

RESOURCE BOOK ON DISABILITY INCLUSION

Light for the World
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THE RESOURCE BOOK: HOW TO USE IT?	3
PART 1 – CORE CONCEPTS	4
1. CORNERSTONES OF DISABILITY INCLUSION	5
2. INCLUSION THROUGHOUT THE PROJECT CYCLE	18
3. INCLUSIVE ORGANIZATIONS	25
PART 2 – HOW TO PAGES	35
1. HOW TO MEASURE THE PREVALENCE OF PERSONS WITH DISABILITIES	36
2. HOW TO KNOW WHICH BARRIERS PERSONS WITH DISABILITIES FACE	38
3. HOW TO TALK RESPECTFULLY ABOUT PERSONS WITH DISABILITIES	40
4. HOW TO CONDUCT AN ACCESSIBILITY AUDIT	42
5. HOW TO RELATE TO PERSONS WITH DISABILITIES	47
6. COMMUNICATION METHODS AND THEIR SUITABILITY	48
7. HOW TO COMMUNICATE WITH PERSONS WITH A VISUAL IMPAIRMENT	48
8. HOW TO COMMUNICATE WITH PERSONS WITH SPEECH DIFFICULTIES	50
9. HOW TO COMMUNICATE WITH DEAF AND HARD OF HEARING	51
10. HOW TO COMMUNICATE WITH SOMEONE WITH A PHYSICAL IMPAIRMENT	52
11. HOW TO COMMUNICATE WITH PERSONS WITH INTELLECTUAL DISABILITIES	53
12. HOW TO COMMUNICATE WITH PERSONS WITH LEARNING DIFFICULTIES	54
13. HOW TO COMMUNICATE WITH PERSONS WITH PSYCHOSOCIAL DISABILITIES	55
14. HOW TO DEVELOP ACCESSIBLE INFORMATION, EDUCATION AND COMMUNICATION (IEC) MATERIALS	57
15. HOW TO MAKE (DIGITAL) DOCUMENTS ACCESSIBLE	58
16. HOW TO SET UP INCLUSIVE MEETINGS	63
17. HOW TO INCLUDE PERSONS WITH DISABILITIES IN PROJECTS	65
18. HOW TO CHECK WHETHER PERSONS WITH DISABILITIES ARE INCLUDED IN THE WHOLE PROJECT CYCLE	67
19. HOW TO MAKE MONITORING SYSTEMS INCLUSIVE	69
20. HOW TO MAP AND REFER TO PROVIDERS OF DISABILITY SPECIFIC SERVICES	73
21. HOW TO NETWORK WITH DISABLED PEOPLE'S ORGANIZATIONS	74
22. HOW TO MAKE THE RECRUITMENT PROCESS INCLUSIVE	75
23. HOW TO DEVELOP AN INCLUSIVE WORKPLACE	78
24. HOW TO CHECK HOW INCLUSIVE YOUR ORGANIZATION IS	79
25. CONSIDERATIONS IN MAKING PROJECT PARTICIPATION CRITERIA DISABILITY SENSITIVE	86
26. HOW TO BUDGET FOR INCLUSION	87
27. HOW TO MAKE EMERGENCY INFORMATION AND SERVICES ACCESSIBLE FOR DEAF PEOPLE WHO USE SIGN LANGUAGE	88
28. HOW TO DESIGN ACCESSIBLE SHELTERS	90
29. HOW TO DEVELOP BARRIER FREE LATRINES	92
30. HOW TO DEVELOP ACCESSIBLE WATER PUMPS	94
31. HOW TO ASSESS HEALTH NEEDS OF OLDER PEOPLE AND PEOPLE WITH DISABILITIES	95
PART 3 - RESOURCE LISTING	97
1. INTERNATIONAL DOCUMENTS ON DISABILITY	97
2. DISABILITY INCLUSION	97
3. PROJECT MANAGEMENT	97
4. LOCAL GOVERNANCE	98
5. MONITORING AND EVALUATION	98
6. ACCESSIBILITY AND COMMUNICATION	99
7. THEMATIC TOOLS	99
BIBLIOGRAPHY	101

THE RESOURCE BOOK: HOW TO USE IT?

This is a **resource book on disability inclusive practices**. Within this book a variety of resources has been brought together that are relevant for disability inclusion. This is of particular interest for persons working in (development) organisations who would like to ensure that their projects and programmes are inclusive of persons with disabilities.

This book consists of four parts:

1. Core concepts

In this part basic information is given about disability inclusion and the process of mainstreaming disability at organisation and programme level. After reading this section you will have a fairly good understanding of the core concepts of disability inclusion.

2. How To Pages

The core concepts provide you with theoretical knowledge; the how to pages give practical tips and tools on how to make inclusion work for you in practice. This includes practical tips on how to communicate with persons with different types of impairments, how to conduct an accessibility audit, how to identify persons with disabilities, and many more.

3. Resource Listing

The resource listing provides an additional range of most acknowledged available resources, tools and techniques. This is meant to deepen knowledge on specific topics, for example on accessibility or disability inclusive project indicators.

The book relies heavily on the experiences and practices of inclusion developed by different organizations to which the authors are indebted, and we have tried to make reference to the sources wherever possible¹. In addition, we have drawn on our own experiences as programme managers and disability inclusion advisors.

These materials may be used for non-commercial purposes, with proper references to all authors and sources involved. Should you use this resource book in your training or other work, please let us know via lab@light-for-the-world.org.

Navigation through the document is facilitated through hyperlinks.

¹ We apologize if any sources have been overlooked. If you find one, please inform us.

PART 1 – CORE CONCEPTS

The core concepts are divided into three sections:

1. Cornerstones of disability inclusion
2. Inclusive programmes
3. Inclusive organizations

1. CORNERSTONES OF DISABILITY INCLUSION

What is disability?

Disability is a broad term that refers to a functional limitation as a result of an impairment (that is: partial or complete loss of the function of a body part) and the limitations and restriction an individual has in society because of their impairment.

The United Nations Convention on the Rights of Persons with Disabilities recognizes disability as an evolving concept, stating that persons with disabilities are those who have “long-term physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society on an equal basis with others”¹.

Impairment is the loss of a function of the body.

For example, when someone cannot see properly. Impairments are mostly irreversible and lifelong. Sometimes the impairment can be treated, for example in the case of vision by using glasses.

Disability is when the person has an impairment and experiences a barrier to do an activity.

For example, if someone has an eye problem which cannot be treated, and therefore cannot read printed materials. If the materials were in braille, there would be no barrier for the person to read.

IMPAIRMENT x BARRIERS = DISABILITY

In other words, disability is a multidimensional concept that is understood as **a relationship between an individual with an impairment and her/his environment**. Disability is thus not considered to be an attribute of the person in question, but is the result of an interaction between a person and his environment. The environment that a person is in thus has a huge consequence on how someone experiences disability. If the environment was completely accessible to someone, then they would be more included in society.

To put it differently:

IMPAIRMENT x ACCESSIBLE ENVIRONMENT = INCLUSION

In the past, disability was viewed as a medical issue, with the focus being on the need to ‘cure’ or ‘fix’ the disabled person so that they would then fit in society. This put the individual at the center: they needed to be changed, and not the society. It was also seen as a charity issue, based on pity and ‘helping’ the ‘poor vulnerable’ person. Nowadays, thankfully, disability is seen as a right-issue. People with disabilities are recognized as valuable individuals, who are often prevented from reaching their full potential due to legal, attitudinal, architectural, communication and other barriers². People with disabilities are seen as equal members of society, who have the same access to all human rights as others, including the right to education, health services and humanitarian assistance.

Prevalence of disability

According to the World Health Organisation, persons with disabilities constitute about 15% of the world's population. This is around one billion people³. Such a big number makes people with disabilities the world's largest minority that faces social, economic and cultural barriers in accessing full and effective participation in society.

Types of Impairments

There can be many different types of impairments which, in combination with activity limitations and participation restrictions, cause a person to be disabled in society. This means that persons with disabilities are not a homogenous group, and one person with a disability can have a completely different experience from the next. Also, people can experience single or multiple impairments, different levels of severity etc.

Some examples of types of impairments are (classification may differ depending on location or who is doing the classifying):

Physical impairments

A set of conditions that results in difficulties in movement, holding/grasping, feeling, movement coordination, height and ability to perform physical activities. May include:

- Conditions that affect the limbs, skeleton, joints or muscles, or a combination of these
- Loss of limbs
- Conditions of the central and peripheral nervous system e.g., spinal injury, stroke, leprosy

Hearing impairments

This refers to various degrees of loss of hearing. The degrees of hearing impairment are:

- Mild: difficulty to hear soft sound, such as whispering. Can benefit from hearing aids.
- Moderate: difficulty to clearly hear during conversations. Can benefit from hearing aids
- Severe: can only hear loud sound or noise.
- Profound: difficulty to perceive any sound at all. This is also referred to as deafness. Cannot benefit from hearing aids.

Depending on the severity of hearing impairment, it may also affect speech, particularly if it begins before a child acquires language.

Vision impairments

Is the partial or total loss of vision or ability to see and read. Vision impairments can be categorised as follows:

- Partially sighted: some difficulty to see or read
- Low vision: severe vision impairment, which makes it difficult to read at normal distances. People with low vision require supportive tools to see and read
- Legally blind: difficulty to clearly see near or far
- Totally blind: inability to see at all. Such people need non-visual resources, such as Braille or audio

Speech impairments

This group of impairments affects the ability to communicate. Communication is a two-way process that involves clear expression and full understanding of what is said. Speech impairment can affect either one or both ways, and includes:

- Production of speech: difficulty in verbal expression, such as articulation of speech and / or sounds; difficulties with the quality of the voice; difficulty with sounds formation (stammering) or a combination of these.
- Difficulty in understanding written or spoken language or in using the right words. However, most persons with speech impairment do not have difficulties in understanding written or spoken language.

A hearing impairment can affect speech development because the ability to hear is critical to development of speech. If a child cannot hear very well, s/he may also experience difficulty in development of speech.

Intellectual impairment may also affect speech due to difficulty in understanding.

Psychosocial impairments

Psychosocial disability refers to persons affected by a “medical or psychiatric condition that affects an individual’s cognition, emotion and/or behavioural control, and interferes with his or her ability to learn and function in the family, at work or in society⁴”. There is a broad range of acute or chronic psychosocial impairments. They include medical conditions, such as anxiety, depression, schizophrenia and post-traumatic stress disorder. The duration may vary from one episode in life to recurrent experiences. Most persons with psychosocial impairments benefit from relevant medications prescribed by trained health workers. Most persons with psychosocial impairments lead an active life with proper and adequate supports.

Although often confused, psychosocial impairment is different from intellectual impairment.

Intellectual impairments

Intellectual impairments refer to life-long limitations of the cognitive and intellectual abilities of a person that often results in the person requiring supervision in connection with daily activities. It usually affects the ability to comprehend and learn; ability to solve problems; ability to remember; ability to learn new information and skills, including social skills. Intellectual disability often has its onset in childhood, and is often linked to brain development problems prior to or at birth. Environmental factors, particularly things and people that surrounds a person with intellectual impairment, can impact his/her development, particularly during childhood.

Intellectual impairments may affect people in terms of education, work and daily routines.

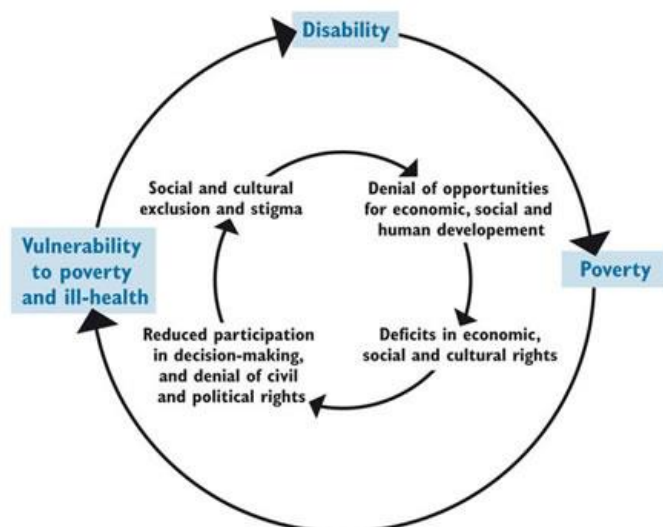
There are different degrees of intellectual impairments: mild, moderate, severe and profound.

Learning impairments

A learning impairment is a general term for disorders that involve difficulty in learning to read or interpret words, letters and other symbols, but that do not affect general intelligence. An example is dyslexia (difficulty in reading) or dyscalculia (difficulty grasping mathematical concepts).

Persons can also have more than one impairment.

Disability as a development issue



The World Health Organisation estimates that 15% of the world's population has a disability. Of these, 80% live in developing countries. There is a strong link between poverty and disability. Poor people have a higher risk of acquiring a disability, because they are often more exposed to situations which can cause disability, such as malnutrition, dangerous work, exposure to violence and bad health care. Equally, disability often increases the risk of becoming poor, as it often means losing a job or not being able to attend school, or paying high medical and transportation costs³.

Persons with disabilities have the same rights as anyone else to participate in society: to have a family, attend school, take part in the workplace, politics and social and cultural events. However, in practice, persons with disabilities are often not able to practice their rights, which means they may not attend school or find jobs, may be discriminated and excluded from community activities, and are vulnerable to physical and sexual abuse². People with disabilities are thus overrepresented among the poorest people in our society, yet development agencies often overlook them².

Development agencies might say "disability is not our business", "it's not cost-effective" or "we are too busy already". Including persons with disabilities in development, however, is not only their right, but is also the most efficient way to battle poverty and leave no one behind.

Barriers for persons with disabilities

People with disabilities are not always purposefully excluded from development activities. They are often not able to attend community and development activities because of barriers that prevent them from accessing activities and information. **Barriers** refer to any process, mind-set or structure that prevent men, women and children with disabilities from equal access to information, facilities and basic services that are available to the general population. It is because of barriers that persons with disabilities are prevented from full and effective participation in society.

There are four types of barriers:

Attitudinal barriers: prejudice, discrimination and stigmatization because of the disability.

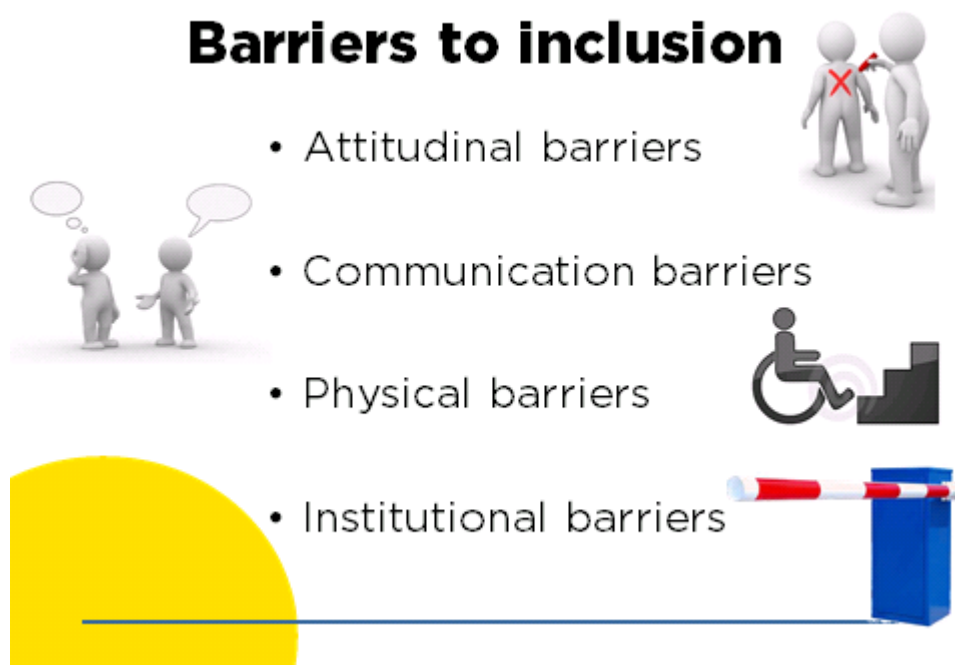
Physical barriers: physical barriers that prevent persons with disabilities from participating – these include the absence of ramps, for example.

Communication barriers: communication issues that prevent persons with disabilities from full and effective participation. Some examples include: lack or inadequate signage to guide

people who are blind, deaf or have intellectual impairments, lack of information in different formats such as Braille, large fonts and sign language.

Institutional barriers: the failure to make provisions for persons with different types of disabilities in national or organizational plans, policies, legal frameworks, data collection, strategic plans etc.

Barriers to inclusion



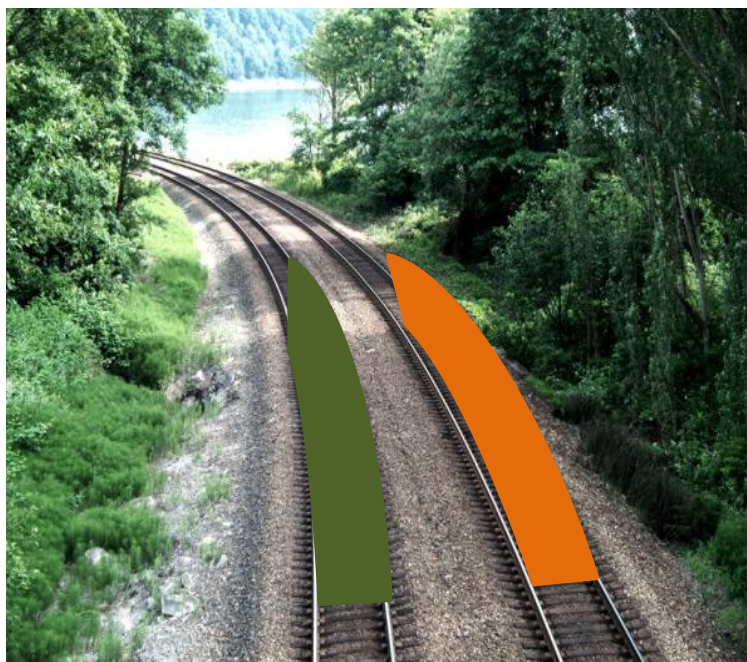
What is disability inclusion?

To ensure that persons with disabilities have access to basic services and can get out of poverty, we call for disability inclusion. Disability inclusion is a goal to ensure that persons with disabilities have equal access to basic services, both in developed, developing or humanitarian contexts, as are available to non-disabled persons. Not only is inclusion a goal, but it is also a human rights issue – persons with disabilities have the legal right to be included in any activities which are provided for non-disabled persons.

Including persons with disabilities in mainstream government and development programmes and services, means that they can be viewed as equal members of society. Additionally, it provides persons with disabilities with the possibility to access the same services, such as education and health care, as any other person, leading to their increased participation in society. Lastly, ensuring that persons with disabilities are included in regular services through small adaptations or reasonable adjustments, is more efficient than providing special services which are often more costly.

The twin track approach

Disability inclusion can be achieved by combining two approaches – disability mainstreaming and disability-specific interventions. This is called the twin-track approach. These approaches need to be addressed at the same time. This can be visualized as two rail tracks running parallel to each other: both needed to arrive at the final destination. The activities under the specific track should steer, as far as possible, towards inclusion in society. The adagio is: inclusion where possible, specific when needed.



Disability Mainstreaming is the process of removing barriers to participation for persons with disabilities in mainstream organisations and activities. Often, persons with disabilities can participate in social activities with few additional interventions.

Disability Specific Interventions: Provision of disability specific services such as rehabilitation, provision of assistive devices & medical treatment. But also empowerment of people with disabilities.

Disability Inclusive Development

What is inclusive development?

Inclusive development can be defined as an approach which respects the full human rights of every person, acknowledging diversity, eradicating poverty and ensuring that all people are fully included and can actively participate in development process and activities, regardless of age, gender, disability, state of health, ethnic origin or any other characteristic.

Disability inclusive development can be defined as follows:

“Ensuring that all phases of the development cycle include a disability dimension and that persons with disabilities are meaningfully and effectively participating in development processes and policies”.

Inclusion is joint responsibility of all development stakeholders:

- Mainstream NGOs
- Government
- Disabled people organisations
- Disability specific NGOs

Each of these stakeholders has a specific role to play.

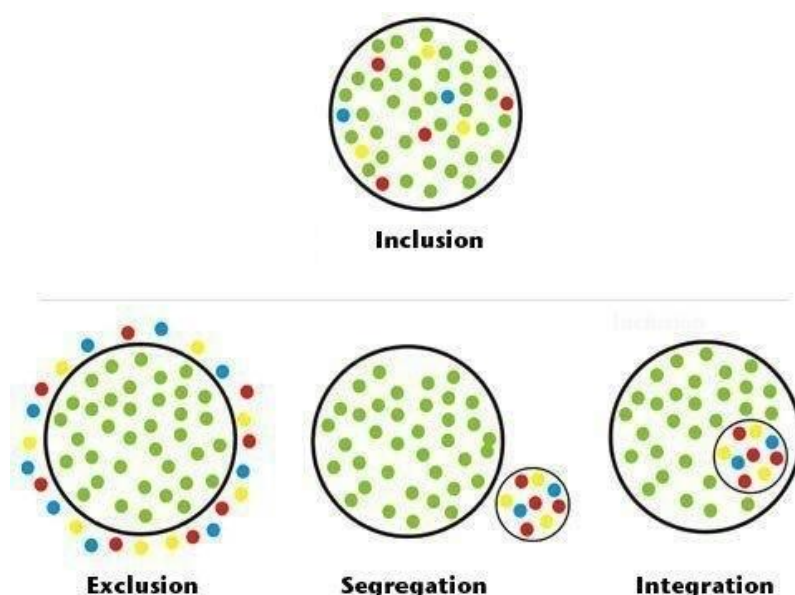
The role of mainstream NGOs is to open up projects for people with disabilities: to remove the barriers and make services and projects accessible. There is no need to become disability expert.

The role of government is to create a conducive environment for inclusion, bringing all legislation and policies in line with UN Convention on the Rights of Persons with Disabilities. This also means making sure that people with disabilities can access all government services, programmes and schemes. This includes access to rehabilitation and health services.

The role of Disabled Peoples Organisations (DPOs) is to advocate for their rights and to influence policy makers, to empower and strengthen the voice their of members and to offer first hand expertise on disability and inclusion.

Disability specific NGOs can play an important role in strengthening DPOs and support empowerment. But they can also develop models of inclusion/ do research and facilitate learning and sharing between all actors. Last but not least they can play a role in (supporting government in) providing disability specific services.

The following four figures show the difference between inclusion, exclusion, segregation and integration. Inclusion in development projects means full and equal participation in the whole project, where as in the case of segregation a separate project is organised for people with disabilities only. In an integrated project, people with disabilities participate in a project, but are for example organised in a group with only participants who have a disability. In the case of exclusion, people with disabilities are completely excluded from the project and not able to participate.



The cornerstones of disability inclusion

Disability inclusion is framed within a rights-based approach that considers persons with disabilities as being equally entitled to human rights as people without disabilities. However, in order to ensure that persons with disabilities are reached, it is essential to apply four main principles of inclusion, namely:

- Attitude: respect and dignity
- Communication: inclusive communication
- Accessibility: barrier-free environment
- Participation: active involvement

In the next sections you will find more detailed information on each of these principles.

ATTITUDE: RESPECT AND DIGNITY

The UN CRPD

The Convention on the Rights of Persons with Disabilities considers under Article 3 (a) as its first guiding principle “respect for inherent dignity, individual autonomy including the freedom to make one’s own choices, and independence of persons”¹. The principle implies the creation of an enabling society where persons with disabilities are not considered as objects of pity but as equal subjects that can enjoy their rights as persons without disabilities do. In this sense, societal attitude to disability, or the way how persons with disabilities are perceived and treated, may serve either as an enabling or disabling factor to inclusion.

What do we mean by attitudes?

Attitudes are a complex collection of beliefs, values or feelings which describe the way we think or feel about certain situations or people. Our attitudes to others are very often framed by the societal ‘norms’ and ‘customs’ that we learn from the childhood. Special attention needs to be paid to attitude, as the way we think about something, strongly influences what we do!

Attitude is the way that someone evaluates or judges a certain person, object, event or idea. Described differently, attitude is **the way we think about someone or something**. This can be a positive thought, or a negative one. Often, the way we think about something, influences the way we act.

Attitude as a barrier

Persons with disabilities very often experience negative attitudes from their close environments⁵. In some countries disability is perceived as a curse and is associated with witchcraft, or thought to be caused by some wrong doing in a previous life. Such beliefs make the family as well as the community feel ashamed about their disabled member, excluding him/her from their gatherings and services offered by the government. Another widespread belief is that persons with disabilities are ‘not productive’ and cannot study and work as persons without disabilities. For example, parents may believe that their visually-impaired daughter or son cannot study and therefore, they decide not to invest in his/her education. As result, the wrong perception of parents about disability hinders their child’s access to education, minimizing his/her chances of employment later.

Negative attitudes can both be a conscious thought, or a subconscious thought, where you are not aware that you think this way. Besides people having negative attitudes towards people with disabilities, persons with disabilities themselves may also feel that they are worthless and in need of support⁶. They may lack self-esteem and feel unable to learn new things². Self stigma and limiting beliefs are complex issues but far too often deeply felt by persons with disabilities themselves.

Attitude as an enabling factor

Positive attitudes to disability may serve as an empowering factor that can stimulate persons with disabilities to study, acquire a profession, develop skills and live a more independent life. For example, a disabled child who is supported by his parents is able to develop from an early age self-confidence and belief in his/her abilities and talents. The community has a vital role to play in shaping and modelling the attitudes towards disability. If the prominent leaders of a community show respect to their members with disabilities, it may reduce discrimination among the wider public, thereby offering persons with disabilities more space and opportunities to participate.

COMMUNICATION: INCLUSIVE COMMUNICATION

The UN CRPD

The Convention does not specifically identify communication as a separate principle but considers it as a core element of accessibility. In Article 9 (b) the UN CRPD claims the responsibility of governments to “include the identification and elimination of obstacles and barriers to accessibility ...[in] information, communications and other services, including electronic services and emergency services”. Besides, in Article 21 the Convention states the right of persons with disabilities to freedom of expression and opinion, and access to information, specifically the provision of information to people with disabilities in accessible formats and technologies, “facilitating the use of sign languages, Braille and other alternative sources of information”¹.

What do we mean by communication?

Communication is the process of reaching mutual understanding, with participants sharing information, ideas and feelings. This can be written, verbal or nonverbal. Inclusive communication relates to all modes of communication including written information, online information, telephone, and face to face. It involves sharing information in a way that everybody can understand and implies the use of tools that are necessary for supporting specific communication needs of an individual with disabilities.

Communication is a process of reaching mutual understanding, with participants sharing information, ideas, and feelings.

Communication can happen in many ways, for example:

- Non-verbal, that is not using words. This includes gestures, facial expressions, body language, eye contact etc.
- Verbal, using spoken language.
- Written.

Communication barriers

Communication barriers are experienced by people who have impairments that affect hearing, speaking, writing, and/or understanding, and who use different ways to communicate than people who do not have these disabilities. For example, the written health promotion messages on the boards are not accessible for people with visual impairments. Or the auditory messages without videos or images shown during events are not inclusive of people with hearing impairments. Lack of access to communication does not allow persons with disabilities to experience productive interaction with other people, which intensifies their experience of exclusion.

Inclusive communication styles

Effective communication allows persons with disabilities to build and maintain relationships, to work, to study, to manage their affairs on their own and to express themselves. To ensure that information shared is understood by all persons, these steps are recommended:

- address a person with disability and not his/her caretaker or guide;
- use simple language to make your point;
- identify yourself when you are talking to a person with visual impairment;
- provide verbal descriptions of content on the image, video or printed text;
- invite sign language interpreters to meetings and events;
- position yourself at the eye level with a person in a wheelchair when talking one to one⁷.

It is important to communicate with simple language, respectful language, and in a variety of ways, so that people with different needs can access and react to the information.

Links

How To: [HOW TO RELATE TO PERSONS WITH DISABILITIES](#)
[How to communicate with deaf and hard of hearing](#)
[How to communicate with persons with speech difficulties](#)
[How to communicate with persons with learning difficulties](#)
[How to communicate with persons with visual impairment](#)
[How to communicate with persons with intellectual impairment](#)
[How to communicate with persons with psychosocial impairment](#)
[How to communicate with someone with a physical impairment](#)

Resources: [Accessibility & Communication](#)

ACCESSIBILITY: A BARRIER FREE ENVIRONMENT

The UN CRPD

One of the other general principles (Article 3 (f)) of the UN CRPD is the concept of accessibility. In Article 9 the UN CRPD states the responsibility of government “to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications..., and to other facilities and services open or provided to the public, both in urban and in rural areas”¹.

What do we mean by accessibility?

Accessibility is broadly understood as an ability to access or benefit from any product, device, service or environment. If a product, service or environment is accessible, it means that all people with and without disabilities can access it without facing any barrier. In 2013, the United Nations High-level Meeting on Disability and Development stressed the importance of ensuring accessibility for inclusion of persons with disabilities in all aspects of developments.

The definition of accessibility is that a person is able to:

- Move around freely without obstacles
- Move around independently (without direct assistance of others)
- Move around with confidence and respect

Framework for ensuring accessibility

The Convention of the Rights of Persons with Disabilities considers accessibility as a cross-cutting issue that enables persons with disabilities to live independently and participate fully in all aspects of society. The Convention promotes accessibility¹ in:

- design and development as well as availability of new technologies, including those of information and communication technologies (Article 4);
- indoor and outdoor facilities, including schools, housing, medical facilities and workplaces (Article 9);
- independent living within the community (Article 19);
- personal mobility (Article 20);
- possibilities to freely express oneself and access information (Article 21).

Besides, there are seven universal design principles established for inclusive environment, education, communication and other areas of access. Universal design is the idea that anything that is created, is made in such a way that it is easy to use for all people without needing too much adaptation. The seven principles are:

1. Equitable use by people with different abilities
2. Flexibility in use
3. Simple and intuitive use
4. Perceptible information
5. Tolerance for error
6. Low physical effort
7. Size and space for approach and use⁷.

Universal design

Designing in such a way that products, services, environments can be used by all people.



Barrier-free access

Accessibility is a very important core element of disability inclusion. An accessible barrier-free environment is a very important step towards fulfilling the rights of persons with disabilities to participate in all areas of community life. A barrier-free environment means more than just physical access such as the building of ramps, but needs to be taken much broader. In a society that offers to all its members appropriate and equal access to transportation, technology, housing, services and community infrastructure, persons with disabilities have more chance to develop their skills and contribute to the communal life. This can mean making reasonable accommodations – small adjustments to the environment to make it more friendly to persons with all types of abilities.

Links

How To: [How to conduct an accessibility audit?](#)
[How to know which barriers persons with disabilities face?](#)
Resources: [Accessibility & Communication](#)

1.4. PARTICIPATION: ACTIVE INVOLVEMENT

The UN CRPD

The principle of participation is also mentioned in Article 3(c) as one of the general principles of the UN Convention. Besides, in Article 33(3) the UN CRPD emphasizes the importance of involving persons with disabilities fully in monitoring processes. Article 29 of CRPD speaks directly about involvement of people with disabilities in civil society to “effectively and fully participate in the conduct of public affairs without discrimination and on an equal basis with others”¹.

What do we mean by participation?

Participation implies that the person with a disability can fully take part in everyday, ordinary aspects of life, with an emphasis on building lasting connections with his/her community. However, the principle does not only highlight the physical presence of persons with disabilities in societal actions and events, but stresses the importance of political engagement of persons with disabilities in decisions that relate to them “so that actions affecting people with a disability are not planned or performed without their input”⁷. ‘Nothing about us without us’ is a slogan that has long characterized the principle of participation within the disability movement.

Participation means that someone can take part or share in something. They can express their opinion, and can have influence on any decisions that are being made. This means that participation is not just being physically present somewhere – it means being welcomed to participate actively and meaningfully.

Barriers to participation

Accessibility, discrimination and negative attitudes can serve as the main barriers to full participation of persons with disabilities in society. For example, prejudices and stereotyping create barriers on the way to education, employment and/or social involvement.

Ensuring participation

In order to enable persons with disabilities to participate fully in societal activities, it is essential to consider different ways of engaging them to ensure meaningful representation, information sharing, consultation, collaboration, mutual decision-making and empowering strategies that help them raise their self-confidence⁹.

To increase the participation of persons with disabilities, it is important to create an environment that welcomes the presence and input of persons with disabilities. For example, when planning an event, it is important to ensure that persons with disabilities are invited and are offered the possibility to share their ideas on a subject.

Links

How To: [How to set up inclusive meetings](#)
[How to include people with disabilities in projects](#)

2. INCLUSION THROUGHOUT THE PROJECT CYCLE

Many organisations use project cycle management as a tool to help them “initiate, plan, implement, monitor and evaluate projects”¹¹. Project cycle management assumes that project or programmes go through different phases, with each phase being definite and coming to some sort of closure before the next phase starts. Organisations may not always agree on which phases exist, as each organisation has their own needs.

For our purposes, we will refer to the project cycle as described below, with the stages being:

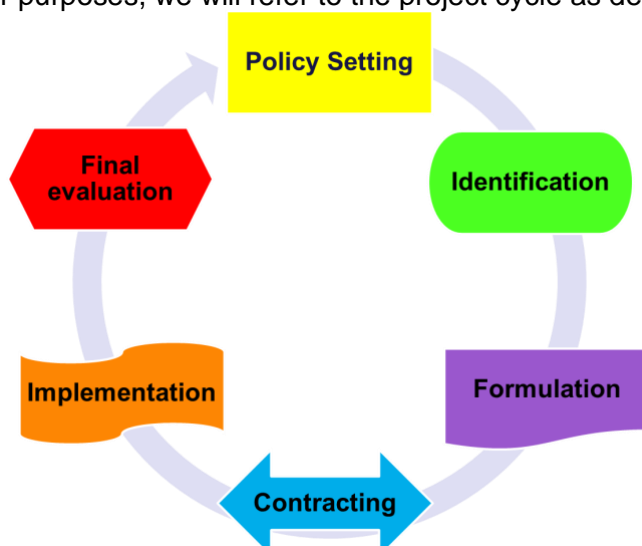


Figure 1: Project Cycle
LIGHT FOR THE WORLD & MDF Training & Consultancy

1. Policy Setting: Includes strategic planning and development of the vision
2. Identification: Analyse the needs and situation, determine which ideas or activities to carry out
3. Formulation: The stage where the project planning takes place. Plan according to objectives, outputs and inputs. A project design and plan is made, and decisions are taken.
4. Contracting: commitments are made; decisions to finance are taken.
5. Implementation: day-to-day execution of the project. Monitoring whether planned activities are taking place also happens.
6. Final Evaluation: an assessment of the project.

Disability Inclusion in the Project Cycle

When projects are disability inclusive, it means they provide people with disabilities with the same opportunity to participate in the project as others. In a project cycle, every phase or step is important and necessary, and determines the next one. Therefore, it is important to ensure that persons with disabilities are able to take part in every phase of the cycle.

In this chapter we will focus on the following steps to ensure that inclusive project cycle management takes place, and that the needs and interests of persons with disabilities are taken into account:

Links

- How To: [How to include people with disabilities in projects](#)
[How to check whether people with disabilities are included in the project cycle](#)
- Resources: [Project Management](#)

2.1. INCLUSION IN POLICIES AND STRATEGIES

To ensure that persons with disabilities are adequately addressed in the project or programme, it is important to ensure that they are included in the project strategy and policies. Naming how and why persons with disabilities will be included in the project, means that a commitment is made to guarantee that they are not accidentally excluded.

Policy Setting

Policies and strategies are developed to establish the general guidelines for the project. Policies are the basic principles that guide the actions. By making sure that people with disabilities are specifically mentioned in policies, two things are achieved. First of all, if inclusion is mentioned in the policies and strategies, it means that inclusion become a natural part of all processes and guidelines that are developed as a result of these policies. Second, if disability inclusion is mentioned in important policy documents, then managers and implementers are responsible to ensure that inclusion actually happens. They will be held accountable!

Policies are where commitment is made² – persons with disabilities are part of your target group, and you want to include them in all your activities!

2.2. IDENTIFYING PERSONS WITH DISABILITIES AND THEIR NEEDS AND INTERESTS

During the phase of identification, we identify who the stakeholders are in a project, and what their needs and interests are.

One of the reasons that people with disabilities are often not included in development programmes, is because they are not always visible in society. Some of them are literally hidden away from the community. Others are difficult to see because their disability may not be visible, such as when someone has a communication impairment. It is therefore important to realize that persons with disabilities do live in the community where your project is taking place, and you need to identify who they are and where they are.

Identification of persons with disabilities

The first step is to get an idea of the magnitude of disability in the project area. There are various ways to collect data and information on persons with disabilities in your area:

- Include disability data in baselines studies for new projects.
- Identify persons with disabilities who are already enrolled in your programmes.
- Link up with local disability-specific organisations or disabled people's organisations and ask them for names and addresses.
- Use existing data from the government or from disability NGOs in your area.
- Talk with community and religious leaders. Explain you want to include persons with disabilities in your programmes. Most likely they will be willing to show you the homes of people with a disability.
- Organise a meeting with people with disabilities and ask them for advice on how to find other disabled people.
- Organise a disability awareness session in the community and ask the participants to help you find persons with disabilities to be enrolled in your programme.
- In the case of childhood disability you can ask children from the programme you support or run (for example, schools or clubs) to identify those children who are not participating.

Because *disability*, as we said in the beginning, is a context-specific concept, it can feel difficult to know who does and who does not have a disability. There are various ways to measure disability. We recommend using the Washington Short Set of questions to help you measure disability in a population. The questionnaire can be found in the How To section, under *How to Identify Persons with Disabilities*.

Needs Assessment

Next to the identification of persons with disabilities it is important to assess what their needs are, and what has been done already to address them. This means carrying out an individual assessment for each person to understand best what their specific needs are.

Barrier Assessment

A barrier assessment can help to identify which barriers persons with disabilities face when they want to take part in the project. What obstacles do they face when they want to participate, and what are the factors that lead to their exclusion. Identifying the barriers is a first step to then analysing what can be done in the project to remove these barriers. In the How To section, you can find an example of a barrier analysis tool.

Links

How To: [How to identify persons with disabilities?](#)
[How to know which barriers persons with disabilities face?](#)

2.3. PLANNING FOR INCLUSION

During the formulation and planning phase, the details of the plan, project or programme will be developed. What are the objectives, and what strategies, activities and resources will be needed to reach those objectives.

Including persons with disabilities in the plans

When developing plans and activities, it is important to think about accessibility to your activities for persons with disabilities. Because despite the best intentions, persons with disabilities are very likely to accidentally be excluded if due consideration is not taken from the start.

So why is it important that persons with disabilities are able to participate in your project activities? Well, first of all, because all people in the target group you are working for should have the right to access any services you provide. And, secondly, it is much more cost-effective. Almost 80% of persons with disabilities can participate in community life without extra interventions, or low cost interventions. And if they can access these services, and be part of the community, it means that expensive disability specific programmes (such as special schools for the blind) will not be needed as much².

There are various steps you can take to make sure that persons with disabilities are included in the planning phase²:

Awareness Raising Raise awareness about disability inclusion. Ensure that all involved stakeholders that are part of programme development and planning are aware that they need to consider accessibility and participation of persons with disabilities in the project.

Ensure Participation Increase participation of persons with disabilities in the development of project plans. Ensure that they are part of the group that makes the decisions, whether it be as staff, consultants, members of community meetings and focus group discussions, or otherwise.

Develop Inclusive Selection Criteria Projects often have selection criteria for participation, which can implicitly or explicitly exclude persons with disabilities.

Consider Accessibility Design the project in such a way that all activities are accessible to persons with various impairments. Make sure that all buildings that are going to be built, apply the principles of universal design. Remove negative attitudes so that non-disabled persons are willing and open to the participation of persons with disabilities. Check that all projects activities are planned in locations which are accessible to persons with different needs.

Budget for Inclusion Earmarking some of the budget for inclusion will ensure that money will be available for some of the disability specific components, such as arranging for alternative methods of communication.

Links

How To: [How To Budget for Inclusion](#)
[How To Make Project Criteria Disability Sensitive](#)

² Adapted from: CBM. (2012). Inclusion Made Easy *and* MDF Consultancy & Light For The World. Reader DM in Projects.

2.4. DISABILITY-CONSCIOUS CONTRACTING AND PARTNERING

During the contracting phase of the project cycle, commitments are made to actually do the activities as described. The decision to finance is made.

Considerations towards your donor

During discussions with the funder of your project, consider the following ¹⁵:

- In case of lack of disability data, ask for flexibility in the use of budget for inclusion.
- Ask for flexible use of beneficiary selection criteria to ensure participation of people with disabilities
- If the donor asks to lower the budget, don't cut the inclusion activities.
- If the donor objects to the inclusion of people with disabilities (because of budgetary consequences) point at the UNCRPD.
- Make sure that your contact person at the donor understands the idea of disability mainstreaming.

Partnering with and contracting other organisations

If you do not do all the work yourself, but work together with other organisations, it is essential that your partner or the organization that is contracted by you shares the same vision and principles of disability inclusion. For example, when you ask a building company to build a new office building for you, you should insist that they design it using universal design principles. Or if you ask your partner organization to organise a community meeting, you should insist that they include persons with disabilities in their meeting by providing the information in different formats.

There are some important principles to consider when partnering with or contracting another organization, namely¹⁶:

- Ownership: project ownership will provide more certainty to the project and make your partner or a contracted organization feel accountable for the results;
- Do no harm: taking on the project the partnering organization shall ensure that it has substantial knowledge on the disability issue and that it will not afflict harm to persons with disabilities through the project activities or lack of knowledge on inclusion;
- Equity, equality and non-discrimination: the partnering or contracted organization shall treat persons with disabilities as rights holders and equal participants of the project;
- Participation and inclusion: the partnering or contracted organization shall ensure that persons with disabilities are included in the full cycle of the programme/project and are able to meaningfully participate in the project activities;
- Accountability and transparency: the partnering or contracted organization shall provide accountable and transparent project structure to allow the good monitoring of inclusion;
- Empowerment: the partnering or contracted party shall ensure that persons with disabilities fully benefit from the project outcomes and that their social position is improved;
- Sustainability: the partner shall adopt long-term practices of inclusion.

Taking systematic account of these principles when partnering with another organization will ensure that disability is taken seriously by your partner organization.

2.5. MONITORING INCLUSION

Disability inclusion is an integrated approach that needs to be practiced throughout all stages of the project cycle. Monitoring takes place to see whether the results you want are being achieved. On the one hand, monitoring processes can be used to check that persons with disabilities are equally participating in development programmes. On the other hand, the monitoring activities themselves need to be inclusive, ensuring that they do not exclude the opinion of persons with disabilities.

Monitoring to check participation

Monitoring takes place during implementation, to check whether your plans are actually being carried out. Information can also be collected to see whether persons with disabilities are actually being included in your projects and programmes. The following questions can be asked to check whether your projects are really inclusive¹⁵.

- How do people with a disability perform and participate in comparison to non-disabled participants?
- Why is there a difference?
- Is earmarked budget being used for disability inclusion? Monitor if and for what purpose it is being used.
- How does the partnership/collaboration with DPOs, government and disability-specific organisations develop?
- Is the staff aware on disability issues and do they understand the inclusion process?
- Are the communities aware about disability rights?
- Is the position of people with a disability at household level changing? In what way?
- Are the barriers at project level removed?
- Are all activities accessible for people with disabilities?

Inclusive monitoring

Besides using monitoring to check whether persons with disabilities can participate in your project, it is also necessary to check whether your monitoring systems themselves are inclusive. Can the opinion of persons with disabilities be measured?

To ensure the full inclusion of persons with disabilities in monitoring processes, consider the following aspects:

- Are persons with disabilities actively involved in data collection and analysis;
- Are persons with disabilities included as monitoring experts;
- Does the projects use different participatory methods to ensure an inclusive environment, such as participation in workshops and/or round tables, assessment of project surroundings for accessibility; adaptation of project materials by and for persons with disabilities, etc.;
- Are monitoring methods accessible for persons with different types of needs.

Links

How To: [How to make monitoring systems inclusive](#)

2.6. EVALUATING THE IMPACT OF INCLUSION

Evaluations are used to assess the design, implementation and results of completed projects. This is then used to advise what a new and improved project should look like. The evaluation can be used to also measure what the outcome and impact of inclusion of persons with disabilities has been. This will help provide evidence that what you are doing is an effective way of working towards a more inclusive and just society.

When developing a Terms of Reference for an evaluation, consider the following questions¹⁵:

- Were people with disabilities able to access the full range of services provided?
- What are the achievements of people with disabilities in the project?
- Do they achieve the same results? If not, what causes the differences?
- What were the difficulties people with disabilities experienced in accessing services or the programme?
- How has the understanding of disability influenced the way your staff is working with people with disabilities?
- How has this changed in the community? What were the activities that contributed most to this change?
- Did the project alter power relations and has this been in favour of more influence and involvement of people with disabilities in your activities?
- Has the organisational capacity of people with disabilities been enhanced?
- What are the recommendations for improving inclusion?
- Did people with disabilities have the choice and opportunity to become active participants in decision-making processes?
- What types of disabilities do the participants in the project have? Are all groups equally represented? Or are some people still excluded?
- What partnerships with disability-specific-programmes/services have been established?
- How are project priorities set and by whom?
- Have project proposal, organisational policies, procedures and project decisions be reviewed and updated to be disability inclusive?
- What lessons are learned on inclusion and how can this be shared with the stakeholders and the development sector?

In addition, consider that¹⁶:

- Disability is not a universal experience – if possible, assess the evaluation questions in regards to different impairments.
- Participatory methods are particularly suitable for evaluations and including different types of opinions.

3. INCLUSIVE ORGANIZATIONS

Inclusion of persons with disabilities goes beyond simply having projects for persons with disabilities. Organisations that wish to become disability inclusive may choose to examine all their organizational policies and practices to ensure that their systems and values actually contribute to the inclusion of persons with disabilities: as employees, partners, beneficiaries and clients. If we do not remove old systems that reinforce discriminatory practices, we will not be able to meaningfully incorporate new inclusive ways of working.

To address these underlying systemic factors the organization is invited to consider the following topics:

- 3.1. Governance
- 3.2. Programme Management Practices
- 3.3. Human Resources
- 3.4. Financial Resources
- 3.5. Accessibility of the office and information
- 3.6. External Relations

The [Disability Inclusion Score Card \(DISC\)](#) can be a useful tool to guide the way to becoming an inclusive organisation. The tool can be found on page 83.

It is important to understand that change is an ongoing process that requires long-term contribution and dedication of all staff from management to junior level. Steady commitment to inclusion at all levels of an organization is critical to creating a truly inclusive work environment. With persistent dedication and commitment, it is possible!

3.1. GOVERNANCE

To create change that sustains, the inclusion of persons with disabilities needs to be embedded in the policies of an organisation: its strategy, vision and mission.

Accidental Exclusion

There are cases where policies can, purposefully or accidentally, discriminate persons with disabilities. For example, a hiring policy might state that applicants need to be physically fit, whether it is necessary for their position or not. This then indirectly discriminates against persons with disabilities, despite their capability to fulfil certain positions.

Policy Development

There are several steps that can be taken to work towards defining disability-inclusive policies for your organisation².

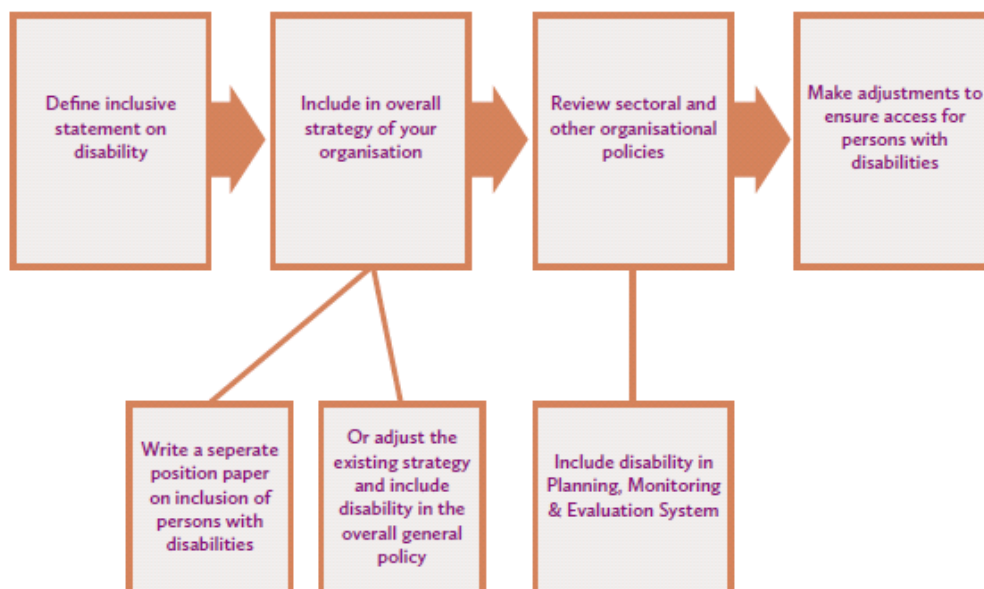


Figure 2. Steps towards an inclusive organisational policy

1. Define an inclusive statement on disability
Define what disability means to the organisation. Why does the organisation want to include persons with disabilities and how does this link to the organisation's core strategy?
2. Include disability in the overall organizational strategy
Ensure that disability is part of the organizational strategy, either by developing a separate policy document on inclusion, or by adjusting the current strategy/policy to include inclusion of persons with disabilities.
3. Review sectoral and other organizational policies
Once disability is part of the organisation's main strategy, look at what the practical implications of this will be for sectoral policies. What does this mean for your fundraising strategy of human resource policy?
4. Make adjustments to ensure access
Make the necessary adjustments and remove barriers to ensure that people with disabilities can actually access your organisation and its services.

A clear mandate on disability and development

In order to promote disability inclusion in an organisation, it is important to have a clear mandate on disability. This can be done in a diversity policy where disability is explicitly mentioned, or in a specifically designed disability policy. If an organization's commitment to disability inclusion is clearly pinned down in policy, then it means that they will need to work on it.

Here are some guidelines on what a 'disability document' could include:

- a clear statement of the organization's commitment to disability inclusion;
- relevant disability analysis of the particular context in which the organization operates;
- explanation of why it is important to address disability in relation to organization's vision and mission;
- list of actions to be taken to address the issue at the organizational and programme levels;
- who or what is the focal point in regard to disability mainstreaming;
- budget allocation for disability inclusion².

Working with the board

Within a development organisation, the board and senior management are key actors who make the decisions. They are the people who decide about strategy. It is therefore important to convince them about the importance of inclusion. Changing their attitude about inclusion can lead to organisational commitment for the topic.

You can raise awareness in the board by:

- organising a workshop on disability inclusion. If you have a whole day, then World Vision's *Travelling Together – how to include disabled people on the main road of development* is a great resource to create urgency within the organisation. If there is limited time, we recommend an activity such as the Game of Life.
- organise a session during a board meeting.
- hold informal discussions during breaks with board members to raise their interest.

3.2. PROGRAMME MANAGEMENT PRACTICES

Becoming an accessible organisation does not happen overnight. It requires a bit of thought and planning. By setting up a system for accountability, you provide information on how you are working in compliance with the agreements and commitments that you have made to your stakeholders, as well as measuring whether you are actually reaching the people you want to reach.

Putting disability into formats

One of the ways to ensure that disability is not ignored in the organisation, is by clearly stating it in the various formats you use. For example, include a paragraph on how people with disabilities will be part of the activities in the format for Country Strategy Plans or Annual Workplans. Include accessibility issues in project-visit formats or reporting formats. When doing a baseline study, include persons with disability in the study guidelines. Building disability into the organisation's formats means the topic is taken up in a natural way, rather than needing to build a parallel system to monitor inclusion².

Section 3 on [Project Cycle Management](#) offers more information on including disability into your project cycle and PME system.

Focal point

Experience shows that unless there are staff members or consultants employed for mainstreaming disability, no one takes this responsibility. There could be a unit or a person who have the mandate and policy to guide the overall disability inclusion processes within the organization. This focal point could check regularly whether the organization takes steps in including the disability perspective into its systems, and what obstacles exist in this process. In addition, this unit or person monitors and evaluates how successfully the organization has mainstreamed disability throughout its structures. Assigning a focal person can be incredibly useful in order to have someone in the organization who is responsible for checking whether inclusive practice is being implemented. This could be a manager, a specialist, or a representative from the disability movement. This person should have commitment and support from higher management to do so².

3.3. HUMAN RESOURCES

An inclusive work environment is about having a diverse culture that welcomes all people, regardless of their (dis)ability. It recognizes and uses people's skills and strengthens their abilities. It recognizes that persons with disabilities are not only beneficiaries of the organisation, but can also be valuable staff members.

A Positive Attitude

An inclusive work environment starts with the actions of individuals who are already part of this environment. A programme manager who focuses on the abilities of an employee is likely to be more inclusive than one who focuses on the individual's limitations. In an inclusive environment persons with disabilities are welcomed and valued for their contributions as individuals. That means that two or more people with the same type of disability may have different experiences, skills, perceptions and needs. It is important to see an individual and not a disability when working with a particular person.

Inclusive Recruitment

The first step in having more people with disabilities in the workplace, is making sure that they are able to apply for posts and be interviewed¹⁰. Some steps that can be taken to ensure that, at least, the process of recruiting is accessible, are:

- Distributing job adverts more broadly than usual. E.g. share them amongst disabled people's organisations and networks.
- Share about the organisation's commitment to inclusion in the advert.
- Provide application forms and information in accessible formats such as large print, Braille or audio.
- Ask the candidate if any adjustments need to be made during the interview, for example
 - Using an accessible venue;
 - Providing additional travel expenses to get to the venue;
 - Supplying a sign language interpreter for Deaf candidates;
 - Allowing vision-impaired candidates to arrange a volunteer to read out a written exercise.

Reasonable Accommodation

The CRPD defines reasonable accommodation as "necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms"¹. Simply said, this means making simple modifications and adaptations so that people with disabilities can work just like anyone else. Accommodations can be made, for example, in the application process, the work environment, or the way an employee enjoys benefits or professional development opportunities¹¹.

Some examples of accommodations that can be made¹²:

- Restructuring a position
- Modifying a schedule
- Modifying policies or procedures
- Increasing accessibility
- Obtaining or modifying equipment or devices
- Reassignment to a different position
- Providing services such as readers, interpreters, or captioning
- Adjusting or modifying training activities, materials or examinations.

Staff Capacity Development

It is impossible to mainstream disability in your organization without addressing the culture and informal processes that underpin how your organization functions. This includes, for example, attitudes, beliefs, values, language, behaviour patterns and styles of communication used within the organization. Organizations that seek to promote disability inclusion need to address the dynamic between formal policies and informal processes. For example, it will be difficult to practice disability inclusive recruitment if the managers and/or human resource personnel still use discriminative language or stereotypes for describing people with disabilities.

Here are some actions that can taken to address this issue.

Raising awareness

General awareness-raising can be done in the form of a training that can communicate shared understandings about disability, ways of addressing disability issues, and importance of mainstreaming disability throughout the organization's structure. Often, people have certain ideas in their mind about what people with disabilities can and cannot do, which might not always be correct. Staff should be made aware that persons with disabilities are full members of society, and have human rights as any other person.

Building skills and knowledge

Sometimes, staff members need to develop particular knowledge on disability in regard to their function or work performed. For example, the human resource manager might need to learn how to recruit in an inclusive manner, and how to provide reasonable accommodations to staff joining the organization.

Sector-specific training

Specific training can be helpful when there is a need to develop skills in disability analysis, collection and utilization of statistics, implementation, monitoring and evaluation of disability-inclusive projects within the framework of a particular sector (e.g. education, economic development, agriculture, health etc.).

The way how the organization chooses to develop the capacity of its staff in regard to disability inclusion may vary: from appointing focal persons within the organization to hiring external consultants. The important point is that disability mainstreaming requires both specialist expertise as well as equipping all staff with a considerate level of understanding, knowledge and skills appropriate for their work. It is also not safe to assume that having a staff member with a disability will ensure that disability inclusion is adequately mainstreamed and addressed. Experience shows that disability inclusion cannot be achieved by the specialists only. Collaboration and involvement of all staff members is needed to ensure that inclusion becomes a part of the organizational culture, and not just the priority of one unit.

Links

How To: [How to make the recruitment process inclusive](#)
[How to develop an inclusive workplace](#)
[How to check how inclusive your organization is](#)

3.4. FINANCIAL RESOURCES¹³

A budget is an estimate of the income and expense for a given period in the future. Budget, or money, is often needed to be able to actually do something. It is therefore important to think beforehand about what budget you will need in order to ensure that you can be inclusive.

Being disability inclusive in budgeting means that you can incorporate funds to:

1. Measure what it will cost to reduce barriers to inclusion for persons with disabilities;
2. Measure what it will cost to take extra measures so that persons with disabilities are able to participate;
3. Measure what it will cost to carry out disability specific activities, if applicable to the project.

There are three things you can define in your budget for inclusion:

1. Budget items to cover administrative costs.
 - Training of staff and management. This can include awareness raising activities, or specific training (e.g. on how to develop accessible communication materials).
 - Workplace adaptations for the recruitment of personnel with disabilities (e.g. purchasing software which can be used with screen readers).
2. Budget items to cover operational costs.
 - Awareness raising activities on disability amongst stakeholders involved in the projects.
 - Adaptation of buildings built for the project.
 - Adaptation of communications means
 - The use of specific services, such as sign language interpreters or the use of assistants during workshops.
 - Gaining specific expertise on disability, for example to develop inclusive policies or to do an accessibility audit.
 - To get rehabilitation or assistive devices if necessary.
3. Allocate a percentage of the budget.

You can also allocate a percentage of the budget for all things related to disability inclusion. This is particularly useful if you don't know up front what the costs will be. In our experience 2-7% of the total budget is usually enough.

3.5. ACCESSIBILITY OF THE OFFICE AND INFORMATION

Often, persons with disabilities are not able to use the services or work at your organisation because there are barriers that stop them from coming. The easiest example is, of course, the physical accessibility of the office. However, accessibility is much more than that. It also means that everyone can attend your conferences, meetings, and social events, for example, and that they can have access to all information you send out².

To make sure that everyone has the option of using your services, it is important to remove as many possible barriers that prevent them from coming to your office or events, and accessing necessary information.

Accessibility of the office building

To ensure that both staff members as well as visitors can come to your office, check the following areas to see if everyone can make use of them¹⁴:

- Outside area and entrance
- Parking area
- Reception area
- Meeting rooms
- Moving from downstairs to upstairs
- Toilets
- Work space
- Canteens and other break areas

Information and communication

As an organisation, you most likely inform and communicate with your staff, clients, beneficiaries, and other people. This can be done in many different ways, such as a website, brochure, poster or others. Here, too, care must be taken that any information is delivered in a variety of formats to cater to different needs. Audio information (such as announcements via megaphone) will not be heard by Deaf persons, and written information will not be seen by persons with a visual impairment. Choosing more than one communication method will ensure that information is spread amongst more people.

Links

Training:	How to organize an inclusive training?
How To:	How to make the recruitment process inclusive How to develop an inclusive workplace How to do an accessibility audit How to check how inclusive your organisation is How to determine the need for accommodation in training
Resources:	Accessibility & Communication

3.6. EXTERNAL RELATIONS

Partnerships are necessary to ensure disability inclusion – no one organisation will realise the full participation of persons with disabilities in society. Not all organizations have specific knowledge on disability – nor do they need to have this knowledge. What is important, however, is knowing where to get this knowledge when you need it.

Organizations that represent persons with disabilities or provide their services to this target group can be found in every community. Strong and effective collaborations with this kind of organizations can contribute to your success in creating an inclusive environment, ensuring compliance with national laws, and providing accommodations. Any development organization that initiates a project on disability or aims to mainstream disability within the existing programme, should consult with Disabled Peoples Organizations (DPOs) and disability service providers in the project area, as these organizations have a lot of knowledge about the needs and position of persons with disabilities in the respective context.

Disabled People's Organizations

Disabled Peoples Organizations (DPOs) are organizations which are mostly controlled and staffed by persons with disabilities, whose aim is to represent persons with disabilities and advocate for their rights. In most cases DPOs are non-profit organizations, though there may be some national unions or agencies which represent persons with disabilities on the national level, DPOs can be divided into two categories: those that have a cross-disability character (meaning that they represent people with all types of disabilities) and those that focus on one type of disability only (such as the National Union for the Deaf).

Disability service providers

Disability service providers are organizations that provide specific services for persons with disabilities. This could be medical care or rehabilitation services, provision of devices such as wheelchairs and crutches, or technical expertise on disability-related issues, such as sign language, speech therapy or braille. Disability service providers may be non-profit as well as private organizations, however both facilitate the access of persons with disabilities to existing programmes or provide them with the necessary services. For example, someone might need a cane to be able to walk to the village meetings, or a wheelchair to be more mobile.

How to begin networking?

The most successful collaborations are built on trust, knowledge about each other and relationships that are mutually beneficial. It is important for the development organization to establish links with DPOs and service providers in the community where the programmes or projects are deployed. Some ways to initiate the collaboration may be:

- set up short and informal meetings with the leadership of local DPOs and/or service providers;
- explain the goal and objectives of your programme, and the importance of focusing on people with disabilities for achieving good results;
- invite the members of DPOs and service providers to visit your programme or to be part of events planned;
- invite DPOs to identify persons with disabilities in your project area and to conduct disability awareness training for your local staff and participants;
- ask some of your staff to be present during the meetings of DPOs;
- in your leaflets, brochures or website link to DPOs or service providers in the region.

There are many areas in which DPOs and service providers can help you succeed in the effort to include persons with disabilities in your projects. They can provide technical assistance on accessibility and accommodation, and assist you in linking and recruiting persons with disabilities and offering a more supportive environment for better networking.

In some places, there may not be DPOs available. In those cases, persons with disabilities themselves and informal groups are also useful.

Links

How To: [How to map and refer to providers of disability services](#)
[How to network with disabled people's organizations](#)

PART 2 – HOW TO PAGES

These “how-to” pages are designed to provide practical suggestions for people that want to include persons with disabilities. They cover the following topics:

1. How to measure the prevalence of persons with disabilities
2. How to know which barriers persons with disabilities face
3. How to talk respectfully about persons with disabilities
4. How to conduct an accessibility audit
5. How to relate to persons with disabilities
6. Communication methods and their suitability
7. How to communicate with persons with a visual impairment
8. How to communicate with persons with speech difficulties
9. How to communicate with deaf and hard of hearing
10. How to communicate with someone with a physical impairment
11. How to communicate with persons with intellectual disabilities
12. How to communicate with persons with learning difficulties
13. How to communicate with persons with psychosocial disabilities
14. How to develop accessible information, education and communication (IEC) materials
15. How to make (digital) documents accessible
16. How to set up inclusive meetings
17. How to include persons with disabilities in projects
18. How to check whether persons with disabilities are included in the whole project cycle
19. How to make monitoring systems inclusive
20. How to map and refer to providers of disability specific services
21. How to network with disabled people's organisations
22. How to make the recruitment process inclusive
23. How to develop an inclusive workplace
24. How to check how inclusive your organisation is
25. Considerations in making project participation criteria disability sensitive
26. How to budget for inclusion
27. How to make emergency information and services accessible for Deaf people who use sign language
28. How to design accessible shelters
29. How to develop barrier free latrines
30. How to develop accessible water pumps
31. How to assess health needs of older people and people with disabilities
32. How to determine the capacity to consent for survivors with disabilities

1. HOW TO MEASURE THE PREVALENCE OF PERSONS WITH DISABILITIES

These questions can be used to identify the prevalence persons with disabilities in a community. This is a first step to understand how many people with disabilities may be part of your community or programme. Remember that this is very different from assessment, which is a process used to understand which impairment a person might have, and how much this affects his or her daily life. This does not help you identify individual persons with disabilities, but will tell you how large the group is in a big population.

Identification by whom?

Community leaders/programme coordinators

How to introduce the questions

When trying to measure the prevalence of disability, ask every individual the following questions. Introduce the questions by explaining that the questions ask about difficulties the person may have doing certain activities because of a health problem. Do not beforehand state that these questions are about disability, as in many contexts the term 'disability' has a stigma or is misunderstood, leading interviewees to answering the questions below incorrectly or untruthfully.

The Washington Group Short Set

1. Do you have **difficulty seeing**, even if wearing glasses?
 - a. No - no difficulty
 - b. Yes – some difficulty
 - c. Yes – a lot of difficulty
 - d. Cannot see at all
2. Do you have **difficulty hearing**, even if using a hearing aid?
 - a. No- no difficulty
 - b. Yes – some difficulty
 - c. Yes – a lot of difficulty
 - d. Cannot hear at all
3. Do you have difficulty moving or using part of the body?
 - a. No- no difficulty
 - b. Yes – some difficulty
 - c. Yes – a lot of difficulty
 - d. Cannot do at all
4. Do you have difficulty remembering or concentrating?
 - a. No – no difficulty
 - b. Yes – some difficulty
 - c. Yes – a lot of difficulty
 - d. Cannot do at all
5. Do you have **difficulty with self-care** (such as washing all over or dressing)?
 - a. No – no difficulty
 - b. Yes – some difficulty
 - c. Yes – a lot of difficulty
 - d. Cannot do at all
6. Using your usual (customary) language, do you have **difficulty speaking**, for example understanding or being understood?
 - a. No – no difficulty

- b. Yes – some difficulty
- c. Yes – a lot of difficulty
- d. Cannot speak at all

How to distinguish the type and degree of disabilities?

Fill in the answers in the following table.

Name:					
	Degree of difficulty				
	No difficulty	Some difficulty	A lot of difficulty	Can't do at all	Total
1. Vision					
2. Hearing					
3. Mobility					
4. Remembering					
5. Self-Care					
6. Speaking					

2. HOW TO KNOW WHICH BARRIERS PERSONS WITH DISABILITIES FACE

Introduction

Barriers are obstacles that persons with disabilities experience in work, in social life, and at home.

All persons with disabilities have lived experiences that are personal. The barriers may differ per person as persons with disabilities can have different disabilities, difference in the degree of difficulty, and also other differences, for example, being a woman, from an ethnic tribe, etc.

Barriers hinder persons with disabilities to participate on an equal basis like others. Although persons with disabilities do have their functional limitation, the environment and others can make it possible for them to participate, if they want.

For example, persons with a physical disability may experience limitations in moving around. They experience a barrier when community meetings take place in a building where people need to climb stairs. If a ramp would have been there, they would be able to come and participate in the community meeting.

Conducting a participatory barrier analysis

With a group of community members conduct an appraisal of, for example, training facilities. Have a mixed group of women and men with and without disabilities, from a range of ages. Having a variety of people will also help raise issues regarding barriers based on age, gender, different abilities etc.

Participants discuss the barriers and categorise them into the four barrier categories (described below):

Tip: Ask persons with disabilities themselves about the barriers they face, and listen. Also ask about possible solutions.

Examples of barriers

Here is an example of what a participatory barrier analysis may look like:

Category	Barriers	Examples
Attitudes	Negative attitudes	<ul style="list-style-type: none"> Disability is seen as inferior, incomplete, imperfect Stereotyping, name calling ("you blind") and bullying Belief that a disability is a result of sin Belief that a disability is evil and witchcraft
Communication	Non-effective communication	<ul style="list-style-type: none"> Pictures and materials are too small Talking is too soft Talking is too fast Language used is too difficult Gesturing without talking (for visually impaired people)
Accessibility	Inaccessible buildings	<ul style="list-style-type: none"> High steps Narrow doors Long distance to toilets Lack of privacy

Category	Barriers	Examples
		<ul style="list-style-type: none"> • Nothing to hold onto • Lack of reading materials in Braille or large print for the blind and persons with low vision
Participation	Isolation	<ul style="list-style-type: none"> • Persons with disabilities are not allowed to do things • They are not invited • Rules that discriminate, f.e. “need to be physically fit”, while that may not be necessary for the job • Meeting place too far away

3. HOW TO TALK RESPECTFULLY ABOUT PERSONS WITH DISABILITIES

Introduction

Language is a powerful tool for driving prejudice and discrimination. This is particularly so for disability issues. Historically, persons with disabilities have been labelled or called names to emphasize that they are different and do not conform to the societal norms of abilities and beauty. In some cultures in South Sudan, as in many other parts of the world, individuals with disabilities are addressed by their impairments rather than by their given names.

By using appropriate language, we can:

- Shape positive attitudes and perceptions
- Avoid keeping up old stereotypes

Disability etiquette

- **Call a person with a disability by his/her name** and refer to a person's disability only when it is related to what you are talking about. For example, don't ask "What's wrong with you?" Don't refer to people in general or generic terms such as "the girl in the wheelchair."
- **Talk directly to the person with a disability** and not to his or her assistant, when you want to talk to the person with a disability.
- **Use person-first language.** Person-first language puts the person before the [diagnosis](#) and describes what the person *has* e.g. "a person with [diabetes](#)" or "a person with albinism". Don't reduce people to their condition, like "a diabetic" or "an albino". A person is foremost a person and secondly a person with some trait.
- **Ask persons with disabilities** which term they prefer if they have a disability.
- When talking about people without disabilities, it is okay to say "**people without disabilities**." But do not refer to them as "normal" or "healthy." These terms can make persons with disabilities feel as though there is something wrong with them and that they are "abnormal."
- **Avoid the use of Acronyms** like PWD or WWD. It is not nice to reduce people to an acronym.
- **Avoid euphemistic language:** such as people with different abilities.
- Use **respectful language** and avoid disrespectful terminology. (see table below)

Respectful terminology

Disability	Negative Language	Positive Language
General	Handicapped person, invalid, the impaired, the disabled, PWD, CWD, WWD	Person with a disability
Blind or Visual Impairment	Dumb, Invalid	Blind/Visually Impaired; Person who is blind/visually impaired
Deaf or Hearing Impairment	Invalid, Deaf-and-Dumb, Deaf-Mute	Deaf or Hard-of-hearing; Person who is deaf or hard of hearing
Speech/Communication Disability	Dumb, "One who talks bad"	Person with a speech / communication disability
Learning Disability	Retarded, Slow, Brain-Damaged, "Special ed"	Learning disability, Cognitive disability, Person with a learning or cognitive disability
Psychosocial Disability	Hyper-sensitive, Psycho, Crazy, Insane, Wacko, Nuts	Person with a Psychosocial disability

Disability	Negative Language	Positive Language
Mobility/Physical Disability	Handicapped, Physically Challenged, "Special," Deformed, Cripple, Gimp, Spastic, Spaz, Wheelchair-bound, Lame	Wheelchair user, Physically disabled, Person with a mobility or physical disability
Emotional Disability	Emotionally disturbed	Emotionally disabled, Person with an emotional disability
Intellectual Disability	Retard, Mentally retarded, "Special ed"	Intellectual disabled/ Person with a cognitive/developmental disability
Short Stature, Little Person	Dwarf, Midget	Someone of short stature
Health Conditions	Victim, Someone "stricken with" a disability (i.e. "someone stricken with cancer" or "an AIDS victim")	Someone "living with" a specific disability (i.e. "someone living with cancer or AIDS")

4. HOW TO CONDUCT AN ACCESSIBILITY AUDIT

Doing an accessibility audit will help you see which physical barriers there are that peoples with disabilities might face.

With the audit team, go through the building you are checking. Start at the entrance of the compound or building and slowly move through the building, checking all items on the list.

There is no correct list for a disability audit. Below list has been based on international practice, but questions may differ depending on the context and (national) legislations.

It is also important that an audit doesn't focus too much on what is lacking or what needs to be done, but rather on the opportunities for improvement. It can be an empowering process.

1. Outside

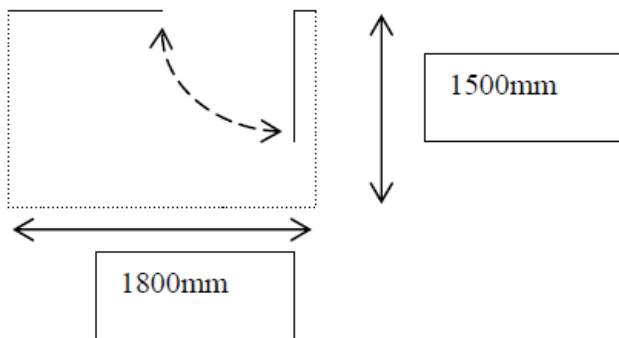
Questions	Finding (Yes/No/NA)
• Are footpaths flat and continuous?	
• Are footpaths wide enough (1500 mm)?	
• Are footpaths non-slippery and kept free of obstacles?	
• Is the building entrance accessible to wheelchair users?	

2. Corridors

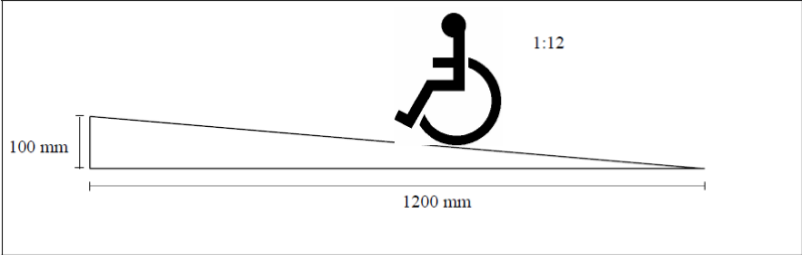
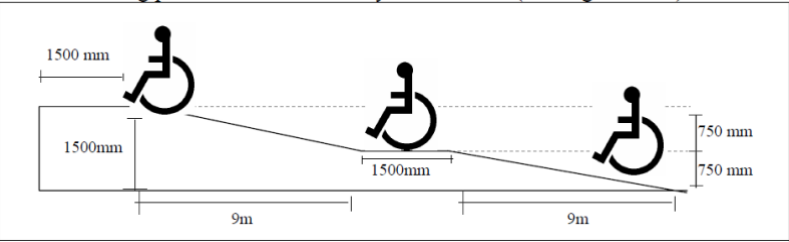

Questions	Finding (Yes/No/NA)
• Are the corridors clear of obstructions?	
• Is the width for low traffic corridors at least 1500 mm wide for public corridors?	
• Is the surface level, smooth and non-slip?	
• Is the path of travel easy to identify?	

Questions	Finding (Yes/No/NA)
	

3. Doors

Questions	Finding (Yes/No/NA)
<ul style="list-style-type: none"> Are the door openings at least 800 mm wide? 	
<ul style="list-style-type: none"> Do users have to pass over thresholds higher than 20 mm? 	
<ul style="list-style-type: none"> Are the doors easy to open with one hand? 	
<ul style="list-style-type: none"> Is the doorway space at least 1500mm x 1800 mm to allow wheelchair users to open doors? 	
<ul style="list-style-type: none"> Are the doors easy to identify? 	

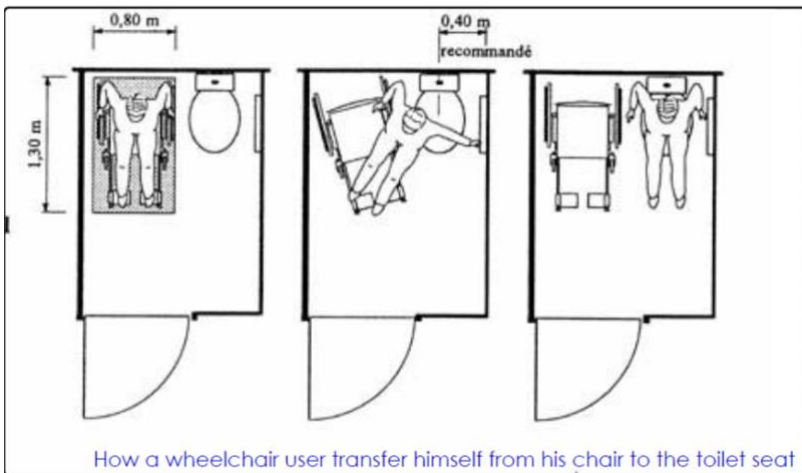
4. Ramps, stairs and handrails

Questions	Finding (Yes/No/NA)
<ul style="list-style-type: none"> Within one floor, is the circulation route free of changes of level or steps and stairs? Is the maximum slope of planned/ existing ramps or curb ramps 1:12?  	
<ul style="list-style-type: none"> Are ramps at least 1000 mm wide? 	
<ul style="list-style-type: none"> Are handrails provided at a height between 800 and 900 mm to enhance safety when using ramps and stairs? 	
 <ul style="list-style-type: none"> Are stairs and ramps easy to identify? 	

5. Waiting areas and associated facilities

Questions	Finding (Yes/No/NA)
<ul style="list-style-type: none"> Are resting facilities provided at an interval of 20 m? 	
<ul style="list-style-type: none"> Do resting facilities provide sufficient space for a wheelchair user? 	
<ul style="list-style-type: none"> Are public seats between 450 mm and 500 mm high and the top of tables between 750 mm and 900 mm high with knee space at least 700 mm high and 600 mm deep? 	

6. Toilets / Restrooms

Questions	Finding (Yes/No/NA)
<ul style="list-style-type: none"> Are there accessible toilets?  <p>How a wheelchair user transfer himself from his chair to the toilet seat</p>	
<ul style="list-style-type: none"> Is the accessible toilet marked as such? 	

7. Signage

Questions	Finding (Yes/No/NA)
<ul style="list-style-type: none"> Are accessible areas, features and facilities identified as such? 	
<ul style="list-style-type: none"> Is the location of accessible spaces, features and facilities indicated? 	
<ul style="list-style-type: none"> Are all maps, information panels and wall-mounted signs placed at a convenient height between 900 mm and 1800 mm? 	
<ul style="list-style-type: none"> Is key information on signs supplemented with embossed letters or Braille? 	
<ul style="list-style-type: none"> Are signs clear and easy to read? 	

8. Emergency system

Questions	Finding (Yes/No/NA)
<ul style="list-style-type: none">• Is the emergency route identifiable as such by people with visual impairments?	
<ul style="list-style-type: none">• Can an emergency situation be recognised as such by people with hearing impairments?	

5. HOW TO RELATE TO PERSONS WITH DISABILITIES

Persons with disabilities are not a homogenous group. Each type of impairments has distinct peculiarities and needs. Even non-disabled persons have their likes and dislikes which you get to know.

Therefore, it is good to be aware about what the particular preferences are for an individual, rather than assume.

Do not assume ...³

- ... a person with a disability either wants or requires assistance.
- ... rejection of aid is meant as a personal affront.
- ... upon acceptance of your help, that you know, without being told, what service to perform.
- ... a person who appears to have one kind of disability also has others.
- ... a disabled person is dissatisfied with his/her quality of life, and is thus seeking pity.
- ... a person with a disability is easily offended.
- ... that a person who does not appear disabled, or who uses assistive devices intermittently instead of all of the time, is faking or imagining their disability.
- ... companions accompanying a person with a disability are there strictly to render service.
- ... a person with a disability will be receptive to personal questions, particularly in a public setting.
- ... that when a person with a disability is in a public place, that they are being escorted by a caretaker, instead of traveling alone.

In general:

- Do not stare at persons with disabilities too much. Like everyone, it makes people uncomfortable.
- Avoid pity. Pity is a negative attitude.
- Communicate directly with the person, even when they are accompanied by an assistant.
- Ask before you render assistance. Unsolicited help may threaten the person's dignity and security.
- Avoid 'heroic' praises. It signifies that you have a lower expectation of him or her.
- Only ask questions about the person's disability if you know that person well.

³ Wikipedia contributors. (2018, April 10). Disability etiquette. In Wikipedia, The Free Encyclopedia. Retrieved 02:42, October 1, 2018, from https://en.wikipedia.org/w/index.php?title=Disability_etiquette&oldid=835763782

6. COMMUNICATION METHODS AND THEIR SUITABILITY⁴

Audio signals

E.g. bells, alarms, sirens, radio, drums, loudspeaker announcements

Ideal for persons with visual impairment.
Also useful for other groups

Must be accompanied with training about how to react and support with evacuation

Signs and gestures

E.g. sign language, body language

Possible as support for other methods of communication, if these prove ineffective.

Assess if recipients with hearing impairment are able to communicate through any type of sign language (universal or local).

Visual signals

E.g. flags, lights flashing on/off

Ideal for persons with hearing impairment.
Also possible for other groups, except persons with visual impairment.

A combination of audio and visual signals is recommended for urgent warnings (e.g. fire alarms).

Printed materials

E.g. posters, leaflets, pictures

Excludes persons with visual impairment.

Keep messages short and simple, and use illustrations.

If the audience is able to read Braille, consider this as a supplement

7. HOW TO COMMUNICATE WITH PERSONS WITH A VISUAL IMPAIRMENT

Communicating with someone with a visual impairment

- When meeting for the first time, introduce and describe yourself.
- Identify yourself so the person with the visual impairment knows who you are.
- If you get closer in your relationship, a blind person may want to feel your body features as part of getting to know you better.
- Inform the person if you are moving away. Do not leave without telling him or her that you are leaving.
- Describe the space you are in as well as any things you see to the person.
- Be specific in your descriptions. Say, "the table is in front of you", NOT "the table is here".
- Avoid comments like 'over there' when giving directions. Rather be specific to direct him to his right or left (and not *your* right or left).
- When you are in a group, tell them who is present, or let the group members introduce themselves.
- When conversing in a group setting, address persons by their names.
- When you are talking in a group, use the person's name when you are directing the conversation to him or her.
- Always talk directly to the person. Do not use a third person to answer your questions.
- Do not move things, or leave things on the floor where someone can fall over them.
- Speak naturally and clearly. There is no need to shout.
- Avoid noisy places so that he or she can hear you clearly.
- Always ask first if the person wants help. Do not help someone without asking him or her first.

⁴ Adapted from: International Federation of Red Cross and Red Crescent Societies. (2015). All under one roof: disability-inclusive shelters and settlements in emergencies.

- For people with low vision use clear signs and documents. These can be in large letters or with letters that you can feel.
- For blind people who can read braille, you can give written information in braille.
- When preparing printed information for persons with low vision, ask the person his/her preferred formats for personal documents. General information is usually given in Arial 18 point bold.
- Do not be surprised to hear or scared to use phrases like 'I will see you'. People who cannot see use such phrases, too.
- If you are at a table together for a meal, give a description of the food. If possible, describe where what is on the plate.
- Do not play with or remove the white cane of a person who is blind from where s/he places it. If it is unavoidable for you to place the white cane elsewhere, remember to inform the person. S/he needs the white cane for mobility purposes.
- Do not play with a guide dog without the owner's permission. It is a distraction. The dog is on duty!
- Avoid revolving doors. On stairs or escalators, assist by putting his / her hand on the railing. Let the person know whether the stairs / escalators are going up or down. Allow him / her a choice between stairs, escalators or lifts.

Specific skills

To guide a blind person:

- Walk alongside and slightly ahead of him/her. Do not hold the person's hand. Allow him/her to hold your arm.
- Bend your arm to your back when passing through a narrow space. S/he will get directly behind you to avoid obstacles.

To seat a blind person:

- Put the person's hand on the back of his/her chair. S/he will be able to sit
- If the chair is backless, put his/her hand on the seat for him/her to be able to sit.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

8. HOW TO COMMUNICATE WITH PERSONS WITH SPEECH DIFFICULTIES

- Allow time for the person to speak. He may speak slower than you are used to.
- Avoid the urge to interrupt or complete the sentence for the person.
- Do not take over the conversation.
- If you do not understand what the person said, ask for repetition.
- Do not pretend you have understood if you haven't.
- Ask if there is somebody close by who may be able to interpret.
- If despite all you are unsuccessful, ask if the message is urgent.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

9. HOW TO COMMUNICATE WITH DEAF AND HARD OF HEARING

- Get the attention of the deaf person. Position yourself where he can see you. If he or she does not react, gently touch their arm or shoulder, or wave.
- Ask the person how he or she prefers to communicate.
- Face the person. People with hearing disabilities want to see your face so they may read your lips and see your facial expression. Get on the same level as the person (e.g. sit if the person is sitting). Do not put your hand in front of your face.
- Talk slowly to someone who has partial hearing.
- Stand nearby so the person who is hard of hearing may hear you in the best possible way.
- Ask short and clear questions that require short answers.
- Move to a quiet area so there is no or little background noise.
- Position yourself, the person, and (if present) their interpreter in a place where there is adequate lighting.
- Speak clearly and at usual volume. Do not shout.
- Check if the person has understood, for example by asking feedback.
- Reword instead of repeating your sentence if he does not understand you the first time.
- Repeat key messages. E.g. by writing them down.
- Use facial and body expressions to support what you say.
- Face and speak directly to the person. Do not direct your speaking to the family member or interpreter of the deaf person.
- In your building, have clear signs to help deaf and hard of hearing identify where to go.
- Provide information in writing if the person can read and write. Have pen and paper with you just in case you need to communicate in writing.
- Do not call him even he gives you his mobile number. Rather send text messages.
- Feel free to use phrases like “did you hear”.

In conference/workshop setting:

- Pay for the Sign Language Interpreter, but let the participant choose his or her own interpreters as much as possible. Always ask what sign language they are using.
- Prepare your workshop well and send programme and other related documents to the Sign Language Interpreter before the session.
- Let the Sign Language Interpreter and the deaf participants decide how they want to be seated in the room

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

10. HOW TO COMMUNICATE WITH SOMEONE WITH A PHYSICAL IMPAIRMENT

- Address the person who has a physical impairment, not his or her companion.
- Try to place yourself at eye level with the person (i.e. sitting in a chair or kneeling down). Particularly if you are engaged in a long conversation!
- Don't lean on a wheelchair or other assistive device. Treat the wheelchair as part of his/her body space.
- Do not give your items to a wheelchair-user to carry for you.
- Do not condescend to a person in a wheelchair by treating him or her childishly, such as patting on the head or shoulder.
- Ask if the person would like your assistance pushing the wheelchair.
- If a person is having a problem with opening a door, offer to assist.
- Ensure a clear pathway to intended destinations, and at meetings and restaurants, make a chair-free space at tables for a wheelchair-user to sit.
- When assisting a wheelchair-user up or down a stair, ask if he prefers going forwards or backwards.
- When telephoning a person, let the phone ring long enough to allow time to reach the phone.
- Do not avoid words like 'run' or 'walk': wheelchair users use them too.
- Do not remove people's assistive devices (e.g. crutches, wheelchairs, artificial limbs) from where they have placed them. If you do temporarily, remember to return them to where the person has placed them initially.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

11. HOW TO COMMUNICATE WITH PERSONS WITH INTELLECTUAL DISABILITIES

- Keep in mind that there are different degrees of intellectual impairments, and some people function at higher levels than others.
- Speak directly to the person and respect their expressed preferences as to choices or decisions.
- Take time and create trust first for the person to feel comfortable with you.
- Speak clearly and use short sentences and easy words.
- Repeat or rephrase what you have said.
- Use pictures or other visuals.
- Do not use a childish voice or exaggerate.
- Use easy-to-read material with simple messages and short sentences.
- Have a quiet and calm place for talking.
- Take your time and don't hurry.
- Use gestures and facial expressions. For example, look sad when you are talking about being unhappy.
- Be patient if the person also has a speech impairment.
- Check with the person if they understand what you are saying. You can ask if she understands what you have just said. If not, repeat yourself or reword your sentence, and check if your language is simple enough.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

12. HOW TO COMMUNICATE WITH PERSONS WITH LEARNING DIFFICULTIES

- Some people have difficulties with writing, others with reading, writing or listening. These are specific learning impairments, not intellectual impairments.
- Such persons may be of average or above average intelligence.
- Be aware that learning disabilities are often not visible. So don't judge people on how they react, write or talk. If a person reacts to situations in an unconventional manner, keep in mind that s/he may have limited processing skills which affect their behavior.
- Allow him / her time to respond
- Adjust your communication according to his or her specific needs: such as use of visual information, audio information (instead of written texts) etc.

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

13. HOW TO COMMUNICATE WITH PERSONS WITH PSYCHOSOCIAL DISABILITIES

- Psychosocial disabilities are often not visible. Most of the time you will not know that someone has a psychosocial disability because it simply doesn't affect their communication or social interaction
- The general advice is to be cautious about interpreting behavior. If social interaction is difficult. Be non-judgmental; allow time for interaction and decision-making.
- If she/he appears unfocussed or speaks slowly – the person may be experiencing side-effects of medications or sleep disturbance.
- If she is displaying an unusual/inappropriate behaviour – be calm and patient.
- Be aware that mental illnesses are not there all the time

Most importantly, ask someone themselves how they want to be addressed, and how they want to be supported or treated.

[side box]

Communicating with persons with Autism⁵

1. Please always keep in mind that communication difficulties are common with Autism. We have difficulties in reading social cues and body language. Be patient and understanding.
2. We tend to take things literally and have often trouble reading between the lines. As a result, we may ask a lot of questions to clarify what is meant by something that you say. I have been told that I ask a lot of questions. Don't be offended by this. It is our way of being sure that we understand what you are telling us. We may repeat back to you in our own words to try and get on the same page as you.
3. If we misunderstand something that you say, please be patient and expand on what you said and explain what you meant. Don't assume a negative or hostile intent from us if we misunderstand something that you said. Keep in mind that communication can be difficult for us. Things that come naturally to you take extra effort by us.
4. Please don't get offended by our communication style. We tend to be frank, honest and matter of fact. Some people may interpret this as blunt or rude. We don't intend to offend you by not sugar coating the things that we say. We don't intend to be rude. Please don't get defensive or assume that we are attacking you. Remember that communicating is hard for us. Don't make negative assumptions. Too often we get corrected or attacked by someone who fails to give us some slack and the benefit of the doubt.
5. Please don't expect eye contact. We may be able to force eye contact, but it is not comfortable for us. Making eye contact takes a conscious effort. This effort

⁵ <https://autismum.com/2012/05/07/10-tips-on-how-to-communicate-with-autistic-people>

may take away from listening and understanding what you are saying. I tend to look at a person's mouth more often than their eyes. Other autistic people will rarely look at your face. This is ok.

6. Please keep in mind that we most likely have been rejected, excluded, ridiculed or bullied in the past. If we seem anxious or insecure this may be due to living in a world that misunderstands us and is often hostile to us. We have to work hard to reach out to others. Please work at reaching back to us with understanding and kindness. If we feel that you are ignoring us we will feel bad about that. We may persist in asking for feedback from you. Please be reassuring and clearly express your support for us.
7. Please don't speak down to us. Treat us as equals. We may sound flat or have an unusual tone to our voice. We may not speak with our voice at all. We may need to type our words. Please be patient with us. It may take us a while to formulate our answers.
8. Please don't talk too loudly or yell at us. It is very jarring to us. It makes me jump when someone comes up to me and talks too loudly. It is like having someone jump out in the dark yelling "BOO!" at me. It causes an adrenaline dump in my body. I don't like this.
9. Please do NOT touch us without warning. It will make us jump. We don't like unexpected touches.
10. Please don't assume that we lack empathy or emotion. We pick up on negative or judgmental attitudes. We know when people look down on us or are hostile to us. We will shut down if you show us a lack of respect.
11. Please keep in mind that we are all different. These issues will vary from person to person. The above tips are written from my perspective as an autistic person. This is just a guide. Feel free to ask me any questions so that I may expand and clarify any areas that aren't clear to you.

[end side box]

14. HOW TO DEVELOP ACCESSIBLE INFORMATION, EDUCATION AND COMMUNICATION (IEC) MATERIALS⁶

This tool can be used to adapt and use information, education and communication (IEC) materials in such a way that they can be understood by persons with disabilities.

Analyse existing IEC materials

Use the following questions to evaluate whether it may be necessary to adapt or use targeted approaches to reach people with disabilities.

1. Who will be able to understand this information in its current form?
2. Who won't be able to understand this information in its current form?
3. How does the information reflect the needs of different people in the community? Will people with disabilities and their caregivers see themselves and their experiences reflected in the images?
4. What do people with disabilities think about the IEC materials? Do they have any advice or feedback?

Develop a dissemination plan

Think how information will be disseminated. The matrix below might help to think through this process.

It might help to discuss with men, women, boys and girls with disabilities about issues such as where they go, what time of day, etc., so that your messages will be in places where people will receive them.

<i>Type of disability/ impairment and effective communication methods</i>	People who are visually impaired or blind	People who are hearing impaired or deaf	People with intellectual disabilities	People with physical disabilities
Radio	✓		✓	✓
Television	For audio content	For visual content	✓	✓
Printed materials: posters, billboards and flyers (dependent upon literacy)		✓	Simplified picture-based messages	✓
Drama	For spoken content	For visual content	✓	✓
Discussion groups	✓	With appropriate sign interpretation	If simplified and accepted by group members	✓

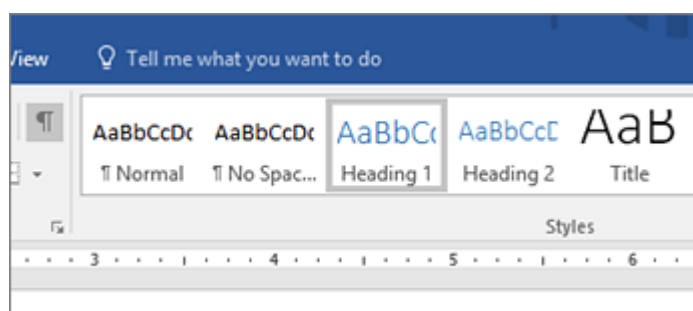
⁶ Adapted from: Women's Refugee Commission. (2015). *Building Capacity for Disability Inclusion in Gender-Based Violence Programming in Humanitarian Settings: A toolkit for GBV Practitioners*.

15. HOW TO MAKE (DIGITAL) DOCUMENTS ACCESSIBLE⁷

(Many of the following points should also be applied to creating accessible presentations and website editing)

Making Word documents accessible for screen readers

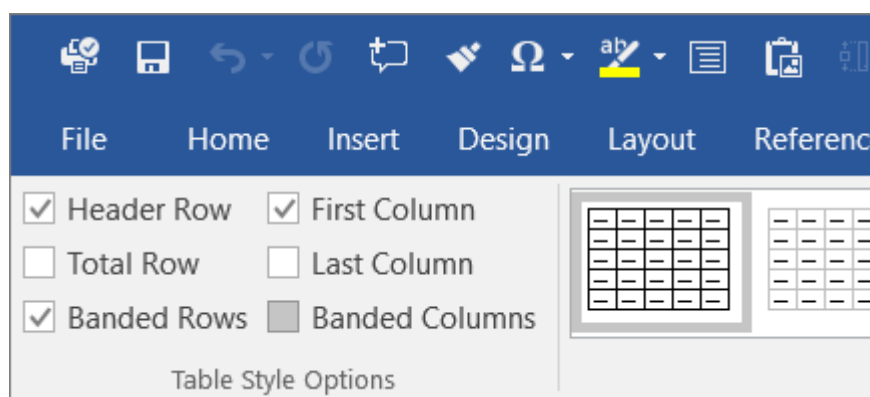
1. When preparing a document in Word use the formatting “Styles” Title, Heading 1, Heading 2 etc. as applicable and use a Table of Contents.
 - These features make it easier to navigate through a document with a screen reader (enables skim reading instead of having to listen to the whole text being read out).
 - Use headings in the correct sequence, i.e. Heading 2 follows Heading 1; Heading 3 follows Heading 2.
 - Do this by:
 - i. Selecting the heading text
 - ii. Under the **Home** tab, under **Styles**, select a heading style



2. Use sans serif fonts (like Arial and Verdana) as these are accessible. This also applies when sending emails.
3. Avoid writing in capital letters, using italics and underlining. If you want to emphasize a word it is best to use **bold**. This also applies when sending emails.
4. Always align text left. Never justify to the right.
5. Do not use hyphens to split words, rather place the whole word on the next line.
6. When providing a listing or schedule (using numbers or bullet points) have these one below each other for easier navigation with screen readers and on Braille print (this enables skim reading instead of having to listen/read through the whole text). Use the bulleting and numbering formats in Word to make sure they correctly follow each other.
 - This is an example
 - Of listing
 - With bullet points

⁷ Adapted from: Wolhandler, J. (2013). *IDDC Accessibility Manual*.

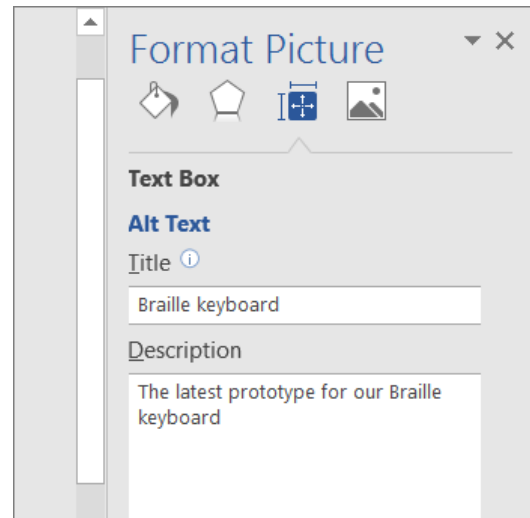
7. Make tables as simple as possible – specify column header information. Make sure they don't contain split cells, merged cells, nested tables, or blank rows. Split or merged cells can help the screen reader lose track of where they are. Blank rows can make someone think that the rest of the table is empty.
 - To use table headers:
 - i. Position the cursor in the table
 - ii. Under the **Table Tools Design** tab, in the **Table Style Options** group, select the **Header Row Box**.
 - iii. Type column headings.



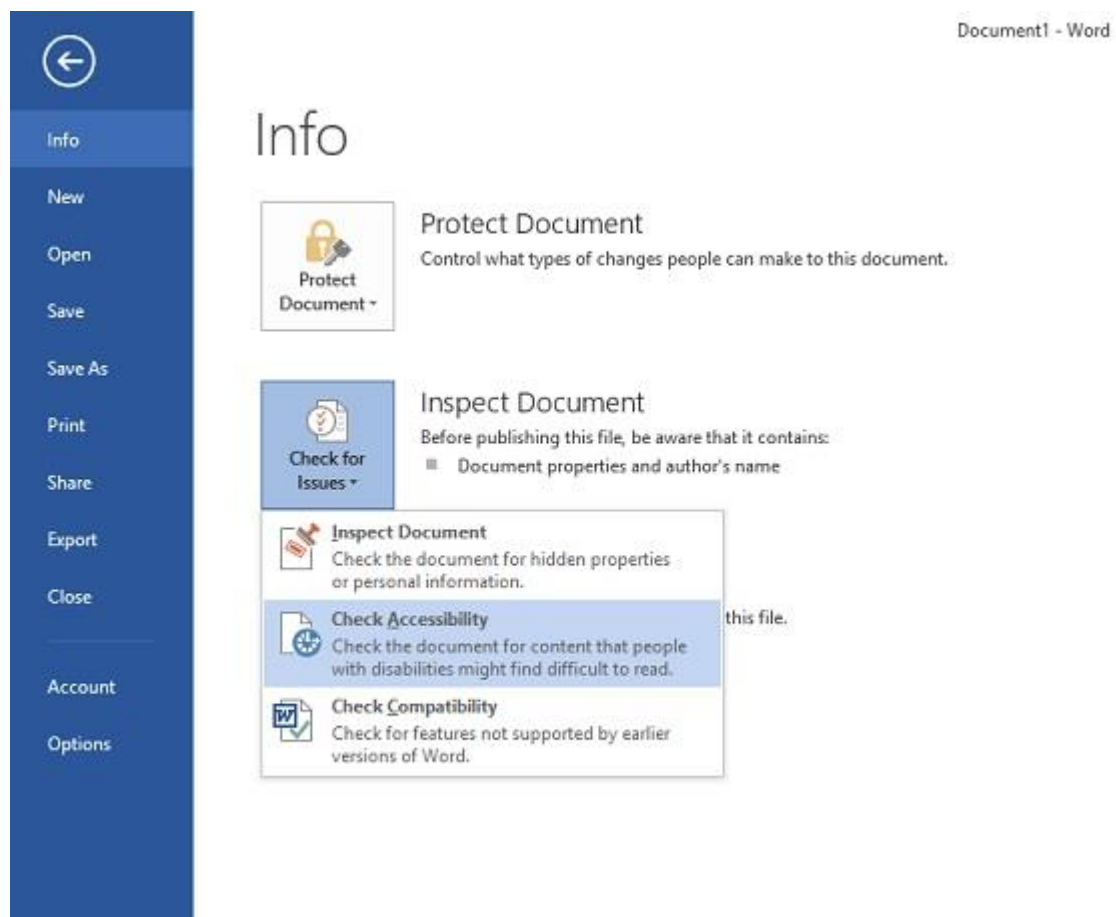
8. Always write abbreviations in full the first time you mention them in the text. Such as Light for the World (LFTW). Braille software does not necessarily read out abbreviations and can link a different meaning to them. For example, the abbreviation GA (meaning General Assembly) is recognised and read out as 'Georgia' by the screen reader Jaws 12.
9. Always insert page numbers to a document on the top right corner of the page. Page numbers are a useful point of reference for documents printed in Braille as well as for screen readers.
10. Avoid using the Enter key to create space between paragraphs. Instead Use the space before and space after properties in your styles toolbar. Similarly, don't use Enter to create space or go to a new page, but use page breaks.
11. Leave a line of white space between logo and the main title as well as between each heading. Headings should start on a new page. Such spaces and lay-out are a useful point of reference when reading through a Braille document.
12. Ensure that there are no images running over / under the text as this makes text more difficult to read.
13. Ensure that all images and logos in documents contain Alt texts so that people using screen readers receive this info. For decorative images the assigned Alt text should be "" (this indicates the screen reader to skip this info).

- Right-click the image
- Select **Format Picture > Layout & Properties**
- Select **Alt Text**
- Type description and title.

14. Include meaningful hyperlinks. Make sure that hyperlink text makes sense as standalone information and give clear information about what the destination is. E.g. don't use the words **CLICK HERE**, but use the full title of the destination.



15. Use the Accessibility Checker!



Accessible Presentations

1. Use a high-contrast colour scheme for persons with low vision, colour blindness and dyslexia:

Such as white text on a dark background

- or dark text on an off white background

2. Color and Brightness Contrast

- The highest brightness contrast is between black and white.
- Objects have the highest colour contrast when they have complementary colours, such as red & green and yellow & blue.
- Main contrast in a slide must come from brightness and not from colour. In particular, there is difficulty with green text on red background. When necessary to have a red background, use _____ or when a green background is required, use a light green background and a black font.
- Best to apply dark background colours (low brightness) and use bright colours (high brightness) for the text. A white font on a deep blue background is a very good combination.

3. Examples of Good text and background color combinations are:

- White text on a dark green background
- Yellow text on a dark blue background
- Yellow text on a black background
- Pink text on a black background
- White text on a dark blue background
- Do not use a pure white background as this may create an uncomfortable glare.
- Do not use a multi-coloured background. If background images are needed, only use a low brightness.

4. Recommended font sizes and font type:

- Use font size 48 and never use less than font size 32 unless it is for personal notes and page numbers
- Headings should be in a font size of 48 and text found in the body of the slide should be a font size of 40
- Use sans serif fonts (like Arial and Verdana) as these are accessible.
- When emphasizing text use Bold or use a larger font size
- Avoid using italics

5. Amount of information and text per slide

- There should be a maximum of six lines of text/bullet points with only five/six words per line. Always justify text to the left.
- Use line spacing of 1.5
- Use one inch margins on all four sides for headers, footers etc.
- Slides should be simple with no more than 3 different blocks of information

6. Figures and graphs:

- Figures and graphs should be explained out loud
- 1 figure/graph per page
- Separate text from image: place text above, below or beside the image do not use text wrapping
- Use brightness and contrasting colours in the same way as you would with text

7. Animation

- Avoid animation if possible but if using be sure to describe the animation out loud this includes sounds

Accessible videos

1. Ensure that video's used closed captioning and voice-over
 - a. Closed captioning is for use by persons with auditory impairments
 - b. Voice-over describes what is happening in the video for persons with visual impairments. Voice-over answers questions like:
 - i. Who's shown on the screen?
 - ii. What are the characters doing?
 - iii. Is the environment changing in some way?

Recently, YouTube has introduced automatic closed captioning. This doesn't work perfectly yet, though. To help improve closed captioning on YouTube, visit:

www.nomorecaptions.com

16. HOW TO SET UP INCLUSIVE MEETINGS⁸

Objective: to organise meetings and events that are accessible to persons with disabilities

Expected result: persons with disabilities can access and participate in meetings and events organised

Guiding principles:

- Outreach and accessibility
- Preparation:
 - preparing the venue
 - how people will get to the event
 - how people will be able to participate in the event

Persons with disabilities are experts in accessibility; a local DPO can help you in the planning of an accessible meeting.

Outreach – How you identify and invite the disability community, and identify possible barriers

Check	Yes	No	Notes
Have people with a disability / organizations for people with a disability been invited just like other people / other organizations?			
Has invitation been provided in different formats (e.g. both on paper and verbally)?			
Has plain and appropriate language been used to provide information?			
Does the invitation provided information on accessibility of the meeting venue?			
Have participants been asked whether they have any accessibility requirements?			

Accessibility – How barriers to participation are removed

Check	Yes	No	Notes
Have both physical structures as well as communication methods been checked for accessibility?			
Is accessibility for everyone? Also for other groups (e.g. older people; pregnant women; children etc.)			
When developing written materials, has there been a good color contrast between text and background for persons with vision problems?			

Preparing the venue for the meeting

Check	Yes	No	Notes
Has the meeting venue been checked in advance for universal accessibility?			
Is the building physically accessible?			

⁸ Adapted from: CBM. *Tool: Accessible Meetings or Events*. Make Development Inclusive

Are the toilets, corridors and eating areas physically accessible for persons with disabilities?			
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How people will get to the event

Check	Yes	No	Notes
Is it possible to get to the event by public transport? If not, is there an alternative (e.g. organize transport with support of a local DPO)?			
Has information been provided to participants on the meeting venue: how to get there, what support they can receive at the meeting, and if there is any reimbursement for extra expenses?			
Is someone at the entrance of the event, to direct people where they need to go and provide assistance if needed?			

How people will be able to participate in the event

Check	Yes	No	Notes
Do you have information from invitees whether they have any special requirements for accessibility or whether they are bringing a personal assistant?			
Has sign and tactile languages translation for the deaf and deaf-blind respectively been organized and budgeted for if there are people coming who speak sign language or language or tactile sign language?			
Has information in braille, large print or audio been organized and budgeted for if there are people with a visual impairment who are coming?			
Have speakers at the meeting been informed about communication? Ask speakers to speak slowly and clearly, and give any translators who are present time to translate.			
Has the room been arranged so that wheelchairs can pass through? Are there no objects that people can trip over?			
Is the timetable suitable for all participants?			
Are washrooms reasonably accessible to PWDs?			

17. HOW TO INCLUDE PERSONS WITH DISABILITIES IN PROJECTS⁹

Including persons with disabilities in regular projects, programmes and activities does not require much work. But they need to be involved at all stages of the project cycle. This instruction describes the steps in ensuring that a project is disability-inclusive.

Make a commitment. State that you really want to include persons with disabilities in your work. This also means allocating a budget for inclusion, as well as noting down data on people with disability in planning, monitoring and evaluation.

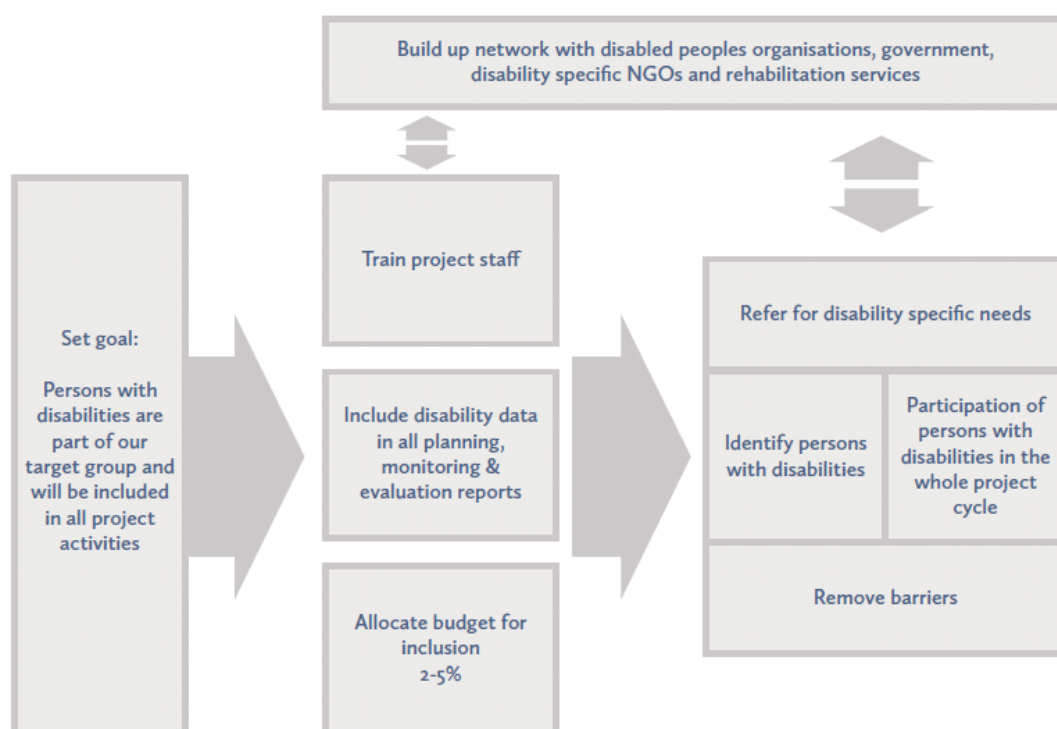
Train staff. Staff involved in the programme should be trained, so that they are aware of the rights, needs and capabilities of persons with disabilities. Staff is often not aware of the needs of persons with disabilities, and might just overlook them.

Identify. Identify persons with disabilities in your programme, and refer them to medical care or rehabilitation if they need it. Sometimes having a device can be crucial to participation.

Remove barriers. Work to remove the attitudinal, environmental and institutional barriers that prevent persons with disabilities from participating.

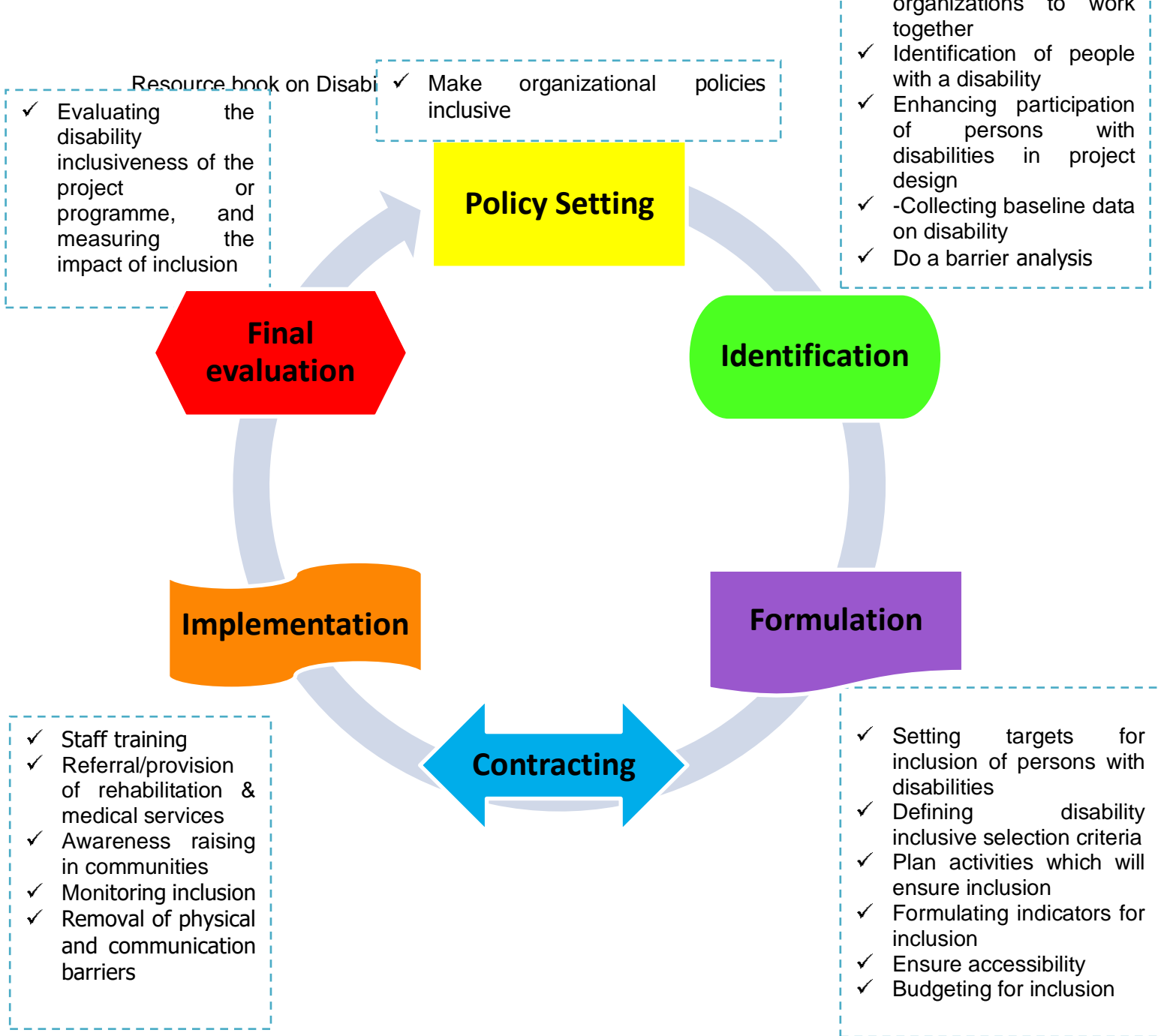
Build a network. Work together as government, disability-specific service providers, disabled people's organizations etc.

This is all demonstrated in the figure below.



Looking at the programme cycle, there are actions that can be taken at every step. The following figure demonstrates which actions can be taken at which phase of the project:

⁹ Adapted from: LIGHT FOR THE WORLD. (2013). Count Me In. LIGHT FOR THE WORLD & MDF Training and Consultancy. Disability Mainstreaming Training.



18. HOW TO CHECK WHETHER PERSONS WITH DISABILITIES ARE INCLUDED IN THE WHOLE PROJECT CYCLE¹⁰

No.	Question
Policy setting / strategic planning	
1.	Does the donor have a policy on disability, or request for specific attention to vulnerable groups, among others persons with disabilities?
2.	Are the values in the strategic plans and policies of your organisation informed by equal human rights?
3.	Are the strategic plans and policies of your organisation referring to vulnerable groups, among others persons with disabilities?
4.	What is the strategy/are the strategies to include or work with vulnerable groups, among others persons with disabilities? Are there different strategies for different groups of people?
Identification	
5.	Are there links between your organisation/your partner organisations and DPOs, or persons with disabilities? What does the relationship/partnership look like?
6.	Is the number and the type of disability of persons with disabilities being identified?
7.	Are needs and barriers of persons with disabilities being studied?
8.	Do persons with disabilities have an active role in obtaining and validating information at the identification phase?
Formulation	
9.	Are targets for inclusion of persons with disabilities being set?
10.	Are criteria for beneficiary selection being disability inclusive?
11.	Is an activity plan being made to achieve inclusion of persons with disabilities?
12.	Is planned infrastructure (new built and renovation) in accordance with universal design standards or other disability sensitive standards in use in the country?
13.	Are actions related to inclusion of persons with disabilities being budgeted separately, or earmarked (e.g.. training, offering rehabilitation services or providing assistive devices)?
Contracting	
14.	Is flexibility being bargained/possible with the donor to adjust the programme when there is good justification (e.g. if baseline data on disability are limited/insufficient, and new data may change the quantitative targets).
Implementation (M&E)	
15.	Is staff being trained on disability (mainstreaming), to increase their knowledge, attitude and practice?
16.	Are indicators for disability inclusion being formulated and fixed into the monitoring system?
17.	Are disability disaggregated data being collected and analysed within the monitoring and evaluation system?
18.	Is referral to or provision of rehabilitation services and assistive devices being done?

¹⁰ Adapted from: LIGHT FOR THE WORLD & MDF Consultancy. Reader DM in Projects.

No.	Question
19.	Is awareness being raised in communities and with authorities on disability (rights) and how disabling barriers need to be addressed?
20.	Are persons with disabilities being empowered themselves (i.e. grow in self-confidence, healthy social relations and economic control)?
21.	Are (community) meeting places being made accessible for all persons with disabilities (i.e. are they able to come and stay)?
22.	Is communication made accessible for persons with disabilities (i.e. easy read/pictogram, sign language, audio/braille print)?
Evaluation	
23.	Is (the impact and sustainability) of inclusion of persons with disabilities in the programme, part of the Terms of Reference for the final evaluation?
24.	Is the evaluator familiar with equal rights and disability?
25.	Do persons with disabilities have an active role in obtaining and validating information in the evaluation phase?

19. HOW TO MAKE MONITORING SYSTEMS INCLUSIVE¹¹

18.1. COLLECT BASELINE DATA ON DISABILITY

By having accurate data on disability, it can help define targets and goals for your project or work.

There are three types of information that are important to collect. These are:

1. General disability statistics
2. Disabled People Organizations landscape
3. Disability specific services

For each area, there is a checklist available, as well as a suggestion where you can collect this information.

Checklist of demographic disability statistics

No.	Question
1	How many persons with disabilities are living in the area?
2	What is the percentage of persons with disabilities compared to the total population?
3	What is the distribution in terms of disability types among persons with disabilities?
4	What is the gender distribution among persons with disabilities? Does it differ from the wider population?
5	What is the age distribution of persons with disabilities? Does it differ from the wider population?
6	What is the local geographical distribution of where persons with disabilities live? Does it differ from the wider population?

Data sources:

1. Global reports on disability such as the World Report on Disability
2. Census based data
3. Data from community health programs, hospitals, Community Based Rehabilitation (CBR) and disability services
4. Education data including from the Ministry of Education, mainstream schools, inclusive education resource facilities and special schools
5. Government Ministries for Social Affairs, Disability and Health
6. DPO umbrella organizations
7. Local DPOs (note: some DPOs will be disability specific so it is worth meeting with more than one DPO where possible)

Checklist on the DPO landscape in the project area

No.	Question
1	Which Disabled Peoples Organizations (DPOs) are present in the project area? (Including self-help groups or parent groups)
2	Detail per DPO: <ul style="list-style-type: none"> • what is the vision & mandate • the number of members • which activities/ services are organized

¹¹ Adapted from: LIGHT FOR THE WORLD & MDF Consultancy. Disability Mainstreaming Training.

	<ul style="list-style-type: none"> • how is the DPO connected to other organizations and institutions (both NGO, religious institutions and government). • what disability model is being practiced
3	Do the DPOs represent all persons with disabilities?
4	Which people in the disability movement are considered as (formal or informal) leaders?
5	What are considered to be the strengths and weaknesses of the DPOs by other stakeholders?

Data sources:

- Government Ministries for Social Affairs, Disability and Health
- Allies of the disability movement (e.g. international disability NGOs)
- DPO umbrella organizations
- Local DPOs (note: some DPOs will be disability specific so it is worth meeting with more than one DPO where possible)

Checklist on the assessment of disability specific services

No.	Question
Please ensure that the questions are answered according to different types of disabilities.	
1	Where and by whom is specific medical support given to persons with disabilities (including mental health)?
2	Where and by whom is physiotherapy offered for persons with a physical disability?
3	Where and by whom is occupational therapy (e.g. orientation and mobility training for visually impaired persons) offered for persons with disabilities?
4	Have or are community based rehabilitation programs being/been implemented? If yes, by whom and what geographical scope and span of activities did it involve, and for how long?
5	Where and from whom do persons with disabilities acquire assistive devices, amongst others: <ul style="list-style-type: none"> • wheelchairs, • crutches, • white canes, • low vision devices: e.g. magnifiers, bookstands, spectacles • braille slates, • hearing aids, • speech software for computers, • tricycle, • artificial limbs, • communication boards, • Etc.
6	Where and by whom is education offered for children with disabilities? (special education, integrated classes, inclusive school)
7	Are there any other specific services for persons with disabilities that have not yet been mentioned in the questions above, and are present in the area?

Data sources:

- Government Ministries for Social Affairs, Disability and Health

- Allies of the disability movement (e.g. international disability organizations)
- DPO umbrella organizations
- Local DPOs (note: some DPOs will be disability specific so it is worth meeting with more than one DPO where possible)

19.2. FORMULATE INDICATORS FOR INCLUSION

To measure whether persons with disabilities are able to access services or be part of the programme or activities, it is important to formulate indicators that will help understand if inclusion is happening.

The first thing to do, is to make sure that you collect disability disaggregated data. This means adding disability to each existing indicator. Some examples for certain sectors are given below:

Inclusive education

- Disabled children enrolled in regular schools
- Classrooms and toilets made accessible
- Teachers trained in inclusive practices (for example, training in Braille, in sign language, in disability awareness and so on)
- Literacy level of children with disabilities

Inclusive HIV & AIDS interventions

- Disabled people attending and participating in HIV & AIDS awareness meetings and able to access the same information as non- disabled people
- Disabled people accessing the same services and programmes on HIV (counselling, testing and ART) as non-disabled people

Food and water security

- Disabled people have access to sufficient safe water at home and increased access to nutritious food throughout the year
- All new facilities (toilets, wells and so on) that are constructed are accessible to disabled people
- Livelihoods and productivity initiatives are inclusive of disabled people

Child protection

- Combating violence against children and countering power abuse addresses the rights, needs and issues of disabled children
- Community campaigns against violence and abuse of children includes information about the rights, needs and issues of disabled children

Vocational training centres

- The building is accessible to people with mobility impairments
- Minimum 5% of the participants have a disability
- Accessible communication formats (such as Braille and audio tapes) are available for people with visual or hearing impairments.

19.3. MONITORING INCLUSION

Now that you have gathered data on disability, it is important to analyse it. This will help you take corrective measures and change what you are doing if you see that it is not working. The following checklist can help you ask the right questions during implementation:

- How do people with a disability perform and participate in comparison to non-disabled participants?
- Why is there a difference?

- Is earmarked budget being used for disability inclusion? Monitor if and for what purpose it is being used.
- How does the partnership/collaboration with DPOs, government and disability-specific organizations develop?
- Is the staff aware on disability issues and do they understand the inclusion process?
- Are the communities aware about disability rights?
- Is the position of people with a disability at household level changing? In what way?
- Are the barriers at project level removed?
- Are all activities accessible for persons with disabilities?

19.4. EVALUATION

At the end of a project, or at the end of a certain time period, an evaluation of the work is usually done. The results of an evaluation will help to formulate recommendations on how to improve your work in the future.

The following checklist will help to ask the right questions on disability inclusion during the evaluation. Suggested questions for the terms of reference for evaluations of disability inclusive projects:

- Were persons with disabilities able to access the full range of services provided?
- What are the achievements of persons with disabilities in the project?
- Do they achieve the same results? If not, what causes the differences?
- What were the difficulties persons with disabilities experienced in accessing services or the programme?
- How has the understanding of disability influenced the way your staff is working with persons with disabilities?
- How has this changed in the community? What were the activities that contributed most to this change?
- Did the project alter power relations and has this been in favour of more influence and involvement of persons with disabilities in your activities?
- Has the organizational capacity of persons with disabilities been enhanced?
- What are the recommendations for improving inclusion?
- Did persons with disabilities have the choice and opportunity to become active participants in decision-making processes?
- What types of disabilities do the participants in the project have? Are all groups equally represented? Or are some people still excluded?
- What partnerships with disability-specific-programmes/services have been established?
- How are project priorities set and by whom?
- Have project proposal, organizational policies, procedures and project decisions been reviewed and updated to be disability inclusive?
- What lessons are learned on inclusion and how can this be shared with the stakeholders and the development sector?

20. HOW TO MAP AND REFER TO PROVIDERS OF DISABILITY SPECIFIC SERVICES

Why refer people to disability services

People with disabilities often also need health services, and are more likely not to be able to access health services. Some people with disabilities could use assistive equipment, such as crutches, hearing aids, a wheelchair, or a cane. If they could receive this support, they would be able to live a more independent life. Yet often people with disabilities and their families do not know how to access these services. This is why it is important for community leaders to know where disability services are in the region, and to refer people with disabilities to go and visit these services.

21. HOW TO NETWORK WITH DISABLED PEOPLE'S ORGANIZATIONS¹²

Working together with other organizations allows you to do more than if you were working alone. Organizations working with or for persons with disabilities, and organizations of disabled people's, can help you become successful in including persons with disabilities.

Starting to network

It is important to build knowledge, trust and relationships with other organizations for you to get to know each other. Become familiar with the organizations in your area, and help them become familiar with you. This way, you will be able to find each other quickly if you have a question or problem.

You can do this by:

- Organizing a short, informal meeting with the leadership of local disability organizations. Explain what the work is that you do, and ask them to explain what they do.
- Invite staff and members of disability organizations to your events and meetings, and make sure that your meetings are accessible so that they can attend.
- Invite a disability organizations to conduct a training for your staff or community
- If the disability organization has a public meeting or event, attend it so that you have a chance to hear and see what they do.

Structures of Disabled Peoples Organizations (DPOs)

DPOs are usually organised as follows:

- Often they are private, non-profit organizations. Sometimes there are government agencies, and sometimes there are also private, for-profit organizations and service providers.
- Disability Organizations are often one of two categories.
 1. Organizations that provide services to or for persons with disabilities.
 2. Organizations that do advocacy work, and are staffed and controlled by persons with disabilities.
- Some disability organizations are cross-disability, and work with a wide range of disabilities. Other organizations focus on certain types of disabilities, such as South Sudan Association of the Visually Impaired.
- Some organizations are members of or chapters of national organizations. There are also local organizations that are not connected to a national organization.

Self-Help Groups

Besides DPOs, persons with disabilities might also organize themselves in self-help groups. Self-help groups are groups founded to share common experiences, situations and problems. They are run by and for group members, and often do not have a formal structure or status. Persons with disabilities who are members of a self-help group, might also be a member of a DPO.

¹² Adapted from: Institute for Community Inclusion. Creating an Inclusive Environment: A Handbook for the Inclusion of People with Disabilities in National and Community Service Programs.

22. HOW TO MAKE THE RECRUITMENT PROCESS INCLUSIVE^{13,14}

Sometimes, persons with disabilities are not able to gain employment, because the recruitment process is set up in such a way that they are discriminated against. The following section will provide guidance on how to develop a recruitment process which is inclusive of persons with disabilities.

Job Description

Look at the job description which has been developed for the position. Requirements in the job description should only include requirements which are clearly related to the duties, i.e. essential functions.

An essential function is a task or duty that is critical to the position. If it is not performed, then the nature of the position is fundamentally changed. A function is essential if:

- The position exists to perform a specific function
- There are a limited other persons available who can perform the function
- A function is highly specialized, and the candidate is selected for special expertise or ability to perform it.

The following chart gives some examples:

The position exists to perform a specific function	There are a limited number of other participants available to perform the function or among whom the function can be distributed	A function is highly specialized, and the person in the position is selected for special expertise or ability to perform it
Example Participant will provide education through public speaking and information dissemination.	Example Participant will have a commercial vehicle driver's license.	Example Participant must have the ability to understand and communicate in Spanish and English.
Example Participant will read stories to preschool children in their homes.	Example Participant must have previous experience installing drywall.	Example Participant will provide estate planning legal advice to participants at the senior day care center.

Figure 3. Explanatory examples of essential functions¹².

Other functions in a position are marginal functions. These can be easily reassigned. The chart below gives an example of marginal functions.

¹³ Adapted from: CCBRT. Employing People with Disabilities: A manual for employers

¹⁴ Adapted from: Corporation for National and Community Service (2004). Creating an Inclusive Environment: A Handbook for the Inclusion of People with Disabilities in National and Community Service Programs.

Service task:

Participants will provide homework help to third grade students at an after-school program. Participants will occasionally fix snacks for students as needed.

The essential functions:

Ability to read and explain third grade subject matter, ability to communicate effectively with children.

The marginal function:

Fixing snacks at the end of the tutoring session.

Service Task:

Participants will establish committees of residents in low-income housing to promote self-sufficiency and drug/crime prevention programs.

The essential functions:

Effective communication, diplomacy and tact, planning, organization, and follow through on activities and goals.

The marginal functions:

Answering telephones, computer skills, and boxing and transporting materials to meetings.

Figure 4. Explanatory examples of essential and marginal functions¹².

Understanding what the essential functions are for a position, will help you find qualified candidates, with or without a disability. A qualified candidate is one who is “able to perform the essential functions of the position with or without accommodation.” ^{12(p18)}. It will also help you to not dismiss candidates, simply because they are not able to perform a function which is marginal, but not essential.

Advertising

Ensure that advertising for the position does not discriminate. Spread the advertisement in various channels so that people have a large chance of seeing it. Considering placing the advertisement with organizations connected to people with disabilities. Provide the vacancy information in different formats such as large print, email or spoken. In your advert, write that alternative formats of the vacancy are available on request.

In case the job advert appears on TV, ensure that the contacts like phone numbers are verbally read but not “contact us on the numbers on the screen” because the visually impaired prospective applicants will not see such numbers.

Application Forms

Allow candidates to submit their application in a different format than specified, e.g. by telephone, tape or email. Do not reject untidy applications if it could be because of an impairment.

Also, provide candidates with the opportunity to share whether they would require any special needs or provisions.

Selection

Check your selection process, to ensure that it does not disadvantage persons with disabilities, for example when carrying out an assessment or selection test.

Interviewing

Make any reasonable adjustments if you know that a candidate will need certain adjustment to attend or take part in a selection interview. Even if you do not know in advance, be prepared to make any adjustments to accommodate a candidate with a disability upon their arrival.

Examples of adjustments could include:

- using an interview location with an accessible room and toilet
- providing additional travel expenses for persons needing to take a taxi to the interview
- allowing a candidate to bring an assistant, etc.

Ensure that interviews are objective and non-biased. Do not let any ideas about disability influence your view on whether a person can manage the job. Do not make any assumptions about what a person can or cannot do. It is important to ask all applicants the same questions. In addition, realize that you are often not allowed to ask disability-related questions or ask for medical information, but need to focus on a candidate's ability to perform the tasks required.

The following chart gives an example of questions that can and cannot be asked during an interview.

Questions You Can Ask		Questions You Cannot Ask	
General Questions Tell me about yourself. What are your greatest strengths and weaknesses? Tell me about your interests. What do you see yourself doing in 5 years?		General Questions Tell me about your disability. Describe any physical or mental problems or disabilities you have. Have you ever received Worker's Compensation, SSDI, or SSI? Are you taking prescribed drugs? Have you ever been hospitalized? How many days were you absent from work for illness last year?	
Questions About Performing Essential Functions Are you able to perform the essential functions of this position with or without reasonable accommodation? (Note: This question should be answered with a yes or a no response. The applicant is not required to disclose if an accommodation is needed.)		Questions About Performing Essential Functions Do you have any disabilities, impairments, or illnesses which may affect your performance in this position?	
Questions About Specific Duties This position requires traveling from one local school to another. Can you do that? This position involves doing X and Y at Z speed. Can you do X and Y at this speed? This position involves taking information over the phone and entering it into a computer. Can you do that? This position requires moving construction materials weighing 15 pounds to various parts of a work site. Can you do that? This position requires reading to children. Can you do that?		Questions About Specific Duties How do you teach a class when you are Deaf? How can someone with your disability drive a truck? How can you manage playground duty when you can't see? How can you clear trails, dig a ditch, pull weeds, or mow lawns with your handicap? What kinds of help will we have to give you so that you can do these tasks?	
Questions About Accommodations If an applicant volunteers that he/she can perform the task with an accommodation, then you may ask: What accommodation will you need to perform this task? However, please note the advisory paragraph above against asking this questions.		Questions About Accommodations To do this job you will obviously need accommodations. Which ones will you need?	

Figure 5. Questions you can and can't ask¹².

Assessment testing

If your selection procedure requires a test, ensure that the test does not have any bias which is not needed. Ensure that you only test what is really necessary for the position.

In some cases, it might be necessary to make a reasonable accommodation to allow a candidate to take a test.

23. HOW TO DEVELOP AN INCLUSIVE WORKPLACE¹⁵

Once a person with a disability is appointed as a new colleague, it might be necessary to make a few adaptations to ensure that the staff member can work to the best of his/her abilities.

The most important is not to make any assumptions regarding the persons and their disability. Always ask the person in question what they would prefer.

Reasonable Accommodation

It might be necessary to make a few adaptations specific to the type of disability that your new staff member has. This will help them to work better. Reasonable means that it should not be an unnecessary financial burden on your organization. There might be a little cost involved, or no cost at all, but any cost incurred will always be in proportion to the work a candidate can deliver.

Some examples of adjustments are:

- Changing the furniture or other things in the office to enable someone to move around easy.
- Providing a tape recorder for a blind person to take notes.
- Providing a mobile phone to a deaf person so that he can communicate by text or SMS.
- Allowing for an escort or assistant for someone with a visual or mobility impairment.
- Providing extra on-the-job support for someone with a learning disability during the induction period.
- Altering work hours.

Office Environment

To ensure that anyone can come and use the office, even guests, it would be good to make the office environment accessible. This can be done using an accessibility audit. Some examples of things to think about include:

- Are the offices on the ground floor, or is there access to offices or meetings room that are not on the ground floor?
- Are toilets accessible?
- Can people move around in the office? Is the furniture in the way? Are the doors large enough? Are there any loose rugs that people can trip on?

Staff

Make clear to all people working in the office that persons with disabilities have the same rights to equal participation and fair treatment. Ensure that there is no discrimination, and enforce disciplinary procedures if staff members do discriminate against disabled people.

Information

Check that all information is accessible to everyone. For example, provide written information in different formats for use by blind or visually impaired people, such as braille, large print, or electronically to be used by a screen reader. When writing documents, try not to make them too long or complex. This will make it easier for people with learning disabilities to understand, as well as people who have another mother tongue, such as minority language groups.

¹⁵ Adapted from: VSO. (2006). A Handbook on Mainstreaming Disability.

24. HOW TO CHECK HOW INCLUSIVE YOUR ORGANIZATION IS¹⁶

The Disability Inclusion Score Card (DISC) is a tool which can provide insight in the current situation of whether an organization is inclusive to persons with different disabilities. It can help find the strengths and opportunities for change in terms of making the organization disability inclusive. This DISC is developed specifically for use by NGOs.

The checklist is intended to be used as guided assessment. The assessment can be carried out multiple times (e.g. at baseline, 6 months and 1 year) to measure change over time. The full version of the tool in Excel format can be requested from Light for the World at info@lightfortheworld.nl.

Name of organisation	
Who were present	
Name of facilitator	
Date of assessment [Baseline]	
Date of assessment [Progress]	
Date of assessment [Final]	

Checklist					
	Level 1	Level 2	Level 3	Level 4	Score
Domain 1: Governance					
Are the strategic and operational documents disability inclusive? (i.e. are the vision and mission supportive to work on inclusion, and does the organisation have a written policy on inclusion?)	Disability or inclusion of persons with disabilities is not included in our strategy documents, or in our sectoral policies.	Inclusion of persons from marginalised groups is mentioned in the strategy documents and sectoral policies, but not specifically worked out.	Inclusion of persons with disabilities from a rights-based perspective is mentioned in the strategy documents and worked out in some policies.	Inclusion of persons with disabilities from a rights-based perspective is a crosscutting issue in our organisation and worked out in all our strategy documents and sectoral policies.	
Does the director/management promote the inclusion of persons	The director/management	The director/management occasionally mention or	The director/management regularly mention and	The director/management	

¹⁶ Adapted from: Mission East & Light for the World. (2016).

Checklist					
	Level 1	Level 2	Level 3	Level 4	Score
with disabilities in the organisation?	does not mention or promote the inclusion of persons with disabilities.	promote the inclusion of persons with disabilities in the organisation.	promote the inclusion of persons with disabilities in the organisation, but it does not drive day to day behaviour.	systematically mention and promote the inclusion of persons with disabilities in the organisation, and this consistently helps drive the day to day behaviours and decisionmaking in the organisation.	
Domain 2: Programme Management Practices					
Do you collect data on the participation of persons with disabilities?	Data on disability is not collected in any programme.	In some of the programmes data on disability is collected.	Disability data is collected in all programmes.	Data on disability is collected in all programmes, and split by type of impairment.	
Is disability included in planning, monitoring and evaluation formats and mechanisms?	Disability is not included in planning, monitoring and evaluation formats and mechanisms.	Disability is included in some planning, monitoring and evaluation formats mechanisms.	Disability is included in majority of planning, monitoring and evaluation formats and mechanisms.	Disability is included in all relevant planning, monitoring and evaluation formats and mechanisms, including the annual report of the organisation.	
Are persons with disabilities involved in the design, planning, monitoring and evaluation of programmes?	Persons with disabilities are not involved in the design, planning, monitoring and evaluation of programmes.	In less than half of the programmes persons with disabilities are consulted in the design, planning, monitoring and evaluation.	In more than half of the programmes persons with disabilities are consulted in the design, planning, monitoring and evaluation.	Persons with disabilities are involved in the design, planning, monitoring and evaluation of all programmes.	
Are staff encouraged to work on the inclusion of person with disabilities in the programmes?	Staff are not encouraged to work on the inclusion of persons with disabilities.	Staff are sometimes encouraged/reminded to work on the inclusion of persons with disabilities.	Staff members are regularly encouraged to actively work on the inclusion of persons with disabilities.	Staff members are systematically encouraged and supported to actively	

Checklist					
	Level 1	Level 2	Level 3	Level 4	Score
				work on the inclusion of persons with disabilities.	
What is the percentage of persons with disabilities that is participating in programmes?	The number of persons with a disability participating in programmes is negligible.	1-3% of the participants in our programmes are persons with disabilities.	4-5% of the participants in our programmes are persons with disabilities.	6% or more of the participants in the programmes are persons with disabilities.	
Domain 3: Human Resources					
Is the human resource policy disability inclusive?	Diversity not mentioned or part of the human resource policy.	Diversity is part of the human resource policy, but disability is not mentioned there.	Disability is mentioned in human-resource policy.	Disability is explicitly mentioned in human-resource policy in an actionable way.	
In how far does your organisation enable persons with disabilities to work as employees, board members, consultants and volunteers?	Nothing in place to enable persons with disabilities for employment.	Limited reasonable accomodation ¹⁷ is provided to (potential) employees, board members, consultants and volunteers.	Reasonable accomodation is provided to (potential) employees, board members, consultants and volunteers.	Reasonable accomodation is provided to (potential) employees, board members, consultants and volunteers, and affirmative actions ¹⁸ are taken during recruitment.	
Are persons with disabilities working in the organisation?	No staff, board members or volunteers with a disability in the organisation.	At least 1% of staff, board and volunteers consist of persons with disabilities.	At least 2% of staff, board and volunteers consist of persons with disabilities.	At least 5% of staff, board and volunteers consist of persons with disabilities.	

¹⁷ A change to a job, work environment, or the way things are usually done that is needed to allow an individual with a disability to enjoy equal access to benefits available to other individuals. These could include adjustments to work schedules, physical space adaptations, the use of interpreters, or personal-care attendants, and performing the work differently.

¹⁸ An active effort to improve the employment or educational opportunities of minority groups; taking a proactive approach to removing prejudices against recruiting and promoting minorities. For example by sharing a job advert in a magazine for persons with disabilities.

Checklist					
	Level 1	Level 2	Level 3	Level 4	Score
Are persons with disabilities employed in decisionmaking positions? If so, in how far does it show a proportional representation?	No representation of persons with disabilities in the organisation.	Some representation of persons with disabilities in the organisation but not in decisionmaking positions.	There is a representation in decision-making position, but not yet proportional.	A proportional representation of persons with disabilities can be seen in the organisation, including in decisionmaking positions.	
Is disability orientation to staff organized?	No orientation is so far given to staff of the organisation on the rights of persons with disabilities and inclusion in all programmes.	Some staff received a one-off orientation on the rights of persons with disabilities and inclusion in all programmes.	Majority of staff received a one-off orientation on the rights of persons with disabilities and inclusion in all programmes.	Staff regularly receives orientation on the rights of persons with disabilities and on inclusion in all programmes.	
Does your organisation/personnel have expertise on disability rights and inclusion and/or does the organisation have access to/make use of external disability expertise? (e.g. inclusion specialist; disability focal person)	No disability expertise/focal person within the organisation. No external support requested at all.	Disability expertise exists within the organisation, but is limited. Only a few people within the organisation are aware of this expertise. Available expertise is rarely used. Occasionally external support is requested.	Disability expertise exists within the organisation. Many people in the organisation are aware of this expertise and they frequently use it. Regular external support is requested.	Disability expertise exists within organization; many within organization and partner organizations are aware of such expertise; it is regularly used within the organization and also extended to other partners on request. Whenever needed external support is requested.	
Domain 4: Financial Resources					
Is budget available to support the inclusion of persons with disabilities where necessary? (i.e.	No budget is allocated for inclusion of	0-1% of budget is allocated for inclusion of persons with disabilities.	2% of budget is allocated for inclusion of persons with disabilities.	3-7% of budget is allocated for inclusion of people with disabilities.	

Checklist					
	Level 1	Level 2	Level 3	Level 4	Score
for reasonable accommodation, training & awareness raising, capacity building on inclusion)	persons with disabilities.				
Domain 5: Accessibility					
Is the office accessible ¹⁹ ?	The organisation's office building and meeting rooms are not accessible to persons with disabilities.	The meeting rooms and toilets are accessible to persons with disabilities. The workspaces are not accessible.	The meeting rooms, toilets and part of the workspaces are accessible for persons with disabilities.	The whole office, including all workspaces, meeting rooms, toilets and kitchen/canteen, are accessible to persons with disabilities.	
Are events and meetings organised by your organisation accessible?	Accessibility is not taken into account when events or meetings are organised by the organisation.	If we know persons with disabilities are coming, we will consider using an accessible location for our event or meeting.	We generally consider accessibility when we organise an event or meeting. Most are accessible for persons with disabilities.	All events and meetings organised by our organisation are accessible to all persons with disabilities.	
Are project activities and infrastructure accessible to persons with disabilities to the maximum extent possible?	No project activities are conducted with accessibility in consideration.	Few project activities are conducted with accessibility in consideration.	Most project activities are conducted with accessibility in consideration.	All project activities are conducted with accessibility in consideration. When needed, reasonable adaptations are done to make activity location and infrastructure accessible.	
Are accessible transport options available to the project location to the maximum extent possible?	No consideration on safe and accessible transportation.	Little consideration on safe and accessible transportation.	Due consideration on safe and accessible transportation.	Consideration on safe and accessible transportation is	

¹⁹ Something is accessible if it can be used, entered, reached. This is not only physical accessibility (the user can enter the building/premises) but also includes whether an individual can read, understand, or participate in something.

Checklist					
	Level 1	Level 2	Level 3	Level 4	Score
				automatic and part of program.	
Is the website accessible?	The website is not accessible.	The website is tested for accessibility and is partly accessible.	The website is tested for accessibility and is fairly accessible.	The website is fully accessible.	
Can all persons access and use information provided by your organisation?	Information provided by the organisation is not accessible.	Information is made accessible on demand.	The option of getting information in an accessible format is actively communicated.	Information is always available in accessible formats. Key information is available in easy read format.	
In how far are staff members trained to use, arrange for and produce materials and communications in alternative formats ²⁰ as applicable?	None of the staff members are trained to use, arrange for and produce materials and communications in alternative formats as applicable.	Sensitization to staff members are given to use, arrange for and produce materials and communications in alternative formats as applicable.	Some staff members are trained to use, arrange for and produce materials and communications in alternative formats as applicable with external support.	Staff members are trained to independently use, arrange for and produce materials and communications in alternative formats as applicable.	
Is sign language interpretation available?	No accommodation is made for people in need of sign language interpretation.	Sign language interpretation is sometimes available.	Sign language interpretation is available on demand.	Sign language interpretation is always provided as an option.	
Domain 6: External Relations					
Does your organisation collaborate with DPOs, disability service providers and/or (inter)national networks on disability inclusion?	There is no collaboration with disabled people's organisations, disability service providers and	In less than half of the programmes collaboration takes place with disabled people's organisations, disability service providers	In more than half of the programmes collaboration takes place with disabled people's organisations, disability service providers and (inter)national	All programmes collaborate actively with disabled people's organisations, disability service providers and	

²⁰ Alternative formats include audio, braille, electronic, large print or easy read versions of standard print materials such as textbooks, letters and information leaflets.

Checklist					
	Level 1	Level 2	Level 3	Level 4	Score
	(inter)national networks on disability inclusion.	or (inter)national networks on disability inclusion.	networks on disability inclusion.	(inter)national networks on disability inclusion.	
Are rights of persons with disabilities part of advocacy?	The rights of persons with disabilities are not included in the organisation's existing lobbying and advocacy activities.	The rights of persons with disabilities are included in some of the organisation's existing lobbying and advocacy activities.	The rights of persons with disabilities are included in the majority of the existing lobbying and advocacy activities.	The rights of persons with disabilities are included in all existing lobbying and advocacy activities of the organisation.	
Does your organisation address disability in promotion, fundraising and communication?	Persons with disabilities are not mentioned in promotion, fundraising and communication content.	Persons with disabilities are hardly mentioned or specifically mentioned as a charitable target group in promotion, fundraising and communication content.	Persons with disabilities are sometimes mentioned in promotion, fundraising and communication content, and where mentioned or pictured are depicted positively and equitably.	Persons with disabilities are proportionally and positively represented in promotion, communication and fundraising content (i.e. people with disabilities are seen in pictures, case studies, reports etc.)	
Is disability orientation with local partners/community groups organized?	Inclusion of persons with disabilities is not discussed with local partner organisations.	Inclusion of persons with disabilities is discussed with local partner organisations.	The organisation is offering orientation on the rights of persons with disabilities and on inclusion of persons with disabilities to local partner organisations.	The organisation is systematically offering orientation on the rights of persons with disabilities and on inclusion of persons with disabilities to their local partner organisations.	

25. CONSIDERATIONS IN MAKING PROJECT PARTICIPATION CRITERIA DISABILITY SENSITIVE

- Ban explicit discriminatory criteria such as candidate should be fit to work, or able to learn, or a child should be able to walk to school. Some criteria may not look discriminating, but in the end they are excluding people with disability unintendedly.
- To prevent problems with enrolling persons with disabilities in programmes, it is suggested that a clause be added to the selection criteria that states that people with disabilities (and caretakers of disabled people) get priority to participate in such projects and that selection criteria will be used more flexibly to ensure equitable participation of people with a disability. We do not suggest that having a disability (or a disabled family member) should automatically lead to enrolment in any kind of development programme, as some people with disabilities are actually economically comfortable. However, when enrolling beneficiaries economic status should not be the only criteria; but social status, level of participation in the community, position in the family/household and the resilience of person with a disability (or the caretaker of the person with a disability) should also be considered. One should also take the extra (health) expenses into account that people with disabilities often have to make.
- Choose your unit of intervention. Is the unit of intervention the household or individual? Approaches that engage the whole household while keeping marginalized individuals, including people with disabilities, at the centre of the intervention, are likely to be more empowering than those that are focused on the household. Household-focused programs tend to engage the primary breadwinner, not the most marginalized, and can make intra-household inequalities worse. It is important to consider the relationship between the person with disability and other household members, including their particular context.

26. HOW TO BUDGET FOR INCLUSION²¹

Objective

To earmark disability inclusion & to include disability related costs in the budget.

Expected results:

- Monitoring and evaluation of disability inclusion in the projects
- Activities and efforts required for disability inclusion are planned
- Provide a proof that disability is really included.

The related costs are considered in the budget.

In general:

Budgeting is the financial expression of the required means for implementing an activity. That covers both administrative costs and operational costs.

Disability inclusion in budgeting means:

- To measure the costs to reduce or remove the barriers to inclusion;
- To measure the costs of the additional required measures that will allow persons with disabilities to equally participate in and benefit from the projects;
- To measure the costs of the disability specific activities (when a project has a disability component).

What to do:

You can define specific budget items that are required for inclusion for administrative costs and for operational costs. You can also allocate a percentage of your budget.

Budget items for inclusion – Administrative Costs

- Awareness of the staff and managers on disability.
- Workplace adaptations permitting the recruitment of persons with disabilities (e.g. accessible IT and software).

Budget items for inclusion – Operational Costs

- Awareness on disability – to reduce social and institutional barriers among different stakeholders involved in the project.
- Adaptation of buildings built during the completion of the project. Surveys show that the cost impact for including disability concerns in the construction of new buildings is 1.12% on average, ranging from 0.1% for public building to 3% for individual homes.
- Adaptation of means of communication. This can for instance be the use of specific services, like sign language interpreters.
- Specific expertise on disability (for disability analysis for instance; or for developing inclusive policies).
- Specific surveys linking disability and the sector area.

Allocating a percentage

Another recommended option is to allocate a percentage of your budget towards disability. The actual spending will depend on the type of activities. Generally, this will be anywhere from 2%-7% of the total budget.

²¹ Adapted from: CBM. Tool: Budgeting the inclusion of a disability perspective. Retrieved from: <http://www.inclusive-development.org/cbmtools/part3/1/Budgetingtheinclusionofadisabilityperspective.pdf>

27. HOW TO MAKE EMERGENCY INFORMATION AND SERVICES ACCESSIBLE FOR DEAF PEOPLE WHO USE SIGN LANGUAGE²²

Emergency Information

Information is essential if individuals are to make decisions about the risk to their own health and safety or that of their family, the risk to their property, and the actions they should take, including if, when and where to evacuate.

Governments and non-governments frequently use radio as a medium of mass communication in emergencies. This medium is not accessible to deaf individuals, and therefore other methods of communications must be used.

Emergency information can be made available for persons who are deaf by:

- Interpret into national sign language and/or use open captions any media broadcasts on television
- If sending public alerts to individuals (e.g. by phone calls) use SMS/text messages or instant messages
- Use Social Media such as Facebook, Twitter, and YouTube to disseminate emergency information
- Radio stations disseminating information should also publish this information on their website
- Provide deaf communities with information about who to contact in case they cannot access information.

Communication with emergency workers

Emergency and humanitarian aid workers are often the first people to interact with members of the public in emergency situations.

Where possible, provide emergency workers with information in Easy Language or symbols to use to communicate.

Train emergency workers on deaf awareness, so that they:

- Can recognize that an individual may be deaf if he/she does not respond to verbal questions or commands
- Can communicate in a basic way with deaf individuals, and use visual methods to gain attention
- Understand the difference in communicating with deaf and hard of hearing persons
- Recognize that deaf forms of communication, for example through signs and deaf accents, are normal and not the result of intoxication, distress or injury
- Understand that deaf persons may not be fluent in the national language
- Recognize that deaf persons may be extra stressed in emergency situations as they have difficulty communicating
- Understand that deaf people who cannot use their hands due to e.g. injury, may be further distressed as they are no able to communicate.

Information in emergency centres

Make emergency sites accessible by:

- Where televisions are turned on in the centre, turn on the open captions

²² Adapted from: WFD Board & WASLI Board. (2015). Communication during natural disasters and other mass emergencies for deaf people who use sign language.

- Contact and make available professional interpreters as soon as possible
- Any information announced orally should also be available as written information
- Make written information available in Easy Language
- Inform deaf people where they can receive written/signed information
- Use telecommunications to share information, e.g. by text messages.

28. HOW TO DESIGN ACCESSIBLE SHELTERS²³

1. Site access

Clear the site and the access to the site from rubble and debris. Try to use flat sites with minimum level changes for better mobility.

Ensure flat, uniform surfaces with drainage in place.

Consider where the entrance is placed. Sometimes rotating the plan a bit can mean avoiding the need to provide stairs or ramps.



Figure 6. Accessible Site Plan Design. ³⁵

2. Pathway to the shelter

There is a pathway to the shelter which is the most direct route. The ground is firm, non-slippery, and has no obstacles. The pathway should be 120cm wide for a wheelchair to circulate. Where it cannot be avoided, the pathway can be reduced to a minimum of 90cm. There are no hazards above the head at least 220cm above the ground.

3. Accessible entrance

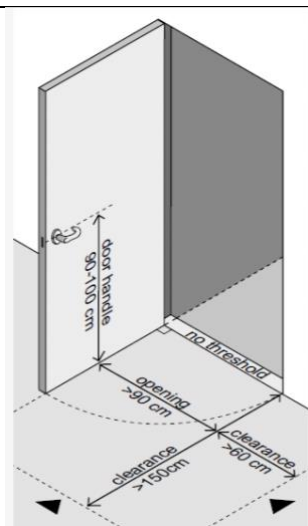


Figure 8. Entrance requirements.³⁶

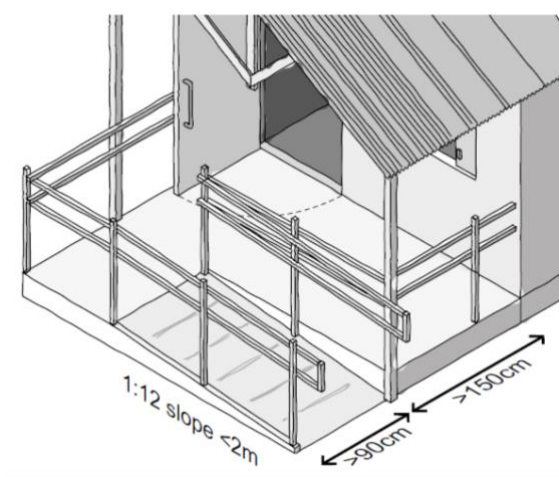


Figure 7. Slope for wheelchairs.³⁶

Provide a ramp for entrance if there is a difference in ground level between the inside and the outside of the shelter. This can be made from wood or concrete.

A ramp should have a maximum slope of 1:10, minimum 90cm wide and is made of a non-slip surface. There are handrails at 70 and 90 cm height.

²³ Adapted from: International Federation of Red Cross and Red Crescent Societies. (2015). All under one roof: disability-inclusive shelter and settlements in emergencies, and CBM. Inclusive post-disaster reconstruction: building back safe and accessible for all.

Make openings at least 90cm with no thresholds or barriers on the ground.

Use non-reflective materials and a contrasting colour at the entrance to make it easier to identify for persons with visual disabilities (i.e. contrast the colour of the door with the colour of the wall).

Inside the shelter

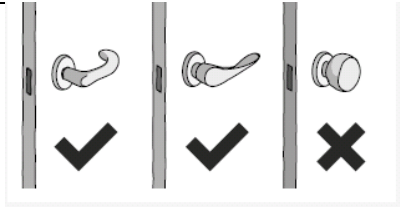


Figure 9. Types of doorhandles.³⁶

Figure 9. Types of doorhandles.³⁶

Provide doors and windows which are light and easy to open and close with accessible handles. Lever handles/vertical handles are preferable.

Provide lighting inside and outside the shelter with accessible light switches.

Consider (natural) methods of ventilation and thermal control, for example by using shade nets and placing openings away from the sun. This is particularly relevant for persons who spend a significant amount of time indoors.

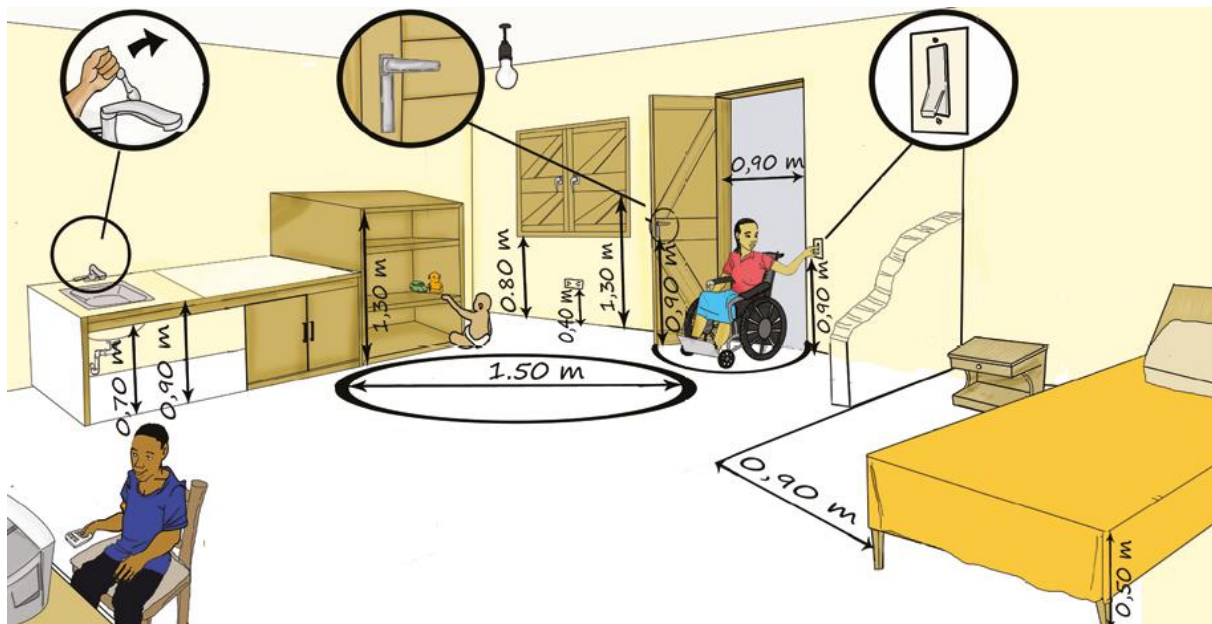


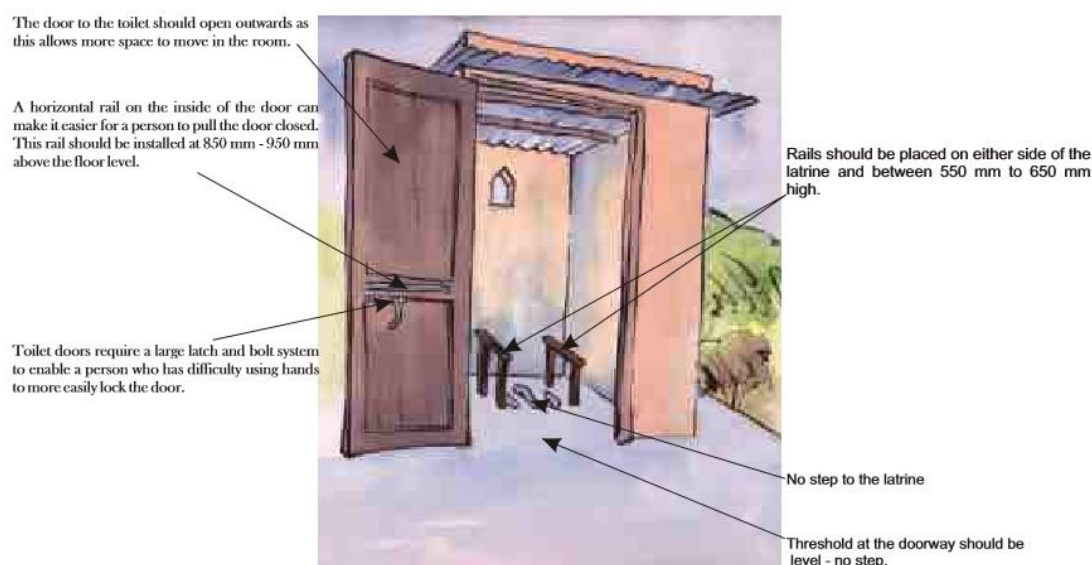
Figure 10. Accessibility requirements in the home.³⁵

Provide work spaces at a comfortable height. Place equipment that is used often in strategic places with enough space to move around them.

29. HOW TO DEVELOP BARRIER FREE LATRINES²⁴

Asian – style latrine:

Persons with disabilities may have difficulty squatting down or standing up again. This may be easier if rails are placed on either side of the latrine. The height of these rails should be 550 to 650 millimetres. There should be no steps into these toilets and no steps up to the latrine.



Asian-style latrine with rail

Figure 11. Asian style latrine with rail³⁷.

Accessible toilet

There should be at least one toilet accessible for persons with disabilities. This should be a Western style toilet if water and plumbing is available for flushing. Where flushing is not

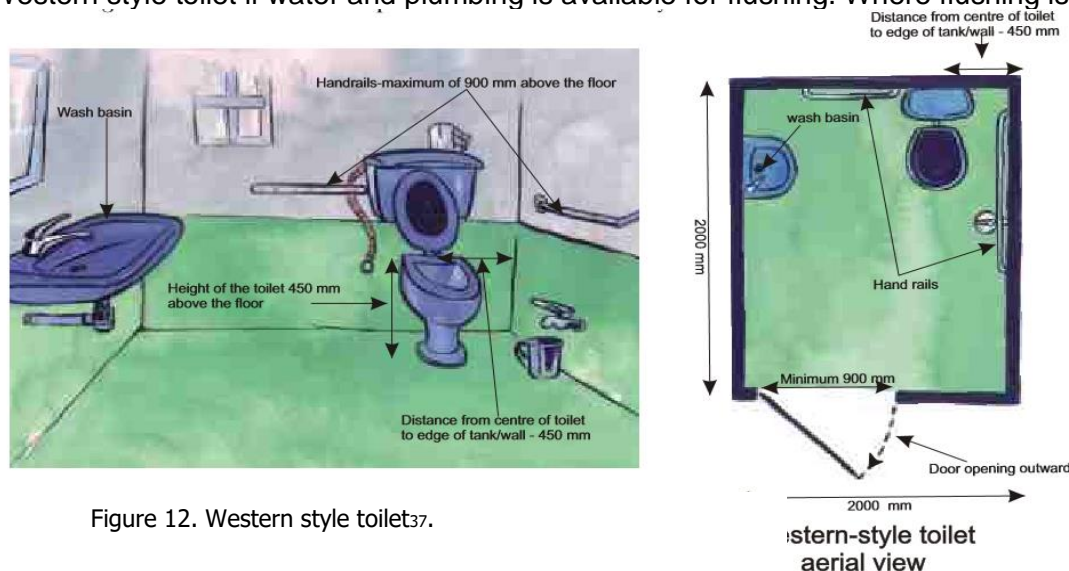


Figure 12. Western style toilet³⁷.

possible, an adapted form of the Western style toilet can be used. In this adapted form, the plumbing will be the same as in the Asian style latrine.

²⁴ Taken from: Handicap International Nepal. (2009). Guidelines for Creating Barrier-free Emergency Shelters.

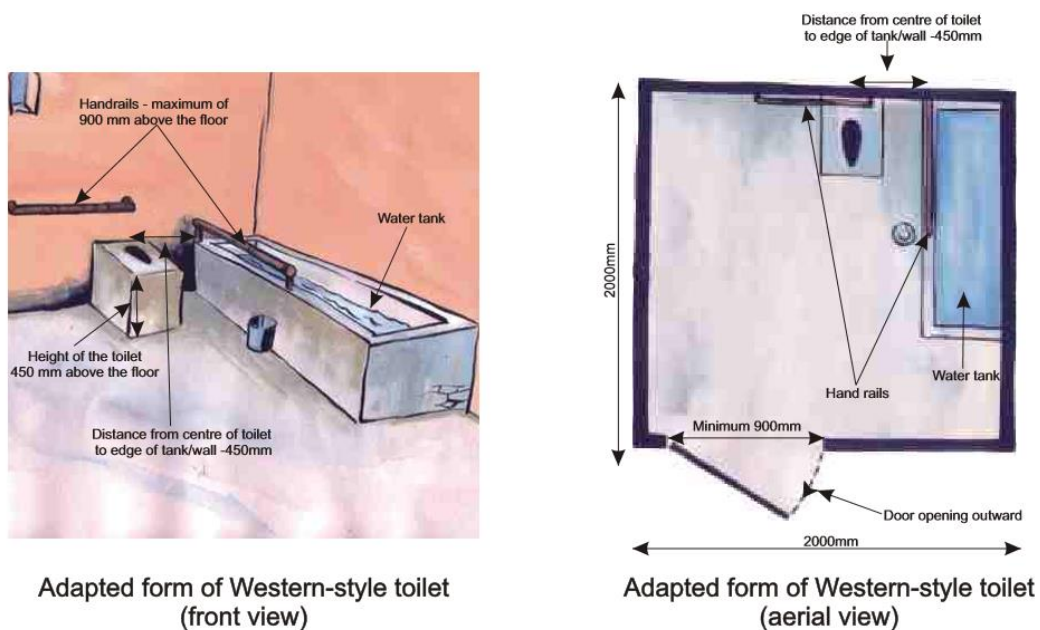


Figure 13. Adapted form of Western style toilet³⁷.

Transferring from a wheelchair onto a toilet



Figure 14. Transferring from a wheelchair onto a toilet sideways³⁷.

30. HOW TO DEVELOP ACCESSIBLE WATER PUMPS²⁵

In flood-affected areas, water pumps should be raised off the ground to protect the water source from being contaminated by the flood waters. This means that steps and ramps will be required so that all people can use the water pump.

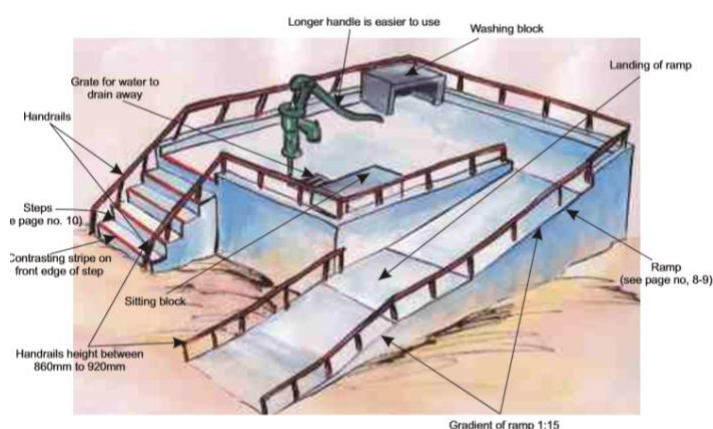


Figure 15. Raised water pump³⁷.

In areas not affected by floods, it is also important to build water pumps that can be accessed by all people. This may mean installing a low ramp and removing the lip from one side of the pump apron.



Figure 16. Accessible water pump³⁷.

If the water pump is placed near the toilet area, it must not be near the soak-away and septic tank. Sphere Guidelines recommend that the soak-away and septic tank is at least 30 metres from the groundwater source and the bottom of any latrine is 1500 millimetres above the water table.

²⁵ Taken from: Handicap International Nepal. (2009). Guidelines for Creating Barrier-free Emergency Shelters

31. HOW TO ASSESS HEALTH NEEDS OF OLDER PEOPLE AND PEOPLE WITH DISABILITIES²⁶

A needs assessment should identify gaps in:

- The structure of the health system: what is available and is it accessible?
- Service delivery: are the needs of older people and people with disabilities covered?
- The quality of health services: do they have trained staff, good hygiene, and friendly services?
- What is the health status of older people and persons with disabilities, and the major health problems affecting morbidity and mortality.

Include a gender analysis in your assessment to understand whether men and women can equally access health services.

- Type, number and location of health facilities (health posts, clinics, health centres, referral hospitals), and services actually available at each level (e.g. PHC, laboratory exams, surgery, X-ray). Map public and private health facilities, as well as those managed by international NGOs.
- Partners involved in the health sector including the various levels of health authorities, local and international NGOs and private providers.
- Number, gender and qualifications of health staff in each PHC facility (community health workers, home based carers, nurses, medical assistants, medical doctors). Are staff receiving a regular salary? (This helps to assess the motivation of the health staff, and the level of functioning of the services).
- Are there any community-based health activities? Do they target older people and/or persons with disabilities? Who is performing them? Volunteers? Do they receive any incentives? What is the proportion of male and female community health workers?
- Is there any mental health support available (psychological support, mental health services) and does it include older people and persons with disabilities? Which staff are involved (their category and level of training)?
- Is the community involved in the health services? What parts of the process are they involved in, e.g. planning, design, monitoring, management?
- Are staff trained in geriatrics or older people's health needs and health care? Is geriatric care part of the national curriculum for medical doctors and nurses? Are staff trained in rehabilitation and disabilities?
- What are the existing protocols and guidelines in use at health facility level (e.g. for the management and treatment of chronic diseases and communicable diseases)?
- Do people have to pay for health services? What is the cost of consultations, laboratory exams, essential drugs, hospitalisation?
- When hospitalised, do patients receive food or do they have to bring their food with them? Do they have to be accompanied by a helper in order to receive proper care?
- Are essential drugs available? Is the supply regular? Where do the drugs come from (local market, national warehouse)? Is there any quality control of the drugs?
- Are essential drugs for chronic diseases available?
- Which data are routinely collected in the health facilities? Are they disaggregated?
- Any available data about people's health status before the crisis. Identify pre-existing health problems affecting the population prior to the crisis.

²⁶ Adapted from: HelpAge International. (2012). *Health Interventions for Older People in Emergencies*.

How to find the information?

There are many different sources of health information. It is useful to cross reference the information by using several sources. In general, you will need to:

- Meet officials at central and decentralised levels of the Ministry of Health to collect information about the structure of the health system, staff training, national protocols and guidelines on health financing, the national drug service and management of diseases.
- Meet with international and national agencies and NGOs (including the private sector and religious institutions), cluster leads (UNICEF and WHO) and OCHA. These sources are especially useful in cases where the authorities are not impartial (in conflict situations for example) or not available.
- Carry out field visits to get to know the health facilities and the communities, as well as the partners involved. It is important to at least visit the referral hospitals and several health facilities of each type (private, public, health posts, health centres). Meet with their managers (hospital medical director, head of centre) and talk to different members of staff (pharmacist, laboratory technician, medical doctor or health assistant, community based health workers).
- Meet the relevant community representatives, disabled peoples organisations and older people, as well as with the local or international organisations working in the area.

Ensure that persons with disabilities and older people participate in the health needs assessment, for example through focus group discussions, to include their opinion.

PART 3 - RESOURCE LISTING

1. INTERNATIONAL DOCUMENTS ON DISABILITY

United Nations Convention on the Rights of Persons with Disabilities and Optional Protocol. (2006). Available at:

https://treaties.un.org/pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-15&chapter=4&clang=_en

2. DISABILITY INCLUSION

A Handbook on Mainstreaming Disability. (2006).
VSO.

Available at: http://www.asksource.info/pdf/33903_vsomainstreamingdisability_2006.pdf

Code of practice on managing disability in the workplace. (2002).
ILO

Available at: <http://www.ilo.org/public/english/standards/relm/gb/docs/gb282/pdf/tmemdw-2.pdf>

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