Disability Rights in Sub-Saharan Africa

January 2015

This brief gives an overview of disability rights in the Sub-Saharan region, with focus on Sida partner countries; DRC, Ethiopia, Kenya, Liberia, Mali, Mozambique, Rwanda, Somalia, Sudan and South Sudan, Tanzania, Uganda, Zambia and Zimbabwe.

The situation of persons with disabilities in Sub-Saharan Africa

Persons with disabilities do not make up a small, insignificant group. As much as one out of seven (15 per cent), or more than one billion women, men and children live with a disability according to the World Report on Disability, 2011. Most of them live in developing countries. In Sida partner countries in Sub Saharan Africa statistics indicate a prevalence of 5%- 17.6% (table below)

depending on the definitions and measurement tools used. The Convention of the Rights of Persons with Disabilities (CRPD) uses a broad definition of disability: "Persons with disabilities include 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". Many countries still have narrower, medical definitions in their laws as these have not yet been adapted to the CRPD. These narrow definitions often refer to specific bodily limitations (such as "loss of function in more than two limbs" or "less than 10% of normal vision despite wearing glasses"). This means that 50-58 million persons with disabilities live in the Sida partner countries in Sub-Saharan Africa.

Country	Prevalence (%)	Number	Country	Prevalence (%)	Number
DRC	11%	7.4 million	Somalia	15%	1.5 million
Ethiopia	17.6%	16.5 million	Sudan and South Sudan	5%-15%	1.9-5.7 million 0.6-1.7 million
Kenya	8.6 %	3.8 million	Tanzania	7.8%	3.8 million
Liberia	16%	0.8 million	Uganda	16%	6 million
Mali	8.9% -11.7%	1.4-1.8 million	Zambia	13,3%	1.9 million
Mozambique	6%-15%	1.5-3.8 million	Zimbabwe	11%	1.5 million
Rwanda	5%-15%	0.5-1.7 million	**Total**		**50-58 million**

It is estimated that 82 per cent of persons with disabilities live below the poverty line. One in five of the worlds' poorest is a person with a disability. World Bank statistics show that 30 per cent of out of school children are children with disabilities. Only 3 per cent of persons with disabilities are literate, 1 per cent when it comes to women. People with disabilities have generally poorer health, lower education achievements, fewer economic opportunities and higher rates of poverty than people without disabilities. This is largely due to the lack of services available to them and the

many obstacles they face in their everyday lives. In many countries, persons with disabilities are still prevented from rights such as being permitted to marry, opening a bank account, voting, working, having legal capacity, getting education, etc. – and are sometimes even denied the right to life. The World Report on Disability has published detailed provides examples about what works to overcome barriers to health care, rehabilitation, education, employment, and support services, and to create the environments which will enable people with disabilities to flourish. The report ends with a

concrete set of recommended actions for governments and their partners. Detailed disability and poverty studies have also been published by the World Bank for Burkina Faso, Ghana, Kenya, Malawi, Zambia, Zimbabwe.

Women with disabilities face significantly more difficulties - in both public and private spheres - in attaining access to adequate housing, health, education, vocational training and employment, and are more likely to be institutionalised.   They also experience inequality in hiring, promotion rates and pay for equal work, access to training and retraining, credit and other productive resources, and rarely participate in economic decision-making. Women and girls with disabilities are at higher risk of gender-based violence, sexual abuse, neglect, maltreatment and exploitation. Every minute more than 30 women are seriously injured or disabled during labour and those 15-50 million women generally go unnoticed.

The prevalence of disability is increasing due to population ageing, the global increase in chronic health problems, but also negative impact on health from environment, road traffic accidents, natural disasters, conflicts, and unhealthy life style. In conflict areas, persons with disabilities are left behind when people flee, they have difficulty accessing food and shelter and their numbers increase as a result injuries from e.g. bombs, mines, small arms, rape.

Persons with various types of disabilities have very different levels of inclusion and support. Persons with mobility limitations are often prioritised in disability related programmes, especially in conflicts and disasters (aiming at surgeries, physical adaptations or assistive devices). Persons with visual impairments are second in line to be considered as their disability is also mainly seen as a practical limitation. When it comes to persons with hearing impairments, the measures taken are not consistent. Often hearing persons

set the agenda and decide "what they need". The claims of the deaf community for official acceptance and use of sign language and availability of interpreters, is often ignored. The situation of person with intellectual disabilities is of even lower priority as often persons with intellectual disabilities are considered to be "less productive", although with support they could contribute to family income and daily life. Lack of support mechanisms leads to family poverty and many single mothers struggle to make ends meet (due to fathers leaving the tough situation). Persons with mental health conditions are often ignored and stigmatised, despite this type of disability being rather common, especially in countries where stress from conflict, disasters and poverty is high. Conditions in mental hospitals are often inhumane and in some African countries exorcism is a growing phenomenon as "treatment".

Having a society, where everybody is protected and can participate and contribute is not only a human right but it is also good for economic growth and poverty reduction. Governments and donors increasingly recognise the rights of persons with disabilities and many have made commitments in policies and plans. Almost 160 countries have ratified the CRPD and started to reform legislation and policies. Still, very little is done in practice to address the rights violations of men, women and children with disabilities. The major barriers mentioned in the World Report on Disability are:

- Inadequate policies and standards
- Negative attitudes
- Lack of provision of services
- Problems of service delivery
- Inadequate funding
- Lack of accessibility
- Lack of consultation and involvement
- Lack of data and evidence.

Legal and policy frameworks

The countries in the Sub-Saharan region have taken a number of legislative and policy steps that indicate commitment to advancing the rights of persons with disabilities. At the same time, significant legal and policy gaps remain. In terms of **international instruments**, the situation can be summarised as follows:

- Of the 14 Sida partner countries in Sub-Saharan Africa, all but Somalia and South Sudan have ratified the *United Nations Convention on the Rights of Persons with Disabilities* (CRPD). (See the table below for more details). The CRPD is the first international, legally binding treaty aimed at protecting the human rights of persons with disabilities.

- Only eight of the partner countries have signed the Optional Protocol to the CRPD, and six have ratified it. The Optional Protocol allows persons with disabilities whose rights have been violated to bring complaints to the Committee on the Rights of People with Disabilities.

- All 14 partner countries have ratified the *Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction* (also known as the Ottawa Mine Ban Treaty). This convention, which is important instrument for reducing the incidence of disabilities, places an obligation on the governments in question to clear all known areas contaminated by anti-personnel mines within 10 years.

- All the partner countries (with the exception of South Sudan) are also state parties to the UN *Convention on the Rights of the Child* (CRC) and (with the exception of Somalia, Sudan and South Sudan) to the *Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). B*oth of these conventions make reference to protecting the rights of persons with disabilities to fair treatment, appropriate care and full participation in society.

Country	CRPD		CRPD Optional Protocol		CRPD initial country report submitted	Ottawa Mine Ban Treaty	
	Signed	Ratified*	Signed	Ratified*		Signed	Ratified*
DRC	☐	☐					☐
Ethiopia	☐	☐				☐	☐
Kenya	☐	☐			☐		☐
Liberia	☐	☐	☐				☐
Mali	☐	☐	☐	☐		☐	☐
Mozambique	☐	☐		☐		☐	☐
Rwanda		☐	☐	☐		☐	☐
Somalia	☐	☐					☐
South Sudan	☐						☐
Sudan	☐	☐	☐	☐	☐	☐	☐
Tanzania	☐	☐				☐	☐
Uganda	☐	☐	☐	☐	☐		☐
Zambia	☐	☐	☐			☐	☐
Zimbabwe		☐		☐		☐	☐

At the **regional level**, the following policy tools are important to note with reference to disability rights.

In November 2012, the African Union Conference of Ministers of Social Development (CAMSD) adopted a "Disability Architecture" (AUDA). The AUDA has 3 components:

- A Legal Component, a Protocol on the Rights of Persons with Disabilities as an additional Protocol to the African Charter on Human and People's Rights, adopted in 1981. The African Commission on Human and People's Rights (ACHPR), through its Working Group on the Rights of Older Persons and Persons with Disabilities, is developing the Protocol. It was released for comment in April 2014 and once finalised, is likely to become part of the regional policy framework for advancing disability rights.

- A Programmatic Component, the Continental Plan of Action (CPoA) for the Extended African Decade of Persons with Disabilities (2010-2019). The CPoA outlines 8 strategic thematic areas for implementation at national level to achieve the goals of the Decade. The AU Commission (AUC), through its Department of Social Affairs (DSA) has the primary mandate to coordinate, monitor and evaluate the implementation of AUC policies and programs on disability, particularly the CPoA.

- A Technical Component, an African Union Disability Institute (the restructured African Rehabilitation Institute), to support Member States' efforts to ensure disability rights and promote disability inclusive development. The new AU Disability Institute (AUDI) will promote and assist national implementation of the CPoA, and will facilitate implementation of AUC policies and programs in the area of disability, including the provisions of the Protocol on the Rights of Persons with Disabilities.

Other important upcoming tools in 2014 are the CRPD Toolkit for Africa, the Accountability Framework for Africa which is part of the Common African position for Post 2015 Development and the Continental Plan of Action Handbook, with detailed recommendations to governments.

Commitments are increasingly being made by African Governments in PRSPs, acts, policies and plans to address the situation of persons with disabilities, as it is acknowledged that the poverty and education targets cannot be reached otherwise. Despite these promises and developments the situation for the majority of persons with disabilities remains unchanged. Very little is implemented in practice. Although economists can show that assisting persons with disabilities to become active, contributing members of their families and communities is highly cost-effective, investments in such empowering or supportive measures are still considered "expensive" and something that can be done "later when the country is not so poor", omitting to consider the catalytic effect.

Implementing Agencies

At regional level, the new AU Disability Institute (AUDI) is expected to take on the role of supporting governments to fulfil their commitments. It has so far no capacity or expertise in this area. At national level almost all Sub Saharan countries have established National Disability Councils with representatives from relevant ministries and CSOs. These councils are responsible for coordination and monitoring of the implementation of the CRPD and national disability laws and policies. However, the Councils are often linked to low priority and under financed Social Welfare Ministries and have difficulties in getting sufficient mandate. Some Councils have been given their own implementation budgets, sometimes removing the responsibility from the various Ministries to include persons with disabilities in mainstream programmes. There have also been corruption cases where budgets allocated for cash transfers or organisational support has been misused (e.g. Kenya). Many governments need capacity development support in terms of developing implementation and monitoring systems. There is a need for both specific, targeted empowerment initiatives and mainstreaming in regular programmes. There are great similarities with strategies used to promote gender equality.

A number of Ministries of Education and Social Welfare (and a few Ministries of Health) have started to take measures to include persons with disabilities, but struggle with negative attitudes and lack of sufficient knowledge and capacity – especially in the decentralised settings. Service providing charities are doing some important gap filling, but this is not always helpful to the long term objectives of local ownership and accountability. The most practiced strategy has been Community Based Rehabilitation (CBR), now changing its name to Community Based Inclusive Development (CBID), introduced originally by WHO. There is an African CBR Network which has worked on development of the methodology from the African perspective. It will

hold a conference in 2015 to identify evidence of good practices and lessons learnt as well as remaining gaps and challenges including emerging issues and priorities for the future, with particular emphasis on post-2015 MDGs, to advance the inclusion of persons with disabilities in all development sectors.

Some of the most important international organisations and agencies active in supporting disability organisations and disability rights development in Sub-Saharan Africa are:

Nordic DPOs which have developed partnerships with peer organisations in developing countries. Some of these relationships go back 30 years in time and have contributed to the survival and development of disability movements in several countries. These organisations are Atlas Alliance (Norway), DPOD (Denmark), Disability Partnership Finland and Abilis Foundation (Finland) and My Right (Sweden).

Other important supporters are the CSO members of the **International Disability and Development Consortium**. This is a global consortium of **25** disability and development non-governmental organisations (NGOs), mainstream development NGOs and disabled people's organisations (DPOs) supporting disability and development work in more than 100 countries around the world. The aim of IDDC is to promote inclusive development internationally, with a special focus on promoting the full and effective enjoyment of human rights by all persons with disabilities living in economically poor communities in lower and middle-income countries.

Among bilateral donors to disability related initiatives, some of the most prominent are Australia, Finland, Norway, UK, Canada, Japan, Germany and US. EU has also made policy commitments to the rights of persons with disabilities, but implementation is weak on the ground. The policy level commitments made by these bilateral agencies could be called on in country level joint donor programming.

UNICEF, Save the Children and Plan have increasingly included children with disabilities in programmes. Since 2011, there is a *[Global Partnership on Children with Disabilities](#)* (GPcwd) which is a network of more than [240 organisations](#), including international NGOs, national and local NGOs, Disabled People's Organizations (DPOs), governments, academia and the private sector, working to advance the rights of children with disabilities at the global, regional and country levels. With a rights-based approach, the Partnership provides a platform for advocacy and collective action to ensure the rights of children with disabilities are included and prioritised by both the Disability and Child Rights Movement. There is also a [Global partnership for education](#), which promotes and supports development of inclusive school systems.

The [World Bank](#) has engaged in disability rights for many years. They have commissioned a range of studies, especially on the link between poverty and disability. At the UN High-Level Meeting of the General Assembly on Disability and Development in September 2013, the [World Bank reiterated its commitments](#). Unfortunately, at country level, representatives are not always informed on these commitments.

Within the UN, there is a Partnership to Promote the Rights of Persons with Disabilities (UNPRPD) which is a collaborative effort that brings together UN entities, governments, Disabled People's Organizations (DPOs) and the broader civil society to advance disability rights around the world. In particular, the UNPRPD supports coalition building and capacity-development at country level to facilitate the full implementation of the Convention on the Rights of Persons with Disabilities (CRPD). In doing so, it contributes to the realisation of a "society for all" in the 21st century. The UN entities participating in the UNPRPD are the International Labour Organization (ILO), the Office of the High Commissioner for Human Rights (OHCHR), the

United Nations Department for Economic and Social Affairs (UNDESA), the United Nations Development Programme (UNDP), the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO). The UNDP Poverty Group serves as the Technical Secretariat for the Partnership. A [Trust Fund](#) has been set up in support of the Partnership, where Sweden is a major contributor. Countries in Sub-Saharan Africa benefitting (or about to benefit) from the Trust Fund are; Ethiopia, Mozambique, Sudan, South Africa, Toga and Uganda.

Accountability mechanisms

Most countries in Sub Saharan Africa have established some kind of Human Rights Institutions or Commission (some are independent - others are not). Most of these commissions are gradually developing their capacities and mandates. However, they have seldom or never engaged in promotion or protection of the rights of persons with disabilities, especially not the deprivation of rights of persons with intellectual and psychosocial disabilities. Disability is often not even mentioned as a mandate of many Commissions, especially not in conflict areas.

Legal aid programmes exist in most Sub-Saharan countries, but they have seldom or never taken on cases of children with disabilities denied access to school, persons with disabilities denied opening a bank account, denied the right to vote etc.

There is great opportunity the strengthen National Human Rights Institutions and legal aid programmes in this respect.

[Disability Rights Promotion International](#) is supporting DPOs to monitor and report on disability rights. It has an African focal point located in Addis Ababa, Ethiopia. So far support has been provided to Cameroon, Kenya and Tanzania.

Main Civil Society Actors at the regional level

African Disability Alliance (ADA) – formerly the African Decade Secretariat – is a technical agency with a mandate to facilitate the implementation of the Continental Plan of Action for Persons with Disabilities, the CRPD and the Millennium Development Goals (and the post millennium agenda). All major continental disability organisations are represented in its board. The Secretariat has head offices in South Africa and regional offices in Senegal and Ethiopia. The African Decade Secretariat has been heavily supported by Sweden (Sida global). ADA is trying to find its role in relation to ADF (below).

African Disability Forum (ADF), formed in November 2014, aims to unify and amplify the voice of Africans with disabilities, their families and their organisations in advocating for their rights and inclusion in all aspects of development and society at Pan African, sub-regional and national levels. The ADF is an initiative of Mr. Shuaib Chalklen, the former UN Special Rapporteur on Disability of the Commission for Social Development. ADF still has no web page and is not yet a member of the International Disability Alliance (IDA).

Pan African Federation of Organisations of Persons with Disabilities (PAFOD) is an African Network for National Federations or Unions of Associations of persons with disabilities, established in April 1990 (Mauretania) and formally constituted in October 1994 in Lusaka, Zambia. Its mission is to work towards achieving the promotion and the actual enforcement of the rights of persons with disabilities in Africa, as stated in the Convention on the Rights of Persons with Disabilities through the mobilisation and unification of Disabled Persons Organizations, all categories put together at national, regional and continental levels, the building of their institutional and operational capacities in the field. PAFOD never managed to secure a mandate from all continental disability organisations and is now one of the members of ADF.

[African Union of the Blind](#) (AFUB) is an umbrella organisation of 57 member organisations of and for blind and partially sighted persons in 51 African countries. AFUB is an active a member of the World Blind Union (WBU), and enjoy observer status with the African Union. It has been heavily supported by the Norwegian and Danish organisations of the Blind. Its headquarters are based in Nairobi, Kenya. AFUB is a member of the newly formed ADF.

[Inclusion Africa](#) (IA) is a pan-African, regional federation of family-based organisations advocating for the human rights and full inclusion of persons with intellectual disabilities and families throughout Africa. IA was registered in Nairobi, Kenya in 2012, but has been operating even before that. Inclusion has been heavily supported by the Norwegian Association of Persons with Intellectual disabilities (NFU). Member countries include Benin, Burkina Faso, Ethiopia, Ghana, Kenya, Lesotho, Malawi, Mauritius, Mozambique, Namibia, South Africa, Swaziland, Tanzania, Togo, Uganda, Zambia, Zanzibar and Zimbabwe. Inclusion Africa also functions as the regional body to Inclusion International. Inclusion Africa is a member of the newly formed ADF.

African Union of the Deaf, possibly with a base in Uganda, seems to have a low visibility presently. It has no web page. The World Federation of the Deaf (WFD) has two African Secretariats, one for West and Central Africa in the Gambia and one for Eastern and Southern Africa based in South Africa (used to be in Kenya). WFD has 34 Sub-Saharan organisations as members. The African Union of the Deaf is a member of the newly formed ADF.

[The African Youth with Disabilities Network](#) (AYWDN) was founded in 2011 to unite Africa's diverse Youth Disability groups, their families, friends and supporters. Youth Disability groups include those with Physical Disabilities, Sensory Disabilities, Intellectual Disabilities, Psychosocial Disabilities and Developmental Disabilities. The role of the Network is to be a continental and effective voice for change – culturally, economically, politically and socially through supporting the implementation of the United Nations Convention on the Rights of Persons with

Disabilities and influencing regional policies to address the challenges faced by Youth with Disabilities. HQ are based in Nairobi, Kenya. AYWDN is a member of the newly formed ADF.

[Pan African Network of Users and Survivors of Psychiatry](#) (PANUSP) was formed in 2011. Members or allies consist of Mind Freedom Ghana, Mental Health Users and Survivors of Psychiatry of Kenya (USPK), Mental Health Society of Ghana (MEHSOG) Users and Carers Association of Malawi (MeHCAM), Tanzanian Users and Survivors of Psychiatry (TUSPO), Mental Health Care Users Network of Zambia (MHUNZA), Ubuntu South Africa, National Organization of Users and Survivors of Rwanda (NOUSPR) and Mental Health Uganda. PANUSP Head Quarters are based in South Africa. The network is supported by among others the [Mental Disability Advocacy Centre](#) that has produced reports on the situation in Kenya, Uganda, Zambia and South Africa. PANUSP is a member of the newly formed ADF.

[Disabled Women in Africa](#) (DIWA) was founded in Dar - es - Salaam in 2002. Due to lack of support, DIWA remained stagnant for some years. Then in 2005, the Southern Africa Federation of the Disabled (SAFOD) resolved to support the further development of DIWA. In September 2007 in Lilongwe, Malawi a Pan-African conference was organised and roles and strategies of DIWA agreed upon. Since March 2009 DIWA has employed her first full time employee who is based in Bulawayo, where the DIWA office is accommodated within the premises of SAFOD. DIWA is a member of the newly formed ADF.

African Down Syndrome Network (ADSN) is a network without a web page. Its President is based in Mauritius. Down Syndrome South Africa has played a significant role in the region and its president sits on the International Disability Alliance board. Down Syndrome International has country level member organisations from many African countries. African Down Syndrome Network is a member of the newly formed ADF.

African Federation of the Deaf Blind (AFDB) has members from 12 African countries namely Malawi, Cote d'Ívoire, Congo Brazzaville, Mali, Ethiopia, Zambia, Nigeria, Kenya, Tanzania, South Africa, Burkina Faso and Uganda. It does not have a web page. South Africa and Kenya seems to be the most active network members. AFDB is a member of the newly formed ADF.

Pan African Alliance for People with Albinism - the organisation has no web page. It is a member of the newly formed ADF.

African Organisation of People Affected by Leprosy - the organisation has no web page. It is a member of the newly formed ADF.

Federation of African Associations of Persons with Short Stature - the organisation has no web page.

The African Regional Committee of the International Bureau for Epilepsy (IBE) has 19 national member organisations and is hosted by the Epilepsy Association of Zambia. It has no web page, but reports can be found on the Internet.

Why Sweden needs to do more to include persons with disabilities

Sweden is obliged by article 32 in the Convention, ratified by Sweden, to include persons with disabilities in all development cooperation programmes. It states that State Parties involved in international cooperation have a responsibility to undertake appropriate and effective measures such as:

a) *Ensuring that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities;*

b) *Facilitating and supporting capacity-building, including through the exchange and sharing of information, experiences, training programmes and best practices;*

c) *Facilitating cooperation in research and access to scientific and technical knowledge;*

d) *Providing, as appropriate, technical and economic assistance, including by facilitating*

access to and sharing of accessible and assistive technologies, and through the transfer of technologies.

2. All Swedish support is to be based on the perspectives of the poor and a human rights perspective (meaning that the principles of accountability, transparency, participation and non-discrimination should be applied to processes and programme design).

What Sweden could do – 8 questions to discuss

Within its mandate and strategies for Sub-Saharan Africa, Sweden has a range of opportunities to include persons with disabilities in a more deliberate manner. Questions to discuss:

- Could Sweden do more to stay updated on the situation of persons with disabilities in the region and the measures initiated by AU and regional bodies to address the rights of persons with disabilities (e.g. the disability architecture AUDA and the post millennium agenda)? Could the regional office do more to support Embassies in this regard?

- Many countries lack data on the situation of persons with disabilities. Sweden is already providing support to "Health Economics and HIV and AIDS Research Division (HEARD)" at the University of KwaZulu Natal in South Africa, which has launched a "Disability, Health and Livelihoods Think Tank" and undertakes research on "disability and HIV". Could Sweden do more to promote regional research in the area of disability?

- Could Sweden do more to systematically include disability rights as an explicit part of its support to regional accountability mechanisms, efforts to establish independent human rights institutions, election monitoring and watchdog organisations? Monitoring tools can be downloaded here.

- Could Sweden do more to ensure that women, men and children with disabilities (and mental health conditions) are systematically included

and even prioritised in emergency relief and humanitarian aid efforts? E.g. refer to

- ✓ Manual on the design and building of barrier-free emergency shelters here
- ✓ Manual on mainstreaming disability in disaster risk reduction here
- ✓ Disability and the post-conflict agenda here
- ✓ Involvement of Persons with Disabilities in Conflict Resolution and Peace Building Efforts here
- ✓ Disability Inclusive Disaster Risk Management: Voice from the Field and Good Practices here

- Could Sweden do more to include DPOs in regional networking and programmes that seek to strengthen civil society organisations and networks to influence policies and monitor the implementation of policy commitments? E.g. the East African Community Policy on persons with Disabilities (2012) outlining joint policy commitments in line with the CRPD and country level recommendations?

- Could Sweden do more to ensure that women with disabilities are included in regional programmes aiming to advance women's rights and gender equality? To include women with disabilities in SRHR and GBV programmes?

- Could Sweden do more to ensure that regional programmes focussing on private sector development, micro financing and economic integration are accessible and inclusive of women and men with various disabilities? Examples of tools can be found here.

- Could Sweden do more to build strategic alliances and bring a disability perspective into joint donor planning meetings with bilateral and multilateral agencies, taking into consideration that article 32 of the CRPD requires donors to do so? What support and additional information would the regional offices need to take such initiative? Guide to Disability in development here.

Useful links and references

1. African CBR Network http://www.afri-can.org/

2. Disability and Statistics, Disability-inclusive design, planning, monitoring and evaluation, disability perspective in national census/data/statistics: http://www.un.org/disabilities/default.asp?navid=13&pid=1515

3. EENET is an important resource in inclusive education is http://www.eenet.org.uk/

4. EU Guidance note for EU Staff on Disability Inclusive Development Cooperation http://capacity4dev.ec.europa.eu/disability-and-development-network/blog/updated-guidance-note-eu-staff-disability-inclusive-development-cooperation

5. Disability Rights Promotion International http://drpi.research.yorku.ca/

6. D.R.P.I.'s Tools to Monitor the Rights of Persons with Disabilities, by Disability Rights Promotion International (DRPI), a collaborative project working to establish a monitoring system to address disability discrimination globally: http://www.yorku.ca/drpi/files/UseOfDRPIsMonitTools.pdf

7. Global Partnership on children with disabilities http://www.gpcwd.org/

8. Make Development Inclusive: How to include the perspectives of persons with disabilities in the project cycle management guidelines of the EC, an on-line manual from International Disability and Development Consortium (IDDC) project financed by the European Commission to break the cycle of Poverty and Disability in developing countries: http://www.make-development-inclusive.org/

9. Open Budget Index, by International Budget Partnership (IBP) Administration: http://internationalbudget.org/budget-analysis/sectors-issues-demographic/people-disabilities/

10. Oslo Conference on Disability in Conflicts and Emergencies "Reaching the most vulnerable", 30-31 May, 2011 - Thon Hotel Opera, Oslo, Norway: http://www.oslodisability2011.org/

11. Sida action plan to promote the rights of persons with disabilities - evaluation: http://www.sida.se/Svenska/Publikationer-och-bilder/Publikationer/2013/oktober/Human-rights-for-persons-with-disabilities-an-evaluation-of-the-work-plan---Final-Report/

12. Sida's tools on disability: *Disability as a human rights issue – conducting dialogue*, http://www.sida.se/English/publications/Publication_database/publications-by-year1/2012/june/disability-as-a-human-rights-issue-conducting-a-dialogue/

13. Study on the role of international cooperation in support of national efforts for the realisation of the rights of persons with disabilities, by the Office of the United Nations High Commissioner for Human Rights (2010): http://www2.ohchr.org/english/bodies/hrcouncil/docs/16session/A-HRC-16-38.pdf

14. UN Ban Ki Moon: Empowering people with disabilities will help battle against poverty: Persons with Disabilities Must Not Be Left Behind in Post-2015 Framework, Secretary-General Tells States Parties to Convention at Opening Session

15. UN Committee on the rights of persons with disabilities: http://www.ohchr.org/en/hrbodies/crpd/pages/crpdindex.aspx

16. UN web page on disability rights: http://www.un.org/disabilities/

17. UN on disability rights: http://www.un.org/disabilities/default.asp?id=1545.

18. UN and women with disabilities: http://www.un.org/disabilities/default.asp?navid=13&pid=1514

19. UNICEF of disability rights: http://www.unicef.org/disabilities/

20. UNAIDS, WHO and OHCHR policy brief on disability and HIV: http://data.unaids.org/pub/Manual/2009/jc1632_policy_brief_disability_en.pdf

21. UNCRPD Handbook for parliamentarians, 2007: http://www.un.org/disabilities/documents/toolaction/ipuhb.pdf

22. USAID tools on inclusion of disability: http://www.usaid.gov/what-we-do/democracy-human-rights-and-governance/protecting-human-rights/disability

23. World Health Organization on Community Based Rehabilitation: http://www.who.int/disabilities/cbr/en/index.html

24. World Report on Disability, 2012, WHO: http://www.who.int/disabilities/world_report/2011/en/index.html

25. World Bank on Disability Rights: http://www.worldbank.org/en/topic/disability

26. World Bank on women with disabilities: http://go.worldbank.org/O14DRFLK90

The human rights of persons with disabilities are a Swedish government priority since 2009. As a service to staff, briefs have been prepared to provide basic information about the situation of this (often forgotten) group and inspire discussions on what Sweden could do to better include disability rights in diplomacy and programming.