

The Disability Inclusion Taskforce (the Taskforce) is an independent body convened by the Dóchas Disability and International Development Working Group (DDIDWG) in 2011 in order to assist the group to create cross-sectoral momentum for the full inclusion of people with disabilities in Ireland's overseas development assistance programme. (See Appendix 1). The Taskforce is chaired by CBM Ireland.

## Introduction

The Disability Inclusion Taskforce is grateful for the opportunity offered by the review of the White Paper on Irish Assistance to contribute to the further development of Ireland's ODA programme.

**The Taskforce recommends** the systematic inclusion of people with disabilities in development activity and humanitarian assistance through:

1. The adoption of disability as a cross-cutting issue
2. The implementation of the "twin-track approach"
3. Ensuring that mainstream development activity and humanitarian assistance do not create intentional or unintentional barriers to equality of participation by people with disabilities.

## Progress made

**Key point:** The lack of a clear focus on disability inclusion has limited progress and the effectiveness of outcomes.

The Taskforce supports the overall thrust of the White Paper, its values and principles. The key issues it identifies remain valid. The Taskforce believes that the achievement of the White Paper's goals can be enhanced through the rigorous adoption of disability as a cross-cutting issue (see page 9) and through the other strategies and approaches advocated throughout this paper.

Ireland's ODA programme has grown stronger and more focused over recent years. It is perhaps the most important aspect of Ireland's foreign policy, and demonstrates that, despite its economic difficulties, the country can reach out to support and encourage others. Irish ODA has an excellent reputation abroad, not least for its interest in disability issues. This is well-founded, but is based on a largely piecemeal approach which does not achieve the maximum for effort and funds expended.

The 2005 White Paper stated that Irish Aid would "examine the possibilities for increased activity in the area of disability and development, such as support for specific programmes to address the needs of disabled people".<sup>1</sup> Commenting on the progress made to fulfil this commitment, the consultation paper says that disability issues "are systematically considered in the design of Irish Aid development programmes" and are "addressed in a multidimensional way".<sup>2</sup> It goes on to describe some of the initiatives it has supported and the amount of money (€6.5m) which it has "provided since 2008 specifically to NGOs working with people with disabilities".<sup>3</sup>

---

<sup>1</sup> Irish Aid, White Paper (2006), pg 116.

<sup>2</sup> Irish Aid Consultation Paper (2011) see page 31.

<sup>3</sup> Ibid.



There is only one other mention of disability elsewhere in the consultation paper, at the end of a list of human rights issues still to be tackled in other countries. This is where issues relating to disability are generally found in development documents: at the end of a list of pervasive and unsolved vulnerabilities.

Taken together, these mentions of disability in the consultation document provide commentary on what progress has been made:

- Systematic consideration may be given, but this is invisible, undocumented and not supported by clear policy or guidance.
- Goals concerning the inclusion of people with disabilities in development assistance or humanitarian aid are not defined.
- With honourable exceptions, including Irish Aid support to UN agencies, the organisation appears to pay attention to projects aimed specifically at people with disabilities, while work aimed at disability inclusion or mainstreaming is less developed.
- There is no requirement for governmental or non-governmental organisations funded by Irish Aid, whether based in Ireland or abroad, to demonstrate practical commitment to accessibility (of information, infrastructure, systems, participation) or the inclusion of disabled people in projects or programmes.
- Although individual projects are evaluated, there is no systematic evaluation of the impact or outcomes of Irish Aid funded initiatives as they affect people with disabilities.
- A tiny percentage of ODA, perhaps as little as 0.25% each year<sup>4</sup>, appears to be targeted to the needs of a group which makes up at least 15%<sup>5</sup> of the population of Irish Aid programme countries, and which is known to be disproportionately affected by humanitarian crises.<sup>6</sup> It is unclear to what extent this percentage is balanced by investment in mainstream programmes and projects which deliberately seek to ensure equal participation by people with disabilities.
- There appears to be little attempt to encourage or disseminate good practice in disability inclusion in development assistance or humanitarian aid, to build disability-related capacity in mainstream development agencies or to offer support for the development of disability-inclusive practice.

The net result of these omissions is that the progress made by Irish Aid funded initiatives has been limited unnecessarily. People with disabilities are disproportionately represented among the poorest sections of society, among those with low levels of education and health, and with poor access to vital information (such as on the prevention of disease), among those most vulnerable to climate change, displacement, natural and manmade disasters, and much more. Their exclusion from full participation delays development in the societies in which they live.

People with disabilities are heads of households, the guardians of orphans and vulnerable children, are elders and young parents. Without deliberate effort to include disabled people fully in

---

<sup>4</sup> According to the consultation document (p32), Irish Aid gave €6.5m to NGOs for targeted work on disability in 2008-2011; in 2011 total ODA fell to €659m; hence 0.25% maximum annualised over 2008-2011.

<sup>5</sup> World Report on Disability; Chapter 2; Disability, the global picture (2011).

<sup>6</sup> See "A study of humanitarian financing for older people and people with disabilities, 2010-2011", published by HelpAge International and Handicap International in 2012.

development activity and humanitarian assistance, the impact of Ireland-funded activities will fall short.

## Changing context

**Key point:** Changes in context accumulate to provide a growing imperative to mainstream disability issues into Ireland's ODA programme, through the institution of a "twin-track approach".

The context for the full inclusion of people with disabilities in ODA has changed dramatically since the White Paper was published in 2006. Some of the most significant broad changes include:

- The UN Convention on the Rights of Persons with Disabilities (CRPD) came into force in 2007. All of Ireland's programme countries (except Timor Leste and Vietnam) have ratified it. The EU ratified as an entity in 2010. Ireland's forthcoming ratification will have profound implications for ODA, as the CRPD contains a specific Article (Article 32) which provides a comprehensive normative framework for mainstreaming disability in the development agenda. It is the only international human rights instrument to have a specific Article on international cooperation. For more on the implications of Article 32 for the White Paper review, (see page 8). For the full text of the Article, see Appendix 2.
- Inspired by the advent of the CRPD, and subsequent increased attention on determining the global implications of disability, **new and more accurate information about the prevalence and disabling effects of impairment** is becoming increasingly available. A particularly significant source is the World Report on Disability (WRD), published in 2011 by the World Health Organisation and the World Bank. This report provides the most comprehensive data yet available on the prevalence of impairment and disability throughout the world, the disabling barriers which impede development globally, the ways in which disabled people's lives are affected and the ways in which these issues can be resolved. Importantly, the WRD calculates that more than a billion people worldwide have some form of impairment, representing around 15% of the global population, up from previous estimates (based on 1970s data) of around 10%. Over four out of every five people with disabilities in the world live in developing countries, which have a higher prevalence of disability and impairment than higher income countries. People with disabilities have worse health and socioeconomic outcomes than non-disabled people, even when development assistance is factored in. Lower participation rates in education (as low as 1-3% in some countries), lower levels of labour market participation and many other aspects of exclusion combine to place people with disabilities among the poorest of the poor in most developing and emerging nations.
- Ageing populations, improved neonatal survival rates and soaring rates of mental health difficulty resulting from natural and manmade humanitarian disasters are contributing to a **steady rise in the number of people with disabilities in all countries**. Measures taken to eradicate preventable impairment will not stem this rise.
- The international community has accepted that the Millennium Development Goals (MDGs) and other **agreed targets "cannot be achieved without the full and effective inclusion of persons with disabilities and their participation in all stages" of poverty reduction programmes**<sup>7</sup>, projects

---

<sup>7</sup> See "Realizing the Millennium Development Goals for persons with disabilities" (A/RES/64/131) was adopted by the United Nations General Assembly. The resolution makes specific reference to the need to make development work inclusive of, and accessible to, persons with disabilities.

and initiatives. International efforts to this end will be strengthened in 2013 following a high-level meeting of the UN General Assembly, scheduled for September of that year. The outcomes of Rio+20 and the negotiations for post-2015 global development goals will stress the importance of disability inclusion as a core element of international agreements at this level.

With regard specifically to the development agenda, significant contextual changes include:

- The publication in 2010 of the World Health Organisation's **comprehensive Community-Based Rehabilitation (CBR) Guidelines**, produced in cooperation with many international and local organisations over several years, which outline an agreed approach to CBR in line with the CRPD and the principle of community-based inclusive development
- **The adoption of disability-inclusive policy and practice by many leading international donors**, including DFID and AusAID. For example, AusAID asserts that "people with disabilities will play an active and central role in our work, including in monitoring and evaluation".<sup>8</sup> Germany, Austria and New Zealand are among the countries which have formally adopted inclusive policy, while Norway will soon introduce a regulation stipulating that all non-governmental development projects which receive government money must be disability inclusive.
- **The emergence of innovative ways of funding and promoting disability-related development work**, such as the Dutch Coalition on Disability and Development which, among other activities, provides training to funders and development professionals, and the Disability Rights Fund (supported by AusAID, DFID and others).
- **The increasing availability of accurate disaggregated data** concerning the economic and social consequences of excluding people with disabilities from full participation in developing countries. For example, a 2009 study by ILO of ten low and middle income countries, half of which are Irish Aid Programme Countries, showed that the economic losses caused by the exclusion of people with disabilities ranged from 3% to 7% of GDP.
- The production of many **tools, guidelines, checklists and how-to guides for inclusive development** at both project and programme level. Many of these are clear, concise and straightforward, including the DFID How To Note on working on disability in country programmes (2007) and the ILO's checklist and guidance notes on including people with disabilities in technical cooperation projects (2011). These developments combine to build a body of know-how on the mainstreaming of disability-related issues into development work on which Irish Aid can draw.

These changes in context accumulate to provide a growing imperative to mainstream disability issues into Ireland's ODA programme, alongside the continuing need to support specific action to enable disabled people to surmount the multiple barriers they face in Ireland's Programme Countries and elsewhere. This combination, known as the "**twin-track approach**", provides a practical framework for advancing the named inclusion of people with disabilities in development activity and humanitarian assistance. Using the twin-track approach, people with disabilities can be both agents and beneficiaries of development. Both are necessary and complementary: on their own, neither mainstreaming nor disability-specific work will lead to best-quality results. The lessons gained through many years of work on gender equality and the empowerment of women are very relevant to the disability and development agenda.

---

<sup>8</sup> See [AusAid](#), Development for All, Towards a disability inclusive Australian Aid Programme 2009 – 2014.

## Key issues

**Key point:** Consideration of the likely impact on people with disabilities in developing countries of Ireland-funded activities related to all key issues will lead to better outcomes and impact overall.

The key issues named in the White Paper are still urgent and relevant. As previously argued, the Taskforce believes that none of these issues can be tackled adequately without a meaningful focus on the inclusion of people with disabilities. For example:

- **Hunger:** at least 20% of impairments are caused by malnutrition, and since 20% of the world's poorest people are disabled, they are more likely to be exposed to food shortage; prevailing attitudes to disability deny them access to scarce resources, including food.<sup>9</sup>
- **Situations of fragility:** as previously noted, people with disabilities are generally absent from most plans related to situations of fragility, including those concerned with humanitarian responses (see page 7).
- **Climate change:** the relative poverty of people with disabilities makes them more vulnerable to environmental hazards, and their livelihoods are likely to be more precarious than most. As previously noted, the Rio+20 outcome document will delineate the relationship between disability and the achievement of sustainable development.
- **Responding to basic needs:** as previously noted, people with disabilities have poor health outcomes (not related to their disabilities), are denied equal access to education and have poor access to HIV/AIDS prevention and treatment programmes.<sup>10</sup>
- **Governance and human rights:** the CRPD institutes the human rights approach in the disability agenda, but at present people with disabilities remain excluded and disenfranchised in many developing countries, and have no say in the issues that concern them.
- **Gender equality:** women live longer than men, so are more likely to develop an impairment but, because of their gender, are less likely to be able to access health care or other necessary services.
- **Private sector:** as previously noted, people with disabilities are often denied meaningful access to the labour market and their needs are not considered in the design of products and services.

Taken together, these factors perpetuate cumulative cycles of poverty, exclusion and disability which work to retard development in those countries which can least afford it.

The imperative to maximise the effective use of limited resources compels Irish Aid to hone its focus on those most in need to take account of the growing incidence of disability. The current excluded and discriminated status of disabled people in programme countries, and in the many others in receipt of Irish development funds, must be addressed.

Responding to these imperatives involves facing up to **uncomfortable omissions**. For example, "A study of humanitarian financing for older people and people with disabilities, 2010-2011", published by HelpAge International and Handicap International in 2012, reveals the low level of activities targeting people with disabilities in situations of humanitarian crisis. According to the study, less than 1.2% of Ireland's 2010 funding for this purpose was allocated to projects which had an activity (even

---

<sup>9</sup> DFID (2000).

<sup>10</sup> See the World Report on Disability (WRD); Chapter 2 – Chapter 6, (2011).

one among many) targeting people with disabilities (figures for 2011 were unavailable). The study points out that of the 6003 projects analysed for the study, funded by many donors and nations, only 5.2% mentioned either people with disabilities or older people (many of whom have disabilities) alongside other groups considered “vulnerable” in situations of humanitarian crisis. This suggests that there is still no concerted effort to ensure that the needs of these groups are mainstreamed in the humanitarian system. That other donors are also culpable is no defence for Irish Aid.

At the same time, **people with disabilities are not a homogeneous group**. The axes of exclusion present in populations in general apply equally to disabled people: women with disabilities are more marginalised than disabled men, rural dwellers more than people with disabilities who live in towns or cities, people with disabilities who belong to ethnic minorities more than those who belong to majority populations. In addition, the incidence of impairment increases throughout the life cycle, requiring prevention, social inclusion and social protection measures.

Similarly, some impairments are more “socially acceptable” than others, with people with intellectual impairments and those who experience mental health difficulties being the most marginalised in all Irish Aid Programme Countries (and elsewhere). Tackling the exclusion of these groups will require sustained effort to change attitudes as well as to improve access to services.

These realities point to the necessity to **target disability as a cross-cutting issue**, rather than corralling it as a specific but exclusive vulnerability. **Traditional disability-specific projects, prevention measures and infrastructural accessibility are necessary but not sufficient to alleviate these multiple forms of exclusion**. It is essential to make sure that people with disabilities have equality of participation (or benefit) in Irish Aid programmes and projects. A few samples of the kinds of interrogation of ODA that is required:

- Is Irish-funded infrastructure accessible to people with mobility impairments?
- Are Irish-funded mainstream schools open to and capable of educating disabled children, those with sensory impairments or learning difficulties, as well as those with physical impairments?
- Is Ireland funding segregated facilities for people with disabilities (schools, housing, employment services), thus replicating the barriers erected in developed countries which are only now being dismantled?
- Are projects on the prevention of disabling medical conditions balanced by work to achieve the human rights of disabled people?
- Critically, **is Irish development support carefully constructed to foster inclusive systems which bring about equality of participation, irrespective of level of ability?**

The medical imperative to “do no harm” may offer a framework for considering how Irish Aid addresses its key issues. **It is essential that Irish Aid ensures that even those programmes and projects which have no apparent “disability component” do not wittingly or unwittingly make matters worse for people with disabilities by intensifying existing barriers or creating new ones**. This will involve Irish Aid in ensuring that all funded organisations at least consider the likely impact of their actions on people with disabilities in developing countries.

## Ways of working

**Key point:** Realignment of Ireland's ODA to meet Article 32 obligations will bring about positive change in Irish Aid's ways of working, leading to better overall outcomes, impact and efficiency.

Once the Irish government ratifies the CRPD, it will be bound to implement Article 32 on international cooperation. As previously noted (see page 4), this will require Ireland to intensify its human rights approach by mainstreaming disability rights into the breadth of its international cooperation: not just economic assistance, but also in the fields of technology, research and access to knowledge. Article 32 requires the involvement of people with disabilities and their organisations at all levels of the development process, which implies closer cooperation with disabled people's organisations (DPOs) and people with disabilities in Ireland and abroad. Most importantly, it signals the explicit move from the predominant medical/charity approach to disability-specific and disability-related cooperation projects to a social/human rights model of inclusion and mainstreaming. The Article is a potent tool for working towards the full realisation of the rights of people with disabilities in the countries which Irish Aid supports.

What this implies is the **realignment of Ireland's ODA programme to ensure its consistency with the CRPD**. This will enable Irish Aid to ensure that people with disabilities benefit from development interventions and humanitarian assistance, thus helping to break the cyclical link between poverty and disability. Appropriate first-step changes to current ways of working are detailed below.

**1. Aid effectiveness, Results and Accountability:** Increasing aid effectiveness involves improving outcomes for groups which have not so far received due attention. People with disabilities comprise one of these groups.<sup>11</sup> For example, economic inactivity is 2.5 times higher among people with disabilities than among others, and disabled people account for less than 0.5% of microfinance clients globally.<sup>12</sup>

As previously noted, evaluating aid effectiveness involves ongoing reflection concerning whether Irish Aid's internal processes are proactively inclusive of people with disabilities. Strong internal mechanisms are needed in order to stimulate a more systematic approach to disability, with specific guidance on inclusion and accessibility in all areas of Irish Aid's work. USAID is an example of a donor which has already done this (see Case 1). It also means fulfillment of international obligations in areas such as gender, governance and sustainability, all of which lie at the centre of meaningful aid provision. All are applicable to people with disabilities, with further impetus to be added through the ratification of the CRPD.

<sup>11</sup> World Report on Disability (2011).

<sup>12</sup> Hervé Bernard, Anne Leymat, Thierry Kowalczyk, Ton de Klerk, Wanda Muñoz, Marie Cécile du Mesnil and Sylvain Bord, "Good practices for Economic Inclusion of People with Disabilities", *Handicap International*, 2006.



### **Case 1: USAID's "Standards for Accessibility for the Disabled in Contracts, Grants and Cooperative Agreements"**

In 2004 USAID adopted a directive requiring all construction and renovations of buildings financed by USAID in programme countries to be accessible for people with disabilities. The directive required this provision to be included in all calls for new projects. The aim is to ensure that projects in receipt of USAID funding are accessible.

#### **The Taskforce recommends that:**

Irish Aid adopts the twin-track approach outlined in the CRPD and WRD by:

- adopting disability as a cross-cutting issue
- requiring the mainstream projects and programmes it funds to demonstrate their practical commitment to disability inclusion
- funding disability-specific work where required.

Irish Aid develops a monitoring and evaluation mechanism to disaggregate data related to the inclusion and participation of people with disabilities in Ireland-funded programmes and projects, and to measure impact. The "Guidelines for Government Departments: How to Conduct a Disability Impact Assessment", introduced by the Department of Justice and Equality in March 2012, may be of assistance.<sup>13</sup>

These actions will provide clear evidence of the "systematic consideration" of disability inclusion cited in the consultation document and by Ministers of State in recent answers to Parliamentary Questions.<sup>14</sup> As well as improving the impact and outcomes of Irish Aid work, these moves will ensure that the organisation's overall programme "does no harm".

**2. Policy coherence:** Inclusion of children with disabilities in international cooperation is required by the Convention on the Rights of the Child.<sup>15</sup> Furthermore, as previously noted, Ireland will soon ratify the CRPD<sup>16</sup>, necessitating the reconfiguration of its approach to disability inclusion. The White Paper review offers the opportunity to prepare for this eventuality.

Article 32 requires States Parties to ensure that international development programmes, and international cooperation in general, including government-to-government activities, are accessible and inclusive of people with disabilities. After ratification, the Irish government, and Irish Aid as its bilateral agency, will be required to demonstrate how they are complying with Article 32. This will involve demonstrating<sup>17</sup> the steps taken to ensure inclusion and accessibility, measures taken to

<sup>13</sup> See <http://www.justice.ie/en/JELR/Pages/PB12000078>

<sup>14</sup> Response to Parliamentary Questions by Minister O'Sullivan (October 2011) and Minister Peter Power in a written response to Billy Timmins in June in June 2010.

<sup>15</sup> Convention on the Rights of the Child, Article 23 para 4.

<sup>16</sup> Ratification of the Convention on the Rights of Persons with Disabilities by Ireland is expected within the lifetime of Irelands revised White Paper on Development Aid.

<sup>17</sup> Guidelines on treaty-specific document to be submitted by states parties under article 35, paragraph 1, of the Convention on the Rights of Persons with Disabilities, Committee on the Rights of Persons with Disabilities Second session Geneva, 19–23 October 2009. See guidelines for Article 32 (p.19).

ensure that all donor funds are used to reach people with disabilities, provision of evidence (including disaggregated data) of disability mainstreaming, provision of details of projects and programmes specifically targeting people with disabilities, and evidence of the mechanisms Irish Aid uses to ensure that people with disabilities and their representative organisations are involved in the design, development and evaluation of appropriate programmes and projects.

**The Taskforce recommends** that Irish Aid and the Department for Foreign Affairs and Trade should begin immediately to realign policies and practices in readiness for achieving compliance with Article 32. First steps in this process could include:

- development of a disability inclusion policy
- designation of a focal person to lead the compliance process.

**3. Working with Programme Countries:** Ireland's concentrated support of Programme Countries is an effective methodology which promotes sustainability and facilitates long-term development, including through focussed collaboration with other donor agencies. In addition, Irish Aid enhances the capacity of development partners in programme countries<sup>18</sup> through its fellowship training programme, knowledge exchange and the sharing of experience<sup>19</sup>. This has particular relevance to the disability community.

The wide range of Ireland-funded projects and activities in Programme Countries provides a fertile opportunity for testing impact and outcomes as they relate to people with disabilities.

**The Taskforce recommends** that Irish Aid undertakes an assessment of one Programme Country. Among other useful outcomes, this could serve as a benchmarking exercise and could help to guide future developments in other Programme Countries and beyond.

**4. Working with multilateral organisations:** In its important partnerships with UN agencies and other multilateral organisations Irish Aid demonstrates its understanding that global challenges need global solutions. Irish Aid multilateral beneficiaries play a significant role in international development, particularly in the promotion of human rights and through working on thematic issues, such as gender, equality, good governance and sustainability.

Disability is a core dimension of each of these issues. As noted in the White Paper consultation documents, Irish Aid's continued focussed support of the International Labour Organisation (ILO) provides an example of what can be achieved, as Case 2 shows.

---

<sup>18</sup> The Fellowship Training Programme aims to strengthen the capacity of development partner organisations in countries benefiting from Irish Aid support through the provision of higher education study opportunities. The participating countries are Ethiopia, Lesotho, Malawi, Mozambique, Tanzania, Timor Leste, Uganda, Vietnam, Zambia and Palestine, see [http://www.irishaid.gov.ie/partners\\_fellowships.html](http://www.irishaid.gov.ie/partners_fellowships.html)

<sup>19</sup> See Ireland (2009), DAC Peer Review – Main Findings and Recommendations. See [http://www.oecd.org/document/38/0,3343,en\\_2649\\_34603\\_42592230\\_1\\_1\\_1\\_1,00.html](http://www.oecd.org/document/38/0,3343,en_2649_34603_42592230_1_1_1_1,00.html)

## Case 2: Irish Aid-funded ILO work in Zambia

Starting in 2005 with the inclusion of women with disabilities in mainstream women's entrepreneurship training, the ILO-Irish Aid Partnership Programme enters a new phase in 2012. In Zambia, one of the countries covered by the Programme, activities to date have included the review of employment-related laws and policies from a disability perspective and building the capacity for disability inclusion in mainstream vocational training, entrepreneurship development and employment. The Programme has resulted in the publication and translation into many languages of guidance tools, videos, brochures and other materials used throughout ILO and its constituents and partners.

Other important Partnership activities in Zambia include the development of a partnership with the University of Zambia, capacity building through sponsoring selected Zambian participants to attend training courses on labour market inclusion of persons with disabilities, the first ILO regional conference on training and employment for people with intellectual disabilities (2010) and the provision of DET for trade unions.

The Programme's influence on the Government of Zambia can be seen in the current National Development Plan. Also through the Programme's influence, in 2008 the UN Country Team (UNCT) in Zambia became the first UNCT globally to undertake a disability-related review of its Development Assistance Framework (UNDAF).

**The Taskforce recommends** that Irish Aid ensures that the human rights of people with disabilities are prominent in all its multilateral commitments.

**5. Working with civil society organisations:** Including people with disabilities in the design and development of policies is widely acknowledged as good practice, and is required by the CRPD.<sup>20</sup> Other bilateral agencies and governments have worked successfully with the disability community in the development, implementation and monitoring of development aid.<sup>21</sup>

The disability sector in Ireland is already engaged in overseas development issues. For example, Ireland's disability community has worked for years through European networks and international DPOs on the issue of human rights for people with disabilities.<sup>22</sup> Also, through such mechanisms as the Dóchas Disability International and Development Working Group, organisations focusing on disability and development collaborate actively to create awareness and share best practice on inclusive development.

<sup>20</sup> See the Convention on the Rights of Persons with Disabilities, Article 4 (3) which requires states to 'in the development and implementation of legislation and policies to implement the present Convention, and in other decision-making processes concerning issues relating to persons with disabilities, States Parties shall closely consult with and actively involve persons with disabilities, including children with disabilities, through their representative organizations.

<sup>21</sup> AusAid in 2008 implemented a wide consultation process with the disability community in Australia and in partner countries where AusAid is present. This consultation formed the basis of the 'Development For All Strategy' published in 2008 and also resulted in the formation of the Disability Reference Group who guide AusAid's work.

<sup>22</sup> For example, the European Network on Independent Living in its Strasbourg Freedom drive features overseas aid in its 2008 advocacy campaign. Also, a leading Irish disability activist played a leadership role in Disabled Persons International.

Drawing on the model of the Human Rights Forum, **the Taskforce recommends** that Irish Aid should promote dialogue between the domestic disability sector and overseas development organisations with a disability and development focus.

**6. Public engagement and ownership:** Public engagement and ownership relate to education and information on development issues, as well as to results and accountability. The Irish public is alert to the rights of people with disabilities domestically, and greater emphasis on disability inclusion in ODA is likely to increase support for development cooperation. Irish Aid's support of the "Putting the World to Rights"<sup>23</sup> development education resource in 2008 stimulated awareness about the CRPD among the disability community and the wider public.

**The Taskforce recommends that:**

- Irish Aid communications highlight the agency's focus on disability inclusion, including through the use of images of people with disabilities in its publicity materials
- Irish Aid develops a creative space on disability in development education programming.

**7. Financing aid:** As the consultation document notes, the Irish public remains supportive of ODA, despite the economic recession. Measures taken to strengthen aid effectiveness and accountability will help to sustain public support.

**The Taskforce recommends** that Irish taxpayers' money is spent on development projects and programmes which are demonstrated to be inclusive and accessible to people with disabilities, and which contribute to the ending of their exclusion from the mainstream of the societies in which they live.

<sup>23</sup> Putting the World to Rights, International Service (2008)

Disability Inclusion Taskforce - Objectives and Membership

Overall vision of Taskforce

- ✓ To develop a roadmap for Ireland's overseas development and humanitarian work that is inclusive of people with disabilities.

Objectives of taskforce

- ✓ To ensure that Ireland's overseas development aid positively impacts on the lives of people with disabilities in the developing world.
- ✓ To provide common definitions, broad principles, guidelines and recommendations for including disability in Irish international development policy & practice.
- ✓ To align Ireland's approach to international co-operation in this context.
- ✓ To actively contribute to the forthcoming international policy & practice implemented by bilateral agencies.
- ✓ To examine best international policy & practice implemented by bilateral agencies.

# Appendices

Members of Taskforce

CBM Ireland chairs the Taskforce. Its core members are:

Core Members

1. Professor Patricia Noonan Walsh: Patricia Noonan Walsh is Professor Emerita in Disability Studies at UCD, and Honorary Professor at the Centre for Disability Policy and Law at NUI Galway. In November 2008, she was Visiting Senior at the Joint Disability and Health Policy Program promoted by Yale University and the Helms Center, Garrison NY. Professor Walsh was a member of the Steering Group of the WHO Europe project on improving the health and well-being of children and young people with intellectual disability. Her declaration was signed at the WHO European Conference: Better Health, Better Lives: Children and Young People with Intellectual Disabilities and Their Families, held in Bucharest, Romania in November 2010. She is a fellow of IASID – International Society for the Scientific Study of Intellectual Disabilities.
2. Dr David Weiskler (Chair of Technical): Dr David Weiskler (Chair of Technical): David is a consultant in public health medicine with the Health Service Executive (HSE). He has worked in international health since 1988, including 12 years working with Technical and other development agencies in Nepal, Liberia, Sudan and Democratic Republic of Congo. Following his return to Ireland he worked as health adviser with Irish Aid from 2005 to 2007. David leads the HSE Global Health Support Programme, which was established in 2010, and is Chair of the Irish Forum for Global Health.
3. Ben Galin (CBM Ireland): Ben is programme Manager in charge of Disability and Development for CBM Ireland in Africa and elsewhere. Ben also has extensive field experience in disability and development as they relate to emergency work.
4. Mary Keogh (CBM Ireland): Mary is Advocacy Coordinator with CBM Ireland. She is also a final

## Appendix 1:

### Disability Inclusion Taskforce - Objectives and Membership

#### Overall vision of Taskforce

- ✓ To develop a roadmap for Ireland's overseas development and humanitarian work that is inclusive of people with disabilities.

#### Objectives of taskforce

- ✓ To examine best international policy & practice implemented by bilateral agencies.
- ✓ To actively contribute to the forthcoming consultation process by Irish Aid on the future of its development policy
- ✓ To situate Ireland's approach to international co-operation in this context.
- ✓ To provide common definitions, broad principles, guidelines and recommendations for including disability in Irish international development policy & practice.
- ✓ To ensure that Ireland's overseas development aid positively impacts on the lives of people with disabilities in the developing world.

#### Members of Taskforce

CBM Ireland chairs the Taskforce. Its core members are:

#### Core Members

1. **Professor Patricia Noonan Walsh:** Patricia Noonan Walsh is Professor *Emerita* in Disability Studies at UCD, and Honorary Professor at the Centre for Disability Policy and Law at NUI Galway. In November 2009, she was Visiting Scholar at the Joint Bioethics and Health Policy Program promoted by Yale University and the Hastings Center, Garrison NY. Professor Walsh was a member of the Steering Group of the WHO Europe Project on improving the health and well-being of children and young people with intellectual disability. Its declaration was signed at the WHO European Conference: *Better Health, Better Lives: Children and Young People with Intellectual Disabilities and Their Families*, held in Bucharest, Romania in November 2010. She is a Fellow of IASSID – International Society for the Scientific Study of Intellectual Disabilities.
2. **Dr David Weakliam (Chair of Tearfund):** Dr. David Weakliam (Chair of Tearfund): David is a consultant in public health medicine with the Health Service Executive (HSE). He has worked in international health since 1988, including 12 years working with Tearfund and other development agencies in Nepal, Liberia, Sudan and Democratic Republic of Congo. Following his return to Ireland he worked as health adviser with Irish Aid from 2003 to 2007. David leads the HSE Global Health Support Programme, which was established in 2010, and is Chair of the Irish Forum for Global Health.
3. **Ben Gobin (CBM Ireland):** Ben is programme Manager in charge of Disability and Development for CBM Ireland in Africa and elsewhere. Ben also has extensive field experience in disability and development as they relate to Emergency work.
4. **Mary Keogh (CBM Ireland):** Mary is Advocacy Coordinator with CBM Ireland. She is also a final

year doctoral student with the Centre for Disability Law and Policy. Her research is on Article 32 of the CRPD and its implications for future development policy and her thesis is an in-depth examination of how USAID, the Ministry for Foreign Affairs (Finland) and AUSAID have mainstreamed disability. Prior to working with CBM Ireland, she coordinated the International Disability Rights Monitor, an international projects on disability rights. Mary has also worked with NGOs such as Concern Worldwide and Mobility International USA as a consultant on inclusive development.

5. **Hasheem Mannan:** Hasheem is currently research fellow at Centre for Global Health and manages a research project on universal access to health care and vulnerable populations focusing on resource poor settings in four African nations (Sudan, Malawi, South Africa, Namibia). Holds doctorate in disability policy and family studies from University of Kansas on a Department of Education and University of Kansas scholarships; a masters in community disability studies for developing countries from University College London on a British Chevening Scholarship. Has worked in research, policy, and practice solely in the area of disability since 1995 in both developed and developing country contexts. Employers include University of Kansas, World Health Organization, Centre for Disease Control's National Centre for Health Statistics, Trinity College Dublin, National Disability Authority (Ireland); Swiss Cottage Special School (United Kingdom) and Civil Society (India).
6. **Aidan Leavy:** Aidan is the current Chair of the Dóchas Disability & International Development Working Group and works with Plan Ireland as their Business Development Coordinator. Between 2007 and 2011, Aidan was Director of International Service Ireland (ISI), an international NGO that supported grassroots disability organisations in West Africa and South America with organisational development, lobbying advice and training and seed capital for enterprise development. Before joining ISI, he spent 9 years working with indigenous Mayan organisations, local authorities and community groups in Central America. He first worked as a Local Development Planning Advisor with a Mayan Chorti tribe in the Honduran highlands and later worked as Coordinator of the United Nations Volunteer (UNV) programme in Guatemala.

Additionally, the Taskforce calls on experts on a voluntary basis including;

- Professor. Gerard Quinn (Centre for Disability Law and Policy, NUI Galway)
- Maureen Gilbert (Independent Consultant)
- Caroline Casey (KANCHI organization)
- Catherine Naughton (CBM)
- Donal Toolan (Independent)

## Appendix 2:

### Article 32 of the Convention on the Rights of Persons with Disabilities

1. States Parties recognize the importance of international cooperation and its promotion, in support of national efforts for the realization of the purpose and objectives of the present Convention, and will undertake appropriate and effective measures in this regard, between and among States and, as appropriate, in partnership with relevant international and regional organizations and civil society, in particular organizations of persons with disabilities. Such measures could include, inter alia:

- a) Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;
- b) Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;
- c) Facilitating cooperation in research and access to scientific and technical knowledge;
- d) Providing, as appropriate, technical and economic assistance, including by facilitating access to and sharing of accessible and assistive technologies, and through the transfer of technologies.

2. The provisions of this article are without prejudice to the obligations of each State Party to fulfill its obligations under the present Convention.