

Disability Inclusion UNICEF Australia's Priority Programs Results 2017 – 2020



Disability Inclusive Development

The rights of children and adults with disabilities are enshrined in the Convention on the Rights of Persons with Disabilities and the Convention on the Rights of the Child. Like all children, children with disabilities have the right to protection, healthcare, education, participation and play. But for many children with disabilities around the world, particularly in developing countries, fulfilment of these rights is far from reach.

Approximately 15% of the world's population live with disabilities, a large proportion in low- and middle-income countries. And for people with disabilities, the external barriers to being able to fully participate in society can be many. Children with disabilities experience a broad range of challenges and discrimination which prevent them from being able to access services and participate fully in their community.

Across the Asia Pacific region, access for children with disabilities to services and supports which will contribute to their development, keep them safe from harm, and help fulfil their rights is extremely limited. Children with disabilities are often excluded from services because of physical inaccessibility, limited capacity of frontline workers to provide appropriate and inclusive services, and social stigma which often means that parents and community members do not think that children with disabilities should or can participate in activities such as attending school.

UNICEF works with governments, service providers and



1.443 children with disabilities directly benefitting from UNICEF Australia's **Priority Programs**

communities to improve disability inclusion through targeted and mainstream services and programs to address the complex barriers children with disabilities experience to better enable full participation throughout a child's life and into adulthood.

UNICEF also collaborates with organisations of people with disabilities (OPDs) to ensure that the approaches and strategies implemented are responsive to the actual needs and experiences of children with disabilities and their parents, rather than assumptions. In countries across Asia Pacific, local OPDs have strong expertise to share in improving accessibility and inclusion and addressing stigma.

In order to ensure that programs are effectively reaching all members of the community, disability inclusion needs to be actively considered, and strategies implemented to ensure that children and adults with disabilities are not intentionally or inadvertently excluded.

Ensuring children with disabilities access services and programs not only fulfils their rights as individuals but sets them up for life, creating more inclusive and equitable communities.

> Alice Hall, Disability Focal Point **UNICEF** Australia





2,437 health workers, teachers, social welfare workers and government officials trained on disability inclusion



Disability Inclusion in UNICEF Australia's Priority Programs

In order to address these barriers faced by children and adults with disabilities and ensure that all people are able to benefit equitably from UNICEF's work, UNICEF Australia has prioritised disability inclusion in Priority Programs. This has been through a mix of targeted approaches, implementing specific strategies to meet the needs of children with disabilities, and incorporating mainstreaming approaches to facilitate accessibility and inclusion of children and adults with disabilities into all activities.

Between 2017-2020, 80% of UNICEF Australia's Priority Projects had a tangible focus on contributing to disability inclusion, with 17% of these projects having at least one component which is solely targeting improving services and support for children with disabilities.

Strengthening disability inclusion begins at the project design phase, where needs assessments inform the barriers which need to be addressed to facilitate participation in the project by children and adults with disabilities, and specific budget is allocated towards ensuring that these barriers are effectively addressed.

In 73% of UNICEF Australia's Priority Projects 2017-20, consideration of disability inclusion was built into the broader activities through simple, yet too often missed, activities such as ensuring all communications materials include messaging on disability inclusion and that they are accessible for people with different types of impairments.

UNICEF Australia continued to work with long time partner CBM Australia, who provided high quality technical support on disability inclusion. This included review of draft national policies and legislation, strengthening of inclusion messages in communications materials for children, parents, communities and service providers, and contributing to ongoing advocacy on the importance on disability inclusion.

Following the principle of the disability movement "nothing about us without us", collaboration with organisations of persons with disabilities (OPDs) is a key strategy to ensure that disability inclusion strategies actually respond to the barriers and needs of children and adults with different types of impairments, and do indeed create more inclusive and accessible programs. Throughout 2017-20, UNICEF Australia supported stronger collaboration with local OPDs, who have contributed significantly to this work.

Between 2021-2024, we will continue to invest in and prioritise progressing disability inclusion in all our Priority Programs, identifying strategic opportunities to collaborate with OPDs, responding to the specific and shared challenges that children with disabilities face, and improving collection of disability-related data to ensure that this is effectively measured.



106,393 children accessing inclusive and equitable early childhood services



3,660

students provided with safe water accessible for students with disabilities



688

early childhood centres which are more inclusive for children with disabilities

Every child should have the best start in life

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Early childhood is a critical time in a child's development. During the first years of life, a child's brain develops at a rapid rate, never again repeated. Investments in a child's physical, cognitive and socioemotional development lay the foundations for the rest of a child's life.

But for many children with disabilities, access to services and supports which will contribute to their development is extremely limited. Children with disabilities are often excluded from services due to physical inaccessibility, limited capacity of frontline workers and social stigma.

In Papua New Guinea, UNICEF's Inclusive Early Childhood Development (IECD) project is changing the trajectory for children with disabilities. UNICEF is working with communities to establish IECD centres, providing access to early childhood education in these rural and remote parts of Papua New Guinea for the first time. Central to this approach is ensuring these centres are inclusive and accessible for all children, especially children with disabilities.

Ensuring inclusion and accessibility requires active strategies to understand and address the barriers that exist for children with disabilities and their families. UNICEF has approached this by training all new IECD community teachers on inclusive education, giving them the skills to create inclusive learning environments and adapt their teaching to meet the individual needs of all children in their classroom, including children with disabilities. Learning materials have also been adapted to be more accessible for children with disabilities. IECD

teachers and Board of Management members actively reach out to families with children with and without disabilities across the community to promote and facilitate enrolment of children with disabilities in the IECD centre, encouraging the whole community to embrace this inclusive approach, addressing stigma and changing social norms around participation of children with disabilities.

This is already seeing great results. In 2018, the first year of the project, 1.8% of children enrolled in the centres had a disability. In 2020, this rate is now 4.2%, with 183 children with disabilities enrolled in 60 IECD centres. This trajectory of increasing enrolment rates of children with disabilities demonstrates that the IECD centres are successfully meeting the needs of children with disabilities and their parents in providing inclusive and accessible ECD, providing a model which is ready for national scale up.

In one rural community, IECD teacher Rueben plays an enormous part as a role model for children with disabilities in his community. As a man with a physical disability himself, he sees the opportunity that education can provide for young children with disabilities, and he is inspiring parents and children to feel confident to participate in the IECD centre.

"It will be fine when all children can come to school. They like playing and will also learn. It is good for their future. If they see I can do it, they will know they can too."

- Rueben, IECD teacher, Morobe Province



Beyond inclusive access to mainstream services such as health and education, children with disabilities and their families often require targeted services and support in order to fully meet their developmental needs and overcome the barriers they face in fully participating in their community.

In Laos these services are not commonly available. Even more challenging is that children with severe disabilities are usually kept at home and often "hidden" from the outside world, largely due to stigma and discrimination. There is also very little data available on children with disabilities, making it difficult to understand the number of children with disabilities in Laos and where those children are living.

In a first for Laos, to improve access to timely, appropriate and high-quality services for children with disabilities and their families, UNICEF and the Ministry of Labour and Social Welfare are piloting a game changing new model of support in two provinces.

This model is adapted from the barefoot social worker approach used in China, which was observed during a 2018 knowledge exchange visit. It aims to provide a network of community-based supports and services which meet the individual needs of children with disabilities and their families, while also strengthening the collection of data to inform planning.

The model combines early identification of disability – essential for ensuring that children and families have access to the services and support they need – provision of support and information for families, introduction of community-based rehabilitation, as well as referral to other services.

Two village coordinators in each of the 18 target villages have been trained on children's rights, and provision of screening and services for children with disabilities, as well as the referral pathways which are available. These village coordinators conduct monthly home visits to children with disabilities and their families, supporting parents to undertake home-based rehabilitation activities with their children and sharing knowledge and experiences, including from other families of children with disabilities.

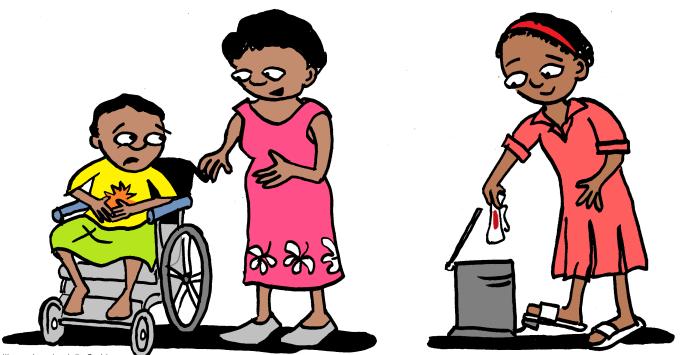
Technical teams at the district, provincial and national levels provide support and guidance to the village coordinators, ensuring that the services and referrals provided are of high quality, and adapted to the needs and priorities of each child and their family.

Parents have also received training on care and support for children with disabilities, enabling them to more effectively meet the developmental needs of their child and provide appropriate nurturing care. For many parents of children with disabilities, this may be the first time they have received any information of this nature or had access to any form of peer support network.

In 2020, this model has reached 106 children with disabilities, and 130 parents. Six children have received assistive devices – items which will better facilitate them to establish independence and overcome barriers to participation in the community, including at school. Four children have been supported to attend school, and five have been referred for specialised medical services.

With the impacts of COVID-19, these services are more timely than ever – children with disabilities are among the most vulnerable to exclusion from health, education and protection services during this time. And so this model is perfectly placed to mitigate the impacts of this global crisis.

The intention is to further test and adjust this model, before ultimately aiming to scale it up to reach more children with disabilities across the country.



Illustrations by Julie Smith

Puberty can be a confusing time for everyone

Periods can be difficult to manage at school. Particularly if you're at one of the many schools across the Asia Pacific region which do not have access to toilets. Often, even where schools do have toilets, these may not have lockable doors, or anywhere to dispose of sanitary products. And these challenges can be particularly compounded for girls who have a disability. Toilets at school may not be physically accessible, or girls with disabilities may not have access to appropriate information explaining menstruation and how to properly manage menstruation. For many girls with disabilities, menstruation can cause anxiety, embarrassment and distress.

To ensure that schools in Fiji are effectively able to support girls with disabilities to manage menstruation at school, UNICEF has integrated accessibility and inclusion for children with disabilities into its water, sanitation and hygiene (WASH) in schools project.

Following a study on the disability inclusiveness of WASH in schools and menstrual hygiene management in Fiji, it was found that girls with disabilities had mixed experiences when it came to managing periods at school.

In some schools, particularly special schools, various positive approaches were being taken to educate and support girls in this area. The Ministry of Education's WASH in Schools Minimum Standards also includes useful basic information on design of accessible WASH facilities.

But overall, children with disabilities face several challenges when it comes to accessing appropriate WASH facilities. Many schools have inaccessible WASH facilities, and teachers and school leadership in mainstream schools often had low awareness around the need for this, and how to make their WASH facilities more accessible for different impairment types.

Furthermore, traditional norms and practices limit open conversation around menstruation, even in the home. Stigma around disability can lead to neglect of girls with disabilities, and parents often do not know how or why they should educate girls with disabilities about menstruation and reproductive health more broadly.

In response to these findings, UNICEF and the Ministry of Education are working with partners, including organisations of people with disabilities, to improve accessibility and inclusion for girls with disabilities, including by supporting schools to systematically improve accessibility of WASH in schools' infrastructure and developing guidance and training materials for teachers on how they can support this in schools.

A series of factsheets have also been developed, including an easy read information sheet for girls with disabilities, and factsheets for parents, teachers and school leaders on how they can support girls with disabilities around menstruation, reducing anxiety, addressing concerns and ensuring that periods can be appropriately managed, either independently, or with appropriate support from a carer.

Through all these strategies, UNICEF and partners aim to ensure that girls with disabilities, and all girls in Fiji, receive timely, appropriate information and support to remove the fear and stigma around menstruation and ensure that puberty doesn't become the reason that girls with disabilities can't complete their education.

All mothers should be able to access health care

In Timor-Leste, women face many barriers to accessing timely and quality maternal and child health services, including distance, cost of travel, and quality of facilities and care available. For women who have a disability, these barriers are compounded. Women with disabilities may experience a combination of physical, communication, attitudinal and institutional barriers to safely and effectively accessing essential care, including antenatal care and safe birth.

Now, as part of UNICEF's Continuous Quality Improvement (CQI) project, these barriers are receiving the attention they require to be successfully addressed. It began during the design of the CQI project. It was recognised that strategies were needed to improve accessibility and inclusiveness of health services in Timor-Leste, and that CQI is the perfect mechanism to embed this process. But not enough data was available on which barriers exist, and whether these are common across facilities, or specific to individual health centres.

To address this, UNICEF planned to undertake an assessment of disability accessibility in the health facilities targeted by this project. One key step towards this was the allocation of specific budget set aside to focus on issues of disability accessibility and inclusion. The allocation of specific budget is an essential strategy to ensure that disability inclusion is sufficiently prioritised and not missed or delayed.

The accessibility assessment was undertaken in five target community health centres in Viqueque, as well as in the Baucau referral hospital, and representatives from seven organisations of people with disabilities participated, contributing their reflections on the barriers being identified. The assessment included completion of a facility checklist, a survey of health staff regarding attitudes and knowledge, an assessment of communication materials for accessibility and key informant interviews to understand institutional barriers.

The findings of the assessment highlighted some positive aspects, but also many of the challenges experienced daily by people with disabilities in accessing health care, across the domains of:

- Physical accessibility: notwithstanding challenges in getting to health facilities, once mothers with physical, vision or hearing impairments arrive at a health facility, barriers include lack of ramps to enter the facility, need to cross uneven ground (including sewers), inaccessible toilets, lack of signage and non-adjustable treatment tables. Many of these issues were caused by lack of maintenance
- Attitude and training of staff: most health staff had not received any training on disability, including principles of inclusion, inclusive language and communication, how to deliver accessible health care, and potential referral pathways for services. All staff expressed a desire to receive training on these topics
- Sustainable and institutional inclusion: within the Ministry of Health some inclusion strategies are being progressed, but these are often taking place in fragmented parts, with opportunity for greater coordination and holistic strategies

As a result of this assessment, an improvement plan has been developed and approved by the Ministry of Health for these health facilities to address these barriers, aiming to become more accessible and inclusive for people with a disability. This serves as a strong model for replication as CQI begins to be scaled up nationally and is a positive step towards improving access to quality health care for all mothers and families in Timor-Leste. UNICEF Australia would like to thank all our supporters for their generosity in supporting our work with children and adults with disabilities, and their families and communities around the world. The results and impacts delivered by these programs would not be possible without your assistance, which is ensuring that we are reaching the most vulnerable, and that no one is left behind.

UNICEF Australia would like to acknowledge the support of the Australian Government through the Australian NGO Cooperation Program (ANCP). ANCP funds contributed to disability inclusion activities across UNICEF Australia's Priority Programs.

UNICEF Australia would also like to recognise the support and contributions of all of our technical partners on strengthening disability inclusion, in particular CBM Australia, and the numerous local organisations of persons with disabilities with whom we have collaborated in country and who have contributed significantly to advocacy and technical work to ensure that disability inclusion remains a priority across all our work.



