

[Cover Page for “Nothing Without Us: USAID Disability Policy”]

Table of Contents

Key Terms	3
Executive Summary	4
Introduction	5
Background - Disability and human diversity: Framing disability in USAID's work	8
Vision, Goal, and Objectives	11
Principles	12
Data, Learning, and Evidence	13
Policy Into Practice - Operationalizing Disability Inclusion at USAID	15
Engagement and Communications:	15
Foundations for Operational Success:	16
Living Our Values:	18
Conclusion	19
Bibliography/Endnotes	20
ANNEX - Persons with Disabilities in USAID Programs	21
Agriculture and Food Security	22
Climate	23
Democracy, Human Rights, and Governance	24
Digital Access and Technology	25
Economic Growth and Trade	26
Education	27
Environment, Energy and Infrastructure	28
Gender Equality and Women's Empowerment	29
Global Health	30
Humanitarian Assistance	31
Nutrition	32
Peace and Security	33
Water Security, Sanitation, and Hygiene	34

Key Terms

- *Ableism* - discriminatory and stigmatizing social norms that devalue persons with disabilities relative to non-disabled persons,¹ and are rooted in beliefs that typical abilities are superior and that persons with disabilities need to be changed to fit a social ideal of what is ‘normal’ or ‘typical,’ rather than being respected as a natural part of human diversity.
- *Agency*² - the ability of individuals to be self-motivated and self-directed in their actions, rather than being subject to the constraints, pressures, or influence of others.
- *Assistive technology* - an umbrella term covering the systems and services related to the delivery of assistive products and services—including wheelchairs, eyeglasses, hearing aids, prosthetics, and more—which enable people to live health, productive, independent, and dignified lives, and to participate in education, the labor market, and civic life.
- *Disabled Persons’ Organizations (DPOs)* - also known as Organizations of Persons with Disabilities (OPDs), DPOs/OPDs are civil society organizations run by and for persons with disabilities. Such representative organizations are distinguishable in their staffing and governance structures from organizations that may focus on disability but may not be majority controlled by persons with disabilities. Both types of organizations, as well as organizations of family members and allies of persons with disabilities, have important roles to play in supporting the full enjoyment of human rights by persons with disabilities on an equitable basis with others, but DPOs/OPDs occupy a unique role in representing the primacy of voice of persons with disabilities themselves.
- *Intersectionality* - the complex, cumulative way in which the effects of multiple forms of discrimination (such as racism, sexism, classism, ableism, ageism, heterosexism, etc.) combine, overlap, or intersect, especially in the experiences of marginalized or underrepresented individuals or groups. An intersectional approach recognizes that many elements of a person’s identity can impact how they experience the world. In combination with systems of inequality, these intersecting identities can lead to varying degrees of power and privilege that, in turn, create unique power dynamics, effects, and perspectives impacting individuals’ place in society, experience of, and potentially access to development interventions. Further, an intersectional approach advances efforts to address the specific inequalities faced by women and girls, as they make up approximately half of the population in any given country.
- *Marginalized and/or underrepresented groups* - groups that are disproportionately excluded from opportunities and systems (e.g., employment, political representation, education, basic services), often due to structural and societal obstacles and historical marginalization. Such groups may include, but are certainly not limited to, women; youth; children in adversity and their families; older persons; persons with disabilities; LGBTQI+³ people; displaced persons; migrants; Indigenous Peoples and communities; non-dominant religious, racial, and ethnic groups; people of castes traditionally considered lower; people of lower socioeconomic status; and people with unmet mental health needs.

¹ Throughout this policy “persons with disabilities” is used, consistent with internationally accepted terminology reflected in the Convention on the Rights of Persons with Disabilities and other instruments. The term “non-disabled persons” is used herein to refer to those individuals who have not, per the Social Model of disability (discussed below in the Background section), been disabled by societal barriers.

² This definition applies to references in this policy to “agency” of individuals, and not those references to “Agency” that refer to the United States “Agency” for International Development.

³ LGBTQI+: An acronym that stands for lesbian, gay, bisexual, transgender, queer, and intersex. The “+” represents other sexual orientations, gender identities, and gender expressions that do not fit within the “LGBTQI” identity labels.

- *Reasonable accommodations*⁴ - necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms.
- *Universal design* - means the design of products, environments, programs and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. “Universal design” does not exclude provision of assistive devices for particular groups of persons with disabilities where this is needed.

Executive Summary

There are more than 1.3 billion persons with disabilities globally or approximately 16 percent of the global population, with nearly 80 percent of persons with disabilities living in low- and middle-income countries (LMICs), and 240 million children with disabilities worldwide. In 1997, USAID became one of the first bilateral development agencies in the world to adopt a policy on disability to guide the Agency’s efforts toward disability inclusion. This 2023 “Nothing Without Us: USAID Disability Policy” responds to stakeholder feedback and updates promising practices, places USAID’s work within the current global context, and situates USAID to fulfill its long-standing commitment to nondiscrimination and inclusion of persons with disabilities in society on an equitable basis with others. The policy also positions USAID to partner with persons with disabilities in meeting the myriad challenges and opportunities of the 21st century.

The **goal** of this policy is to advance empowerment and elevate the lives of the world’s more than one billion persons with disabilities by ensuring that USAID and implementing partners recognize, respect, value, meaningfully engage, include, and are intentional in ensuring that persons with disabilities and their representative organizations benefit equitably from our work as equal partners. Intentional and meaningful inclusion of persons with disabilities across all areas of USAID’s work is key to ensuring that countries can meet their development goals and potential. Moreover, meaningful and intentional disability-inclusion is fundamental to ensuring that development and humanitarian assistance is both effective and cost-effective.

To achieve the objectives of this policy, USAID will uphold the following seven **operating principles**:

- Accessibility
- Accountability
- Anti-ableism
- Do no (more) harm
- Gender equality
- Nondiscrimination
- Nothing Without Us

⁴ In light of the international context in which USAID undertakes its programming, this definition of reasonable accommodations is drawn from Article 2 of the Convention on the Rights of Persons with Disabilities, which is more familiar to the stakeholders with whom we work than comparable definitions from U.S. legislation. However, the use of this definition is not intended to preclude application of U.S. legislative definitions where controlling, e.g. in the context of providing reasonable accommodations to USAID employees with disabilities.

In order to achieve the vision, goal, and objectives of this policy, the following have been identified as key approaches and opportunities to promote effective implementation, and to support a systematic change management approach to furthering USAID’s disability-inclusion work:

- Engagement and Communications:
 - A Disability-Inclusive Approach to Localization
 - Partnering for Success
 - Communications
- Foundations for Operational Success:
 - Twin-Track Approach
 - Budgeting for Success
 - Leveraging Principles of Universal Design
 - Approaching Our Work Across the Life Course
 - Systems Strengthening
 - Inclusive Acquisition and Assistance
- Living Our Values:
 - Supported and Representative Staffing
 - Leading Through Development Diplomacy: Advancing Progress Beyond Programs
 - Being in “Better” Mode

Recognizing that all of USAID’s programming and interventions are relevant to persons with disabilities, an Annex to the policy provides a brief overview of the situation of persons with disabilities, as well as non-exhaustive examples of promising approaches for disability-inclusive programming across the broad range of sectors of USAID’s work.

Introduction

In 1997, USAID became one of the first bilateral development agencies in the world to adopt a policy on disability to guide the Agency’s efforts toward disability inclusion. Since that time, understanding of the global situation of persons with disabilities has deepened, persons with disabilities have forged a truly international cross-disability advocacy movement, and the policy environment in which USAID operates has expanded to include both the first international human rights treaty focused on the rights of persons with disabilities, and a global development agenda that explicitly includes persons with disabilities. The 2023 “Nothing Without Us: USAID Disability Policy” places USAID’s work within this new global context; situates USAID to fulfill its long-standing commitment to nondiscrimination and inclusion of persons with disabilities in society on an equitable basis with others; informs the development of technical guidance documents specific to USAID’s programming and assistance interventions; and positions USAID to partner with persons with disabilities in meeting the challenges and opportunities of the twenty-first century.

There are more than 1.3 billion persons with disabilities globally or approximately 16 percent of the global population,⁵ with nearly 80 percent of persons with disabilities living in low- and middle-income

⁵ WHO. “[Global report on health equity for persons with disabilities.](#)” 2022.

countries (LMICs),⁶ and nearly 240 million children with disabilities worldwide.⁷ Disability discrimination can lead to persons with disabilities being denied access to all areas of life on an equitable basis with others, including education, employment and economic empowerment, transportation, health care, sports and recreation, religion, culture, justice, and participation in political and public life.

Although there is a continued need for improved data collection with respect to persons with disabilities, the data already available paint a vivid picture of the types and impacts of pervasive stigma and discrimination experienced by persons with disabilities. For example, some persons with disabilities die up to 20 years earlier than non-disabled persons due to inequitable access to health care systems and services by persons with disabilities.⁸ Only one in three persons with disabilities is employed, on average, and they are two times less likely to be employed than non-disabled persons.⁹ Compared to non-disabled children, children with disabilities are 49 percent more likely to have never attended school, 47 percent more likely to be out of primary school, 33 percent more likely to be out of lower-secondary school, and 27 percent more likely to be out of upper secondary school.¹⁰ Children with disabilities are also 2-3 times more likely to be malnourished, and twice as likely to die from malnutrition as their non-disabled peers.¹¹ Exposure to violence—including gender-based violence (GBV)—is higher for persons with disabilities than their non-disabled peers.¹² The disproportionately high levels of poverty, exposure to violence, lack of access to services, and underrepresentation in political and public life are particularly acute¹³ for the estimated 700 million women and girls with disabilities globally.¹⁴ LGBTQI+ persons with disabilities face multiple, intersecting layers of discrimination and stigma, and barriers to societal inclusion. In the absence of community support, LGBTQI+ persons with disabilities may have to rely heavily on their families for support, but may find that their sexuality is often considered taboo.¹⁵

None of these disparate outcomes for persons with disabilities should be considered inevitable. Intentional and meaningful inclusion of persons with disabilities across all areas of USAID’s work is key to ensuring that countries can meet their development goals and potential. Disability-inclusive development and humanitarian assistance is *more effective* development and humanitarian assistance by supporting peaceful and prosperous societies in which persons with disabilities enjoy the rights, agency, access, influence, and opportunities to pursue their life goals on an equitable basis with others. Disability-inclusion is also *more cost-effective*. When, for example, accessibility features are incorporated into new construction, they typically account for less than 1 percent of the overall cost of construction, as compared to much higher costs associated with retrofitting.¹⁶

⁶ UN. [“Factsheet on Persons with Disabilities.”](#)

⁷ UNICEF. [“Press Release - Nearly 240 million children with disabilities around the world, UNICEF’s most comprehensive statistical analysis finds.”](#) 2021.

⁸ WHO. [“Global report on health equity for persons with disabilities.”](#) 2022.

⁹ ILO. [“International Day of Persons with Disabilities: How disability affects labor market outcomes.”](#) 2021.

¹⁰ UNICEF. [“Press Release - Nearly 240 million children with disabilities around the world, UNICEF’s most comprehensive statistical analysis finds.”](#) 2021.

¹¹ The Missing Billion Initiative & The Clinton Health Access Initiative. [“Reimagining Health Systems that Expect, Accept and Connect 1 Billion People with Disabilities.”](#) 2022.

¹² UNFPA. [“Young Persons with Disabilities: Global study on ending gender-based violence, and realising sexual and reproductive health and rights.”](#) 2018.

¹³ UNDESA. [“Disability and Development Report.: Realizing the Sustainable Development Goals by, for and with persons with disabilities.”](#) 2018.

¹⁴ OHCHR. [“Statement by Nada Al-Hashif, UN Deputy High Commissioner for Human Rights at the Human Rights Council 47th session, annual full day discussion on the human rights of women.”](#) 2020.

¹⁵ USAID. [“LGBTQI+ Inclusive Development Policy.”](#) 2023.

¹⁶ ADA Network Top ADA Frequently Asked Questions.

USAID's approach to disability inclusion is grounded in and informed by key legal and policy frameworks, including:

- **Convention on the Rights of Persons with Disabilities (CRPD)** - adopted in 2006 and establishing definitively that disability rights are human rights, the CRPD situates existing human rights within the disability context, ending what has been referred to as the previous “invisibility” of persons with disabilities within the international human rights architecture. As the treaty approaches near universal ratification, it is important to note that all but a small and diminishing handful of countries in which USAID works are parties to the CRPD.¹⁷ Amongst those state parties, the CRPD is catalyzing adoption of national legislation and policies to respect, protect, and fulfill the human rights of persons with disabilities. It is therefore important that USAID's interventions complement and support conditions consistent with effective implementation of the CRPD by those countries with whom USAID works that are state parties to the treaty. In that respect, the CRPD is also a key reference in adopting a rights-based approach to USAID's work that is inclusive of persons with disabilities.
- **Sustainable Development Goals (SDGs)** - the 17 goals and 169 associated development targets for eradicating poverty to be achieved by the international community by 2030, build upon and go beyond the previous Millennium Development Goals (MDGs). Perhaps most significantly, and unlike the MDGs, the SDGs explicitly reference persons with disabilities, including with respect to goals 4, 8, 10, 11, and 17, which cover such important issues as education; employment; reducing inequality; making cities and human settlements inclusive, safe, resilient and sustainable; and strengthening data, monitoring, and accountability. Implementation of the SDGs are animated by the three principles of: human rights-based approach; leave no one behind; and gender equality and women's empowerment.
- **United States legislation** - as one of the first countries in the world to adopt legislation comprehensively prohibiting discrimination on the basis of disability through the 1990 Americans with Disabilities Act (ADA, later updated by the Americans with Disabilities Act Amendments Act of 2008), the United States has a robust and extensive framework of Federal civil rights laws and regulations that provide equal opportunity protections for persons with disabilities. USAID seeks to comply with its legal obligations pursuant to those laws (e.g. laws addressing equal employment opportunity for persons with disabilities, provision of reasonable accommodations, accessibility of electronic and information technology, etc.), and also incorporates relevant U.S. legal standards into USAID policies as appropriate (e.g. prohibiting discrimination consistent with the 1973 Rehabilitation Act, extending the principles of the Americans with Disabilities Act (ADA) and the 1968 Architectural Barriers Act (ABA) to USAID-financed assistance for new or renovation construction). Furthermore—and mindful of the need to respect local contexts and approaches—U.S. laws and regulations protecting the rights of persons with disabilities can offer helpful principles and methods to inform rights-based programmatic approaches to USAID's work with respect to persons with disabilities.
- **USAID policies and strategies** - the Disability Policy informs and is informed by the [State Department and USAID Joint Strategic Plan](#) and [USAID Policy Framework](#) (both of which reference persons with disabilities as among the marginalized groups to include and support in our work to advance equity), and numerous USAID policies and strategies, including but not limited to those addressing marginalized and underrepresented groups across the life course.¹⁸ These policies and strategies address technical, operational, and communication aspects of programming, and embody USAID's commitment to nondiscrimination, and inclusive

¹⁷ The United States became a signatory to the CRPD in July 2009, committing to upholding the object and purpose of the treaty and consistent with the strong guarantees of nondiscrimination and equality of access and opportunity for persons with disabilities in existing U.S. law.

¹⁸ For a complete current listing of policies and strategies, please refer to the USAID Policy Registry.

development, consistent with the guiding principles of diversity, equity, inclusion, and accessibility. Many of these policies and strategies expressly reference persons with disabilities, and the importance of fostering accessibility for and inclusion of persons with disabilities, including in sector-specific contexts.

Background - Disability and human diversity: Framing disability in USAID's work

*Disability only becomes a tragedy when society fails to provide the things we need to lead our lives—job opportunities or barrier-free buildings, for example. It is not a tragedy to me that I'm living in a wheelchair.*¹⁹

- Judith Heumann, American Disability Rights Advocate, former U.S. Department of State Special Advisor for International Disability Rights (2010-2017)

As recognized in the Convention on the Rights of Persons with Disabilities (CRPD), “disability is an evolving concept and that disability results from the interaction between persons with impairments²⁰ and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others.”²¹ This understanding of disability as a social construct is a departure from traditional framings of disability.

Historically, society has acknowledged that persons with disabilities have experienced problems, but the cause of those problems has often been misattributed to persons with disabilities themselves, and has centered on misperceptions of persons with disabilities as deficient.²² In the *Medical Model* of disability, this meant trying to “cure” people, whether this could be achieved or not, and whether they wanted this or not. Such approaches have often encouraged—or worse, forced—persons with disabilities to use medicines, surgery, or other interventions to change their bodies or minds to become closer to a prevalent societal view of what is considered “normal” or “typical,” regardless of what persons with disabilities themselves might want or aspire to.

In the *Charity Model* of disability, well-intentioned people have tried to offer support, such as access to disability-specific goods or services. However, typical delivery models of charity have often adopted unsustainable approaches that disempowered or patronized persons with disabilities, deprived them of autonomy and agency, made them dependent upon others, or fostered segregation rather than meaningful and comprehensive community inclusion.

¹⁹ Joseph Shapiro, NPR. “[Activist Judy Heumann led a reimagining of what it means to be disabled.](#)” 2023.

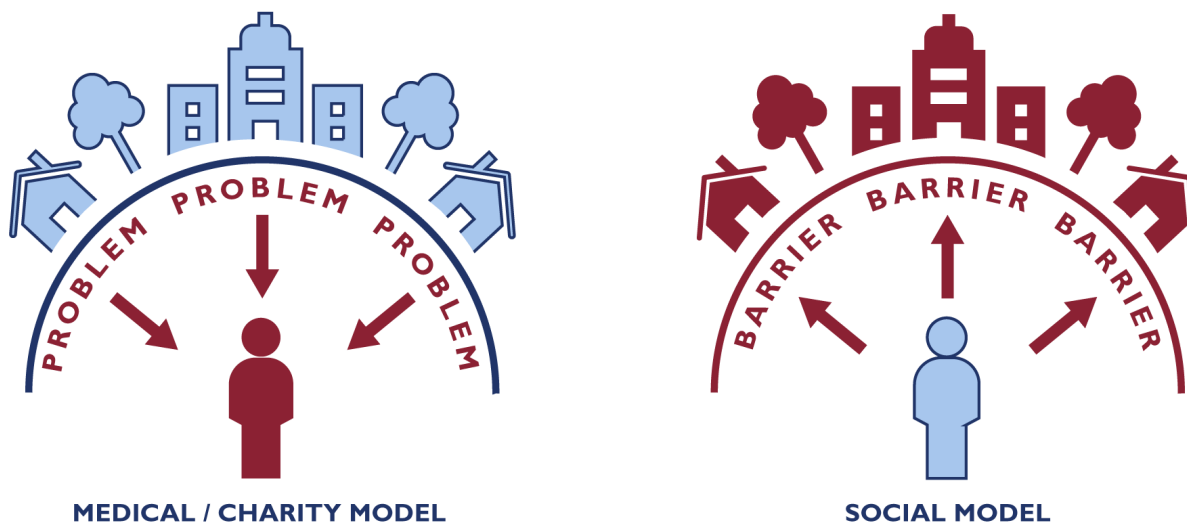
²⁰ USAID acknowledges that although used in the CRPD, not all persons with disabilities are comfortable with or self-identify with the term “impairment,” and may prefer “condition,” “functional condition,” or other terms altogether.

²¹ Convention on the Rights of Persons with Disabilities, Preamble (e).

²² Such framings are not universal of course. At the other end of the spectrum, persons with disabilities have sometimes been viewed as “special,” “heroic,” and even magical in some cultural contexts. Although ostensibly more positive than framings focus on perceived “deficiency,” these approaches can also be othering, inaccurate, and inconsistent with how persons with disabilities would prefer to be seen. Such framings can also result in persons with disabilities being kept away from others in society, viewed as dangerous or less worthy, contributing to deprivation of agency and autonomy, and further societal segregation of persons with disabilities. In extreme cases, the perception of persons with disabilities as possessing magical characteristics—including but not limited to persons with albinism—has led to persons with disabilities being maimed or killed for their body parts, or forced to self-segregate for their own safety.

Access to quality medical care is of course as important to persons with disabilities as it is for their non-disabled peers, and charities can have a useful role to play especially when their work is guided by persons with disabilities themselves. However, by focusing on changing persons with disabilities rather than systems of inequality and discrimination, these two models of disability have frequently subjected persons with disabilities to harm and human rights violations. Furthermore, these approaches have typically failed to successfully address the root causes of persons with disabilities being denied full access and inclusion in society on an equitable basis with others.

The *Social Model* of disability as embodied in the CRPD is a reaction to these traditional framings of disability. Instead of pointing to the person to change, the Social Model looks outward, to society. Under the Social Model, disability is the result of the negative interaction that can occur when people with certain functional conditions or “impairments” encounter barriers in society. Barriers can include physical, communication, information, legislative, policy, technological, attitudinal barriers, and more.²³ The Social Model identifies barriers in society as the problem, not persons with disabilities.²⁴



Situating USAID’s work within the Social Model of disability compels us to focus our development interventions on addressing societal barriers to access, equality, equity, and meaningful inclusion for persons with disabilities. The types of societal barriers typically experienced by persons with disabilities align well with the wide array of substantive areas in which USAID programs, providing ample

²³ Illustrative examples of such barriers include: *physical* - e.g. the absence of a curb cut preventing access by a person with a mobility disability to a pedestrian sidewalk; *communication* - e.g. the absence of a sign language interpreter to facilitate a deaf or hard of hearing person discussing a health concern with a medical professional; *information* - e.g. the lack of plain language instructions to help a person with a cognitive disability understand how to exercise their right to vote; *legislative* - e.g. a law prohibiting persons with disabilities from serving in elected office; *policy* - e.g. a policy of an employer to hire persons with disabilities to fulfill an employment quota requirement, but then have them not work or remain at home to avoid providing workplace reasonable accommodations; *technological* - a banking mobile app that is inaccessible to blind or low vision persons; *attitudinal* - e.g. an organization does not even attempt to recruit training participants with disabilities because they assume persons with disabilities will not gain as much from the training as others.

²⁴ The Social Model has benefits beyond persons with disabilities, as its focus on barriers in society can support universal design approaches that have the potential to benefit all persons regardless of disability status.

opportunity for USAID to contribute to the effective removal of barriers that stymie full inclusion of persons with disabilities in society. At the same time, the Social Model’s respect for the individuality, agency, and autonomy of persons with disabilities is consistent with USAID’s commitment to a rights-based approach anchored in the protection and promotion of human rights, that seeks to address inequalities and injustices that hinder development, and empowers individuals as active claimants of rights.

Persons with disabilities include persons with physical, psychosocial/mental, intellectual, cognitive, sensory, and other disabilities. People may be born with their disabilities or they may acquire them later due to accident, illness, age, violence, natural disaster, or other causes. Two people may have the same disability, but that does not guarantee that their experiences or disability-related needs will be the same. Thus, it is important that USAID’s work encompass persons with disabilities across all disability types, from all backgrounds, sexual orientations, gender identities, gender expressions, and sex characteristics (SOGIESC), and at all ages and stages across the human life course. An individual’s disabilities may not be readily apparent though, and because of the prevalence of disability-based discrimination and stigma, not all persons with disabilities may choose to self-identify as persons with disabilities. For example, some individuals may view themselves as persons with disabilities, but may not feel safe or comfortable self-disclosing to others. Others may not identify as members of the disability community at all, in some cases because of lack of access to assessment services or supports. USAID respects whether and how persons with disabilities self-identify and/or disclose, and strives to foster safe and respectful environments in which persons with disabilities can feel comfortable in embracing and disclosing that identity as and when they so choose.²⁵

Disability Inclusion in Action

USAID’s “Global Labor Program – Inclusive Futures” aims to increase the inclusion and confidence of persons with disabilities, particularly women, so they are able to collectively bargain and improve labor rights at the Kenyan companies of global drinks brands – Coca-Cola Beverages Africa (CCBA) and Diageo’s East Africa Breweries Limited (EABL). Working with EABL, the program introduces smallholder farmers who grow sorghum to organize collectively into hubs. Through the hubs, farmers with and without disabilities gain improved access to agricultural advice, farm inputs, and collective bargaining power to secure higher prices from EABL for their produce. GLP-IF works with CCBA to make their retail distribution chain more inclusive. It provides skills training and support to women retailers with disabilities to grow their businesses and supports them to organize into groups – giving them a platform to discuss common issues and negotiate better margins from CCBA product sales.

The Global Labor Program has helped me a lot. I have received training on things like record keeping and customer service, which have made me more organized. The weekly coaching sessions have also helped me to know what I need to improve on and enabled me to navigate challenges I experience, which have in turn improved my business. – Josephine, CCBA retailer. Josephine owns a small retail business in Nairobi and is deaf.

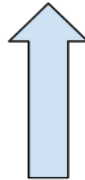
Persons with disabilities are not a monolithic group, and are part of every other population and group. As such, persons with disabilities also experience the complex, cumulative way in which the effects of multiple forms of discrimination (such as racism, sexism, classism, ableism, heterosexism, etc.) combine, overlap, or intersect. An intersectional approach recognizes that the many elements of identity, in combination with systems of inequality, can create unique power dynamics, effects, and perspectives that have the potential to impact persons with disabilities’ access to, and experience of, development and humanitarian assistance interventions. The effects of intersectional factors can be particularly impactful

²⁵ For more information on respectful representation of persons with disabilities, including respecting people’s self-identification preferences, see, [USAID Disability Communications TIPS](#).

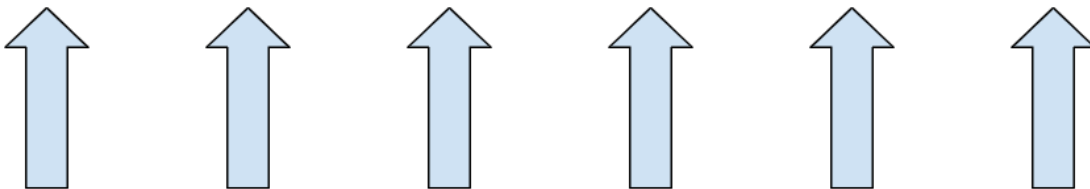
in contexts of transition to and from various states of local stability and fragility, peace and conflict, disaster and development; or political, economic, or societal transitions.

Vision, Goal, and Objectives

Vision: USAID envisions peaceful and prosperous societies in which persons with disabilities enjoy the rights, agency, access, influence, and opportunities to pursue their life goals, and equitably contribute to and benefit from USAID’s development, humanitarian, and peacebuilding assistance interventions that engage people across societies, communities, and countries.



Goal: To advance empowerment and elevate the lives of the world’s more than one billion persons with disabilities by ensuring that USAID and implementing partners recognize, respect, value, meaningfully engage, include, and are intentional in ensuring that persons with disabilities and their representative organizations benefit equitably from our work as equal partners.



Objectives: In support of this goal, USAID will work towards the following six objectives:

- Ensure meaningful disability inclusion and respect for disability rights across USAID programming in development, humanitarian, and peacebuilding assistance.
- Respect, empower, and meaningfully engage persons with disabilities across the life course and their representative organizations as drivers of development and peace, agents of change, and essential partners in the generation of solutions.
- Dismantle discrimination and barriers to foster accessible, equitable, safe, and inclusive societies in which persons with disabilities and their representative organizations can advocate for and exercise their rights without fear of violence or pressure to assimilate.
- Recognize, respect, and meaningfully engage and partner with the full and intersectional diversity of persons with disabilities, not only with respect to disability, but also in consideration of intersections with race, ethnicity, color, sex, sexual orientation, gender, gender identity, gender expression, sex characteristics, native or Indigenous origin, age, genetic information, generation, culture, religion, belief system, marital status, parental status, socio-economic status, appearance, language and accent, education, geography, nationality, citizenship, migration status, lived experience, job function, personality type, thinking style, and other facets of identity.
- Advance the knowledge base of effective programming by strengthening disability-inclusive data collection, research, analysis, and learning associated with USAID programming, including with respect to assessing the representation of persons with disabilities and quality of programming.

- Leverage USAID’s leadership and convening power in fostering political will amongst international, regional, national, and local institutions to implement disability-inclusive principles and practices, and accountability to persons with disabilities and their representative organizations.

Principles

To achieve the six objectives described above, USAID will uphold the following seven operating principles: **accessibility, accountability, anti-ableism, do no (more) harm, gender equality, nondiscrimination, and nothing without us**. These operating principles are intended to align with and complement the principles in Chapter 201 of USAID’s Automated Directives System (ADS): *Program Cycle Operational Policy*. The following operating principles should be applied by USAID’s Operating Units across sectors and across the Program Cycle at every opportunity. Consideration should also be given to the interrelated and interdependent application of these principles. For example, in addressing how to uphold the principle of *accessibility* in USAID programs, the principle of *nothing without us* should be applied to ensure that persons with disabilities are central to informing and guiding what constitutes effective and meaningful access.

- **Accessibility** - the design, construction, development, and maintenance of facilities, information and communication technology, programs, and services so that all people, including persons with disabilities, can fully and independently use them. Accessibility includes the provision of accommodations and modifications to ensure equitable access to and participation in activities for persons with disabilities, the reduction or elimination of barriers to equitable opportunities, a commitment to ensuring that persons with disabilities can independently access every outward-facing and internal activity as well as electronic spaces, and the pursuit of best practices such as universal design.
- **Accountability** - USAID is committed to disability-inclusive development, humanitarian, and peacebuilding assistance that is effective, responsive, sustainable, transparent, and accountable to persons with disabilities and their representative organizations. Achieving the objectives of the Disability Policy is a shared Agency responsibility, and depends on the contributions and collective commitment of all our staff. Generation of data and evidence to facilitate tracking of progress is essential to ensuring effective outcomes, not merely tracking of inputs or outputs. All USAID staff including Senior officials, Mission Directors, Bureau leaders, Center, Office, and Hub directors, technical team leaders, and team members are accountable (including through employee evaluations as appropriate) for implementing this Policy across their portfolios, as well as for defining specific goals within the Agency’s strategies and programming that align with the objectives of this Policy.
- **Anti-ableism** - the intentional use of strategies, theories, actions, and practices to challenge and counter pervasive discrimination and exclusion of persons with disabilities based on ableist norms that devalue persons with disabilities relative to non-disabled persons, and are rooted in beliefs that typical abilities are superior and that persons with disabilities need to be changed to fit a social ideal of what is ‘normal’ or ‘typical,’ rather than being respected as a natural part of human diversity.
- **Do no (more) harm** - the undertaking of development, humanitarian, and peacebuilding assistance interventions that do not put participants at greater risk than would be the case without the intervention. Do no *more* harm acknowledges that harm may have already occurred, and the goal then is to ensure that more harm does not occur beyond the point of intervention, and that to the extent possible, actions are undertaken to mitigate and address past harm that may have occurred.
- **Gender equality** - the equal ability to attain and benefit from human rights, freedoms, socially valued goods, opportunities, and resources by all individuals independent of their sex, gender

expression, and gender identity. Gender equality is more than parity in numbers and laws on the books. Achieving gender equality means that all individuals—women and girls, men and boys, and gender-diverse individuals—can meaningfully contribute and belong to their societies with dignity.

- **Nondiscrimination** - USAID is committed to inclusive development which recognizes the concept that every person, inclusive of diverse identities and experiences, is instrumental in the transformation of their own societies, and that their inclusion throughout the development process leads to better outcomes. In designing and administering programs, USAID staff and implementing partners must not discriminate against any participant or potential participant, including by withholding, adversely impacting, or denying equitable access to benefits or services on the basis of disability. We encourage all in-country partners to work to end discrimination against persons with disabilities and promote equity for persons with disabilities in their country contexts.
- **Nothing Without Us** - the meaningful engagement of stakeholders in all aspects and stages of the decision-making, implementation, and evaluations processes of programming or actions. Originally coined as “nothing about us without us” by disability rights activists in the 1990s, over time disability rights advocates, such as former Special Rapporteur on the Rights of Persons with Disabilities Catalina Devandas Aguilar, started shifting usage to “nothing without us.” At the 2022 Global Disability Summit, disability advocates called for a change to “nothing without us,” in recognition that any issue affecting humanity is necessarily of relevance to persons with disabilities. The principle has become an element of inclusive practices across a variety of fields and applications, is consistent with USAID’s commitment to locally-led and inclusive development, and is more effectively realized when we engage in development interventions *with* rather than *for* persons with disabilities.

Disability Inclusion in Action

USAID’s “Leading for Independent Living: Building Resources and Partnerships for Inclusive Communities in Armenia” activity fostered the equal right of all persons with disabilities to live independently and be included in the community. The activity supported establishment and operation of Independent Living Resource Centers (ILRCs) in two regions of Armenia. It also offered peer-led, rights-based services and resources to empower persons with disabilities to live independently, advocate for their rights, and participate fully in their communities.

We created an environment where persons with disabilities were able to teach each other, to learn from each other, and to acquire a multitude of skills. So, among the achievements of the [the ILRC], we can also highlight the fact that State authorities have started to approach the needs, requirements and demands of persons with disabilities more seriously, and they’re trying to ensure better representation and involvement for persons with disabilities. - EREO ILRC Advocacy Coordinator with a disability

Data, Learning, and Evidence

Commitment to learning is a core value of USAID. Strengthening disability-inclusive data collection, research, analysis, reporting, and learning, is critical to advancing the knowledge base of what works and supporting more effective programming.

- **Collecting and using disability disaggregated data** - disability-inclusive data collection, research, analysis, reporting, and learning are bolstered by disaggregation of data by disability—in addition to other bases for disaggregation that may be required—in order to better assess and

bring visibility to the effective representation of persons with disabilities in and across USAID programming. This is especially important in programs that are not targeted specifically at persons with disabilities, but that instead seek to be inclusive of persons with disabilities in mainstream programming contexts. Without disaggregation of people-specific indicator data in such contexts, we will struggle to determine the degree to which our wider programming is reaching and ensuring equitable outcomes for persons with disabilities, and to facilitate learning and adaptation in our programming.²⁶ Consistent with ethical principles and relevant safety, security, data protection, privacy, and age-related considerations in the collection and use of such data, it is strongly encouraged that those implementing USAID programs disaggregate indicator data collected by disability status at a minimum, and disability type where possible. In this effort, USAID staff and implementing partners should leverage internationally comparable tools and suitable secondary data sources where available for identifying persons with disabilities in data collection efforts. In all data disaggregation efforts, the principle of do no harm must be paramount.²⁷

- **Leveraging regular reporting mechanisms** - regular reporting mechanisms such as the annual Operational Plan (OP) and Performance Plan Report (PPR) offer ideal opportunities to capture and bring visibility to USAID's work to support persons with disabilities. A disability-focused Key Issue (for the OP) and Qualitative Narrative (for the PPR) exist to facilitate such reporting. All OUs engaged in activities that indirectly support or directly contribute to the inclusion of persons with disabilities in USAID programming should be reporting through these reporting mechanisms, including in instances where such activities might also be reported through other Key Issues or Qualitative Narratives.
- **Research and technical guidance** - generation of sector-specific, evidence-based research and technical guidance is also important in filling data gaps and disseminating knowledge of effective practice. Such guidance documents will be essential in promoting the effective application and implementation of this policy in sector-specific contexts, and evaluating the efficacy of those approaches. In generating such guidance and research products, the principles of *nothing without us*, *do no (more) harm*, and *accessibility* are of particular relevance. USAID staff and implementing partners are highly encouraged to consult with and meaningfully involve persons with disabilities and their representative organizations in these initiatives, in order to benefit from the perspectives of those most directly impacted by USAID interventions, and also ensure that programming has no unintended negative consequences. Furthermore, information about research activities and findings should be made available in formats accessible to persons with disabilities.

²⁶ USAID recognizes collecting robust data in humanitarian emergencies can be challenging due to a number of constraints. In cases where it is not possible to responsibly collect disability-disaggregated data from the start of a humanitarian response, USAID implementing partners must still seek to identify specific risks persons with disabilities face in the context, factors that contribute to this risk, and factors impacting the ability of persons with disabilities to meaningfully mitigate these risks. Partners must also identify barriers persons with disabilities face in accessing services and factors that enable access. This information should be used to inform programming decisions. Additionally, implementing partners should utilize data available about the number of persons with disabilities in program design. When this data is not available or is an under-estimate of the numbers of persons with disabilities, implementing partners should use the global prevalence estimate that 16 percent of a population are persons with disabilities.

²⁷ Disability disaggregation data constitutes prevalence data, and is used in aggregated form and never to provide information on or about individuals. Tools intended for medical screening or diagnosis should not typically be used for the purposes of prevalence or disaggregation. Where such screening tools may be used for other reasons in the context of USAID programming, provision should be made for referral of individuals for follow-up support and provision of services as needed, e.g. referral of children to eye care services as a consequence of vision screening at school. For specific tools on collecting and using disability-disaggregated data in USAID education work, see USAID Education Disability Measurement Toolkit.

It should also be acknowledged that the lack of accurate host country data on disability is itself a development challenge. Where feasible, USAID Missions should seek to meaningfully engage relevant host government ministries and government statistics offices in the promotion of accurate and ethical disability data collection, including through censuses, demographic and health surveys, and other appropriate tools.

Policy Into Practice - Operationalizing Disability Inclusion at USAID

As an organization and as persons with disabilities, we do not want tokenism. We want meaningful engagement as equal partners in the process.

- Ganesh Singh, Guyana Council of Organisations for Persons with Disabilities, Program Manager

In order to achieve the vision, goal, and objectives of this policy, the following have been identified as key approaches and opportunities to promote effective implementation, and to support a systematic change management approach to furthering USAID's disability-inclusion work. These recommended (unless otherwise indicated as a **requirement**) approaches draw upon the collective experiences and learning of USAID staff, implementing partners, bilateral and multilateral development and humanitarian assistance agencies, and—most importantly—persons with disabilities and their representative organizations. These approaches are also consistent with a holistic approach to diversity, equity, inclusion and accessibility, which embraces work at every level so that our people, partnerships, programs, processes and policies are inclusive, reflect diversity, advance equity, and enhance accessibility.

Disability Inclusion in Action

USAID supports the Reference Group on Inclusion of Persons with Disabilities in Humanitarian Action (DRG) through a global program focused on increasing the leadership of DPOs/OPDs in humanitarian action. The DRG is developing a set of core resources for and with DPOs/OPDs to increase the capacity of their members to engage in key humanitarian processes at global, regional, and country levels. This program is working with seven fellows and training 120 DPO/OPD staff and members, establishing an active core cadre of disability rights activists with capacity to effectively engage with humanitarian actors to influence policy, programming and implementation.

Engagement and Communications:

A Disability-Inclusive Approach to Localization - USAID's commitment to locally-led development that fosters diversity in implementing partners affords a prime opportunity to intentionally engage diverse representation from local disabled persons' organizations (DPOs/OPDs) as leaders and implementers of development, humanitarian, and peacebuilding assistance interventions. Consistent with USAID's [Local Capacity Strengthening Policy](#), USAID is also committed to capacity strengthening that supports DPOs/OPDs' ability to deliver and sustain development results. Such approaches are strengthened where we include persons with disabilities at all phases of the program life-cycle, and support the organizational capacity of DPOs/OPDs to contribute to USAID's strategic planning, participate in project design including through accessible and inclusive collaboration and co-creation processes, and respond to USAID solicitations including as first-time recipients of USAID funding.

Partnering for Success - collaborative partnerships between USAID, persons with disabilities, donors,

governments, civil society, and others, are necessary for effective implementation of this policy. Clarity of expectations is essential to foster mutually beneficial partnerships. With respect to USAID implementing partners in particular, explicit references to persons with disabilities in all solicitation phases for all activities are important to ensure that implementing partners are selected considering their understanding, willingness, and capacity to meet the expectation that USAID-funded programs should equitably include and be responsive to persons with disabilities, consistent with this policy.

Communications - not only should USAID's work be consistent with the vision, goal, objectives, and principles of this policy, but *how* USAID and implementing partners communicate about our work should also be consistent. This includes promoting empowering and respectful representation of persons with disabilities that challenges societal discrimination and euphemistic or ableist framings of disability. With respect to accessibility of IT procured in support of an award, and communications products (including but not limited to social media posts, videos, electronic briefers, factsheets, reports etc.), compliance with the accessibility requirements of Section 508 of the Rehabilitation Act is a legal **requirement** for USAID and implementing partners, as reflected in various Chapters and References of USAID's [Automated Directives System \(ADS\)](#) related to 508 compliance, including [ADS Chapter 551 "Section 508 and Accessibility."](#)

Foundations for Operational Success:

Twin-Track Approach - USAID is committed to a twin-track approach, which recognizes that *both* inclusion of persons with disabilities in mainstream programming across all USAID sectors and portfolios, *and* programming targeted to the specific needs of persons with disabilities, are essential programmatic approaches to be pursued.

Budgeting for Success - a valuable approach to programming (both mainstream and targeted) that equitably includes persons with disabilities, is to assume that persons with disabilities can and should be included, and to budget accordingly. Given the global prevalence rate of 16%, it is reasonable to expect that persons with disabilities will be reflected in potential participant pools for USAID-funded activities broadly, and not only in activities targeting persons with disabilities. Budgets should proactively and intentionally support principles of universal design (UD) and the provision of disability reasonable accommodations where UD alone may be insufficient to facilitate the equitable participation of program participants and staff with disabilities.

Leveraging Principles of Universal Design - in ensuring that USAID programming is fully accessible to all people, including persons with disabilities, principles of universal design (UD) offer an important foundational approach to inform program design and implementation. However, where UD principles alone are insufficient, reasonable accommodations remain an important tool to effect appropriate modifications and adjustments to ensure that persons with disabilities are equitably engaged and included. As noted previously, both approaches are most effective when proactively supported by intentional budgeting.

Approaching Our Work Across the Life Course - persons with disabilities exist at all ages as disability can be acquired at any age and stage of life, and the disability experience as it intersects with other aspects of identity can impact an individual's needs throughout their life course. It is thus important to recognize that disability-inclusive approaches to USAID's work are relevant across the entirety of the life course. Although programs or interventions may necessarily be targeted to specific ages or stages within the life course, e.g. infancy and childhood, youth, or older adults, it is important that USAID's programming as a whole foster accessible, equitable, safe, and inclusive societies that are responsive to persons with disabilities across the life course, including their transitions between life course stages. Especially, though not exclusively, for children with disabilities, it is important that USAID

supports and promotes protective, nurturing, and loving family care, as well as home and community-based support services, and avoids approaches that would strengthen or perpetuate institutions and other residential care settings that contribute to the segregation of persons with disabilities from society.²⁸

Systems Strengthening - achieving and sustaining any development outcome depends on the contributions of multiple and interconnected actors. Focusing on the system as a whole—the actors, their interrelationships, and the incentives that guide them—will typically be more positively impactful over the long-term than more limited approaches. Interventions and programming that encompass whole-of-society engagement, locally-driven solutions, and social and behavior change are best positioned to strengthen the myriad societal systems with which persons with disabilities interact, combat discrimination and ableist norms that may manifest in those systems, and ensure such systems are responsive to and supportive of persons with disabilities fully enjoying their human rights on an equitable basis with others. A systems strengthening approach not only enhances the efficacy of USAID’s work, but also has the potential to increase its impact and sustainability over the long-term. Effective systems strengthening work relies on robust engagement with persons with disabilities, raising the importance of USAID interventions and programming that support and empower DPOs/OPDs and networks of persons with disabilities and their allies.

Inclusive Acquisition and Assistance - USAID acquisition and assistance (A&A) processes and procedures afford multiple opportunities to ensure that activities and programming achieve inclusion of, and responsiveness to the needs of, persons with disabilities. In addition to explicit references to persons with disabilities in all solicitation phases for all activities, encouraging proactive budgeting for accessibility and reasonable accommodations promotes the efficacy of disability-inclusive programming in both targeted and mainstream programming contexts. A&A processes and procedures should be reviewed and, where feasible, adapted to lower barriers to DPOs/OPDs as implementation partners of USAID programming. At the same time, assistance standard provision packages in ADS 303maa (Standard Provisions for U.S. Nongovernmental Organizations); ADS 303mab (Standard Provisions for Non-U.S. Nongovernmental Organizations); and ADS 303mat (Standard Provisions for Fixed Amount Awards to Nongovernmental Organizations) contain mandatory references to the USAID Disability Policy and nondiscrimination against beneficiaries provisions that are a **requirement** in such awards. [ADS Chapter 55 | Section 508 and Accessibility](#) offers guidance on the building of accessible information and communications technology (ICT) into awards. In the context of any new or renovation construction project funded by USAID, the use of the [USAID Policy on Standards for Accessibility](#) is a **requirement** in all USAID acquisition and assistance for construction and alteration.

²⁸ Research and evidence shows that learners who are deaf and hard of hearing benefit greatly from being in sign language-rich learning environments where they can communicate directly with their teachers, peers, staff and others. In practice, such environments usually only exist effectively at schools that primarily serve deaf and hard of hearing students. for the deaf. Any support for de-institutionalization and care reform efforts should therefore exercise caution, to ensure that such schools and the populations of deaf and hard of hearing learners they serve are not adversely impacted by these efforts.

Disability Inclusion in Action

USAID’s “Advancing Nutrition” promotes greater attention to nutritional needs of children with disabilities. Children with disabilities are more likely to experience feeding difficulties, which contribute to higher rates of malnutrition and early mortality among children with disabilities, and daily stress and social exclusion for children and families. Advancing Nutrition has made resources more accessible to better support communities, workers, and programs to respond to these children's needs through the [Feeding and Disability Resource Bank](#). They have also increased awareness of the nutritional needs of children with disabilities through [research and advocacy](#) under the guidance of an advisory group of persons with disabilities, and through a global convening bringing together actors from health, nutrition, and disability to align on priorities moving forward.

Living Our Values:

Supported and Representative Staffing - consistent with USAID’s commitment to enhancing diversity, equity, inclusion, and accessibility throughout the Agency, effective implementation of this policy will be strengthened by promoting a diverse and representative workforce across USAID and implementing partners that is inclusive of persons with disabilities. This necessitates a commitment to hiring persons with disabilities in a manner consistent with applicable legal protections and hiring targets, and leveraging relevant hiring authorities, including Schedule A hiring. Crucially, it also requires fostering a workplace culture where colleagues with disabilities are welcomed, respected, and supported (including through universal design and provision of reasonable accommodations) in their performance, professional development, and advancement on an equitable basis with others. Supported staffing also necessitates promoting the knowledge, capacity, and confidence of USAID and implementing partner staff to pursue disability-inclusive programming, through provision of training and technical guidance, and facilitating direct engagement with persons with disabilities and their representative organizations. USAID Missions and operating units are strongly encouraged to designate at least one “Disability Focal Point” to drive championing and ownership of disability inclusion across the Mission or operating unit, and provide technical support. Disability Focal Point(s) should have, at a minimum, completed Disability 101 and 102 training, and training on inclusive development.

Leading Through Development Diplomacy: Advancing Progress Beyond Programs - the convening power of USAID offers a unique opportunity to bring together a wide variety of relevant stakeholders to share knowledge, and foster commitment to disability-inclusive principles and practices. Such stakeholders include DPOs/OPDs, wider civil society groups and community-based organizations and networks, the private sector, other bilateral development agencies, philanthropies, multilateral institutions, regional organizations, international financial institutions, host-country governments, and the wider U.S. interagency. Perhaps most importantly, USAID has the opportunity in its convenings (whether focused on disability or other issues entirely) to ensure that persons with disabilities—reflecting the diverse array of intersectional identities across the disability community—have the opportunity to participate fully and on an equitable basis with others. Especially in contexts where persons with disabilities are marginalized in society due to stigma on the basis of disability, USAID can exercise its convening power and influence to demonstrate the value of inclusion, push back against ableist norms, and encourage others to do the same.

Being in “Better” Mode - as reflected in USAID’s systematic and intentional use of “collaborating, learning, and adapting” practices, USAID is committed to continuously improving the effectiveness of its work across the program cycle. In the context of implementation of this policy, being in “better” mode reflects USAID’s commitment to continuing to improve through regular evaluation, solicitation of stakeholder feedback, and periodic review and updating of both policy and practice. It also means

recognizing and responding to situations where our systems and approaches may unintentionally hinder the ability of persons with disabilities and their representative organizations to effectively partner with us.

Conclusion

USAID has a long-standing commitment to nondiscrimination and inclusion of the world's more than one billion persons with disabilities in society on an equitable basis with others. Following two and a half decades of learning, through this 2023 "Nothing Without Us: USAID Disability Policy," USAID seeks to position itself to partner with persons with disabilities across all aspects of its work in meeting the challenges and opportunities of the twenty-first century.

Through a principled and rights-based approach, grounded in the Social Model of disability and key legal and policy frameworks, and informed by sector-specific technical guidance, USAID will work towards peaceful and prosperous societies in which persons with disabilities enjoy the rights, agency, access, influence, and opportunities to pursue their life goals, and equitably contribute to and benefit from USAID's development, humanitarian, and peacebuilding assistance interventions that engage people across societies, communities, and countries. In doing so, USAID will leverage key approaches to operationalizing disability inclusion that draw upon the collective experiences and learning of USAID staff, implementing partners, bilateral and multilateral development and humanitarian assistance agencies, and—most importantly—persons with disabilities and their representative organizations.

Bibliography/Endnotes

[TO BE ADDED]

ANNEX - Persons with Disabilities in USAID Programs

Disability sector snapshots and promising approaches to disability-inclusive programming across USAID portfolios

All of USAID's programming and interventions are relevant to persons with disabilities, and have the potential to address societal barriers identified in the Social Model framing of disability that negatively impact equitable inclusion of persons with disabilities in society. Intentional and meaningful inclusion of persons with disabilities across all areas of USAID's work is key to ensuring that countries can meet their development goals and potential for the benefit of *everyone*. Across the broad scope of USAID's work, intentional inclusion of persons with disabilities is necessary for quality programming that advances equity and benefits persons with disabilities. Conversely, failure to include persons with disabilities in our programming may negatively impact persons with disabilities and other participants who will not have the benefit of their participation. Failure to include persons with disabilities may also violate the principle of do no harm by depriving individuals of opportunities for meaningful engagement, or even reinforcing societal barriers that adversely impact persons with disabilities long after programming has ceased.

The following snapshots are not intended to be a substitute for more detailed, sector-specific technical guidance documents. However, they provide a brief overview of the situation of persons with disabilities, as well as non-exhaustive examples of promising approaches for disability-inclusive programming across the following range of sectors of USAID's work:

Agriculture and Food Security

Climate

Democracy, Human Rights, and Governance

Digital Access and Technology

Economic Growth and Trade

Education

Environment, Energy and Infrastructure

Gender Equality and Women's Empowerment

Global Health

Humanitarian Assistance

Nutrition

Peace and Security

Water Security, Sanitation, and Hygiene

Irrespective of sector, the following approaches should ideally be undertaken in order to ensure that USAID programming is maximally inclusive of persons with disabilities:

- Consistent with the principle of “nothing without us,” meaningfully engage with Disabled Persons' Organizations / Organizations of Persons with Disabilities (DPOs/OPDs) early, often, and throughout the project life cycle to ensure that project design, implementation, and monitoring and evaluation are undertaken *with* and *not for* persons with disabilities.

- Ensure that project budgets proactively and transparently account for accessibility and reasonable accommodations that may be needed to facilitate the equitable participation of persons with disabilities.
- Disaggregate project data by disability status at a minimum, and disability type where feasible, to determine whether project participants are inclusive of persons with disabilities.
- Consistent with USAID’s commitment to [localization](#), support strengthening of DPOs/OPDs, and work with local DPOs/OPDs to adapt policies and program practices to foster locally-sustained change that generates positive outcomes for persons with disabilities.

Agriculture and Food Security

Smallholder farmers’ produce accounts for 70 percent of the world population’s food source.²⁹ In some contexts, a majority of households in a region may be involved in agriculture and reliant on agriculture for their livelihoods.³⁰ However, poor access to services, markets, and assets marginalizes smallholder farmers and small to medium enterprise (SMEs) operators with disabilities, resulting in their inequitable participation in the agriculture sector.³¹ Barriers to equitable participation by farmers and SME operators with disabilities can include physical barriers, such as a lack of access to adapted agricultural tools and machinery, and attitudinal barriers which may cause financial institutions to fail to extend credit, or crop buyers to mistakenly believe that the produce of farmers with disabilities is of lower quality.³²

Persons with disabilities are also more likely to experience food insecurity compared to non-disabled persons. Even outside of (LMIC contexts, data indicates that the average percentage of persons with disabilities who are unable to afford a meal with protein every other day is almost double that of non-disabled persons.³³ The gender gap in terms of access to meals with protein is also greater among persons with disabilities, with a higher number of women with disabilities experiencing this situation compared to their male peers. In LMICs, data indicates that persons with disabilities and their households are more likely to not have food to eat, compared to non-disabled persons and their households.³⁴

Promising Approaches:

- Promote leadership of persons with disabilities in decision-making, governance, research, and food-systems organizations at all levels, as well as in managing and governing land, freshwater, marine, and other natural resources.

²⁹ GSMA Assistive Tech. [“Inclusive Digital Culture: Making Value Chains Work for Farmers with Disabilities.”](#) 2021.

³⁰ For example, one study estimated that “over 75.0 percent of households in sub-Saharan Africa are involved in agriculture.” African Journal of Disability, [Exploring the role and lived experiences of people with disabilities working in the agricultural sector in northern Nigeria](#), 2022.

³¹ Ibid.

³² GSMA Assistive Tech. [“Inclusive Digital Culture: Making Value Chains Work for Farmers with Disabilities.”](#) 2021.

³³ UNDESA. [“The United Nations Flagship Report on Disability and Development.”](#) 2018.

³⁴ Ibid.

- Address disability discrimination in agricultural cooperatives, financial institutions and agricultural financing schemes, so that farmers with disabilities may benefit from their support on an equitable basis with others.
- Promote access of farmers with disabilities to affordable adapted agricultural tools and machinery and accessible digital agricultural technologies

Climate

Of the world's one billion persons with disabilities, 80 percent live in LMICs,³⁵ many of which are more exposed to extreme weather events.³⁶ Persons with disabilities face multidimensional inequalities, including higher rates of poverty, ableist norms, inaccessible environments, discrimination, and other forms of exclusion.³⁷ This contributes to persons with disabilities being at especially high risk of injury and mortality during climate-related extremes, including natural disasters and extreme weather events.³⁸ Persons with disabilities may be unable to evacuate in the face of extreme weather events or to fully utilize migration as a climate change adaptive response due to inaccessibility of the built environment, transportation, information and communication, and emergency shelter facilities, and poor access to financial and other resources, leading to increased risks of acquisition of injuries and/or secondary disabilities or mortality.³⁹

Societal norms associated with disability often assume there is an inevitability to the increased mortality rates experienced by persons with disabilities during natural disasters, such as extreme weather events. Such assumptions fail to recognise that these and other negative outcomes of climate change for persons with disabilities are the result of structural inequalities and discrimination. Persons with disabilities are accustomed to creative problem-solving in their daily lives, and many in the disability community are interested in being positive agents of change in combating climate change and mitigating its effects for all.

Promising Approaches:

- Bolster the resilience of persons with disabilities to the effects of climate change, including by promoting disability-inclusive approaches to urban planning processes, disaster risk management and response, development of accessible early warning systems, and inclusion of persons with disabilities in the design and implementation of financial protection strategies and instruments.
- Promote a “just transition” to a green economy for persons with disabilities on an equitable basis with others,⁴⁰ including facilitating the participation of persons with disabilities in current and emerging “green jobs” that seek to de-carbonize the economy, bring down emissions of

³⁵ UNDESA. “[Factsheet on Persons with Disabilities.](#)”

³⁶ UNOHCHR. “[Policy Guidelines for Inclusive Sustainable Development Goals: Climate Change and Disaster Risk Reduction.](#)” 2020.

³⁷ Disability & Society. “[Seeking a disability lens within climate change migration discourses, policies, and practices.](#)” 2020.

³⁸ American Meteorological Society. “[Factors Associated with the Climate Change Vulnerability and Adaptive Capacity of People with Disability: A Systematic Review.](#)” 2017.

³⁹ Reasons why persons with disabilities are killed or injured in disproportionately high numbers in disaster contexts: [2013 UNISDR Survey on Living With Disabilities and Disasters](#)

⁴⁰ ILO. “[‘Nothing about us without us’ Realizing disability rights through a just transition towards environmentally sustainable economies and societies.](#)” 2022.

greenhouse gasses, promote fuel efficiency and/or the use of renewable energy sources, or otherwise contribute to climate change mitigation.

- Support the contribution of persons with disabilities to climate change response, including climate change mitigation, through: fostering collaborative partnerships between DPOs/OPDs, environmental groups, governments, and humanitarian agencies; meaningful inclusion of persons with disabilities in the development of climate change response and mitigation policies, strategies, and activities at regional, national, and/or sub-national levels; and by ensuring that climate action by governments and other actors is informed by and responsive to the unique ideas and contributions of persons with disabilities.

Democracy, Human Rights, and Governance

Despite widespread adoption of the Convention on the Rights of Persons with Disabilities, discriminatory laws and policies still exist in many countries, including laws negatively impacting the right of persons with disabilities to marry, exercise legal capacity, and participate in political and public life. Only 36 percent of countries hold no legal restrictions for persons with disabilities to marry; only 13 percent have no limitations to vote; and only 9 percent have no restrictions on persons with disabilities being elected for public office.⁴¹ In many countries, persons with intellectual or psychosocial disabilities experience denial of their right to exercise legal capacity through guardianship, conservatorship, and legislation depriving them of the ability to have agency and control of their lives.⁴²

The evidence from five LMIC countries suggests that approximately one in five persons with disabilities has been beaten or verbally abused due to their disability.⁴³ However, access to justice is also limited in many contexts, with more than 30 percent of courts and police stations not accessible in some countries, and more than 90 percent of persons with disabilities in need of legal advice unable to receive it.⁴⁴ In some countries, more than one in ten persons with disabilities experience discrimination in public services, and globally only two thirds of countries have access to online government services designed for persons with disabilities.⁴⁵

Promising Approaches:

- Address barriers to the full, meaningful, and equitable participation of persons with disabilities in all areas of political and public life, including supporting their representation, leadership, and agency in political organizations, legislatures, and governmental agencies.
- Support the political empowerment of persons with disabilities, including through participation in accessible elections at all levels of government, access to information needed to understand these processes and make informed political decisions, and removal of legal limitations on participation based on disability.
- Address ableist norms, policies, and inaccessibility that deprives persons with disabilities of equitable access to justice via the policy and court systems.

⁴¹ UNDESA. "[The United Nations Flagship Report on Disability and Development.](#)" 2018.

⁴² Ibid.

⁴³ Ibid.

⁴⁴ Ibid.

⁴⁵ Ibid.

Digital Access and Technology

Despite the transformative impacts of digital technology on people's access to information, communication, goods, and services, and the essential role mobile devices and services in particular now play in people's lives, many persons with disabilities remain "unconnected and digitally excluded."⁴⁶ Many websites, including government portals, fail to comply with accessibility standards (e.g. the Web Content Accessibility Guidelines) that would facilitate access for persons with a wide variety of disabilities.⁴⁷ Affordability of technology also remains a barrier, with some data indicating that in LMICs "persons with disabilities are half as likely to afford Internet costs, and less likely to be able to afford radio, TV and a mobile phone."⁴⁸ Although emerging technologies such as artificial intelligence (AI) hold the potential to benefit persons with disabilities, the encoding of ableist norms and assumptions in some AI applications has raised concerns about AI discrimination against persons with disabilities.⁴⁹

Assistive Technology ("AT" including wheelchairs, hearing aids, prostheses, eyeglasses, digital services etc.) plays a key role in the lives of many persons with disabilities. By supporting access, including to education and employment, it is estimated that providing access to AT has a 9:1 return on investment.⁵⁰ Facilitating access to AT for a child in a LMIC has the potential to make a difference of US\$100,000 in lifetime income, in addition to health and social benefits.⁵¹ However, it is estimated that in LMICs, only 10 percent of persons have access to the AT they need.⁵²

Promising Approaches:

- Close the digital gap for persons with disabilities by promoting: compliance of products and services with accessibility standards and principles of universal design; affordability of digital products and services for persons with disabilities; access to information and training to ensure that persons with disabilities have the skills to fully leverage the potential of digital technologies across different areas of life.
- Address disability discrimination in digital ecosystems, including: avoiding the encoding of ableist norms and assumptions in AI-driven products and services, including through the adoption of standards and regulations, and promoting disability-inclusive hiring of coders and product developers; supporting laws and regulations to hold technology platforms and individual perpetrators accountable for discrimination against persons with disabilities, including technology-facilitated gender-based violence (TFGBV).⁵³

⁴⁶ GSMA Assistive Tech. "[The Mobile Disability Gap Report.](#)" 2021.

⁴⁷ UNDESA. "[The United Nations Flagship Report on Disability and Development.](#)" 2018.

⁴⁸ Ibid.

⁴⁹ OHCHR. "[Report of the Special Rapporteur on the rights of persons with disabilities on Artificial Intelligence and the rights of persons with disabilities.](#)" 2021.

⁵⁰ ATscale. "[The Case for Investing in Assistive Technology.](#)" 2020.

⁵¹ Ibid.

⁵² [ATscale Global Partnership for Assistive Technology.](#)

⁵³ Technology-facilitated gender-based violence (TFGBV) is any action by one or more people that harms others based on their sexual or gender identity or by enforcing harmful gender norms, and is carried out using the internet and/or mobile technology. Some of these are unique to digital contexts, including: doxing, gendertrolling, hacking, cybergrooming, using fake accounts and image-based abuse.

- Promote lifetime access to appropriate and affordable AT through: user-centric innovation; consistent product and service delivery standards; inclusion of AT in insurance and national health schemes; training of personnel; coordination by stakeholders at all phases of the supply chain; and removal of import tariffs that can impact affordability.

Economic Growth and Trade

In 22 countries, national constitutions explicitly guarantee the right to work for persons with disabilities.⁵⁴ More than 60 percent of countries include provisions in their labor laws prohibiting discrimination in employment and guaranteeing equal pay for persons with disabilities.⁵⁵ However, the employment-to-population ratio of persons with disabilities aged 15 and older is almost half that of non-disabled persons.⁵⁶ Only one in three persons with disabilities is employed, on average, and they are two times less likely to be employed than non-disabled persons.⁵⁷ Persons with disabilities who are employed tend to earn lower wages than their non-disabled counterparts.⁵⁸ Lack of accessible workplaces and reasonable accommodations, discrimination in hiring, and denial of access to education and skills-development all pose obstacles to the equitable employment of persons with disabilities.

At least 168 countries have disability schemes that provide periodic cash benefits to persons with disabilities, while lump-sum benefits are provided in 11 countries.⁵⁹ However, many persons with disabilities remain unable to access social protection, and in some countries, more than 80 percent of persons with disabilities cannot access needed welfare services.⁶⁰ In half of the countries with periodic benefits, children with disabilities and persons with disabilities may be excluded from benefits as they have not had the opportunity to sufficiently contribute to social insurance.⁶¹

Promising Approaches:

- Promote access of persons with disabilities to skills and training to participate in the economy and engage in decent work in mainstream work environments that do not segregate persons with disabilities, do not reinforce stereotypes of “suitable” jobs for persons with disabilities, and that ensure wage parity with non-disabled workers.
- Promote adoption and effective enforcement of nondiscrimination laws in employment, and work with employers to understand their obligations, including with respect to provision of workplace adjustments and reasonable accommodations.
- Address social protection systems to account for the added costs many persons with disabilities face due to societal inequities and barriers, and ensure that persons with disabilities need not fear loss of access to social protection or other supports as a consequence of participation in the labor market.

⁵⁴ UNDESA. [“The United Nations Flagship Report on Disability and Development.”](#) 2018.

⁵⁵ Ibid.

⁵⁶ ILO. [“New ILO Database Highlights Labour Market Challenges of Persons with Disabilities.”](#) 2022.

⁵⁷ ILO. [“International Day of Persons with Disabilities: How disability affects labor market outcomes.”](#) 2021.

⁵⁸ UNDESA. [“The United Nations Flagship Report on Disability and Development.”](#) 2018.

⁵⁹ Ibid.

⁶⁰ Ibid.

⁶¹ Ibid.

Education

Globally, school-age children and youth with disabilities face extreme barriers that limit their access to quality, equitable and inclusive education. For the nearly 240 million children and youth with disabilities across the world, or 1 in 10 children and youth aged 0-17 years, they are on average more likely to be out of school; less likely to complete primary, secondary, or higher education; less likely to possess basic literacy and numeracy skills; and less likely to receive school-related support compared to learners without disabilities.⁶² Only 16 out of 195 countries mention inclusive education in their general education laws, effectively removing marginalized children and youth, including those with disabilities, from policy making and programming decisions affecting their lives.⁶³ Youth with disabilities are far less likely to be employed than non-disabled youth; and among individuals with disabilities who are employed, youth, women, and individuals with mental and cognitive disabilities receive less wages.⁶⁴ These data reflect that societal stigma and attitudes—including low expectations of the capacity of persons with disabilities to learn or contribute economically—remain major barriers for persons with disabilities in accessing education and employment.

With accessible and appropriate resources, children and youth with disabilities can prosper academically, gain meaningful employment, and exercise self-determination. Principles of Universal Design that look at the design of policies, allocation of resources, training and support for teachers and employers, availability of support services, and overall accessibility of materials, infrastructure, transportation, and assistive technologies can improve education and workforce outcomes for all students and employees, including persons without disabilities, and inform a holistic approach for persons with disabilities.

Promising Approaches:

- Support partner country governments to develop and implement education sector and workforce development policies and plans that further inclusive education for persons with disabilities as articulated in Articles 24 and 27 of the Convention on the Rights of Persons with Disabilities and align with the needs and priorities of organizations of persons with disabilities.
- Build capacity to deliver disability-inclusive education among educators through embedding disability inclusive education pedagogy, including principles of Universal Design for Learning, throughout pre-service and in-service teacher training programs. Support the establishment of post-secondary degree and certificate programs in inclusive education to build human resource capacity. Remove access barriers at institutions of higher education and prioritize recruitment of individuals with disabilities as staff and students in teacher training programs.
- Develop inclusive and accessible teaching and learning materials for all learners, not only learners with disabilities, that align with principles of Universal Design for Learning. Design and administer inclusive and accessible learning assessments that align with principles of Universal Design for Assessment. This includes materials for workforce development and training efforts.

⁶² United Nations Children’s Fund, *Seen, Counted, Included: Using data to shed light on the well-being of children with disabilities*, UNICEF, New York, 2021

⁶³ UNESCO. 2020. *Global Education Monitoring Report 2020: Inclusion and education: All means all*. Paris, UNESCO.

⁶⁴ EnCompass LLC and MSI, a Tetritech company, *Approaches to Increase Employment and Quality of Employment Among Youth with Disabilities: Evidence and Good Practice Paper*, EnCompass LLC, 2022.

Environment, Energy and Infrastructure

Persons with disabilities are negatively impacted by environmental degradation, and environmental hazards are risks for disability. For example, overfishing and climate change have been tied to the acquisition of neurologic injuries and paralysis by indigenous Miskito divers in Honduras, who risk decompression syndrome diving to increasingly dangerous depths.⁶⁵ When communities migrate to escape environmental pressures, persons with disabilities and other marginalized groups are often left behind to cope with drought, flooding, or other hazardous conditions.⁶⁶ Yet persons with disabilities are often excluded from environmental advocacy movements, and not consulted in environmental decision-making, leading to policy and infrastructure choices that create significant barriers for persons with disabilities.⁶⁷ In some countries more than 30 percent of persons with disabilities find that transportation and public spaces are not accessible.⁶⁸

In 37 out of 44 LMICs, access to electricity is lower for households with persons with disabilities than households without.⁶⁹ In 17 countries, less than half of households with persons with disabilities have access to electricity.⁷⁰ Traditional fuels, such as biomass and coal, are still used for cooking in many LMICs, with persons with disabilities at greater exposure to household air pollution due to longer periods at home.⁷¹ Access to clean, affordable, safe, reliable energy is crucial to the well-being of persons with disabilities, including their ability to power assistive devices, lighting, heating/cooling, cooking, and refrigerated food storage.

Promising Approaches:

- Advance programs and policies to protect the rights of environmental human rights defenders with disabilities; promote collaboration between environmental, indigenous, and disability rights communities; and facilitate the meaningful inclusion of persons with disabilities in environmental policy-making, conservation, and natural resource management.
- Engage persons with disabilities in energy sector interventions to promote access to clean, affordable, safe, reliable energy for persons with disabilities; and advance disability-inclusive economic opportunities for persons with disabilities in the energy sector through recruitment, human resource policies, training, and education.
- Ensure the meaningful engagement of persons with disabilities in informing and influencing accessible and disability-inclusive infrastructure design and decision-making, encompassing all aspects of infrastructure, such as communications, transportation, housing, and broader urban and peri-urban planning.

⁶⁵ Ford Foundation. [“The Unknown Ally in the Fight for Environmental Justice.”](#) 2020.

⁶⁶ Ibid.

⁶⁷ Greenpeace. [“For disabled environmentalists, discrimination and exclusion are a daily reality: From straws to street design, disabled people are often left out of the environmental decisions that affect them most.”](#)

⁶⁸ UNDESA. [“The United Nations Flagship Report on Disability and Development.”](#) 2018.

⁶⁹ Ibid.

⁷⁰ Ibid.

⁷¹ Ibid.

Gender Equality and Women's Empowerment

The average disability prevalence rate in the female population of 18 years and older is 19.2 percent, compared to 12 percent for males, representing about 1 in 5 women.⁷² Women and girls with disabilities face a double nexus of inequality - inequalities experienced by persons with disabilities, and gender inequalities across development and societal sectors. This in turn places them in doubly vulnerable situations where they do not receive access to services, have compounding safety and security challenges, and enjoy less agency and autonomy.

Women and girls with disabilities are up to ten times more likely to be subjected to gender-based violence than their non-disabled peers,⁷³ and also experience technology-facilitated gender-based violence (TFGBV) as an evolving form of GBV. Sterilization of women with disabilities without their knowledge or consent is also a widespread form of violence and violation of reproductive rights.⁷⁴ Inaccessible justice systems in turn hinder the ability of girls and women with disabilities to access justice and seek or obtain redress. Women with disabilities are often further discriminated against because they are even more likely to be economically poor.⁷⁵ This triple discrimination experienced by women with disabilities is often ignored or unnoticed because persons with disabilities are often treated as genderless human beings. It is also primarily neglected due to a lack of substantive data and information on its extent or impact.

Promising Approaches:

- Build awareness of and capacity to address gender-based issues within DPOs/OPDs and disability-serving organizations; and advance and support women and girls with disabilities' agency, equitable leadership, representation, and meaningful participation across all development, humanitarian, social, and political sectors of society.
- Identify and address the differential gaps, barriers, needs, and opportunities of women and girls, men and boys, and gender diverse individuals by conducting and integrating the findings from gender analyses for disability-focused programming, and disability-inclusive gender analyses for all USAID programming, strategies, and policies.
- Advance gender-sensitive learning, by ensuring all disability-focused data and research is sex-disaggregated, accounts for gender-based differentials, and incorporates gender-based learning questions. Disaggregate by disability status, and as feasible disability type, age, gender identity, sexual orientation, sex characteristics, and other relevant disaggregates.

⁷² UN Women. [“The Empowerment of Women and Girls with Disabilities: Towards full and effective participation and gender equality.”](#) 2018.

⁷³ UNFPA. [“Young Persons with Disabilities: Global Study on Ending Gender-Based Violence, and Realizing Sexual and Reproductive Health Rights.”](#) 2018.

⁷⁴ UNDESA. [“The United Nations Flagship Report on Disability and Development.”](#) 2018.

⁷⁵ USAID. [“Advancing Women and Girls with Disabilities.”](#) 2023.

Global Health

Although life expectancy has increased by 69.4 percent in years lived with disability between 1990 and 2019, persons with disabilities remain behind in life expectancy by 10-20 years.⁷⁶ Mortality rates are 2.4 times higher among persons with disabilities than their non-disabled peers.⁷⁸ During the COVID-19 pandemic, persons with disabilities were 2.8 times more likely to die from COVID-19.⁷⁹ Persons with disabilities are also 3 times more likely to be denied health care.⁸⁰ Research indicates that transgender individuals with disabilities and who are deaf are likely to be treated by practitioners who have little to no understanding of at least one aspect of their identities.⁸¹ Only 21 percent of adults with disabilities have comprehensive knowledge about HIV prevention and transmission compared to 28 percent of non-disabled persons.⁸² As a result of the gap in comprehensive knowledge, persons with disabilities are 2 times more likely to have HIV/AIDS.⁸³

Such disparate health outcomes are not the consequence of persons with disabilities' underlying health conditions, but rather are the consequence of unfair and avoidable societal conditions which disproportionately affect persons with disabilities.⁸⁴ Adopting disability-inclusive approaches to health care has the potential to bring dividends to individuals and communities. It is estimated that for every US\$1 spent on disability-inclusive noncommunicable disease prevention and care (ie. ensuring equitable access to these services for persons with disabilities), the return on investment could be US\$10.⁸⁵ For children with disabilities, promoting primary health care systems that are equipped to monitor children's development is a key component to early intervention and provision of appropriate support services to children and families. Ensuring access to quality health care for persons with disabilities contributes to their wider participation in society, is consistent with state parties' obligations under Article 25 of the CRPD, and is critical to achieving Universal Health Coverage, and Sustainable Development Goal 3 promoting "Good health and well-being."

Promising Approaches:

- Promote health care systems that effectively serve all, including persons with disabilities of all ages, by ensuring that such systems "expect, accept, and connect"⁸⁶ persons with disabilities with quality and inclusive health care, and that such approaches respect and respond to the diverse and intersecting identities of persons with disabilities.

⁷⁶ IHME, ["WHO Rehabilitation Need Estimator."](#) 2021.

⁷⁷ The Missing Billion Initiative. ["The Missing Billion Report: Reimagining Health Systems That Expect, Accept and Connect 1 Billion People with Disabilities."](#) 2022.

⁷⁸ Ibid.

⁷⁹ Ibid.

⁸⁰ Ibid.

⁸¹ Transgender Europe, "Oppression Squared." 2017.

⁸² Ibid.

⁸³ Ibid.

⁸⁴ WHO. ["Global report on health equity for persons with disabilities."](#) 2022.

⁸⁵ Ibid.

⁸⁶ The Missing Billion Initiative. ["The Missing Billion Report: Reimagining Health Systems That Expect, Accept and Connect 1 Billion People with Disabilities."](#) 2022.

- Ensure empowerment and meaningful participation of persons with disabilities and DPOs/OPDs in health sector interventions, including but not limited to the areas of health sector governance, financing, physical infrastructure, health policy, digital technologies for health, development of the health and care workforce, and systems of monitoring and evaluation.
- Recognizing that rehabilitation services,⁸⁷ Assistive Technologies,⁸⁸ and person-centered and rights-based mental health care services are beneficial to all persons not only persons with disabilities, addressing the provision of these services as part of health systems strengthening should be part of quality, disability-inclusive health care.

Humanitarian Assistance

Humanitarian crises—whether violence, economic and political collapse, or natural disasters—disproportionately impact persons with disabilities. During crises, the mortality rate of persons with disabilities may be two to four times higher than that of non-disabled persons.⁸⁹ Crises also increase the prevalence of disability due to new injuries and disrupted health and essential service systems.⁹⁰ Persons with disabilities are more likely to have unmet basic needs due to significant barriers in accessing humanitarian assistance, such as inaccessible sanitation infrastructure or food assistance that is not responsive to specific nutritional needs.⁹¹ The systems, services, and informal networks that persons with disabilities rely on are more likely to be dysfunctional or inaccessible during crises. Persons with disabilities also face specific protection risks, including targeted violence and abuse, loss of or damage to assistive devices, and increased dependency on others.⁹²

Disability intersects with other identity factors to increase marginalization during crises. For example, children with disabilities are more likely to be abandoned or neglected during displacement, and women and girls with disabilities face higher rates of gender-based violence than their non-disabled peers.⁹³ ⁹⁴ Understanding how the different aspects of a person's identity can expose them to overlapping forms of discrimination and marginalization, and enhancing the participation and leadership of persons with disabilities in humanitarian decision-making and ensuring OPDs access funding is critical to disability inclusive humanitarian assistance.

⁸⁷ It is estimated that approximately 2.4 billion people would benefit from rehabilitation. IHME. [“WHO Rehabilitation Need Estimator.”](#) 2021.

⁸⁸ 2.5 billion people globally need to use at least one type of Assistive Technology (AT), such as wheelchairs, hearing aids, prostheses, eyeglasses or digital services. [ATscale The Global Partnership for Assistive Technology.](#)

⁸⁹ Katsunori Fujii, 2015. ‘The Great East Japan Earthquake and Disabled Persons’, in Disability Information Resources, Japan.

⁹⁰ Handicap International. 2015. [Disability in Humanitarian Contexts: Views from affected people and field organizations.](#)

⁹¹ UNDESA, [“Disability-Inclusive Humanitarian Action.”](#) 2023.

⁹² Handicap International. 2015. Disability in Humanitarian Contexts: Views from affected people and field organizations.

⁹³ UNICEF, [Children with Disabilities in Emergencies,](#) 2023.

⁹⁴ Women's Refugee Commission. 2014. Disability inclusion: Translating policy into practice in humanitarian action.

Promising approaches:

- Promote the leadership of persons with disabilities and their representative organizations in humanitarian coordination and decision-making fora at the global- and regional-, national-, and sub-national- levels.
- Implement the Inter-Agency Standing Committee Guidelines on Inclusion of Persons with Disabilities, including the four “must do” actions: promote meaningful participation; remove barriers to accessing humanitarian assistance; empower persons with disabilities to develop their own capacities; and monitor for inclusion.⁹⁵
- In line with the twin track approach, ensure each humanitarian response sector (e.g. health, nutrition, protection, shelter, etc.) integrates disability inclusion into all programmatic activities and provides interventions to address the specific risks or barriers persons with disabilities face related to that sector.

Nutrition

Persons with disabilities of all ages experience barriers in accessing adequate nutrition. Barriers to education and skills acquisition, and employment discrimination, can negatively impact their standard of living and affordability of nutritious food. Inaccessible housing and transportation can make even affordable food difficult to obtain, and lack of access to reliable power can negatively impact safe storage and cooking of food. Consequently, persons with disabilities are at higher risk of living in food insecure households, and are less able to afford a meal with protein than non-disabled persons and their households.⁹⁶ Lack of access to education also means that children and youth with disabilities are “less likely to benefit from school-based malnutrition reduction efforts” than their non-disabled peers.⁹⁷

Children with disabilities are 2-3 times more likely to be malnourished, and twice as likely to die from malnutrition as their non-disabled peers.⁹⁸ In addition to wider societal barriers that limit access to nutritious food, lack of access to nutrition-specific supports can also foster malnutrition for persons with disabilities who experience feeding difficulties such as difficulty chewing or swallowing. Although 25-45 percent of typically developing children experience such difficulties, that figure jumps to 33-80 percent of children with disabilities.⁹⁹ The frequent exclusion of children with disabilities experiencing feeding difficulties from nutrition programs and services, and lack of access to supports for their families and other caregivers, means that these children are at enhanced risk of malnourishment, wasting, and death.

Promising approaches:

- Address societal barriers in education, employment, and elsewhere that negatively impact the ability of persons with disabilities to achieve and maintain an adequate standard of living, and support policies and programs that uphold the ability of persons with disabilities to live

⁹⁵ IASC. 2019. [Guidelines on inclusion of persons with disabilities in humanitarian action.](#)

⁹⁶ UNDESA. [“The United Nations Flagship Report on Disability and Development.”](#) 2018.

⁹⁷ Ibid.

⁹⁸ The Missing Billion Initiative & The Clinton Health Access Initiative. [“Reimagining Health Systems that Expect, Accept and Connect 1 Billion People with Disabilities.”](#) 2022.

⁹⁹ Seminars in Speech and Language. [“Pediatric Feeding and Swallowing Disorders: State of Health, Population Trends, and Application of the International Classification of Functioning, Disability, and Health.”](#) 2007.

independently and be included in accessible communities where they can access affordable healthy food and adequate nutrition.

- Promote social protection policies and programs that encompass the nutrition needs of persons with disabilities and their households across the life course.
- Ensure that nutrition supports and services, and malnutrition reduction interventions, are accessible to and inclusive of persons with disabilities on an equitable basis with others, including through early identification of and outreach to persons with disabilities who may experience feeding difficulties.

Peace and Security

Persons with disabilities who are living in, or attempting to flee from, conflict zones face numerous threats to their physical and mental health and well-being, further aggravating pre-existing disability or leading to secondary disability.¹⁰⁰ Conflict also increases the prevalence of disability within the population through newly acquired disabilities for combatants and civilians alike. At the same time, persons with disabilities are “among the most excluded groups” in peacebuilding.¹⁰¹ When peacebuilding programs and initiatives are not disability-inclusive, they deny persons with disabilities “their right to participate and fail to benefit from their expertise, both on conflict-related disability issues and on broader conflict dynamics.”¹⁰²

Independent of broader situations of conflict, persons with disabilities are at elevated risk of being victims of crime. Reasons include reliance on in-person assistance, inaccessible transportation, limited access to information and communication, social isolation, and lack of access to justice that reduces the chances of perpetrators being held accountable.¹⁰³ In addition to crimes common to non-disabled persons, persons with disabilities may also experience specific forms of crime influenced by their disability context. For example, persons with disabilities who are victims of intimate partner violence may be subject to “denial of care or assistance, destruction of medical equipment, destruction of equipment for communication purposes, or manipulation of medications, in addition to more common controlling and abusive behaviors.”¹⁰⁴

Promising approaches:

- Recognize and support persons with disabilities and their representative organizations as agents of change in transforming conflict, interrupting violence in communities, and participating in inclusive and accessible peacebuilding processes and programming to promote attitudes, structures, and institutions that underpin and sustain peaceful societies.
- Promote the meaningful inclusion of persons with disabilities and their representative organizations into security and governance mechanisms, including disarmament, demobilization, and reintegration processes.

¹⁰⁰ UNGA. [“Report of the Special Rapporteur on the Rights of Persons with Disabilities.”](#) 2022.

¹⁰¹ United States Institute of Peace. [“Special Report Disability-Inclusive Peacebuilding: State of the Field and the Way Forward.”](#) 2021.

¹⁰² Ibid.

¹⁰³ The National Center for Victims of Crime. [“Crimes Against People with Disabilities.”](#) 2018.

¹⁰⁴ Ibid.

- In addition to addressing ableist norms and inaccessibility of justice systems, ensure that services intended to support victims of crime are accessible and responsive to the specific needs of persons with disabilities.

Water Security, Sanitation, and Hygiene

Globally, 2.2 billion people around the world do not have safely managed¹⁰⁵ drinking water services, 4.2 billion people do not have safely managed sanitation services, and 3 billion lack basic¹⁰⁶ handwashing facilities.¹⁰⁷ Access to safe and clean water and sanitation facilities is a basic human right of all people, including persons with disabilities.¹⁰⁸ However, in many LMICs, persons with disabilities are “less likely to live in households with access to improved water and sanitation, and less likely to live in a dwelling with hygiene and sanitation facilities on the premises.”¹⁰⁹ In some LMIC contexts, “more than one in seven persons with disabilities finds the toilet at home hindering or not accessible.”¹¹⁰ Even in more resourced country contexts, crowdsourced data indicates that “only 69 per cent of public toilets are accessible for wheelchair users.”¹¹¹

The denial of access to safe and clean water and sanitation facilities has extensive implications for the well-being, dignity, and self-reliance of persons with disabilities. Inaccessibility of water sources and facilities can hinder the ability of persons with disabilities to participate in community activities, education, and employment. For example, inaccessible toilet and water facilities are major contributing factors for school dropout among children with disabilities, especially girls.¹¹² Inaccessible facilities can also force dependency on others, increasing “the risks of sexual and financial exploitation, as well as deteriorating health and hygiene,” especially for women and girls with disabilities.¹¹³

Promising approaches:

- Strengthen national, municipal, and local system capacity to deliver accessible and equitable water and sanitation services for persons with disabilities, including through governance and financing reforms, and utilization of principles of universal design and accessibility standards.
- Ensure the meaningful engagement of persons with disabilities and their representative organizations to develop water, sanitation, and hygiene design and location recommendations that increase accessibility, affordability, and safety.

¹⁰⁵ *Safely managed drinking water and sanitation services*: Drinking water from sources located on premises, free from contamination and available when needed, and using hygienic toilets from which wastes are treated and disposed of safely.

¹⁰⁶ *Basic services*: Having a protected drinking water source that takes less than thirty minutes to collect water from, using an improved toilet or latrine that does not have to be shared with other households, and having handwashing facilities with soap and water in the home.

¹⁰⁷ UNICEF/WHO. “[Report on inequalities in access to water, sanitation and hygiene.](#)” 2019.

¹⁰⁸ See CRPD Article 9 (Accessibility) and Article 28 (Adequate standard of living and social protection).

¹⁰⁹ UNDESA. “[The United Nations Flagship Report on Disability and Development.](#)” 2018.

¹¹⁰ Ibid.

¹¹¹ Ibid.

¹¹² African Educational Research Journal. “[Public School Toilets: A curse or blessing for girls with physical impairment.](#)” 2017.

¹¹³ World Bank. “[Including Persons with Disabilities in Water Sector Operations: A Guidance Note.](#)” 2017.

- Advance disability-inclusive economic opportunities for persons with disabilities by improving the ability of water and sanitation service providers to train, hire, retain, and promote persons with disabilities so that they can work in the water and sanitation industry.