Expanding the GDS Discussion Paper on OPD engagement

# Introduction

The global movement surrounding disability rights took a historic turn with the [Global Disability Summit](https://www.globaldisabilitysummit.org/) (GDS) coming to life in 2017. With the intention to change the lives of persons with disabilities across the world, especially in developing countries, the GDS builds on an innovative multi-stakeholder, cross-border cooperative approach.

Throughout the discourse of the disability movement, people with disabilities have been left out of the global agenda, international cooperation policies, and programs that affect them the most, resulting in a lack of relevant interventions addressing the concerns of people with disabilities. To bridge this gap, one of the key themes of the GDS2022 was OPD engagement. To serve as a better, useful, and effective resource for governments, donors, civil society organisations, and OPDs, The Norwegian Agency for Development Cooperation (NORAD) commissioned a [discussion paper](https://www.globaldisabilitysummit.org/resources/discussion-paper-on-opd-engagement) highlighting the importance of inclusive programming and meaningful engagement of people with disabilities and their representative organisations through case studies collected through an open call, and crucial recommendations to ensure OPD engagement in view of a disability-inclusive future.

The paper builds on the tenets of the CRPD and recognises people with disabilities as equal subjects of human rights and OPDs as intermediaries that represent people with disabilities and their critical issues. The GDS Secretariat, to further the work initiated by the release of the discussion paper, has created a database where all case studies received may be consulted. Please feel free to consult the database, which can be accessed [here.](https://docs.google.com/spreadsheets/d/12eig1SnIicohbD2OdLWeZWeGTaeQU_0Q/edit?usp=sharing&ouid=114125692478575637478&rtpof=true&sd=true)

This database offers numerous benefits to other similar organizations, fostering collaboration, knowledge sharing, and overall advancement of their shared goals. It provides a valuable resource for organizations seeking guidance on effective strategies and approaches for advocating disability rights, inclusion, and empowerment. It offers insights into successful initiatives, campaigns, and policies that have produced positive outcomes in various contexts.

On top of the Discussion Paper published in 2022 and the database, the GDS Secretariat took the opportunity to further highlight five case studies, through this document. For each of the case studies below, a brief summary will be provided, along with information on how the problem was addressed, the result of the practice, and key recommendations.

# Case Studies

## 2.1 *OPD’s Engagement in Evidence-based Advocacy to Count Accurately the Persons with Disabilities in the Upcoming National Population and Housing Census 2021* – a Case Study by Access Bangladesh Foundation

### About Access Bangladesh Foundation

Based in the country’s capital, Access Bangladesh Foundation is an organization of people with disabilities that works on promoting equity for people with disabilities and other marginalized groups in all realms of life ranging from education, training, and employment to arts, health, legal services, and even climate change.

### Summary of the Case Study

With the support of the Disability Rights Fund, a national coalition of six Organizations of Persons with Disabilities (OPDs) successfully conducted evidence-based advocacy with the Bangladesh Bureau of Statistics (BBS) and the Planning Ministry to include persons with disabilities in the upcoming National Population and Housing Census 2021 scheduled to be held from 25-31 October 2021. (The survey took place from 15-21 June 2022 due to the restrictions arising from the pandemic.) As a result of advocacy, BBS has engaged OPDs to take inputs for developing census questionnaires, reviewing all publicity, promotional materials, and training manuals developed for enumerators, taking accessibility expert support, and ensuring OPDs representations in different committees.

### Problem addressed by the Case Study

There is no reliable data on persons with disabilities in Bangladesh which has been identified in the data gaps analysis conducted by the Government. The discrepancy of disability data in various government surveys found such as Household Income Expenditure Survey (HIES) 2010 (9.07%), Census 2011 (1.41%), HIES Sample Survey 2016 (6.94%), and Disability Information Survey (2.18%). If the country does not have an accurate number of persons with disabilities, it is not possible to allocate resources and undertake programs for their development. The upcoming census 2021 could be a golden opportunity for the Bangladesh Government to count persons with disabilities accurately as the census takes place every ten years. Improving disability data is one of the eight commitments the Bangladesh Government made at the Global Disability Summit held in London in 2018. The coalition of OPDs addressed this problem through an evidence-based advocacy to count accurately the persons with disabilities in the upcoming National Population and Housing Census 2021.

### Result/Outcome of the Practice in Improving OPD Participation

1. Based on the recommendations, submitted to the BBS, the coalition of OPDs arranged a meeting with Access Bangladesh and its partner organizations and they decided that
* BBS will call an emergency meeting shortly to discuss the questionnaire revision agenda and they will take steps to revise the questionnaire in line with our recommendations.
* Human resources from OPDs will be engaged in providing training to 100 master trainers on disability inclusion who will provide training to enumerators, zonal officers, and supervisors to be held in October 2021.
* OPDs will be engaged to review all promotional materials related to the census developed by the BBS.
* OPDs will review the training manual and provide the required inputs.
* Representation from OPDs will be ensured in the different committees related to the census for inputs.
1. To ensure the participation of OPDs in the census process, Access Bangladesh has trained 126 OPD representatives on the upcoming census 2021.
2. BBS decided that data enumerators, master trainers, zonal officers, and supervisors will be trained and sensitized on disability inclusion.
3. The awareness campaign for the PHC 2021 will be carried out in an inclusive and accessible manner
4. The result of the work will directly impact the macro activities i.e., the country will be able to make appropriate plans, programs, and resource allocation for the development of persons with disabilities in Bangladesh.

### How the Outcomes Were Achieved

Access Bangladesh identifies the following as key steps in achieving the desired outcomes:

* Outlined plots and milestones to achieve the target of engaging OPDs to include persons with disabilities in the upcoming National Population and Housing Census 2021.
* Prepared a policy brief on standardized disability data in the upcoming National Population and Housing Census 2021.
* Arranged national-level workshops with OPDs and meetings with BBS officials and different committees.
* Arranged a national webinar through the Disability Alliance on SDGs Bangladesh.
* BBS officials and the minister have been sensitized on disability inclusion in the census.
* A set of recommendations submitted to the government to make the upcoming census inclusive for persons with disabilities. The recommendations consist of 5 domains- general, data, capacity building, accessibility, and promotional and awareness.
* A support mechanism has been established with thematic experts to provide technical support to the BBS for implementing the recommendations submitted to the government.
* An accessibility audit has been conducted on the website of BBS.
* Provided inputs from OPDs in their regular meetings related to census.

### Key Recommendations for Multiplying the Results of this Practice

1. No alternative to doing evidence-based advocacy so we need to focus on it to multiply the results of this practice.
2. OPDs need to be capacitated more on how to improve disability data so that they can work as an expert group.
3. Coordinated efforts are required to draw the attention of government officials and policy-makers as we experienced a fixed mindset of the designated government officials towards disability inclusion.
4. Organizers should emphasize obtaining commitments from the government, development agencies, multi-lateral banks, and other agencies on the systematic engagement of OPDs for developing plans, programs, and allocating resources.
5. OPDs are the ultimate field forces so specific financial resources should be allocated mandatorily for them to work actively in the field.
6. Investment should be made in OPDs’ capacity building, promoting the OPD movement locally, nationally, regionally, and internationally.
7. Obtain commitment for official recognition of OPDs by the state and development agencies and strengthening and functionalizing government-OPDs-CSOs collaboration.

## 2.2 *Equitable Access and Response to the COVID-19 Pandemic (EAR-C 19) Project: Ensuring Disability Mainstreaming in Key Sectors* - a Case Study by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)

### About Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ)

Deutsche Gesellschaft für Internationale Zusammenarbeit, also known as GIZ, is the primary German development agency, headquartered in Bonn and Eschborn. It was founded in 2011 and works with the federal government to provide services in a large number of areas including international development cooperation, and international education work.

### Summary of the Case Study

Leadership, management, activists, and members of organizations of persons with disabilities were able to share experiences and good practices on the COVID-19 virus using emerging home-grown solutions, WHO, and other guidelines. This created meaningful consultation and active participation of persons with disabilities and their representative organizations to document their experiences on inclusion in all stages of the COVID-19 response and recovery and establish accountability mechanisms to ensure disability inclusion. There were 50 participants from the ADA (African Disability Alliance) affiliate representative organizations who registered and undertook the online course on “disability stakeholders & relationship building” which further prepared them to influence development agencies.

### Problem addressed by the Case Study

In March 2020, the World Health Organization (WHO) declared the outbreak of a novel coronavirus disease, COVID-19, to be a pandemic. A UN Policy Brief: A Disability-Inclusive Response to COVID-19 published in May 2020, noted that the global crisis of COVID-19 was *deepening pre-existing inequalities, exposing the extent of exclusion and highlighting that work on disability inclusion was imperative.* The Policy Brief highlighted the need to ensure the mainstreaming of disability in all COVID-19 response and recovery together with targeted actions.

In line with the speed and scale of transmission, people with disabilities were at greater risk of contracting COVID-19 due to: Barriers to accessing public health information; Barriers to implementing basic hygiene measures, such as hand-washing (e.g. hand basins or sinks may be physically inaccessible, or a person may have physical difficulty rubbing their hands together thoroughly); Difficulty in enacting social distancing because of additional support needs(personal assistance) or because they are institutionalized; and also the need to touch things to obtain information. Organisations were also out of touch with each other with meetings cancelled.

Depending on underlying health conditions, people with disabilities were at even greater risk of developing more severe cases of COVID-19 if they became infected. This may be due to: COVID-19 exacerbating existing health conditions, particularly those related to respiratory function, immune system function, heart disease, or diabetes; barriers to accessing health care; and those disproportionately impacted because of serious disruptions to the services they rely on.

There was, therefore, a need for assessment and monitoring of the status of COVID-19 responses/investments that reach/benefit persons with disabilities in Africa. Again, there was the need to have a stronger voice in terms of advocacy (OPD engagements). There was also the need to reconnect them with each other and create a link with stakeholders to consider these important needs of persons with disabilities whilst considering effective ways of addressing them during the global pandemic.

### Result/Outcome of the Practice in Improving OPD Participation and How it was Achieved

An appraisal report was produced by an organization of persons with disabilities of existing and planned COVID-19 responses/investments targeted at disability population groups in different African countries. This included an analysis of disability data on the status of intervention across Africa. The findings were then disseminated with the utilization of MEF data/statistics in online conferences and advocacy, planning, and implementation of COVID-19 responses and investments.

At least three hundred leaders, activists, managers/members of stakeholders from ADA networks in the five regions of Africa shared their practices and the capacity to create awareness of the impact of the COVID-19 virus on persons with disabilities. 10 online conferences with good practices for responding to COVID-19 inspired stakeholders to implement and cover the five regions of Africa.

ADA staff was also strengthened to provide technical support and moderation of online conferences at least twice per month providing real-time exchange of African context ideas, good practice, experiences, suggestions, tips, and motivation on COVID-19 responses between peers, DPOs, leaders, and duty bearers driving regional action. Similarly, inputs and contributions to the regional online campaign by persons with disabilities were sustained using, among others, accessible short messages and video clips, group chats, and social media awareness on topics such as social distancing and keeping safe from COVID-19. DPOs and persons with disabilities worked on a strategy of using resolutions from online conferences. They also submitted policy briefs and proposals on disability-inclusive COVID-19 response strategies to the government, regional organisations, and agencies of the AU.

At least ten organisations of persons with disabilities report having improved advocacy for the rights of persons with disabilities in development cooperation and programming by signing grant agreements. A free and self-paced online course on *“Disability Stakeholders & Relationship Building”* was developed to improve access to e-learning education and inclusion of the needs of persons with disabilities in development cooperation. Free and accessible e-learning course comprising of at least two modules, with relevant content, references, bibliography, and other materials, on “Disability Stakeholders & Relationship Building” placed on Atingi/ADA online platforms which were available and accessible every day/time on an as-and-when-needed basis, with participants from the organizations enrol in the pilot phase.

### Key Recommendations for Multiplying the Results of this Practice

Evidence of the results was geared towards increasing capacity building among OPDs in terms of advocacy for the needs of PWDs which is much needed more than in this global pandemic era. Again, the result is a living document that could be used by organizations, for example, the Atingi course has an African-specific context that OPDs could use to build their capacity in terms of targeting development agencies and other stakeholders who could be involved in promoting the needs of PWDs in Africa.

Also, the training could be used as an awareness creation to sensitize development agencies on disability inclusion as well as how development and other stakeholders could understand the African context in terms of their inclusion practices. Moreover, there should be continual webinar exchange and the use of social media for post-COVID-19 to build back a better agenda on issues of gender, diversity, inclusion, employment promotion, inclusive recruiting, digital skills, and employment as well as discussion on vaccines. This initiative on OPD capacity building could make them well-represented in these areas.

There should be more inclusive disability training where training design is more accessible and disability- and gender-focused. Also, inclusive job promotion and training especially on issues of reasonable accommodation, recruitment processes, and digital accessibility could also be incorporated. There should also be room for OPDs to manage more partnership projects with private and public agencies in development corporations as this could help them contribute real-life experiences to maximize project impact.

Again, there should be inclusive digital skills training, especially in the area of job or employment as this is currently an area identified as of greater demand but of exclusion on the side of persons with disabilities. There should also be more OPD engagement in taking more specific disability programs.

## 2.3 *Meaningful Engagement of OPDs in a COVID-19 Response Portfolio* - A Case Study by Disability Inclusive Development (DID) Consortium

### Summary of the Case Study

The DID program is a UK Aid-funded program of Sightsavers and the International Disability Alliance, implemented with a Consortium of 11 organizations: Action on Disability and Development, BBC Media Action, BRAC, Humanity and Inclusion, International Disability Alliance, Institute of Development Studies, Leonard Cheshire, Light for the World, Sense International, Sightsavers and Social Development Direct. The DID program is part of the Inclusive Futures initiative, to ensure all children and adults with a disability have the same likelihood as everyone else to access quality education, health, and work opportunities.

In the COVID-19 response portfolio, the DID program partnered with the government, people with disabilities and their representative organisations, and communities. We learned that when people with disabilities and their representative organisations are meaningfully engaged in the design of a program, the response will be more inclusive and tailored to local needs and priorities. The response will also be better informed to address the systems that create barriers for people with disabilities in the full enjoyment of rights.

### Problem addressed by the Case Study

People with disabilities have been differentially impacted by COVID-19 despite global commitments made on disability inclusion prior to the pandemic, enshrined in the UN Convention on the Rights of Persons with Disabilities and outlined in the IASC Guidelines on Humanitarian Action. The COVID-19 Disability Rights Monitor report published by the International Disability Alliance (IDA) found that countries have generally failed to take sufficient measures to protect the rights of people with disabilities in their responses to the pandemic.

As well as being at a greater risk of contracting COVID-19 and mortality from COVID-19, people with disabilities are disproportionately impacted by various discriminatory factors that already existed prior to the pandemic, and which the pandemic has exacerbated. These include barriers to accessing adequate resources and services including jobs, social protection, and health care services. Many people with disabilities, who rely on carers or family members, have faced severe challenges with social distancing and self-isolation measures. Public health information and water, sanitation, and hygiene facilities are often inaccessible to people with disabilities. Evidence also shows that during the pandemic disability has intersected with other factors to exacerbate a person’s vulnerability (for example, women with disabilities faced an increased risk of gender-based violence).

Despite being highly marginalized and more likely to live in poverty, programs in response to humanitarian crises and emergencies – such as the COVID-19 pandemic - often fail to address the barriers that exclude people with disabilities from accessing vital support: *“At this time of the pandemic, I have many disabled brothers and sisters who haven’t received any help neither from the government or an organization.”*

* a man from Bangladesh who has deafblindness

As UK aid’s flagship disability inclusion program, the DID program developed a specific project portfolio in response to the COVID-19 pandemic. In the initiatives in Bangladesh, Nepal, Kenya, Tanzania, and Nigeria, DID Consortia partners played a driving role in mobilizing the disability movement, including through IDA’s critical support to organizations of persons with disabilities (OPDs) and program partnerships with regional and national OPDs, governments, and community actors. Through this, Inclusive Futures supported some of the most marginalized communities during the initial phases of the pandemic.

### Result/Outcome of the Practice in Improving OPD Participation and How It Was Achieved

In the DID COVID-19 response program, partnerships with OPDs were critical in delivering a relevant and appropriate program that provided tangible outcomes for people with disabilities. Our partner OPDs represented people with disabilities in all their diversity, including women with disabilities.

During the planning and implementation period – from April to December 2020 - we worked with the disability movement, government, and community actors to help ensure the most marginalized people with disabilities were identified and prioritized for support. Activities included giving people with disabilities access to cash transfers, hygiene products including soap and detergent, and psychosocial support in Bangladesh and Nepal; auditing, improving, and promoting access to health services in Nigeria and Nepal; building the resilience of micro-businesses run by entrepreneurs with disabilities to withstand economic uncertainty in Kenya; providing input into national government response plans in Tanzania; and undertaking focused qualitative research with people with disabilities about the impacts of COVID-19 on their lives in Bangladesh and Nepal.

In Kenya, we worked with organisations of persons with disabilities (OPDs) to understand how people with disabilities were affected by the pandemic and what their immediate requirements were. These OPD partnerships had been established prior to the pandemic. The national OPD in Kenya, the United Disabled Persons of Kenya, led the selection of more than 40 community OPD partners. These OPD partners supported data collection to identify people with a range of disabilities, including people with deafblindness. They also helped mentor micro-entrepreneurs with disabilities to adapt their business models during the pandemic. OPDs took a central role in highlighting the gaps in government data, prioritizing support and distribution, which had risked leaving behind some populations. They also monitored the success of the relief packages that were provided.

In Bangladesh, OPDs identified the most marginalized people with disabilities for mobile cash support, including people with deafblindness. OPDs ensured that all selected people with disabilities had access to a mobile phone and access to a valid account to receive cash support. They assisted with the verification process to register for the mobile account and supported people receiving the transfers to decide how to use the money and how to prevent transfer fraud. The OPDs themselves represented a range of people with disabilities, including the Women with Disabilities Development Foundation.

In Nigeria, DID trained an audit team to undertake accessibility audits of COVID-19 health centers. The training was co-facilitated by a member of the national umbrella OPD. Following the audits, OPDs and government partners worked together to prioritize the accessibility recommendations and agree on key renovations.

### Key Recommendations to Multiply the Results of this Practice

DID’s experience highlighted the importance of working with people with disabilities and their representative organisations to identify and resource essential requirements for meaningful engagement of people with disabilities and to build long-term partnerships that last beyond the life-cycle of a program.

DID found that setting up a Memorandum of Understanding and Standard Operating Procedures with OPDs at the beginning of each project took longer than expected and delayed some initial activities. However, this time investment was critical to establish a clear working relationship with well-defined roles for OPDs as equal partners.

DID also learned that it was a vital priority to support OPDs to work virtually, given local restrictions on movement and safety concerns. This was addressed through training sessions on device and platform use, as well as specific budget allocation for portable hotspots and data packages, particularly for deaf people for whom phone credit was not sufficient.

It is important to partner with national and local OPDs to address data gaps, where data is not accurate nor readily available (from the government). This data is important for informing an inclusive crisis response. The program partnered with OPDs and community partners who drew on extensive networks to identify people with disabilities for participation and engagement and to shape the support to the specific needs expressed. DID learned that being able to rapidly identify people with disabilities is essential to delivering an accessible and inclusive response and that OPDs led this identification process. When identifying people with disabilities as part of a crisis response, they also learned that data collection needs to involve inclusive methods to ensure people with disabilities contribute and count, sensitive, contextualized questions about disability.

DID learned that inclusive crisis response measures can establish or support partnerships and programs between OPDs and decision-makers for longer-term change. Programmes need to look to support or establish partnerships, programs, and capacities that address underlying, systemic barriers that exacerbate vulnerabilities.

Experience shows that it is more effective to plan for inclusion rather than react. Lessons learned in their COVID-19 response about inclusion and accessibility can be directly applied in future crisis response and recovery programming. This includes COVID-19 longer-term social and economic recovery, and vaccination rollout.

## 2.4 *Utilizing the Link between UNCRPD, SDGs, and the RPwD Act (2016) to Empower People with Disabilities and hold Institutions accountable through the Disability Inclusive Score Card (DISC)* - A Case Study by Sightsavers

### About Sightsavers

Empowered with more than 70 years of experience in the field, Sightsavers is an international non-governmental organization that works with its partners to aid those living with cataracts, blindness, and other visual disabilities in more than 30 countries across the world. The organization also advocates for the rights of people with different visual and other disabilities and works towards a future where no one is blind and people with disabilities are equitable participants in society.

### Problem addressed by the Case Study

Danjai, OPD leader in India, says: *“My dreams have wings now. When I was nominated leader of the parents and OPD group recently in Ganjam to develop ratings for the SDG scorecard, I ‘found myself’. I learned how to lead active advocacy and stand up for the rights of girls and women with disabilities. For me, now there is no looking back.”*

To serve the most disadvantaged communities authentically, the 2030 Agenda for Sustainable Development must be accountable to them. While many countries have developed robust mechanisms for the implementation of the Sustainable Development Goals (SDGs), policy frameworks for disability inclusion, and ratification of the UNCRPD, implementation remains weak and SDG progress is not always inclusive of people with disabilities.

A firm way to ensure that people with disabilities are reached by efforts to implement the SDGs is by creating pathways for OPDs to monitor whether governments are delivering on their promise to ‘Leave no One Behind’, especially at the local level. OPDs must be involved in assessing service delivery in all SDG areas, from education to health, employment, and beyond. SDG processes should create meaningful, inclusive, accessible, collaborative, and responsive opportunities for people with disabilities to gather and present evidence to drive effective decision-making.

The **Disability Inclusive Score Card (DISC)** process is an innovative approach to social accountability for people with disabilities grounded in UNCRPD and the SDGs. The project **‘**Building Partnerships for Sustainable Development Goals: Empowering Disabled People’s Organizations’ funded by the EU, supports people with disabilities to play a vital role and proactively engage in SDG implementation at local, national, and international levels. It includes 15 Organizations of People with disabilities (OPDs) in 5 states in India covering 14,333 people with disabilities, 859 Self Help Groups, and 100 Gram Panchayats (local administration). As part of this project, Sightsavers, EDF, Together2030, and Newcastle University developed a scorecard (DISC), with a strong focus on women with disabilities, as a participatory monitoring and accountability mechanism for SDG implementation.

DISC aims to empower people with disabilities to claim their rights and to increase the accountability of individuals and institutions. The pilot focused on SDG 4 - Inclusive Education at early childhood care centers, and primary and middle schools. OPD members engaged in meetings with school administration, education officials at block and district levels, parents, and children. The consultations revealed the status of services and issues with accessibility, attitudes, infrastructure, and teaching aids. Interviews with officials and community representatives gathered feedback on the quality of services available. Group meetings were conducted to discuss barriers, and develop and prioritize indicators with children with disabilities, parents, and service providers, whilst separate focus group discussions were conducted with women and girls. All participants rated each scorecard indicator (1-5) and votes were compiled into a result scoring sheet. An interface meeting followed with government officials/service providers in decision-making positions to present results. Indicators with low scores were discussed between OPDs, service users, and officials, who also discussed joint solutions and developed action plans.

### Result/Outcome of the Practice in Improving OPD Participation and How it was Achieved

Leela, an OPD member says, *“I spoke with a mic for the first time in my life as part of the scorecard process, now I’m confident that I can address community meetings better and actively advocate for other women with disabilities”.* OPDs led consultative processes, generated evidence, oriented stakeholders on disability rights, and shifted the status quo significantly. OPDs presented evidence and built collaborative engagement with local and district administration. They were trained on the SDGs, learned their rights under the UNCRPD and the Rights of People with Disabilities (RPwD) Act, 2016, and decided the scope of the DISC. Service users and providers engaged in inclusive, accessible, collaborative opportunities to address service delivery issues. Government officials are committed to working with OPDs to improve the quality of services. A senior government official suggested sharing best practices with the district education department to replicate the process in other areas. DISC focused on access issues but brought significant attitudinal changes. Initially, parents had feared service providers would not engage with them. A “nothing will change” attitude among stakeholders changed to a belief that ‘collective effort can create change’ and empower all stakeholders.

DISC increased knowledge and awareness among the stakeholders on the entitlements and issues of people with disabilities. It created a path for constructive engagement with authorities such that OPD personnel are now being recognized as an important resource for the education department which is a good starting point for longer-term cooperation. It also engendered attitudinal changes and realizations among officials of government departments as well as parents of children with disabilities. Officials who had not previously thought of facilities for people with disabilities started assessing the accessibility of buildings. Teachers reported feeling more confident in demanding better services and facilities for children with disabilities. OPDs and people with disabilities felt more empowered with knowledge of rights and entitlements. An important realization among OPDs was that through collective efforts it is possible to change the state of services and facilities for people with disabilities.

Increased visibility of and engagement of OPDs following the DISC led to a range of different outcomes:

* Inclusion in COVID action programs and stronger engagement with district officials.
* Accessibility audits were conducted in 4 schools in Chhattisgarh and 6 in Odisha followed by ramps built in several schools.
* Policy on inclusive education began to be implemented, with children with disabilities admitted into mainstream schools.
* Since resources were unavailable to train teachers teaching children with disabilities, the Government of Odisha has developed a module for classes 1-5 and disseminated it to all schools with a similar module developed for classes 6-8.

DISC proved to be an excellent tool for local advocacy as it helped OPDs to be seen as key stakeholders by local government. As expressed by an OPD member ‘OPDs are being considered as a part of essential manpower in the education department which is a good beginning of co-operation’. This improved engagement with OPDs will have a strong impact on ‘Leave No One Behind’ in India. In addition, the approach has since been piloted in Senegal, Ghana, and Nigeria supported by Sightsavers Country teams.

### Key Recommendations to Multiply the Results of this Practice

* Make UNCRPD a core element of SDG implementation with national disability laws being fully enacted in the process.
* Establish OPD-led monitoring and accountability mechanisms to ensure access and quality services to people with disabilities, especially at the local level.
* Establish working relationships between OPDs, policymakers, and other stakeholders to address policy implementation gaps at local and subnational levels.
* Ensure transparent, participatory approaches including OPDs in developing policies, plans, budgets, and implementation aligned with the SDGs.
* Make disability and gender awareness part of pre-service and in-service training for all public officials. This will facilitate equitable behaviour towards people with disabilities and the promotion of their rights, with particular emphasis on girls and women with disabilities.

*“The community scorecard process is a unique initiative of advocacy. Putting our demands forward, a positive and healthy relationship can be built and the gap between OPDs and government stakeholders can be narrowed. We, the OPD leaders, are now able to advocate for the empowerment of people with disabilities in Hazaribagh in a positive atmosphere. Our OPD will work as a facilitating organization for the successful implementation of SDGs and the RPWD Act.”*

– Mr. Mukesh Rana, President of Divya Jyoti Divyang Samiti in Hazaribagh, Jharkhand, India

‘Leave No One Behind’ reaffirms the rights of people with disabilities as essential to sustainable development. DISC translated this into practical change through links between global frameworks, rights, and local action so the implementation of the SDGs became a practical tool for ensuring that rights were realized. The first element was working with OPDs to understand and translate the SDGs to everyday experiences. Many members did not initially view the SDGs as tangible. It was important to start from the challenges they faced and then understand how the SDGs, the UNCRPD, and the RPwD Act linked to each of these. This approach helped OPDs articulate specific challenges within global and national rights frameworks and describe the changes they wanted to see in a way that decision-makers understood. The DISC increased people’s knowledge of their rights built their confidence to advocate for change and provided structured spaces for collaborative dialogue with local administration.

The development of constructive relationships between OPDs and government officials is one of the biggest successes. OPDs came to see government officials as allies in promoting change and government officials were impressed when OPD members could refer to the SDGs, UNCRPD, and the RPWD Act in their influencing. One example is from Rajasthan, where the OPD was able to build such a constructive relationship with the District Collector that the government requested support to ensure elections were accessible. This was also a recognition of people with disabilities as a community with a voice, power, and political influence.

DISC was found to be easy to follow and perceived as beneficial by all stakeholders. It is gender-inclusive, and disability-inclusive, generating greater awareness and future cooperative action. It is a powerful knowledge-sharing tool, especially when further refined and developed beyond the pilot phase, and has potential for use across many other sectors.[[1]](#footnote-1)

*“Information on the rights of people with disabilities are often hidden in a maze of complex legislative provisions.”*

- a Participant in a focus group discussion in Pančevo, World Bank - Austria Urban Partnership Program (UPP), implemented by the World Bank.[[2]](#footnote-2)

The role of accountability at both global and local levels as a key element of sustainable development has increased over the past decade. Efforts increasingly highlight the potential for greater accountability to address corruption, reduce inefficiencies, enhance the distribution of resources, and improve service provision. Accountability is a key human rights principle. Social accountability is reflected in Sustainable Development Goal 16, including Target 16.6: “Develop effective, accountable and transparent institutions at all levels”; and Target 16.7: “Ensure responsive, inclusive, participatory and representative decision-making at all levels”. The UNCRPD recognizes participation as both a general obligation and a cross-cutting issue and enshrines the obligation of States parties to closely consult and actively involve people with disabilities (art. 4 (3)) and the participation of people with disabilities in the monitoring process (art. 33 (3)) as part of a wider concept of participation in public life.

Social accountability mechanisms are very often demand-driven and operated from ‘the bottom up’. This is especially relevant as there are often significant issues with the transparency and accountability of local administration toward people with disabilities. Capacity development and training are essential components to enable OPDs to implement social accountability tools and mechanisms. There are a range of social accountability mechanisms and processes that can be adapted to ensure disability inclusion like the community scorecard, citizen report cards, community monitoring, participatory evaluation, budget/expenditure tracking, etc. These tools can be used to increase the awareness of people with disabilities of their rights and entitlements to public services, amplify their voice, and agency in local development processes, empower them to demand better quality public services, and hold government policy-makers and service providers accountable.

A strong recommendation would be for disability-focused organizations to build OPD capacity on ‘bottom-up’ social accountability processes that will serve to empower people with disabilities, enable them to meaningfully participate in decision-making, planning, and monitoring processes, and strengthen the capacity of duty bearers to respond positively to their concerns and challenges.

## 2.5 *Article 32 in Practice: Australia’s efforts towards disability-inclusive Development in Cambodia* - A Case Study by the Department of Foreign Affairs and Trade, Australian Government

### About Department of Foreign Affairs and Trade, Australian Government

The Department of Foreign Affairs and Trade (DFAT) is an organization dedicated to advancing Australia's global interests to ensure our security and economic well-being through collaborations with international allies and nations to address worldwide issues, enhance trade and investment prospects, safeguard international regulations, maintain stability in our region, and provide assistance to Australians across the world.

### Summary of the Case Study

The Australia-Cambodia Cooperation for Equitable Sustainable Services (ACCESS) program is an AUD25 million program that aims to improve the sustainability of quality inclusive services for people with disabilities, including those affected by gender-based violence (GBV). This case study highlights the way in which a bilateral donor can support the active role of people with disabilities and OPDs in policy development and service delivery decision-making, including facilitating peer-to-peer support between more established OPDs and smaller and emerging OPDs.

### Problem addressed by the Case Study

The 2014 Cambodia Demographic and Health Survey (CDHS) identified that 9.5 percent of the population five years of age and above exhibited some form of disability. While the situation of people with disabilities in Cambodia has been improving over the last decade, this group of people still faces significant challenges, including sub-standard access to government services such as education, health, rehabilitation, employment, social protection, public transportation, and justice.

Furthermore, for women with disabilities in Cambodia, this situation is further exacerbated. They have less financial autonomy and consequently fewer opportunities when compared with those without disabilities. Women with disabilities experience higher levels of emotional, physical, and sexual violence than women without disabilities. They are more likely to be belittled and intimidated, finding it harder to escape situations as a result of the many intersecting drivers of social exclusion that influence their lives.

One of the General Obligations set out in Article 4 of the Convention on the Rights of Persons with Disabilities (CRPD), states that in the development and implementation of legislation and policies and in other decision-making processes concerning issues relating to people with disabilities, State Parties should closely consult with and actively involve people with disabilities, including children with disabilities through their representative organisations. Despite this, what was observed in Cambodia was that the voices of people with disabilities were not consistently and effectively influencing policy and program decision-making. In particular, their engagement was not systematically sought during decision-making processes on improving service delivery standards.

Australia is committed to ensuring its efforts to support development and poverty reduction in Cambodia are inclusive of people with disabilities. To advance this, the Australia-Cambodia Cooperation for Equitable Sustainable Services (ACCESS) program was established to support grassroots OPDs to better represent the perspectives and requirements of those they assist during policy development processes. A particular focus included empowering OPDs to highlight the specific challenges faced by women and girls with disabilities. Through this program OPDs were able to consult with decision-makers at appropriate forums, report on local needs, identify associated gaps in service delivery, and highlight ways to address barriers.

### Result/Outcome of the Practice in Improving OPD Participation and How it was Achieved

Disability equity is a cross-cutting priority of Australia’s international engagement in foreign policy, human rights, development cooperation, and humanitarian action. In line with Australia’s International Development Policy Australia supports an active and leading role for people with disabilities and their organisations at all stages across the development program. Australia is developing a new disability equity and rights strategy to ensure that we remain a strong and consistent advocate for disability equity and rights.

The Australia-Cambodia Cooperation for Equitable Sustainable Services (ACCESS) program is a program that aims to improve the sustainability of quality inclusive services for people with disabilities, including those affected by gender-based violence (GBV). Australia is supporting an AUD30 million second phase of ACCESS to September 2028.

The active role of people with disabilities and/or OPDs in the planning, implementation, monitoring, and evaluation of programs is one of two core principles of Australia’s approach to disability-inclusive development. To put this into practice in Cambodia, Australia ensured there was significant consultation with Cambodian OPDs during the design phase of this program. In addition to this, ACCESS also recruited two people with disabilities to its steering committee and grant appraisal panel. The inclusion of OPDs and people with disabilities has positively influenced the ACCESS program ensuring a stronger focus on the lives of people with disabilities, addressing specific barriers within the Cambodian context (including prioritizing economic inclusion) while maintaining an inclusive approach across all program components (including mandating collaboration with OPDs in disability inclusive development projects).

The ACCESS program has achieved significant outcomes. Through ongoing efforts to facilitate dialogue between key stakeholders and OPDs, key stakeholders are now willing to include people with disabilities in meetings on a regular basis. These efforts have in turn resulted in an increased consideration and incorporation of the needs of people with disabilities in the development of local action plans and social protection targeting procedures. As a result, 3,959 people with disabilities (1,880 or 47% being women) accessed the National Social Protection cash transfer program in 2020.

Other outcomes achieved through engagement with OPDs in the ACCESS program include the development and implementation of the National Disability Strategic Plan (NDSP), the National Action Plan to Prevent Violence Against Women (NAPVAW), the new disability law development, and the implementation of National Standards on Physical Accessibility Infrastructure for People with Disabilities in Cambodia.

ACCESS works directly with seven implementing partners focused on the disability sector and 23 OPDs. A key element of this work is peer-to-peer support where larger and more established OPDs mentor smaller and emerging OPDs. For example, ACCESS facilitates the Cambodian Disabled Person’s Organisation (CDPO) to engage with and strengthen 75 OPDs, including 12 Women with Disabilities Federations (WWDF), across the country, helping them to better engage in policy dialogue with the government on areas such as social protection, including COVID-19 cash transfers.

The ACCESS program is also flexible, addressing emerging priorities and needs of Cambodia’s disability movement. The program facilitated the engagement of CDPO and the Deaf Development Program to ensure the inclusion of Cambodian Sign Language interpretation within the Ministry of Health’s national COVID-19 press conferences. ACCESS has also facilitated consultations with OPDs in order to enable people with disabilities to obtain driver's licenses.

### Key Recommendations for Multiplying the Results of This Practice

* **The active role of people with disabilities and/or OPDs is crucial** in the planning, implementation, monitoring, and evaluation of international development programs to ensure that people with disabilities equally benefit.
* **Strengthening diverse grassroots OPDs can help to inform and improve public service delivery.** Strong practice in disability-inclusive development requires equitable access to services and equal outcomes for diverse population groups, with a particular focus on reaching those who are more marginalized or who experience greater barriers to inclusion. Deliberate efforts to adapt services and provide targeted support are needed to reach these groups. These efforts should be based on the experiences and lived expertise of people with disabilities themselves. Strengthening grassroots OPDs and women with disabilities forums in order for them to effectively identify local needs, and gaps in service delivery and raise these with decision-makers is a key strategy. Strong self-representation of people with disabilities is key to the ongoing sustainability and equity of services, in alignment with the international disability movement’s slogan, ‘Nothing About Us Without Us.’
* **Disability movement strengthening can be pursued by facilitating peer-to-peer exchanges and support.** This provides the exchange of experiences and technical assistance to support policy influence.

# Conclusion

The engagement of Organizations of People with Disabilities is fundamental to the realization of disability rights and the creation of inclusive societies. OPDs serve as powerful advocates, working tirelessly to break down barriers, challenge discrimination, and ensure that individuals with disabilities can enjoy full participation in all aspects of life. While they have achieved significant successes, there is still much work to be done. It is imperative that governments, organizations, and society at large recognize the importance of partnering with and supporting OPDs in their efforts.

To bolster OPD engagement, it is recommended that stakeholders invest in capacity-building, resource allocation, and meaningful collaboration. OPDs should be included in decision-making processes at all levels to ensure that policies and programs are truly inclusive and reflect the diverse needs of the disability community. Furthermore, fostering a culture of respect, empowerment, and inclusivity is essential for maximizing the impact of OPD engagement.

In a world striving for greater equality and inclusion, OPDs stand as champions of the rights and dignity of individuals with disabilities. Their engagement is not only a matter of moral obligation but also a practical necessity for achieving a more just and equitable society for all. By supporting and amplifying the voices of OPDs, we can collectively work towards a world where disability is not a barrier but a dimension of diversity to be celebrated and accommodated.

1. <https://www.sightsaversindia.in/reports/2021/07/knowledge-product-building-partnership-project-supported-by-the-european-union/> [↑](#footnote-ref-1)
2. <https://documents1.worldbank.org/curated/en/389721525949103126/pdf/SSCE-Booklet-2-5-2018.pdf> [↑](#footnote-ref-2)