Mainstreaming Disability in the Development Agenda

Rosangela Berman Bieler
Inter-American Institute on Disability & Inclusive Development-IIDI
E-mail: RBBieler@aol.com

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WHO ARE THE BENEFICIARIES OF DEVELOPMENT PROJECTS AND PROGRAMS?
The only common characteristic among them is diversity

men, women, children, youth, older persons, persons with disabilities, Indigenous peoples, different ethnic groups, Jews, Christians, Muslims, atheists, rich, poor, illiterate, immigrants, tourists, doctors, housewives, taxi drivers, the smart, the sick, the homeless, the fat, the tall...
The worldwide demographic and epidemiological transitions show that in recent years, new profiles are being installed among the populations:

- people are living on average 20 years more than before;
- although the advancements in science and technology have a strong impact in prevention and treatment, there is an increase of chronic, non-communicable diseases;
- Maternal and child care still represent a challenge to be addressed, specially in developing countries, lead to high incidence of death or permanent disabilities;
- Accidents and urban and domestic violence, generate a great deal of death and chronic conditions, as well, specially in economically active populations;
- old and new forms of diseases, including HIV-AIDS, specially when associated with poor living conditions, generate permanent illnesses that lead to more poverty and social exclusion.
Inclusive & Sustainable Public Policies

- **Diversity** is what characterizes the populations that the development sector is meant to serve;
- Each individual in society has a *diverse way of functioning*;
- The demographic and epidemiological profile of the populations is pointing out to a bigger *prevalence of chronic conditions throughout the age brackets* of the world population;
- Societies have the responsibility of providing *dignity and quality of life to all* their members, in equal conditions...

To ensure *universalized, equity and sustainability in access to and coverage of public projects, programs and policies* - in all the development areas - all principles, actions and components should be conceived under an *inclusive approach*, from design to implementation.
Article 1 - Purpose

The purpose of the Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

http://www.un.org/disabilities
To guarantee a fair selection, all will have the same exact test – climb up on that tree.
Disability is the interaction between people with different levels of functioning and an environment that does not take those differences into consideration.

Disability = Functional limitation x Environment
Environment Impact in the relation between disability and functioning

\[ FL \ 1 \times E \ 0 \Rightarrow 0 \text{ Disability} \]
\[ FL \ 5 \times E \ 0 \Rightarrow 0 \text{ Disability} \]
\[ FL \ 1 \times E \ 1 = 1 \text{ Disability} \]
\[ FL \ 5 \times E \ 5 = 25 \text{ Disability} \]

**FL:** FUNCTIONAL LIMITATION

**E:** ENVIRONMENT
Disability is part of the life cycle of everyone

Besides the typical physical, sensory and mental disabilities, people in general face disabling conditions on a society that is unprepared for diversity, when they are too small (as in childhood) or too tall, late in pregnancy, temporary sick or ill, too fat, illiterate, a foreigner, an older person...
Functional limitations in the life cycle

• A baby that needs to be held or carried in a stroller for mobility;
• A small boy that can not reach his floor’s button in the elevator;
• Someone with a broken leg in a cast trying to go up the stairs;
• A woman in advanced pregnancy trying to get up the stairs of a bus;
• An illiterate citizen looking for information on the Internet;
• A group of tourists that do not speak the language, trying to communicate;
• Someone that cannot read the small letters on a prescription’ instructions;
• An older person with arthritis, that cannot open a door handle.

... All of these situations could happen to any of us!
The latest demographic surveys reveal that the largest prevalence of disabilities is concentrated in the age bracket of 65 years and up, when most people start experiencing some kind of progressive or permanent functional limitation.

The increase in life expectancy, does not keep people young for longer. On the contrary, it prolongs the aging process and its natural consequences; so people will live as older persons for a longer period of time, thus potentially, in disability as well.

For the sustainability of countries’ economies and social development, the growing population of older persons should be able to live and function with autonomy and quality of life.
With the advance of medicine, HIV-AIDS survivors have a higher life expectancy. People living with AIDS are potentially living with a disability associated or in consequence of the medication.

Also, people with disability are in major risk of contracting STI and AIDS, due to their great vulnerability to sexual abuse and to the lack of access to information and communication, and to the network of services.
According to the UN, approximately 10 percent of the world’s population has a disability. This translates into over 650 million people, 80% of them living in developing countries.

There is a vicious circle between poverty and disability. Poor people are more at risk of acquiring a disability because of lack of access to good nutrition, health care, sanitation, and living conditions. Disability creates barriers to education, employment, and public services that could help an exit from poverty.
Family Impact: if the disability prevalence was 5% (lower than reality) and families of 6 members average, more than 25% of the whole population would be directly affected by disability. If members of the extended family are considered, then 50% of the whole population would have a persons with disabilities in their family.

Demographics: It is expected that the number of persons with disabilities will increase by 120% in the next 30 years in developing countries. The increase will be 40% in more developed countries.

Causes: About 80% of disabilities have causes associated to poverty. It is estimated that 100 million people in the world acquired a disability due to malnutrition.

Statistics: data will differ depending on the definition of disability. Different definitions are applied for different objectives. There does not exist a comprehensive, universally accepted measure of disability.
Disability is an important cause and consequence of poverty. About 82% of persons with disabilities in developing countries live in poverty, which in most cases also affects family members.

Only about 20-30% of children with disabilities are attending school in the Global South.

About 80-90% of persons with disabilities are unemployed or outside the work force. Most of those who have jobs receive little or no monetary remuneration.

In Ecuador, 84% of persons with disabilities have no insurance benefits.
People with Disabilities are disproportionately poorer

Nearly an 82% of the persons with disabilities in Latin America are poor. In the majority of these cases, this also affects their families.

In Panama, the data in PENDIS (Jan/07) points to a prevalence of 11.3% of a persons with disabilities, reaching 13.5% in indigenous/rural areas. One out of three homes has a person with disabilities and, of this, 90,730 homes live with a low economic capacity.

A recent study in Brazil estimates the prevalence of disability in the country at 14.5%. The 2000 Census shows that, of the 24,650,000 Brazilians with disability, 27% live in situation of extreme poverty and 53% are poor.
UNIVERSAL ATTENTION

The UN agencies estimate that in countries of the South, health, education, social protection and others existing services, only reach 3 - 4% of persons with disabilities who need them. These are basically focused in specialized attention, and centralized in the great urban centers. As general public services are commonly not accessible for them, these invisible 96-97% of persons with disabilities and their families are usually kept excluded of/by the system and condemned to poverty.
Access to Services

The incidence of disabilities of all kinds - accordingly to levels of severity - is higher among the low and moderate disabilities, being the severe conditions, the less frequent. In most cases, these can receive primary care attention, at the community level, with simple interventions and at a lowest cost.

On the other hand, if the person does not receive the necessary attention, a low functional limitation, can become a severe disability, generating high possibility of social and economic exclusion.
Besides what is specific, persons with disabilities have many aspects and needs in their daily life that are not necessarily related to their disability:

- they need to go to an agency and pay their bills;
- they need to take their kids to school or to receive vaccination on a health center;
- They need to vote, to work, to eat, to go to the movies, to take vacations, to socialize... to be full citizens in their own community, as everybody else.

...Because they ARE everybody else!!!
Disability is out there, everywhere…

- If society is composed by people with diverse ways of functioning;
- If disability is part of everyone’s life cycle and it can appear in different moments of life;
- If we tend to acquire functional limitations as we age and the world population is aging more and more;
- If many causes of disability are a result of poverty and exclusion;
- If people who are considered “different” or who live with a disability tend to be invisible to/excluded from the system...

So, IN FACT, who are the persons with disabilities and where are they, so specific public policies can be designed to address their needs?
Inclusive and Sustainable Public Policies

Persons have different needs in various levels and at the same time. Each individual encompasses an array of characteristics and is permanently exercising different roles in life. For instance, a woman, who is black, Muslim, mother, leader of her union, tax payer and lives in a rural area. Due to so many personal factors, each individual has a diverse way of functioning in society.

But independently of who they are, where they live and how they function, they are all equal citizens with equal right and responsibilities under the law.

The cost of special services to address the specific needs of each group in society is always much higher and less cost effective than of those of public policies and programs designed and implement for all. Only an inclusive approach to development can adequately address this issue.
Poverty and social exclusion affect millions of people worldwide, prevent human development and a decent life with quality – and that in countries of the South this situation affects over half of the population. Exclusion and poverty, together with inequality, diseases, insecurity, environmental pollution and degradation, and inadequate design are public hazards affecting many people and threatening everyone.

To sustain and promote economic growth and well-being, it is essential to incorporate the concept of human functioning and inclusiveness into development programs. People’s functioning levels vary significantly, whether in relation to physical, intellectual or sensory (hearing and vision) abilities, or the impact of mental health. Not accounting for these differences can seriously limit the effectiveness of programs designed to promote economic and social well-being.
The emerging concept of Inclusive Development, recognizes diversity as a fundamental aspect in the process of socioeconomic and human development, claims a contribution by each human being to the development process, and rather than implementing isolated policies and actions, promotes an integrated strategy benefiting persons and society as a whole.

Inclusive Development is an effective tool for overcoming social exclusion, combating poverty and ensuring social and economic sustainability...

Sustainable Development means Inclusive Development!!!
Inclusive/Universal Design

- Recognizes diversity as a fundamental aspect in the process of socioeconomic and human development, claims a contribution by each human being to the development process, and rather than implementing isolated policies and actions, promotes an integrated strategy benefiting persons and society as a whole.

- It is estimated that the additional costs to bring universal access to the infrastructure is lower than 1% in the stage of design and planning.
Opportunities for the Promotion of Inclusive Development

• Take advantage of the **existing opportunities**;

• **Propose inclusive strategies in the programs and projects** that are being implemented;

• **Develop capacities** among the different actors, **to negotiate** the presentation of wider and inclusive projects and programs;

• Establish mechanisms for **participation and collaboration of** the beneficiaries (**PWD & families**) for the implementation, the monitoring and evaluation of the programs and inclusive actions.
Possible interventions in Human Development

• all projects related to education, health promotion and social protection should consider persons with disabilities and their families among their regular beneficiaries. Access to the building space and to information should be taken into account

• all projects involving construction, reconstruction and/or reform of school, health facilities and social protection services rendered to the public should be planned and implemented under the principle of inclusive design

• all Teacher Training programs and activities to promote/enhance quality in education should have an inclusive education component

• all health reform projects should have inclusive components e.g. appropriate services, equipment in primary health care level, and training of health personnel on Community Based Rehabilitation approaches

• all HIV-AIDS and all youth projects should include persons with disabilities and their families among their focus groups and as their direct beneficiaries
Possible interventions in Environment & Social Development

• all the environmental and social assessments should include disability indicators

• all projects involving Gender, Indigenous Peoples, Involuntary Resettlement, Social Participation and Inclusive Governance (among others) should take into consideration disabled people and their families among their regular beneficiaries

• studies, resources and materials directed to civil society and the public in general should include disability issues and should be available in accessible formats (Braille, Audio, Sign Language, etc…)

• training and meetings involving civil society should include persons with disabilities and be held in accessible sites.
Possible interventions - **Infrastructure**

- all projects involving infrastructure and transportation, construction, reconstruction and/or reform of the building environment, as well as services rendered to the public should be planed and implemented under the principle of inclusive design;

- all projects with private sector should take into consideration persons with disabilities and their families among their regular beneficiaries;

- Projects related to Tourism should take persons with disabilities into consideration to address new growing markets such as tourism for older persons and social tourism.
Possible interventions in Poverty Reduction Studies and Measurements

• Poverty Assessments, data collection and other sector studies should include indicators of disability (violence, gender, indigenous, etc).

• Studies/Flagships involving life-cycle and topics like job generation, aging & social security reform, cash transfers, etc, should include disability indicators

• When specific disability-related studies are conducted, they should be broadly disseminated

• The World Bank, in partnership with the UN Statistics Office and the Washington Disability Statistics Group, the IDB and the MECOVI Project have all been working hard to increasing the quality and the quantity of data available in the field of disability.
Mainstreaming Disabilities

Clear political will and allocation of adequate resources for mainstreaming — including additional financial and human resources, if necessary.

Mainstreaming does not replace the need for targeted, disability-specific policies and programs, and positive legislation; nor does it do away with the need for disability units or focal points.
Full participation of persons with disabilities

Disability mainstreaming requires that efforts be made to broaden the equitable participation of persons with disabilities at all levels of decision-making.

The integral involvement of civil society, including of organizations of persons with disabilities, in national and international mechanisms is an essential ingredient in effectively guiding the development agenda towards integrating and including persons with disabilities.