making the labour market much more inclusive.
4. **Building stronger institutional capacity on disability rights,** particularly if we want all sectors of government to work together in responding to the integrated needs of persons with disabilities. There is a particular need to design a disability inclusive Disaster and Risks Reduction (DRR) at the national and local levels.

What Joint Programme do you implement?

The UN in Zimbabwe is implementing the UNPRPD project on “*Advancing the Rights of Women and Girls with Disabilities in Zimbabwe*” began in 2018, involving UNESCO, UNFPA and UNDP.

Its catalytic role in promoting increased awareness raising and implementation of the Convention on the Rights of Persons with Disabilities (CRPD) is strong, because the UN has demonstrated the unique value of Joint Programming and Implementation on the ground. Plans for the UNPRPD project’s expansion therefore remain a priority of the UN as this project has triggered more interest in disability rights. This project has had a “domino effect” - in the sense that disability rights has become a part of mainstream dialogue in communities, justice system, and SRHR service delivery and others.

One key example of how this project has already expanded to other major programmes in the country is the UNPRPD’s active participation and share in the EU-funded *Spotlight Initiative to Eliminate Violence Against Women and Girls*. This is a flagship Joint UN Initiative in this field, in which the momentum, impact, and advocacy generated by the UNPRPD Project has allowed the integration of women and girls with disabilities as a key priority target group for Gender Based Violence responses. Today, the UNPRPD project and team serve as a technical support team to the UN system in Zimbabwe in this major Spotlight Initiative. This is a topical example of a successful spill-over effect in partnership building, bringing 6 UN Agencies, the Government, and the CSOs together to fight against violence and discrimination against girls and women with disabilities.

How many people have benefitted from the project?

- Over 3,000 people (both direct and indirect beneficiaries) have benefited from this project’s awareness raising, institutional strengthening, capacity building initiatives, and media coverage.
- Since 2018, over 261 women and girls with disabilities and over 600 communities (from 6 out of 10 of Zimbabwe’s Provinces) have been reached. Additionally, over a 100 stakeholders from the justice and SRHR service providers have benefited from various initiatives.
- In the future an additional 3 000 or more can be reached.

What are the most important lessons learnt from working on Disability inclusion in Zimbabwe?

- **UN Delivering as One:** The UN Agencies can deliver as one by bringing together their various areas of expertise, based on their mandates. Joint planning and building on each other's work has been a perfect illustration of how disability inclusion and rights issues, as an intersectoral and interdisciplinary issue per se, can highly benefit from the whole-of-the-UN approach and support to Member States.
- **UNPRPD project's technical backstopping in promoting disability rights in other UN Initiative:** This project played a key role in advocating for the right-based approach to disability within the UN initiatives themselves. The UN is supporting the Government in reviewing the Disability Policy and Bill, whereby the UN, because we have worked as One in the UNPRPD Project, has been requested to assist and advise the Government. The UNPRPD project team has been at the forefront of the UNCT's commitment to implement the new **UN Disability Inclusion Strategy (UNDIS)** at the country level. This is an ongoing effort for the years to come, and the UNPRPD project has played a crucial role in impelling the first discussions among the UNCT.
- **Meaningful Engagement & Participation of women and girls with disabilities:** This project has continuously engaged women and girls with disabilities and provided them platforms to be self-advocates on issues that affect them. The advocacy training on disability rights, leadership and SRHR for these women has been one notable area of success. During the Commemoration of the International Disability Day in 2019, I witnessed a group of empowered beneficiaries from UNPRPD project sites articulate (in their way) key areas of concern, and what they felt the UN and the policy-makers need to consider for improved inclusive programming. Such a public platform of dialogue with first-hand beneficiaries and partners are rare in the disability sector.
- **Participation of Civil Society:** The project has contributed to enhance the visibility and credibility of Organizations of persons with disabilities (DPOs), who are a key stakeholder in the successful implementation of the CRPD in Zimbabwe. The fact that the UN involves the DPOs in the driving sits helps to take the narrative on DPOs' involvement and participation to another level.
- **Institutional Capacity Strengthening:** The project has increased the institutional capacities of the Government of Zimbabwe, in the areas of Justice, SRHR, and Human Rights-based approach to disability in particular. And this is key to the CRPD implementation and reporting.