## FINAL REPORT

# Consultancy to conduct desk review on impact of national policies and programs on disability rights and develop an action plan to make existing policies and programs and legislation disability friendly

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#### ABBREVIATIONS AND ACRONYMS

DfID:	Department for International Development
EDPRS I:	Economic Development and Poverty Reduction Strategy 2008 – 2012
EDPRS II:	Economic Development and Poverty Reduction Strategy 2013 – 2018
EICV :	IntegratedHousehold Living Conditions Survey
FARG:	Fonds d'Assistance aux Rescapés du Génocide
FENAPH :	Fédération nationale des personnes handicapées
FGD:	Focus Group Discussion
ICF:	International Classification of Functioning, Disability and Health
ID :	Identification Card
IGA:	Income Generating Activities
MDGs:	Millennium Development Goals
MINAGRI:	Ministry of Agriculture and Animal Husbandry
MINALOC:	Ministry of Local Government, Community Development and SocialAffairs
NCPD :	National Council for Persons with Disabilities
NGO :	Non Governmental Organization
NUDOR:	National Union of Disabilities' Organizations of Rwanda
PPIMA:	Public Policy Information Monitoring and Advocacy
PWDs:	Persons with Disabilities
RDRC:	Rwanda Demobilization and Reintegration Commission
SACCOs:	Savings and Credit Cooperatives
SDGs:	Sustainable Development Goals
SSFR:	Social Security Fund for Rwanda
UN:	United Nations
UNCRPD:	United Nations Conventions on the Rights of Persons with Disabilities
VUP:	Vision 2020 Umurenge Program

#### **INTRODUCTION**

This Report on theimpact of national policies and programs on disability rights was prepared for the National Union of Disabilities' Organizations of Rwanda, NUDOR.

Persons with disabilities (PWDs) in developing countries are disproportionately represented among the poorest people<sup>1</sup>. They have long been stigmatized and left behind in terms of personal development and social interactions because of different factors, they were discriminated and isolated, they were not considered in development programs and mostly because their rights have long been ignored.

The United Nations have then put in place the Convention on the Rights of Persons with Disabilities (UNCRPD) which serves to protect, to respect and to promote their rights throughout the world. However, there is still some way to go in terms of translatingthe convention into actual facts.

The government of Rwanda has put in place a law protecting persons with disabilities. The Article 1stipulates that without prejudice to provisions of this law, there may be instituted particular laws protecting persons who are disabled due to various circumstances. The following article stipulates that disability shall mean the condition of a person's impairment of health ability he or she should have been in possession, and consequently leading to deficiency compared to others. And a disabled person is any individual who was born without congenital abilities like those of others or one who was deprived of such abilities due to disease, accident, conflict or any other reasons which may cause disability<sup>2</sup>.

On international level, Sustainable Development Goals (SDGs) present a golden opportunity to fill in the gaps for disability inclusion in development especially in the following goals:

- 4 Quality education (Guaranteeing equal and accessible education by building inclusive learning environments and providing the needed assistance for persons with disabilities),
- 8 Decent work and economic growth (Promoting inclusive economic growth, full and productive employment allowing persons with disabilities to fully access the job market),

<sup>&</sup>lt;sup>1</sup> Philippa Thomas, Disability Policy Officer / DFID, Mainstreaming Disability in Development: Country-level research - Rwanda Country Report, April 2005

<sup>&</sup>lt;sup>2</sup> Law N° 01/2007 of 20/01/2007 relating to protection of disabled persons in general

- 10 Reduced inequalities (Emphasizing the social, economic and political inclusion of persons with disabilities),
- 11 Sustainable cities and communities (Creating accessible cities and water resources, affordable, accessible and sustainable transport systems, providing universal access to safe, inclusive, accessible and green public spaces) and
- 17 (Underlining the importance of data collection and monitoring of the SDGs, emphasis on disability disaggregated data).

#### **Background of the assignment**

The Rwandan context is characterized by the adverse effects of the 1994 Genocide against theTutsi, which resulted in many additional persons with disabilities as well as mental health challenges<sup>3</sup>.

The Government of Rwanda has developed a long-term development pathfor sustainabledevelopment aiming at attaining the status of a middle-income country by the year 2020<sup>4</sup>. TheGovernment of Rwanda has developed a series of Poverty Reduction Strategy Papers, the nationalframeworks aimed at socio-economic transformation of the country and numerous programs toachieve this ambitious goal.

These programs include the first Economic Development and Poverty Reduction Strategy (EDPRS1) covering the period 2008-2012, subsequently reviewed and revised in the light of progress achieved toproduce the second Economic Development and Poverty Reduction Strategy (EDPRS2) covering the period 2013-2018.

In EDPRS 2,Rwandacommitted to not leaving behind disadvantaged groups such as PWDs in its development<sup>5</sup>; they are to contribute actively to the country's development and to benefit from it. Rwanda is equally committed to the attainment of the Millennium Development Goals (MDGs)andSustainable Development Goals (SDGs) which will enhance disability inclusion.

<sup>&</sup>lt;sup>3</sup> Republic of Rwanda, Initial Report of Rwanda on the Implementation of the convention on the Rights of Persons with Disabilities, March 2015

<sup>&</sup>lt;sup>4</sup> Government of Rwanda, Vision 2020, July 2000

<sup>&</sup>lt;sup>5</sup> Republic of Rwanda, Economic Development and Poverty Reduction Strategy (2013-2018), 2013

Different community development programs have been initiated implement that commitment and NUDOR's activities under PPIMA Program have been focusing on raising awareness on the participation of PWDs into those programs. Population and communities, PWDs included, have to participate and contribute in all steps of policies and programs planning, development, implementation, review and evaluation.

It is in order to appreciate positive changes or identify the gaps and challenges in the inclusion of PWDs in different national development programs and policies that NUDOR initiated this assessment. The present document provides the findings of the research.

#### **Objectives of the assignment**

The overall objective of the assignment was to assess the impact of national policies and programs on disability rights, recognize positive changes, identify gaps and challenges, and develop an action plan to make existing policies, programs and legislations disability friendly.

Specifically, the assignment aimed to:

- Identify and document key relevant national development programs, policies and laws inrelation with livelihoods and social protection;
- Provide an overview on social protection policy and highlight eventual gaps in responding to need affecting PWDs;
- Provide an overview of Girinka program (one cow per family);
- Assess VUP program in order to identify its gaps and challenges in terms of inclusiveness or exclusiveness of disability rights;
- Gain insight into testimonies of stakeholders operating in disability area in Rwanda about the promotion of the rights of PWDs as a result of national development programs specifically VUP program;
- Based on the findings from VUP program assessment, recommend corrective measures and strategies to improve disability inclusiveness in national development programs.

#### METHOGOLOGY

This was a qualitative research using a deductive approach. This methodology was better suited for this assignment as the approach is based on a pre-determined idea about how things should be.

#### **Approach and Methodology**

Deduction follows a general to specificapproach. Conclusions are drawn from a process of exploring evidence (provided in collected data) and using correct reasoning.

The qualitative research design involved the collection of extensive narrative data in order to gain insights into the phenomena of interest i.e. persons with disabilities rights in Rwandan social protection sector.

A participatory approach was adopted which allowed the Consultant to regularly check with NUDOR team and in particular with NUDOR Executive Secretary and PPIMA Project Manager at every stage to share and compile relevant information.

#### Data collection methods

Literature review method was used to collect extensive narrative data pertaining to social protection programs in Rwanda and the rights of persons with disabilities. Secondary data have been used from different researches conducted in social protection domain (e.g. One cow per poor family program, Vision 2020 Umurenge Program, etc.) and mainstreaming Disability in Development.

#### Data source

The research used literature from official publications of different national institutions and unpublished documents from relevant projects and programs.

#### Data collection tools

Internet and libraries were the main sources of the literature consulted. Key disability institutions' books (reports, documentation on disability and researches) have been also consulted.

#### Data compilation, analysis and reporting

Collected data has been compiled and analyzed using the systematic reviewwith the following steps:

- Framing questions for a review: As the problem to be addressed by the review has been clearly specified in the terms of reference, unambiguous and structured questions have been set.
- Identifying relevant work: The search for studies has been extensive; multiple resources (both computerized and printed) have been searched.
- Assessing the quality of studies to every step of the review
- Summarizing the evidence: An analysis has been done using a combination of data from multiple studies.
- Interpreting the findings where recommendations have been graded by reference to the strengths and weaknesses of the evidence

#### **RWANDADISABILITY LEGAL FRAMEWORK**

Rwanda ratified the Convention on the Rights of Persons with Disabilities and its OptionalProtocol on 15 December  $2008^6$ . The government also committed itself through the adoption of the law to protect the rights of persons with disabilities (in 2007 - Law n° 01/2007 of 20/01/2007) and haspassed eight ministerial orders in order to implement this law (in 2009).

The general principles of the Convention are about ensuring among other things the followingfor persons with disabilities:

- Respect and acceptance,
- Non-discrimination,
- Independence,
- Inclusion in society,
- Equality of opportunity,
- Accessibility.

<sup>&</sup>lt;sup>6</sup> Republic of Rwanda, Initial Report of Rwanda on the Implementation of the convention on the Rights of Persons with Disabilities, March 2015

The convention caters particularly for women and children with disabilities and ensures that their rights and best interests shall be of primary consideration. The Convention urges States Parties to raise awareness of the capabilities and contributions of PWDs and to promotepositive perceptions and greater social awareness towards them.

Other articles of the Convention cover areas of concern pertaining to daily living (right to life, adequate standard of living and social protection, respect for home and the family, health, situations of risk and humanitarian emergencies, freedom from degrading treatment, freedom from exploitation, habilitation and rehabilitation) and areas of concern in terms of legalmatters (access to justice, equal recognition before the law, liberty and security of person, protecting the integrity of the person, violence and abuse, liberty of movement and nationality, personal mobility).

Other subject covered are public life (participation in political and public life, freedom of expression and opinion, and access to information, respect for privacy), and other topics such as education, employment and leisure (education, work and employment, participation in cultural life, recreation, leisure and sport).

The Rwandan law relating to the protection of persons with disabilities builds on the above articles of the Convention.

The Rwandan constitution also has provisions with regard to persons with disabilities. Generally, its  $16^{th}$  article prohibits discrimination of any kind including discrimination based on disability. Specifically, its  $51^{st}$  article is devoted to the welfare of persons with disabilities and other needy persons. It is said that the State has the duty, within its means, to undertake special actions aimed at the welfare of persons with disabilities.

#### SOCIAL PROTECTION SECTOR IN RWANDA

#### **Overview and intervention programs**

The National Social Protection Policydefines social protection as "a set of publicand private initiatives enabling to providetransfers of income or consumption the poor, to protect, in particular, thevulnerable and the marginalized against welfare risks and improve their social status and rights as a whole with the overallobjective of promoting the welfare of the population"<sup>7</sup>.

The Government of Rwanda considers that social protection provides income support to poor households or those at risk of falling into poverty, as well as interventions to help them overcome financial barriers to accessing public services such as health care and education, and also provide associated in-kind assistance essential in contribution to the achievement of its development goals<sup>8</sup>.

A number of categories of the Rwandan population are particularly vulnerable to poverty and welfare risks including older people, those living with disabilities, young children, female-headed households, genocide survivors and the historically marginalized<sup>9</sup>. In the first EDPRS the government committed to achieve effective and sustainable social protection for thepoor and vulnerable<sup>10</sup>. In order to achieve the Government's aspirations for poverty and inequality reduction, Rwanda has elaborateda Social Protection Strategy. The strategy was defined acrosstwo main dimensions i.e. cash transfer programs and access to core essential services.

The first EDPRS situates PWDs as well as the unsupported elderly and people incapacitated by AIDS among people needing long term social assistance as opposed to those who may only need social assistance for a shorter period of time, namely orphans and vulnerablechildren, childheaded households and historically marginalized people.

The social protection sector and intervention programs are seenas a means by which to contribute to economicgrowth, to integrate people into the labor market, to slow down population growth, to

<sup>&</sup>lt;sup>7</sup>Ruberangeyo T., Ayebare C. and de Laminne de Bex A.: Social Protection: An Ongoing process, 2010

<sup>&</sup>lt;sup>8</sup> National Institute of Statistics of Rwanda, 4<sup>th</sup>Integrated Household Living Conditions Survey, Social Protection and VUP Report, November 2015

<sup>&</sup>lt;sup>9</sup> Ministry of Local Government, National Social Protection Policy, January 2011

<sup>&</sup>lt;sup>10</sup> Republic of Rwanda, Economic Development and Poverty Reduction Strategy (2008-2012), September 2007

improve human developmentthrough better access to health andeducation, and to reduce poverty<sup>11</sup>.

The following are the key social protection programs placed under the direct responsibility of the Ministry of Local Governance (MINALOC).

- The Vision 2020 Umurenge Program (VUP):in terms of cash transfer, this is the most important program in social protection. Under this program cash grants are given to extremely poor households without labor capacity, those with labor capacity are provided with work opportunities through public works and financial services provide investment loans to poor households;
- The Genocide Survivors Support and Assistance Fund (FARG): this para-statal organization provides assistance in terms cash transfer, medical care and education scholarships to genocide survivors in need;
- The Rwanda Demobilization and Reintegration Commission (RDRC): this institution provides support for demobilized ex- combatants and disabled soldiers;
- *Ubudehe* **program**: also overseen by MINALOC, assists financially poor households to invest in income generating activities (IGA);
- In addition to these, **Districts** receive funding to ensure that they can provide a broad range of services to vulnerable groups.

Though MINALOC has the overall policy lead on social protection, a number of other Ministries have significant social protection programs:

- Social Security Fund of Rwanda (SSFR) overseen by the Ministry of Finance provides old age, disability and survivors' pensions to members;
- The community based health insurance scheme (**Mutuelle de Santé**) introduced by the Ministry of Health provides medical services packages to all the population at minimum cost;
- **Free basic education** for all Rwandans is the main social protection programprovided by the Ministry of Education;

<sup>&</sup>lt;sup>11</sup>Ruberangeyo T., Ayebare C. and de Laminne de Bex A.: Social Protection: An Ongoing process, 2010

- A number of social protection programs are provided under the Ministry of Agriculture and Animal Husbandry (MINAGRI) such as Girinka program (one cow per poor family with more than 0.7 hectares), small animal provision program (for poor households with little land) and the fertilizer subsidies and seed program;
- The ministry of Trade and Commerce introduced microfinance institutions at sector level (Savings and Credit Cooperatives (SACCOs)) in order help all members of society learn the culture of saving and also to access loans that will support them to venture into entrepreneurship opportunities.

The current assignment provides an overview of Girinka program (one cow per family) and a comprehensive analysis of Vision 2020 *Umurenge* Program (VUP) which is the flagship program of EDPRS and the most important program in terms of social protection and poverty reduction.

#### Vulnerability criteria to join the above programs

Household vulnerability in Rwanda is often defined by households' ranking under the system known as *Ubudehe.Ubudehe* povertycategorization is a community based system that assesses the financial situations of citizens throughout Rwanda. Every Village(*Umudugudu*)evaluates each citizen's financial/asset situation and places him/her in one of defined categories<sup>12</sup>.Initially, the system comprised 6 categories but it was revised later to include only 4 categories.

Under the *Ubudehe* categorization, communities periodically rank the households in their area with category 1 being the most vulnerable and 6 (or 4) the least. The most vulnerable individuals, as identified by the villagers, are considered by the government to be in need of financial assistance.

Vulnerability in this context is defined as the risk of being in poverty today or falling into poverty in the future<sup>13</sup>. Consequently, disability is not considered as a vulnerability criterion in Rwandan social protection programs if the person is not listed in the first or second *Ubudehe* categories. The fourth integrated household living conditions survey (EICV4) on social

<sup>&</sup>lt;sup>12</sup>Anna Berglund (Embassy of Sweden in Rwanda), A Local Perspective of The Vision 2020 *Umurenge* Program and the Land Tenure Regularization Program, October 2012

<sup>&</sup>lt;sup>13</sup>National Institute of Statistics of Rwanda, 4<sup>th</sup>Integrated Household Living Conditions Survey, Social Protection and VUP Report, November 2015

protection and VUP program conducted in 2013-2014 found that persons with disabilities were spread fairly evenly across all wealth classes.

Only households classified as *Ubudehe* categories 1 and 2are eligible for VUP components Direct Support or Public Works. Households in *Ubudehe* category 3, as well as those in categories 1 and 2, are eligible to apply for a Financial Services loan.

In the community based health insurance scheme, households classified as *Ubudehe* categories 1 and 2receive assistance with paying the premiums for health insurance. These households get their fees subsidized by district and nationally organized solidarity funds financed primarily by the central government and external aid partners.

#### Provisions of the social protection strategy regardingPersons with Disabilities

With regard to persons with disabilities, the Social Protection Strategy elaborated in 2011 had planned to focus on strengthening programs across government that empower them.PWDs were to be given greater access to relevant government programs, both by improving current plans for persons with disability and also by monitoring the access of personswith disabilities to all public services.

That engagement was dependent on gaining adequate information on the number of PWDs, as well as a better understanding of the nature of those disabilities and was to be facilitated by providing persons with disabilities with identity cards<sup>14</sup> that would also classify their level of disability.

There was recognition that personswith disabilities need financial support to enable households to care for those in a dependent situation and help those who can take care of themselves to overcome additional costs they face in accessing jobs and establishing their own enterprises. This assistance was to be gradually built through the VUP Direct Support program and a feasibility study on a Disability Grant was planned by 2014.

# Provisions of the Convention on the Rights of Persons with Disabilities and the Rwanda 2007 Law on protection of PWDs

<sup>&</sup>lt;sup>14</sup> Ministry of Local Government, Implementation Plan of Social Protection Strategy, September 2011

States Parties recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and the Convention on the Rights of Persons with Disabilities (CRPD) urges State parties to take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability.

The CRPD recognizes the right of PWDs to social protection and to the enjoyment of that right without discrimination on the basis of disability. The Convention exhorts States Parties to ensure for PWDs access to basic infrastructures such as clean water services, access to appropriate and affordable services, devices and other assistance for disability-related needs.

States Parties must also take appropriate measures to ensure access by PWDs (especially women and girls) to social protection programs and poverty reduction programs.PWDs and their families living in situations of poverty must be ensured access to assistance from State with disabilityrelated expenses, including adequate training, counseling, financial assistance and respite care. Access to public housing programs and to retirement benefits and programs are also to be ensured for PWDs as stated in the Convention.

The law  $n^{\circ}$  01/2007 relating to protection of persons with disabilities in general issued by the Rwandan government contains articles relevant to the social protection of PWDs. Foremost, the law plans that where possible, persons with disabilities shall be consulted and they shall give views on activities and services accorded to them. To that end, the coordinator of the federation of the persons with disabilities at local levels shall participate in the consultative councils elected at those levels.

In its article 9, the lawsays that a person with disabilities shall be catered for and assisted particularly in times of conflict, accidents and other disasters. Article 15 says that the Government has an obligation to provide medical care to a needy person with disabilities and it shall provide prosthesis and orthesis appliances if required.

#### Positive changes in social protection towards persons with disabilities' rights

In order to provide adequate assistance to PWDs, a ministerial Order determining the modalities of classifying persons with disabilities into basic categories was issued in July 2009. The Order established two types of classification namely the type of disability and the degree of disability.

On the basis of disability, persons with disabilities shall be classified under the following categories:

- 1. Physically disabled persons;
- 2. Sight-impaired persons;
- 3. Deaf-and-dumb persons or persons with either of these disabilities;
- 4. Mentally disabled persons;

5. Persons with disabilities not specified in the above categories approved by the Medical committee.

On the basis of the degree of disability ascertained by the Medical Committee established by relevant authorities, persons with disabilities in each of the above categories of disability were to be classified into the categories below in light of international disability standards:

- 1. between 90 and 100%;
- 2. between 70 and 89%;
- 3. between 50 and 69%;
- 4. between 30 and 49%;
- 5. below 30%.

The Order also stated that after classification the Medical committee shall issue them a card that indicates the disability, degree of disability and the signature of the Medical Committee President.

With the purpose of assisting PWDs on health related matters, a ministerial Order determining the modalities of facilitating persons with disabilities access medical care was also issued in July 2009. The Order asserts that persons with disabilities whose degree of disability is between 50% and 100% shall be the responsibility of the State as regards to the mutual health insurance scheme while those whose degree of disability is between 30% and 49% shall be the responsibility of the State at 50% in respect of mutual health insurance premiums.

Moreover, in respect of contributions of persons with disability to medical care and purchase of drugs, the care of those whose degree of disability is between 50% and 100% shall be the

responsibility of the State while those whose degree of disability is between 30% and 49% and are needy shall also be the responsibility of the State.

The categorization procedurewas implemented by the Ministry of Local Government (MINALOC) in collaboration with the Ministry of Health through the National Council of Persons with Disabilities (NCPD). According to the terms of reference, the activities related to categorization of PWDs were to be done in the period of March to December 2014.

Prior to categorization, a census of PWDs has been conducted in 2012 during the fourth population and housing Censusconducted by the National Institute of Statistics of Rwanda (NISR). The thematic report of the census presented the characteristics of persons with disabilities under some broad headings (the number, prevalence, types, and causes of disability; the demographic, social and economic characteristics of PWDS; and the characteristics of household heads with disabilities and the living standards of their households).

The disability measure used in the 2012 Census was based on the International Classification of Functioning, Disability and Health (ICF) and used the concept of activity limitations (difficulty seeing, hearing, speaking, walking/climbing and learning/concentrating) to identify persons with disabilities<sup>15</sup>.

The census reported a total number of 446,453 persons with disabilities aged five years and above in Rwanda, with the largest number being found in the Southern Province and the lowest in Kigali City.

Subsequent to the 2012 census and 2014 classification of PWDs, identification cards (ID) were given to persons with disabilities. The first rounds of cards have been issued and to date, no official report has been shared about the successful completion of the categorization! The ID cards are being issued by NCPD since 2016 and contain information such as names, date of birth, district, type of disability and degree of disability.

<sup>&</sup>lt;sup>15</sup> National Institute of Statistics of Rwanda, Fourth Population and Housing Census-Thematic Report, Socioeconomic characteristics of Persons with Disabilities, 2012

The government has put in places federations of PWDs at all local levels and they actively participate in the consultative councils elected at those levels in accordance with the law relating to the protection of persons with disabilities. This is beneficial in advocating for PWDs needs.

The right to access retirement benefits and programs for PWDs which is recognized by the CRPD is ensured by the social security fund (SSFR) program which provides old age, disability and survivors' pensions to members.

#### Gaps in social protection towards persons with disabilities' rights

The major gap in social protection towards persons with disabilities is the fact that designed programs are not disability inclusive. Persons with Disabilities are only considered in social protection when they belong to *Ubudehe* categories 1 and 2. There is need to take into consideration the type of disability and design appropriate assistance to each category of PWDs, something current programs lack significantly.

Though the ministerial Order on classification, it isspecified that classification of PWDs was to be implemented within one year from the date the Order came into force (2009), pilot categorization of PWDs was conducted in February 2014 and the first IDs were issued in 2016. This delay has surely impacted the effectiveness of social protection initiatives towards PWDs. Furthermore, literature does not show evidence that thefeasibility study on disability grant which was planned at the inception of the social protection strategy has been carried out yet.

The CRPD recognizes the right of persons with disabilities to an adequate standard of living for themselves and their families (including access to adequate food, clothing and housing). However, current programs in social protection don't cater for the families of PWDs. A person with disability is considered alone, his/her family is not considered.

Access to basic infrastructure (clean water, appropriate and affordable services, assistance for disability-related needs) is also a right recognized by the CRPD but which has not yet been fully realized. To date, only PWDs in *Ubudehe* categories 1 and 2 can only receive assistance from State.

The CRPD also recognizes that PWDs have the right to access public housing programs. Available programs in housing are in the FARG program which constructs houses for vulnerable persons as long as they are genocide survivors. PWDs who are not genocide survivors don't therefore benefit from this program and this is a gap that still needs to be filled.

There is a gap in social protection in relation with the ministerial Order ensuring that persons with disabilities whose degree of disability is between 50% and 100% shall be the responsibility of the State as regards to the mutual health insurance scheme while those whose degree of disability is between 30% and 49% shall be the responsibility of the State at 50% in respect of mutual health insurance premiums. Indeed, the order came into force in 2009 and ID cards for PWDs have only been issued since July 2016. PWDs have therefore not benefited from the privileges that are due to them in regard to this Order. So far, only PWDs listed in *Ubudehe* categories 1 and 2 can have their mutual health insurance premiums paid for.

#### Proposed corrective measures for social protection to meet persons with disabilities' rights

Some of the corrective measures to the Social protection strategy are proposed below:

- Persons with Disabilities are only considered in social protection when they belong to *Ubudehe* categories 1 and 2: Disability as crosscutting issue, there is a need to take into consideration the type/category of disability, level of disability and, design appropriate assistance to each category of PWDs with less consideration of Ubudehe categories.
- Delay in classification of PWDs: To ensure the effectiveness of social protection initiatives towards PWDs, there is a need of accelerating the availability of PWDs' classification report as well as the distribution of the related PWDs' identification cards
- Lack of feasibility study on disability grant: As planned at the inception of the social protection strategy, there is a need to conduct that study to facilitate further disability related planning.
- A person with disability is considered alone, his/her family is not considered (Programs not catering for the families of PWDs): A new approach of planning for persons with disabilities considering their families shall be introduced.
- There is a gap concerning the inclusion of women, girls and old persons with disabilities in social protection programs in general: Women, girls and old persons with disabilities

shall have special attention in the National Social Protection programs as emphasized in the CRPD

#### **GIRINKA PROGRAM**

#### **Overview**

Girinka Program (One Cow perPoor Family) was initiated by thePresident of Rwanda in 2006 and is partof the implementation measures of the2020 vision, the Economic Development and Poverty Reduction Strategy (EDPRS) and the Integrated Development Program (IDP)<sup>16</sup>. Girinka was initiated in response to the alarmingly high rate of childhood malnutrition and as a way to accelerate poverty reduction and integrate livestock and crop farming<sup>17</sup>.

The objective was to improve income generation and reduce poverty among the rural poor through increased productivity in livestock and agriculture sectors<sup>18</sup>. The program is based on the idea that providing a dairy cow to poorhouseholds helps to improve their livelihood as a result of a more nutritious and balanced diet from milk, increased agricultural output through better soil fertility as well as greater incomesby commercializing dairy products.

The implementation of the program is done by government agencies together with NGOs. By June 2016, about 248,566 cows had been distributed to poor households (Mudingu, 2016). The program is designed is way such that every beneficiary household gives the first calf to another household and this strategy ensures the program's continuity.

The program beneficiaries are chosen on the basis of household vulnerability but also on the household's capacity to feed the cow. Beneficiary households should have land that can be used to grow grass for feeding the cows and should be able to construct an animal shed or willing to join others in community to construct a communal cow shed (*igikumba rusange*). Another criterion followed in choosing a beneficiary is the social integration aspect<sup>19</sup> i.e. the household is to be well integrated in activities related to community development.

<sup>&</sup>lt;sup>16</sup>Ndahindwa V., Impact evaluation of the "One cow per poor family program" in Rwanda, June 2014

<sup>&</sup>lt;sup>17</sup> Mudingu J., Girinka Program transforms livelihoods, reconciles communities, 2016

<sup>&</sup>lt;sup>18</sup> Argent J., Augsburg B., Rasul I., Livestock Asset Transfers With and Without Training: Evidence from Rwanda, July 2014

<sup>&</sup>lt;sup>19</sup> Mudingu J., Girinka Program transforms livelihoods, reconciles communities, 2016

### Provisions of the Convention on the Rights of Persons with Disabilities and the Rwanda 2007 Law on protection of PWDs

The CRPD emphasizes the right of PWDs to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions.

#### Positive changes from Girinka program towards persons with disabilities' rights

The implementation of Girinka program has contributed to the improvement of living conditions for beneficiary households. Since its inception, the program has had positive impact in terms of livestock production (increased livestock products: milk, milk by-products, beef, hides and skins), agricultural production and food security (improved soil fertility, increased crop production), improved health (reduced malnutrition, dietary diversity), and better livelihoods in general (enabled beneficiaries to access loans, improved access to shelter).

For persons with disabilities who benefited from Girinka, the program has surely promoted the realization of their rightto an adequate standard of livingfor themselves and their families.

#### Gaps from Girinka program towards persons with disabilities' rights

While Girinka program is inclusive for persons with disabilities, disability is not per se a beneficiary criterion. Therefore, the realization of PWDs' right to an adequate standard of living for themselves and their families, including adequate food, clothing and housing cannot be done through this program.

#### Proposed corrective measures for Girinka program to meet persons with disabilities' rights

While Girinka program is inclusive for persons with disabilities, disability is not per se a beneficiary criterion: There is a need to harmonize the program in relation with other social protection programs whenever the issue of vulnerability is raised (this will go together with the consideration of persons with disabilities and their families in Girinka program as a vulnerable group like recognized by the Social protection strategy)

#### **VUP PROGRAM**

#### **Description and main components**

Rwanda's main national social protection program is the Vision 2020 *Umurenge* Program (VUP). Itwas conceived during the high-levelGovernment retreat of February 2007 as a social protection program to enhancethe attainment of Vision 2020 objectivesby accelerating poverty reduction<sup>20</sup>. Launched in 2008, the Program is basically asocial security program targeting poor households with a variety of financial and social developmental assistance<sup>21</sup>. The primary aim of the program was toeradicate extreme poverty by 2020 by releasing the productive capacities of the poor andextremely poor<sup>22</sup>. The VUP program was designed to be implemented through three components:

- **Public works**: they use community-based participatory approachesto build community assets and create an off-farm employment infrastructure (construction/repairing of roads, bridges, dams, workshops, training centers, storage warehouses, hillside terraces, irrigation mechanisms, classrooms, health facilities, etc);
- Direct support:monetary support to improve access to social services or to provide for landless households with no members qualifying for public works or credit packages. This component is designed to provide grants to the neediest members and most vulnerable of the community.
- Financial services through credit packages: designed to improve poor households' livelihoods these investment loans target areas such as agriculture and livestock farming (credit packages for seeds, fertilizers, pesticides, farmer training, or technology adoption), technical and vocational sector (skill credit packages), formal markets participation (off-farm, energy, transport, skill, supply-chain management and export credit packages), village settlement (construction material and mortgage credit packages), and the health sector (health credit packages);

<sup>&</sup>lt;sup>20</sup>Ruberangeyo T., Ayebare C. and de Laminne de Bex A.: Social Protection: An Ongoing process, 2010

<sup>&</sup>lt;sup>21</sup> National Institute of Statistics of Rwanda, Vision 2020 Umurenge Program (VUP), Baseline Survey – Final Report, December 2008

<sup>&</sup>lt;sup>22</sup>Republic of Rwanda, Economic Development and Poverty Reduction Strategy (2008-2012), September 2007

#### **General analysis**

Rwanda being the most densely populated country in Africa, VUP's components respond to the need for off-farm employment opportunities which is obviously important due to demographic pressures and the lack of land. The VUP program was expected to facilitate the redirection of social protection to the neediestpeople who are landless and unable to work(like PWDs) and to enable them to progress to appropriate productive activities.

The lead ministry for the Programis the Ministry of Local Government, Community Development and SocialAffairs (MINALOC). At the sector level, which is the primary implementation level, there are two Vision 2020 *Umurenge* Program staff in each sector: the Program Manager and the FinanceOfficer.

The Program was initially piloted in 30sectors (the poorest sector in each of the country's 30 Districts); it scaled up to anadditional 30 sectors in July  $2009^{23}$ . The Government intention was to continuescaling up to all 416 sectors of the country. By July 2014, 330 out of 416 sectors (almost 80%) were participating in the program<sup>24</sup>.

Households eligible to the VUP "public works" component (which provideswork on community infrastructure projects) are extremely poor (in the bottomtwo *Ubudehe* categories) who are "land-less" (less than 0.25 ha) but who have atleast one adult (18 years+) able to do manual labor<sup>25</sup>. VUP's most common type of "public works" is radical terraces making<sup>26</sup>. This is a very physically demanding work which is generally not suitable for weak people and PWDs. There has to be only one representative from each household per working day. The daily wage in public works was of 1,500 Frw in 2012 from 1,000 Frw it had started with.

In order to get paid from VUP, an account in the sector's Savings and Credit Cooperative (SACCO) is required. The fee to open an account is all together 8,000 Frw and it is rather high and almost equivalent to a six day's wage. This is a constraining factor which is not motivational

<sup>&</sup>lt;sup>23</sup>Hartwig R., UNU-WIDER Conference on Inclusive Growth in Africa: Public works as means to push for poverty reduction? Short-term welfare effects of Rwanda's Vision 2020 *Umurenge*Program, September 2013

<sup>&</sup>lt;sup>24</sup>National Institute of Statistics of Rwanda, 4<sup>th</sup>Integrated Household Living Conditions Survey, Social Protection and VUP Report, November 2015

<sup>&</sup>lt;sup>25</sup>Ruberangeyo T., Ayebare C. and de Laminne de Bex A.: Social Protection: An Ongoing process, 2010

<sup>&</sup>lt;sup>26</sup> Anna Berglund (Embassy of Sweden in Rwanda), A Local Perspective of The Vision 2020 *Umurenge* Program and the Land Tenure Regularization Program, October 2012

for vulnerable poor households who feel like they cannot "afford" to work for VUP. VUP's payments are generally late (10-45 days) which is very difficult for vulnerable households who depend on daily labor to be able to feed themselves.

Item	Amount (Frw)
Opening fee	4,000
Contribution to SACCO building	2,500
Withdrawal fee	500
Money that has to be left in the	1,000
account	
Total	8,000

Table 1: The fee of opening a SACCO account

The "public works" component seems to be excluding poor people for whom it was originally designed fornot only because of the high cost of opening a SACCO account but also because it requires a lot of strength and most very poor people don't eat enough to be strong and work hard and they therefore feel intimidated to go and work for VUP.Yet these people do not have any physical handicap, and do not qualify for VUP's "Direct Support". The component ends up benefiting better of households who have enough strength to work hard, can easily open accounts, can hire other poor people to work on their own land (for lower wage than VUP's), and can afford to wait for VUP's payment for two weeks or more.

Households eligible to the VUP "direct support" component are extremely poor households in the bottom two *Ubudehe* categories who are "landless" (less than 0.25ha) and whose members are unable towork because of age, disability or illnessand are without a household memberqualifying for public works. They are provided with unconditional cash transfersto improve their standards of living, access to essential social services such aseducation or health, and the ability ofhouseholds to save and invest. This component is more inclusive for PWDs provided they are in *Ubudehe* categories 1 and 2.

Payments under this component also rarely come on time (usually over a month late). Even if the value of the amount allocated to a household is supposed tobear a direct relationship to the

number of people in thehousehold, it is not always the case. The EICV4 reported that only 21% of the respondents received an amount that tallied with their household size.

In the "financial support" component loans are made to individuals, groups and cooperatives selected on the basis of businessproposals. This component complements the first two and it increases access by the poor to financial services infrastructure, encourages savings, and provides microcreditin order to tackle extreme poverty and to promote entrepreneurship, job creation and economic growth. The program allows a maximum of 30 persons per group and provides 75,000 Frw per person or 85,000 Frw if at least 70% of the group is female. This component is inclusive for PWDs regardless of the *Ubudehe* category but provided that in the group there are at least a household belonging to *Ubudehe* category 1 and 2.

Different studies and researches have conducted an evaluation of the VUP program. Evidence shows that not all eligible households are participating in the VUP program. The main reason of the poor coverage was thought to be the fact that not all sectors offer all three VUP components. There is also the fact thatthe "public works" component, where it is active, sometimes there is not sufficient work for everyone and this causesless participation of households. This component is not suitable for PWDs as proposed work is mostly physically demanding.

In addition to benefiting individual households, the VUP program benefits the community at large in the form of increased assets. However, facts indicate that households who have increased their standards of living owing to VUP depend on continuous work for VUP not to fall back in poverty. Therefore the program's effects seem to be short-lived especially for the "public works" component.

# Provisions of the Convention on the Rights of Persons with Disabilities and the Rwanda 2007 Law on protection of PWDs

In line with the proposed components of the Vision 2020 *Umurenge* Program (VUP), the CRPD highlights the following topics mentioned earlier:

• The right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions,

- The right of PWDs to social protection and to the enjoyment of that right without discrimination on the basis of disability,
- The right to access basic infrastructures such as clean water services, access to appropriate and affordable services, devices and other assistance for disability-related needs,
- Assurance to access by PWDs (especially women, girls and old persons) to social protection programs and poverty reduction programs.

#### Positive changes with regard to PWDs' rights as stipulated in the Convention

In the VUP program's baseline assessment, disability was considered as one of the developmental aspects to be used later in studying the effectiveness of the program. A number of types of disability was documented in the baseline assessment namely blindness, mute/deafness, arms disability, legs disability, mental disorders and traumatism.

Since these programs in social protection have started, persons with disabilities benefit more from the financial assistance provided by VUP's "direct support" component. Money received under this component is mainly used to buy food, clothes and to buy iron sheets to repair or expand their houses. On occasions the money is also used to buy items such as blankets and hoes and small livestock such as goats, pigs and chickens. All this contributes to improve leaving conditions for beneficiaries.

Persons with disabilities can also benefit from the "financial services" component which provides business loans to groups or individuals though participation is alsoconstrained by *Ubudehe* categories.

#### Gaps in VUP program towards persons with disabilities' rights

It is worthwhile to note that persons with disabilities not classified in *Ubudehe* categories 1 and 2 do not benefit from any financial assistance, though the social protection strategy recognizes that persons with disabilities need financial support.

Even for those receiving financial assistance, there are still gaps as far as disability-related needs are concerned.

There is still a gap concerning the inclusion of women, girls and old persons with disabilities in social protection programs in general and in VUP program in particular, yet this right is emphasized in CRPD.

#### Proposed corrective measures for VUP program to meet persons with disabilities' rights

To solve the gaps identified above, different corrective measures are suggested below:

- Persons with disabilities not classified in *Ubudehe* categories 1 and 2 do not benefit from any financial assistance: Persons with disabilities not in *Ubudehe* categories 1 and 2 shall also benefit from the Social protection strategy.
- Even for those receiving financial assistance, there are still gaps as far as disabilityrelated needs are concerned: To conduct a study on special needs of persons with disabilities in the society to facilitate further disabilityrelated planning.
- There is also gap concerning the inclusion of women, girls and old persons with disabilities in VUP program: Women, girls and old persons with disabilities shall have special attention in VUP program as emphasized in the CRPD

#### CONCLUSION

Rwanda has made someprogress insupporting the rights of persons with disabilities and ensuring that persons withdisabilities benefit from and contribute tonational development. The establishment of the former National Federation of Personswith Disabilities (Fédération Nationale despersonnes handicapées, FENAPH), which had representation from the central government up to the grass-roots level and later on, the current National Council of Persons with Disabilities has certainly helped in identifying and responding to some of the specific needs of PWDs.

It is also very important to note that Rwanda does not have specific programs for persons with disabilities; persons with disabilities have been mainstreamed into existing social protection programs and initiatives. This is very crucial as the concept of inclusion relies on the principle that there shall be inclusive programs instead of developing specific programs for persons with disabilities! However, a reflection shall be made on how to deal with extreme/severe cases of disabilities.

Under the Vision 2020 Umurenge Program, Persons with disabilitiesbenefit under the components of directsupport, public works or financial servicesdepending on the selection criteria andmany other schemes.

Another important initiative worthmentioning is the categorization persons with disabilities, which is in its final phase prior validation. It has been carried out to be able to know the actual number of persons with disabilities in Rwandabut most importantly to generate data forevidence-based planning. This has been done by the Ministry of Local Government through the National Council of Persons with Disabilities together with the Ministry of Health, which helped in categorizations that those for whom the law provides benefits can access them.

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### Appendix: ACTION PLAN WITH CORRECTIVE MEASURES

National Social Protection Policy			
Gap	Corrective measure	Sub activities	Stakeholders
PWDs are only considered in social protection when they belong to <i>Ubudehe</i> categories 1 and 2	Disability as crosscutting issue, there is a need to take into consideration the	Conduct consultative meeting with stakeholders to discuss on the challenge Conduct a comprehensive needs assessment	NUDOR, DPOs and NCPD
	type/category of disability, level of disability and, design appropriate assistance to each category of PWDs with less consideration of Ubudehe categories or merge the Ubudehe and PWDs categorizations.	for each category of disability Propose appropriate assistance to each category of PWDs taking into consideration the type and level of disability Advocate for the harmonization of Social protection policy and PWDs categorization	
Delay in classification of PWDs	To ensure the effectiveness of social protection initiatives towards PWDs, there is a need of accelerating the availability of PWDs' classification report as well as the distribution of the related PWDs' ID	<ul><li>Work with NCPD to follow up the availability of PWDs' classification report</li><li>Work with NCPD to follow up the distribution of PWDs' ID to all PWDs</li></ul>	NUDOR and NCPD
Lack of feasibility study on disability grant	As planned at the inception of the social protection strategy, there is a need to conduct feasibility study on disability grant to facilitate further disabilityrelated planning.	Consult NCPD on the progress to conduct feasibility study on disability grant to facilitate further disabilityrelated planning	NUDOR
A person with disability is considered alone, his/her family is not considered	A new approach of planning for persons with disabilities considering them and their families shall be introduced.	Conduct consultative meeting with stakeholders to share and discuss on the gap Conduct a comprehensive needs assessment for families of PWDs taking into consideration each category of disability Propose a solution / approach to consider families of PWDs in social protection	NUDOR, NCPD, DPOs and MINALOC

Gap concerning the inclusion of women, girls and old persons with disabilities in social protection programs in general	Women, girls and old persons with disabilities shall have special attention in the National Social Protection strategy as emphasized in the CRPD	Conduct consultative meeting with stakeholders to share and discuss on the gap Conduct a comprehensive needs assessment forwomen, girls and old persons with disabilities in Social protection	NUDOR, MIGEPROF, NCC and NCPD
	GIRINKA Prog		
Gap	Corrective measure	Sub activities Conduct consultative meeting with	Stakeholder
	To harmonize the program in relation with	stakeholders to share and discuss on the gap	
While Girinka program is	other social protection programs whenever the	Discuss with responsible parties on the issue	NUDOR,
inclusive for persons with	issue of vulnerability is raised (this will go	of vulnerability of PWDs and their rights	DPOs, NCPD,
disabilities, disability is	together with the consideration of persons	Discuss with responsible parties on the issue	LODA and
not per se a beneficiary criterion	with disabilities and their families in Girinka program as a vulnerable group like	of vulnerability of PWDs' families	MINALOC
cinterion	recognized by the Social protection strategy)	Propose way forward to harmonize Girinka program in relation with other social	
		protection programs in terms of vulnerability	
	Vision 2020 UMUREN		
Gap	Corrective measure	Sub activities	Stakeholder
		Conduct consultative meeting with	
PWDs not classified in	Persons with disabilities not in <i>Ubudehe</i>	stakeholders to share and discuss on the issue	NUDOR,
Ubudehe categories 1 and	categories 1 and 2 shall also benefit from the	Discuss with responsible parties on the issue	DPOs, NCPD,
2 do not benefit from any	Social protection strategy.	of vulnerability of PWDs and their rights	LODA and
financial assistance	Social protection strategy.	Advocate for the harmonization of Ubudehe	MINALOC
		categorization vis a vis PWDs categorization	
Even for those receiving	To conduct a study on special needs of	Conduct a comprehensive needs assessment	NUDOR,
financial assistance, there	persons with disabilities in the society to	for each category of disability	DPOs, NCPD
are still gaps as far as	facilitate further disability related planning.	Propose appropriate assistance to each	and LODA
disability-related needs are		category of PWDs taking into consideration	

concerned		the type and level of disability	
There is also gap concerning the inclusion	Women, girls and old persons with disabilities – shall have special attention in VUP program	Conduct consultative meeting with stakeholders to share and discuss on the gap	NUDOR, MIGEPROF,
of women, girls and old persons with disabilities in VUP program		Conduct a comprehensive needs assessment forwomen, girls and old persons with disabilities in Social protection	NCC and NCPD