

Submission to the International Disability Equity and Rights Strategy

The Australian Council for International Development (ACFID) welcomes the opportunity to provide this submission to the Department of Foreign Affairs and Trade as part of its consultation process on the International Disability Equity and Rights Strategy.

Executive Summary

People with disabilities make up the largest minority group in our region and the world. In our region, around 700 million people live with a disability.¹

Due to barriers that people with disabilities experience, embedded inequality and lack of equal rights, this group of people are more likely to live in poverty than persons without disabilities.² They are more likely to be negatively impacted by climate change and to be injured or killed during a disaster.³

Women and girls and people of diverse sexual orientation with disabilities are more likely to experience sexual or physical violence than those without disabilities.⁴ Children living with disabilities face higher barriers to accessing education and healthcare than children without disabilities.⁵

Achieving equity for people with disabilities across the Indo-Pacific has been a slow but forward moving effort by local organisations, OPDs, states, regional bodies and disability rights advocates. While gains have been made, the effects of COVID-19 have amplified and entrenched long-standing inequalities experienced by people with disabilities. As we move beyond the halfway point towards the Sustainable Development Goals' 2030 Agenda, people with disabilities are the group left furthest behind.

Despite its previous recognition as a global leader in this area Australia's progress on disability equity in international development has become constrained by stagnant funding, stalled strategic direction and gaps in implementation. To restore its role as a global leader and drive the meaningful action required to achieve disability equity, the strategy must be adequately resourced and set targets and mandatory requirements for Australian development actors.

In setting out a vision to achieve disability equity, ACFID recommends to DFAT the framework set out in the Australian Disability and Development Consortium that disability equity is understood and advanced through the four interconnected dimensions of 'access, processes, quality and outcomes.'

¹ United Nations Economic and Social Commission for Asia and the Pacific, 2022, "A three-decade journey towards inclusion: assessing the state of disability-inclusive development in Asia and the Pacific"

² 2. Humanity & Inclusion, 2018, "Disability and Climate Change: How climate-related hazards increase vulnerabilities among the most at risk populations and the necessary convergence of inclusive disaster risk reduction and climate change adaptation"

³ [The Great East Japan Earthquake and Persons with Disabilities Affected by the Earthquake - Why Is the Mortality Rate so High? - \(dinf.ne.jp\)](#)

⁴ UN Women, [Facts and figures: Women and girls with disabilities](#)

⁵ CBM Australia, [Supporting Children with Disabilities in the Philippines](#), 2023. Adunga, M.B., Nabbouh, F., Shehata, S. et al. Barriers and facilitators to healthcare access for children with disabilities in low- and middle-income sub-Saharan African countries: a scoping review. BMC Health Serv REs 20, 15(2020). <https://doi.org/10.1186/s12913-019-4822-6>.

SUMMARY OF RECOMMENDATIONS

In the development of this submission, ACFID has engaged with our membership of 130 international development and humanitarian NGOs, the Australian Disability and Development Consortium and the wider international development sector. ACFID highlights the following as overarching recommendations of this submission:

1. **Recommendation 1:** That IDEARS is ambitious and sets a 2030 target of 10 per cent of ODA being allocated to initiatives with disability equity as a principal objective, according to the OECD Development Assistance Committee Disability policy marker.
2. **Recommendation 2:** That IDEARS is accountable by requiring that all in-country programs over \$3m have a disability objective, and that 80 per cent of programs effectively address disability equity.
3. **Recommendation 3:** That IDEARS is resourced through increasing the central disability allocation to \$20m per annum with annual increases thereafter in line with overall budget increases.

Set out below are the recommendations put forward by the Australian Disability and Development Consortium. ACFID endorses these recommendations in full, along with the recommendations provided by CBM Australia which provide further detail on the below.

Recommendation 1

The purpose of the forthcoming International Disability Equity and Rights Strategy ('the Strategy') must be to achieve disability equity. The Strategy must commit to achieving disability equity through following the leadership and expertise of people with disabilities to transform relationships of power and reduce and remove marginalisation and discrimination based on disability and its intersection with the various identities within the community.

Access

Recommendation 2

Commit to adopting preconditions for inclusion as a specific outcome of the Strategy as well as the lens through which to determine the sectors best placed to build the preconditions in specific contexts and which to prioritise for investment. Including in:

- a. **Partnering with OPDs and under-represented groups of people with disabilities** in the development and delivery of Development Partnership Plans and Strategic Partnership Frameworks.
- b. Ensuring that funding in the core sector groups, including gender, climate, education, health, governance and humanitarian, **has both mainstreamed disability equity investment and allocation for specific contribution** to addressing the empowerment and preconditions for inclusion of people with disabilities.
- c. **Supporting partner governments to develop disability inclusive and disability specific economic and social protection schemes** to support the participation and inclusion of people with disabilities, and which cover the extra costs incurred by people with disabilities because of inaccessible environments and services.

Recommendation 3

Increasing visibility of and resourcing for disability equity across all development investments by **ensuring that accessibility and reasonable accommodations are resourced** in all investments in order that people with disabilities and their representative organisations can fully participate and lead in design, delivery, monitoring and evaluation. Specifically:

- a. Ensure that **accessibility provision** – such as ensuring venues are accessible and information is available in accessible formats – are factored into core program budgets.
- b. All investments **allocate a minimum of 5 per cent of the total budget** to support reasonable accommodations for consultation and design processes.
- c. **Consultation and design outcomes include specific reporting** on accessibility and reasonable accommodation requirements for implementation and monitoring and evaluation, with associated delivery budget provision.
- d. **Recognise that for disability specific programs** and where there is a larger cohort of people with disabilities as participants, the reasonable accommodation costs may increase significantly from this minimum level, potentially 50 per cent of the project budget.
- e. **Track and report information on budget expenditure** on reasonable accommodation in order to contribute to continuous improvement and adequate resourcing.

Recommendation 4

Access to assistive technologies is a necessary precondition for disability equity that is preserved as a right in Article 20 of the *Convention on the Rights of Persons with Disabilities*. Australia should commit to investing in increasing access to assistive technologies and support services that facilitate active and meaningful participation of people with disabilities. This includes:

- a. Working with partners to **establish a Pacific regional procurement facility** for quality and affordable assistive technologies by 2025.
- b. Provision of direct funding to partner governments, regional bodies or specialist agencies to ensure the **initial training and ongoing professional development of specialist prosthetics and orthotics** personnel in low-income settings.
- c. Providing funding for **regular training of multi-disciplinary personnel** within local systems in the procurement, maintenance, care and disposal of assistive technologies, recognising that a life-cycle approach to managing assistive technologies is important.
- d. **Funding pilots and scale ups** of effective, contextualised rights-based support services, including human supports such as sign language interpreters, sighted guides, tactile interpreters, and personal assistance.
- e. Commit to supporting a **regional rehabilitation and assistive technology association** to facilitate the sharing of resources and building of an evidence-base for future investment.

Recommendation 5

Commit to **non-discrimination and accessibility as non-negotiable requirements of all procurement investments and processes**, to ensure Australia's investment in accessible public infrastructure includes rather than further exacerbates systemic exclusion of people with

disabilities. This includes public infrastructure such as roads and transport, information and communication infrastructure, education, justice and health facilities and evacuation centres.

Processes

Recommendation 6

Commit to **partnering and supporting Organisations of People with Disabilities (OPDs) to grow stronger**, to become more able to pursue their priorities, to advocate and fulfil their duties as civil society organisations with the mandate to keep their governments to account and have greater influence in Australia's International Development program. Achieved through:

- a. **Prioritised engagement with and support to OPDs** throughout the International Development program, via the central disability allocation, in bilateral portfolios and through individual investments.
- b. Increased investment to provide **predictable multi-year core budget support and capacity development** for OPDs in the region, including increasing investment support to OPDs in Southeast Asia.
- c. Commitment to **supporting the diversification of the movement** through providing intentional, multi-year funding for under-represented and under-resourced groups to establish themselves and represent their constituencies.
- d. A significant investment to scope and **support the establishment of representation where none currently exists** – including across geographies, types of disability and aspect of inclusion and equity being focused on.
- e. **Systematically investing in leadership development** and peer collaboration and learning across the Indo-Pacific disability movement so the next generation of leaders have been supported to develop their skills and capacity and to connect with each other. Achieved through a comprehensive approach to leadership development, spearheaded by the Indo-Pacific Disability Equity Leadership Program.

Recommendation 7

Commit to the **use of an age lens in the design and implementation of new investments to ensure that people with disabilities across the life cycle, in their diversity, are effectively reached with a focus on older people and youth**. There is a pressing need to ensure equity of access to disability-related programs and initiatives for older people, particularly older women with disabilities. Evidence shows that programs, expenditures, and goals for people with disabilities differ substantially across age groups in ways that suggest ageism. It is also estimated that about two-thirds of the global population aged 60 years or older need assistive products and this need is currently not being met. In addition, close to 90 per cent of the world's youth (10-24 years of age) live in low-income countries, where they make up the largest proportion of the population. Youth with disabilities are among the most marginalized and poorest of the world's youth population and are more likely to face severe social, economic, and civic disparities as compared with those without disabilities. To address this through a life-cycle approach, Australia needs to:

- a. Undertake **analysis to determine if and how** Australia's international development investments are **inclusive of younger and older people with disabilities**.
- b. **Ensure data is collected and reported across all international development investments with age disaggregation within the older age category at a minimum of 10-year age brackets**. This information is essential for programs to effectively be designed and delivered to reach older people with disabilities in all their diversity.
- c. **Analyse if and how the development programme as a whole is reducing and eliminating intersecting forms of discrimination that people with disabilities may face including ableism, ageism and sexism**. Available research shows that ageism can intersect with ableism and sexism, meaning that older people with disabilities can face multiple and intersecting forms of discrimination, compounding the disadvantages, particularly for older women with disabilities.
- d. **Require Australian implementing partners to report age disaggregated data following DFAT's GEDSI Good Practise Note** and to report on how they are reaching younger and older populations.

Recommendation 8

DFAT to **establish a new set of standards of practise responding to the call from OPDs** to ensure all DFAT and Australia's development partners consistently operate to build disability equity and strive for good practice in both policy and program development and delivery. This can be built off the learnings from the inclusive and accessible process DFAT has utilised to develop this strategy, developed with diverse representatives of the disability movement as well as based on current research, including the *Feminist Accessibility Protocol* and *Planning for Equity*.

Recommendation 9

Australia commits to being an **international champion for disability equity and rights**, harnessing our national strengths and working in authentic partnership with the disability movement. Australia can utilise its convening power by supporting people with disabilities to inform agendas and exercise their leadership in regional and global forums and by harnessing opportunities to put disability equity on the table as part of all international fora.

Outcomes

Recommendation 10

Commit **ongoing support to the Pacific Regional Mechanism** beyond the co-design phase, to accelerate the implementation of the *Pacific Framework for the Rights of Persons with Disabilities 2016-2025*, including:

- a. Committing **\$40 million over four years to the Pacific Regional Mechanism commencing 2024-2025**.
- b. **Actively engaging with likeminded donors** to provide support through the Mechanism.

Recommendation 11

Adequately **resource the key role DFAT's central disability allocation** plays in building and strengthening the disability movement and driving DFAT's capability to deliver on the Strategy, by increasing the allocation to \$20 million per annum in the 2024-2025 Federal Budget with annual increases thereafter in line with overall budget increases. This increased funding would enable:

- a. Increased investment in providing **predictable multi-year core budget support and capacity development for OPDs in the region**, including increasing investment support to OPDs in Southeast Asia and the ASEAN Disability Forum.
- b. Systematic **investment in leadership and capacity development** across the Indo-Pacific disability movement, including for women with disabilities and marginalised groups such as people with psychosocial and cognitive disabilities, and those who are deafblind. This support would help under-represented groups to amplification their priorities.

Recommendations 12

Women and girls with disabilities and people of diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC) with disabilities are exposed to gender-based violence at a greater rate than the rest of the population. In this strategy, Australia needs to:

- a. **Commit to both investments specifically addressing the increased rates of violence women and girls with disabilities and people of diverse SOGIESC with disabilities experience**, as well as commit to increase funding for the inclusion of women with disabilities and people of diverse SOGIESC with disabilities in all programs to combat gender-based violence.
- b. Commit to removing the barriers to and **increasing access to disability inclusive sexual and reproductive health and rights** on an equal basis with others.

Recommendation 13

People with disabilities are the largest and most complex group at risk of climate change impacts and are up to four times more likely to die or be injured during a disaster event. As such, Australia needs to ensure that climate change policies, plans and strategies recognise that the impacts of climate change and disasters are exacerbated for people with intersecting identities, particularly gender, age and disability. As such, commit to:

- a. **Analysis of the impact of climate change** on people with disabilities including those with intersecting forms of marginalisation.
- b. Implementation **measures that specifically target people with disabilities**.
- c. The **involvement** of people with disabilities in the design, implementation, monitoring and evaluation of climate interventions.
- d. The ability to **monitor implementation** toward disability inclusive climate action in performance assessment.

Championing climate financing to be inclusive of a range of civil society organisations, with a particular stream for OPDs.

Ensuring that all Australian climate finance, inclusive of ODA and other forms of finance adhere to the standards, commitments and requirements contained in the Strategy.

Quality

Recommendation 14

Develop, resource and report publicly the measures to systematically address disability equity across the development program. This would include:

- a. **Setting a 2030 target of 10 per cent of ODA** being allocated to initiatives with disability equity as a principal objective, according to the OECD Development Assistance Committee Disability policy marker.
- b. Establishing a requirement **that all new investments over \$3 million have a disability equity objective**, in line with existing requirements for two other core areas of action of the Australian International Development program, namely climate change and gender equality.
- c. **Establishing an ambitious target that 80 per cent of investments effectively address disability equity.**

Recommendation 15

Support the **implementation of the Convention on the Rights of Persons with Disabilities (CRPD)** across the region and globally through a lens of preconditions for inclusion to identify with OPDs and partner governments specific areas for investment, including:

- a. Supporting partner government **CRPD compliant legislative reforms and subsequent structural changes.**
- b. **Advocating for partner governments to allocate core budgets** from each department towards disability equity and support their efforts towards CRPD compliant budgeting and financial management.
- c. **Investing in a program of research and evidence building** regarding disability equity and development, funding critical new research, and exploring and systematically sharing what is working well and not. This would sit well within the remit of the proposed new Disability Equity Effectiveness and Performance team in recommendation 15f below.

Recommendation 16

Commit to a timeline to re-establish expertise and increase applicable understanding of disability equity and rights across DFAT through:

- a. Establishing **specialist technical teams** on Disability Equity and Rights in both the South-East Asia Office and the Office of the Pacific and ensuring that **Disability focal points in Posts** have capacity identified for this role within position descriptions.
- b. Developing and promoting resources to support staff and delivery partners to embed the Strategy in action, including **annual mandatory training** for DFAT and delivery partners.
- c. Developing and implementing a plan to drive up quality of program reporting on disability equity and against **the OECD-DAC disability marker**.
- d. **Establishing an external Disability Equity and Rights Reference Group** as a 'brains trust' to support implementation of the new strategy. This diverse group of disability movement representatives could help keep DFAT to account on strategy outcomes, be a resource to explore solutions to current and emerging challenges, keep DFAT abreast of current trends and shifts in the landscape and support DFAT's internal and external advocacy efforts. This group could play a similar role in support of all new strategies.

Support for organisations of people with disabilities (OPDs)

Development and humanitarian responses are most impactful when they are built on genuine partnerships, mutual trust and designed and led by local actors and organizations who have access to funding that is both long-term and flexible. This includes OPDs and other civil society organizations representing persons with disabilities (including those with more invisible impairments), as they are leaders within their communities and are best placed to understand and respond to the diversity of people's needs. As part of DFAT's new localisation agenda, targeted resourcing to partner organizations for OPD capacity strengthening is critical to supporting and elevating the work in this space, as per **ADDC's Recommendation 6**. This also requires the meaningful participation and representation of people with disabilities and their representative organisations throughout the Development Partnership Plan (DPP) process and beyond, ensuring their voices are heard and accounted for.

In the face of climate change and climate related disasters, people with disabilities throughout Australia's region are going to be disproportionately impacted, experiencing reduced access to emergency support, exacerbation of inequalities and vulnerabilities and higher rates of morbidity and mortality.⁶ OPD's will play a core role in leading anticipatory action and disaster risk reduction processes so it is essential that they are meaningfully included in the planning, design and decision making for climate action and preparedness programs. This also extends to OPDs engagement in migration and displacement in protracted crises contexts.

On the pathway towards achieving disability inclusion and equity there needs to be increased coherence, cohesion and collaboration among OPDs, as well as between OPDs and governments, NGOs and private sector entities. Australia could consider a tool to help facilitate partnerships, networking and information, such as a comprehensive, user-friendly database of OPDs and their Australian partners that includes contact information, areas of expertise and the types of services or support each OPD provides. Additionally, national level disability data collection, that is participatory and citizen-led, is essential in the development of evidence-based policies, monitoring of implemented programs and tracking progress towards national targets.⁷ The promotion and support of employment opportunities for people living with disabilities within DFAT and affiliated organizations should be promoted. This would set a leading example for inclusive employment practices, ultimately leading to more effective work and outcomes.

Disability equity across the lifespan

We welcome DFAT's commitment to an intersectional approach to inclusion and equity, as outlined in the GEDSI Analysis Good Practice Note. This should be strongly reinforced by the Disability Equity and Rights Strategy, by stating Australia's commitment to a transformative and intersectional approach to disability inclusion which challenges dominant narratives and paradigms that currently exclude marginalised people and impede the fulfillment of their rights. This requires addressing the root causes of inequity, such as social norms and attitudes, and recognising that disability interacts with other social identities (such as gender, age, indigeneity, ethnicity etc) to shape a diversity of experiences for people with disabilities.

⁶ [The impact of climate change on the rights of persons with disabilities | OHCHR](#)

⁷ [Strengthening the collection of data on disability \(who.int\)](#)

An intersectional approach to disability inclusion requires a focus on the unique challenges people face at each stage of their life, including as children, adolescents and in old age. Evidence shows that early intervention in providing children with disabilities with holistic support and inclusive educational opportunities make them more likely to become healthy and productive adults.⁸ This necessitates adequate funding for multi-sector programs, including strengthening functioning systems for early identification of impairments, health and rehabilitation services and addressing harmful social norms and attitudes that may prevent families from accessing health, education and other basic services. This could be supported by strengthening the capacities of OPD's on child rights, child safeguarding and child and youth participation and voice.

With a rapidly ageing population across the Indo-Pacific region, there is a pressing need to increase the focus on addressing the health needs and care burdens of older people with disabilities. For those aged 60 years and over, 46% have disabilities and more than 250 million older people experience moderate to severe disability.⁹ As persons with disabilities and older people are likely to experience similar barriers to accessing adequate care, bear the same health inequities and face multiple and intersecting forms of discrimination, including issues such as social isolation and abuse, there is opportunity that addressing one agenda (healthy ageing or disability equity) can significantly support the other. DFAT should ensure that its support for disability inclusion and equity reaches people across the lifespan. Dedicated planning and resourcing may be required to adapt programs to meet the needs of children and young people, as well as older people living with disabilities.

Gender-based violence and disability equity

As mentioned in ACFID's submission on the new International Gender Equality Strategy, women with disabilities are two to three times more likely to experience physical or sexual violence than women without a disability.¹⁰ They are also less likely to disclose incidences of sexual violence and domestic abuse. In particular, older women with disabilities are more likely to experience multiple and compounding forms of discrimination, including increased incidences of abuse, with one in six older women experiencing abuse globally.¹¹ This clearly highlights the urgent need for greater focus to both prevent and respond to gender-based violence, with particular support provided for women with disabilities.

Assistive Technology and accessible infrastructure

Many people with disabilities will utilise assistive technology (AT) at some stage in their life, to include glasses, hearing aids, walking aids, wheelchairs, prostheses, orthoses and products to support memory or communication. With 31% of the global population needing AT and with this need rapidly growing due to the Indo-Pacific's ageing population, accessibility is an important pre-condition to achieving equal opportunities, human rights and dignified living.¹² Australia should

⁸ WHO & UNICEF (2012), Early Childhood Development and Disability: A discussion paper

⁹ UN Department of Economic and Social Affairs, Ageing and Disability:

<https://www.un.org/development/desa/disabilities/disability-and-ageing.html#:~:text=Currently%2C%20it%20is%20estimated%20that,experience%20moderate%20to%20severe%20disability.>

¹⁰ UK Department for International Development, 2000. Disability, Poverty and Development. DFID, London.p. 3.

¹¹ WHO, Global Report on Ageism (2021), <https://www.who.int/publications/i/item/9789240016866>

¹² WHO/UNICEF, Global Report on Assistive Technology, (2022), <https://www.unicef.org/reports/global-report-assistive-technology>

consider implementing and strengthening policies and programs that improve access to assistive technology as a move towards universal health coverage. One example is the implementation of the World Health Assembly recommendations together with those of the Assistive Technology Procurement Study Report (2020) which explores existing challenges with and strategies to strengthen the procurement of AT with the aim of increasing access for people throughout the Pacific.¹³

Australia also has the opportunity to be a global leader in efforts to promote universal design in public infrastructure which centres the needs of a diverse range of user groups. This requires both technical and financial support as well as policies that mandate universal design.

¹³ WHO/WPRO, Assistive technology procurement study: technical report, 2020, <https://www.who.int/publications/i/item/9789290619178>