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The comments and recommendations in this document are the views of a range of Disability NGOs working in Ireland with and on behalf of people with disabilities, including Disability Aid Abroad, Livability, CBM and Disability Action. The International Department of the Ulster University provided research information.

An initial seminar was held in Belfast in January 2012 which developed a draft response which was circulated to the Stormont Assembly's All Party Working Group on International Development, The Coalition of Aid and Development Agencies (CADA) and individual disability agencies and individuals.

The lead agency is this joint response is:

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We authorise the release of all the content in this final draft response.

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## **Page B:**

### **Response**

This consortium of disability and development agencies in Ireland is pleased to respond to the invitation from Irish Aid on its Consultation Document in regard to the forthcoming White Paper on Irish Aid. To facilitate understanding by Irish Aid's assessors and evaluators of all submissions, we will respect the structure of responses suggested by Irish Aid, though there will inevitably be areas where we feel we need to bring in new evidence or propose new modalities in thinking about the efficacy of Ireland's development work, at home and abroad. We offer a summary, in bullet point form, of our proposals and recommendations at the end of this submission.

### **Progress Made**

*Has the Government been successful in implementing commitments contained in the White Paper on Irish Aid?*

We accept many of the comments and evaluations made in the Consultation Document and would strongly support the contribution Irish Aid has made to the resolution of development difficulties, especially in its 9 Programme Countries, as well as to the efficiency, effectiveness, integrity and social value of many of its development projects and programmes. In specific regard to the theme of disabilities, we note Ireland's increased focus over the past few years on fragility and vulnerability; on improved responses to humanitarian disasters and emergencies; and on a much more enhanced understanding of hunger and food insecurity, with all that that implies for people becoming disempowered due to malnutrition and physical and mental stunting.

We note the admission (in 5.3) that "In Tanzania, Lesotho, Malawi, Mozambique, Ethiopia, Zambia and Uganda up to 50% of all children under five are stunted" which surely must mean not only that there remains a huge amount of work for Ireland's hunger and food security strategy but also that there needs to be a concomitant focus on malnutrition-related disability which Irish Aid has not yet begun to address. Equally (5.7), "1.5 billion people continue to live in countries affected by violent conflict" and we are prompted to think of the continuing needs of the many thousands of Sierra Leoneans and Liberians who suffered amputations in the civil wars in the last 20 years, or the tens of thousands of people in Haiti who suffer the sequelae of physical and mental trauma after the January 2010 earthquake.

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Similarly, we note Irish Aid's concern for the negative effects of climate change and the example of Ethiopia being more acutely affected than any other Programme Country (4.13) – a situation we feel needs to be seen not merely from an environmental or natural resources perspective but from the point of view of the millions of children, women and men who will be 'dis-abled' by such increased vulnerabilities.

We particularly salute the successful introduction of hunger and food security as a new and key focus of Irish Aid programmes, as we believe that such a core concern speaks to Ireland's own history and background, and the new policy focus suggests that where Ireland plays to its strengths, co-ordinates its activities and areas of expertise, and takes a strong, decisive lead within the international development community, it can quickly carve out a niche for itself, adding reputation and credibility to its development work whilst delivering effective and very real benefits to people in need. ***We urge that a similar commitment be made by Irish Aid to people with disabilities***, so that a core, key focus of the agency can be a multidimensional approach to the myriad circumstances of people with a disability, rather than the fragmented, ad hoc approach that we believe to be a hallmark of past efforts.

### **Changing Context**

*What are the implications of the changes in the global and domestic context for the Government's aid programme in the future and how will these affect current priorities?*

We note the Consultation Document's review of the many changes affecting people in developing countries – climate change and environmental degradation, the increased frequency and severity of emergency situations and humanitarian disasters, fragile or conflict-affected states being the norm for a majority of the developing world's population by 2015, and the seeming intractability of attitudes and behaviours that inhibit girls and women from becoming fulfilled citizens in our global community. All of these situations particularly impact upon people with a disability; they are, effectively, the most disadvantaged, the most marginalised and the most excluded. ***We urge Irish Aid to recognise the special needs of people with a disability and to mainstream proactive disability work in all Programme Countries*** (and in other countries receiving Irish development or humanitarian assistance) so that people with a disability are a priority rather than a consideration after the 'main' themes of development activity have been extensively investigated. The Consultation Document effectively outlines the increased prevalence of forms of malnutrition, the situations of fragility and conflict, problems of climate change, and

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continuing gender inequality. To us, the clear conclusion of these stark statistics of deprivation is that people with a disability are being made worse off as their daily circumstances deteriorate in environmental, social, political, job-related, domestic and cultural terms. ***Irish Aid's focus on poverty reduction cannot be really effective if disabled people who are at the bottom of all hierarchies of well-being are not being specifically targetted.***

The United Nations Economic and Social Council has already claimed that "*the Millennium Development Goals (the MDGs) will not be met unless disability is mainstreamed*" (UN ESC, Commission for Social Development, 23 November 2007). It rightly notes that 80% of people with disabilities live in developing countries, where their physical or mental impairments are much more likely to result in functional disability and eventually into social exclusion thus preventing them from living a full life and from contributing to the development of their community or country. They estimate that as many as 1 in 5 of the world's poorest people (those living on less than \$1.25 a day) are people with disabilities, and that such a huge problem can only be addressed by mainstreaming disability as a core focus for development work. This could represent a major opportunity for Irish Aid to adopt the same nimbleness as it successfully displayed over hunger and food insecurity, and to marshal resources of expertise, advocacy and policy focus to lead the international development community towards embracing disability as a key theme as we all emerge – after 2015 - from the period of the MDGs.

The Consultation Document notes the difficulties in approaching development in a multidimensional manner, addressing all the many variables in as coherent a form as possible. We submit that Irish Aid's success in framing its focus on HIV and AIDS as a cross-cutting theme in all its international development efforts needs to be replicated for people with disabilities. Indeed, there are vastly more people with disabilities than those affected by the HIV/AIDS pandemic – even including families and communities where people are sick or have died from the disease complex – and yet Irish Aid has already devoted considerable expenditures and resources to combating that single syndrome. Its flexible and humane response to HIV/AIDS is laudable but its continuing neglect of huge numbers of other people with equally severe challenges to their, mental, physical, spiritual and emotional well-being really needs to be remedied in the forthcoming White Paper.

***Spending over €100 million each year on the HIV/AIDS pandemic which directly affects fewer than 40 million people but spending less than 10% of that on the 25 times greater population of persons with disabilities is an anomaly and policy distortion that needs to be reversed urgently.***

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The Convention on the Rights of Persons with Disabilities represents an excellent mechanism for Irish Aid to begin to address the multidimensional aspects of disability. Article 32, for example, states that signatory parties should try to ensure that:

“...international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities.”

With equal clarity, there are articles helping to direct state parties to a better understanding, and more effective practice, in regard to women with disabilities (Article 6), children with disabilities (Article 7), situations of risk and humanitarian emergencies (Article 11), education (Article 24), health (Article 25), habilitation and rehabilitation (Article 26), work and employment (Article 27), participation in political and public life (Article 29) and participation in cultural life, recreation, leisure and sport (Article 30), amongst others.

It has been a general conclusion of much work evaluating the effectiveness of the MDGs that disability has been the forgotten element of the MDGs. The first recommendation of the *Making Development Inclusive* Conference (Senec, Bratislava, 14-15 May 2007) was to:

*“Ensure the MDG framework incorporates and actively promotes adherence to, and implementation of, the UN Convention on the Rights of Persons with Disabilities.”*

They also recommended that all development initiatives:

*“Systematically include a disability perspective, and gather information on the status of persons with disabilities, in all MDG country analyses.”*

The UN Special Rapporteur on Disability, Sheikha Hissa Al Thani, reaffirmed the “definite and inextricable link between poverty and disability. Symptoms of poverty, such as inadequate medical care, unsafe environments and malnutrition, are all causes and exacerbators of disability”.

UN Secretary-General Ban Ki-Moon stated in his guideline report for the 2010 MDG Review that:

*“Attention must be focused on the special needs of the most vulnerable and the large and increasing inequalities in various economic and social dimensions including geography, sex, age, disability, ethnicity and other vulnerabilities... Children with disabilities remain among the most marginalized and least likely to go to school.”*

[Our emphasis]

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It is clear that a consensus is emerging internationally that the MDGs – which were a political creation of the mid to late 1990s – have been effective in mobilising financial and political resources around a new burst of energy in favour of international development. However, in early 2012, only 3 years away from the end of the MDG period and with the Irish Aid White Paper to decide on future aid and support policy, mechanisms and resources, it is crucial that people with disabilities are defined, profiled, targetted and supported far more proactively and effectively than in the past. Disability was not mentioned once in any of the 8 MDGs, the 18 targets or the 48 indicators. It is clear that all aid programmes can learn the reality that the MDGs were valid in their time but that a clearer focus is now available, and that ***the priorities of the coming years must absolutely include people with disabilities.***

Attempts at gender mainstreaming, and the heightened profile of HIV/AIDS as a cross-cutting theme of Irish Aid's successful work over the past few years, are both examples of how resolute policy-making, coupled with carefully targeted resources and imaginative programmes, can be extremely successful. Disability should feature as a principle theme of the forthcoming White Paper, whatever the financial constraints: Ireland has an opportunity to lead and to leverage in resources from larger donors if it demonstrates conviction, argues with conviction and marshals expertise.

### **Key issues**

*How should the Government respond to the key issues of hunger, fragility, climate change, basic needs, governance and human rights, and gender equality? Are there other issues?*

*Given the limited resources, and the need to prioritise these, which issues should the Government prioritise in its future aid programming?*

We particularly welcome Irish Aid's focus on these themes, since they emphasise the circumstances of people's lives and they offer a framework for effective intervention. Earlier perspectives, which focussed on programmatic interventions (such as agriculture, health or education), were inevitably skewed by the institutional constraints of each sector. As individuals and agencies working to support people with disabilities in developing countries, we strongly support the priorities outlined in the Consultation Document, as they clearly point to fundamental needs. We believe that targeting people with disabilities within each Programme Country, and in other interventions, will enable Irish Aid to reach the most needy people and to bring effective help and support to them.

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Whenever there is a situation of hunger (and food insecurity), or of fragility, or evidence of the negative impacts of climate change, or people living in circumstances of utterly basic human needs, or in need of support towards empowerment over governance and their inalienable human rights, or lack of gender equality and the injustices that that brings, people with disabilities are present. They suffer from those disadvantages – and they suffer from the physical, mental, social or cultural effects of their impairment, too. ***They suffer a double disadvantage.*** If Irish Aid wishes to help address those most in need, they need to move beyond the perhaps simplistic language of “the poorest of the poor” and seek to empower all of those groups suffering from the vulnerabilities identified in the key issues. As just one example among many, the Uganda Demographic and Health Survey found that:

“Poverty is both a cause and consequence of disability, with up to 80% of disabled people experiencing long term poverty. Poverty also affects the families of disabled people disproportionately. The majority of adults and children with disabilities find their chances of going to school, working for a living, enjoying family life and participating as equals in social life are severely restricted, not only because of their impairments but also due to attitudes, discrimination and exclusion. Disabled women in Uganda face “double discrimination”, and are more likely to be poor or destitute, and have less chance of founding a family and benefiting from family relationships, than do men with disabilities... Disabled people are also more likely to be victims of sexual abuse and violence, and disabled women in particular are more at risk of contracting HIV and AIDS. (UDHS, 2007, p. 50)

Similarly, in Tanzania, Disability Aid Abroad has concluded that:

“Disability is still seen as a social and cultural stigma, particularly in relation to women and girls, who experience a double discrimination, that of disability and gender. In many of our projects persons with a disability are refused medical treatment, educational facilities and employment opportunities.”

The Consultation Document expresses it very well:

“Analysing and addressing the inequalities, discriminatory practices and imbalanced power relations, which are often at the heart of development problems, can lead to better and more sustainable outcomes. Even where international human rights standards are generally accepted implementation at the national level remains slow. Women still face enormous difficulties. The last decade has not seen enough progress on protecting and promoting the rights of children. Considerable challenges

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remain to ensure the full implementation of the United Nations Convention on the Rights of Persons with Disabilities.” (5.25)

This is an admission that, during the last four years, Irish Aid has been grappling with the difficulties of a multi-stranded programme for which it has not been able to identify any single overarching theme that can offer coherence, conceptual clarity or commonality of approach. We submit that a key focus on people with disabilities can help provide a unitary focus that will lead to programmes – be they long-term developmental initiatives or short-term humanitarian interventions – being clear in their intended outcomes, offering easily measurable progress, and demonstrating value for money as they beneficially impact the most disadvantaged citizens on our planet.

## **Ways of Working**

*How can the Government further strengthen its ways of working in delivering an effective aid programme, with a view to delivering real results in poverty reduction?*

Ireland has made excellent progress in ensuring that its aid is untied, transparent, appropriately balanced between bilateral and multilateral, involving a wide range of partners at home and overseas, and attempting to maintain a consensus at home that international development aid is a valid form of public expenditure. Its efforts at monitoring and evaluation, at demonstrating value for money, and at linking expenditure inputs to beneficial outcomes have drawn praise from many international authorities, as the Consultation Document rightly shows.

An important next step is to mainstream disabilities within all components of Irish Aid’s international development work, in order to improve coherence and to foster a unitary theme across the myriad different circumstances both of the Programme Countries and those other countries where Irish Aid makes a contribution to poverty reduction and/or to humanitarian disaster relief. Ireland’s high standing in the international development community – highlighted at the Busan High Level Forum on Aid Effectiveness in November-December 2011 – can be used to good effect in this regard. The new and inclusive Global Partnership for Effective Development Co-operation, which Ireland strongly champions, will insist on pragmatic implementation at the country level of the international conventions and agreements that so many countries seemingly sign up to with little regard for future implementation. Irish Aid will need to work patiently and diligently with partner countries in order to help them implement their commitments towards people with disabilities: this is an excellent example of aid being a facilitator and a means of empowering the host country government and civil society, and not a top-down, externally-driven planner and implementer of development projects and programmes. This will help build capacity

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within those poorer countries that contain great numbers of people with disabilities to conceive and fulfil their own plans and measures to alleviate the double sufferings of such people.

Mainstreaming disabilities would also enable Irish Aid to tap into a wide range of parties in civil society in the Programme Countries, and other areas of intervention, and to forge new partnerships that use the competence, expertise and capacities of skilled, local and appropriate actors. It would also lead to a major boost within Ireland for the idea of international development assistance, as people readily support charities and initiatives that help people with disabilities rather than more nebulous concepts of solidarity, child sponsorship or improved governance.

Irish Aid already has a modest partnership with the International Labour Organisation (ILO) (Annexe A) in support of people with disabilities but this needs to be extended hugely in scale, in order to help such multinational organisations scale up their efforts, in employment and other areas. The World Health Organisation (WHO) also has great expertise in the mechanisms for supporting people with disabilities to engage more fully and more productively in wider society and would constitute an excellent partner of choice for a major up scaling of its work on disability.

Imaginatively, one could foresee much more work with organisations such as the Food and Agriculture Organisation (FAO), the International Fund for Agricultural Development (IFAD) and the World Food Programme (WFP) – with all of whom Irish Aid has established relations during its recent work to increase the profile of its work on hunger and food security – in order to **turn the double disadvantage of people with disabilities into a double triumph**: helping such people to become productive citizens but also to help address the challenges in their own country of hunger and food insecurity. Other UN organisations working with women (UN-Women, UNFPA), children (UNICEF, UNESCO) and the environment (UNEP) would become obvious partners of choice for Irish Aid as it built up its expertise in this vital area and offered partnership in this key area.

The forthcoming White Paper on Irish Aid represents a huge opportunity to learn from the past, to review the lessons of the international development programmes supported by Irish Aid over the last five years, and to reposition the agency as an innovator, a leader, a worldwide champion for people with disabilities. It would be a huge mistake to remain locked into the old categories of 'health' and 'education', with no overarching vision about who the most disadvantaged people are in our rapidly globalising – and rapidly changing – Planet Earth. Mainstreaming people with disabilities into major development programmes and projects would change

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fundamentally the dynamic of international development. Attitudes would change, stigma would be halted, poverty reduction would be accelerated and disability would change from being a circumstance of double disadvantage into being an opportunity for a win-win solution: people with disabilities being helped to improve their personal, familial and community circumstances, and international development efforts being made more effective. Mainstreaming disability into Irish Aid's core vision is too important to leave to the next development initiative. As Dóchas' Disability and International Development Working Group entitled their own position paper on this vital issue: *The Time Is Now*. (Dóchas, 2011)

### **Summary of Proposals and Recommendations**

- ***Irish Aid should mainstream disability as a core theme of all its international development work, either long-term development or short-term humanitarian disaster relief.***
- ***A key priority in each of its Programme Country strategies must be the prioritisation of people with disabilities, as a target beneficiary group but also as a key partner in programme formulation and implementation, with agreed aims, modalities, indicators and outcomes.***
- ***Internal capacity in Limerick will need to be enhanced, but also each Programme Country office will need training and support in order to be able to assess proposals on disability, advise in-country partners and stakeholders on Irish Aid's strategic goals on this issue, and engage fully in national debates with host Governments, civil society and specialist organisations, including DPOs (Disabled People's Organisations).***
- ***One option for this strengthening of internal capacity across all areas of Irish Aid's work would be to develop Disability Champions – people with specialist training who are capable of being reference points for the organisation in all matters concerning disability in a development context.***
- ***There should be an expectation of compliance on the part of Irish Aid in regard to agreed disability work by each and all of its partners in the Programme Countries – this is crucial if there is to be a reasonably rapid move from mere ratification of international conventions and agreements in regard to people with disabilities to detailed***

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***implementation of specific measures of direct benefit to such people. This would not so much constitute aid conditionality but an element of positive co-operation between equal partners who had agreed to work together on particular programmes of benefit to people with disabilities.***

- ***Irish Aid's policy planning and programming need to have the deep, day-to-day involvement of people with disabilities – not just in the implementation phase but at all stages, including before a project is conceived and elaborated.***
- ***Health, education and employment are key areas where effective work of direct benefit to people with disabilities can yield great results in terms of poverty reduction and should thus constitute major priorities for intervention.***
- ***All projects submitted to Irish Aid for approval for funding need to be disability proofed – assessed for the contribution they can make to impacting positively on people with disabilities and on their consequent contribution to poverty reduction.***
- ***Training in disability issues will need to be made available to Irish Aid's partners at home and abroad.***
- ***The UN Convention on the Rights of Persons with Disabilities places an onus on international development agencies to monitor the work of all partners – those in receipt of development or humanitarian monies, those working specifically with people with disabilities, and those not particularly specialised in disability issues but having an impact on development programmes – and Irish Aid should insist on the highest standards of compliance from its partners here in Ireland as well as in the Programme Countries and elsewhere overseas.***

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