Regional Disability Policy Brief

The Conduct of Disability Assessments in Borrowing Member Countries

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Conducted by the University of the West Indies, Cave Hill Campus

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Inclusivity, Dignity and Agency for All: **A Disability Is Not an Inability**

1 Summary of Purpose

This regional policy brief summarises strategic priority areas for support in the short-, medium- and long-term and addresses the challenges of persons with disabilities in four Borrowing Member Countries (BMCs) of the Caribbean Development Bank (CDB), namely Grenada, Jamaica, Saint Lucia, and Trinidad and Tobago., The policy brief aims to support their human rights specified under the Convention on the Rights of Persons with Disabilities (CRPD) and other global commitments to human rights (such as Convention for the Elimination of All Forms of Violence Against Women (CEDAW) and the Convention for the Rights of Children (CRC), gender equality and the Sustainable Development Goals (SDGs). The four countries were selected because they represent a spectrum of CDB's 19 Borrowing Member Countries (BMCs).

The CDB Disability Assessment in BMCs confirmed areas of progress (strengths), persistent inequalities (weaknesses), innovative opportunities, and best practices that can be replicated across the region as well as threats, which, if not addressed, will undermine progress in empowering persons with disabilities to achieve their rights.

The CDB Disability Assessment employed a mixed methods approach (including quantitative and qualitative research; national and household surveys, desk reviews and institutional assessment alongside focus group discussions and interviews with key policy makers). This Brief presents quick facts from the assessment of disabilities in all four BMCs, key recommendations for strategic priority areas for programme/project support in short, medium and long term and key monitoring and evaluation indicators.

2 Quick Facts from the Assessment of Disability in the Region

This section summarises the main findings from studies conducted in the four countries. For more details, see the Regional Report and the specific country reports.

A national survey was used in St Lucia. In Grenada, Jamaica, and Trinidad and Tobago, the study participants included persons with disabilities and their caregivers, who provided more information on the focused area of the study. Persons with disabilities constituted a considerable proportion of the populations in these countries, ranging from 4.2% in Jamaica to 15% in Saint Lucia. Jamaica had the highest percentage of males with disabilities at 56.5%, while St Lucia had the highest percentage of females with disabilities at 53.1%. In Grenada, the distribution of persons with disabilities was 49.5% male and 50.5% female, whereas in Trinidad and Tobago, it was 53.6% male and 46.3% female. Grenada and St Lucia had the highest proportion of persons with disabilities over 60 years of age at 47.2% and 57% respectively. Jamaica had the highest percentage of persons with disabilities in the 0–17 age group at 32.4%, while Trinidad and Tobago had the highest percentage in the 35–59 age group at 35%.

For those who reported at least one disability, Jamaica had the highest percentage of males with disabilities at 56.5%, while St Lucia had the highest percentage of females with disabilities at 53.1%. In Grenada, the distribution was 49.5% male and 50.5% female, whereas it was 53.6% male and 46.4% female in Trinidad and Tobago.

Disability Is **Not Inability**

The disability assessments were quite informative and provided comprehensive insights into the quality of life of persons with disabilities. The main theme that emerged from the study is that persons with disabilities do not want to be treated as citizens lesser than their country men, women, boys and girls. The lived realities of persons with disabilities were similar at all stages of the life cycle. Some of the main challenges are as follows:

Macro Level

1. **Lack of Rights-Based Framework:** The rights of persons with disabilities are not mainstreamed in the state's policies and programmes. Although all four countries have ratified the Convention on the Rights of Persons with Disabilities (CRPD), there have been no concerted efforts to protect the rights of persons with disabilities at all stages of the life cycle. Further, there are gaps in legislation, policy, strategic interventions, programmes, projects, advocacy and public education that prevent the promotion of their rights.

2. **Inadequate Expenditure:** Public expenditure (capital and recurrent) on persons with disabilities is inadequate. It is difficult to calculate the total public expenditure on this group of citizens as it is often subsumed under expenditure on other groups.

3. **Voicelessness and Invisibility:** Persons with disabilities are seldom included in the conceptualisation, implementation, monitoring and evaluation of policies and programmes that target them.

4. **Stigmatised and Without Agency[1]:** Often, persons with disabilities are regarded as helpless and useless. They are treated as persons with no agency and a burden to all.

Macro Level

1. **Limited Access to employment opportunities:** Discrimination and stigma, the lack of workplace accommodations, limited access to education and training, inaccessible transportation, low employer awareness, legal and policy gaps, social isolation and lack of networks are some of the issues that persons with disabilities confront in the labour market.

2. **Inadequate Access to Basic Social Services:** Persons with disabilities have limited access to basic social services. When they are available, access to services may be hindered by transportation costs or/and time, type or mode of the delivery.

3. **Inequitable Social Protection:** Social protection is inadequate in terms of monetary value, coverage and scope. Further, there is a lack of public, private, voluntary or social network sectors supporting persons with disabilities in their efforts to prevent, manage and overcome a defined set of risks and vulnerabilities. These interventions are deficient with regard to income protection, social safety nets, public and private insurance, labour standards, employment generation, micro-credit, education and training, disaster prevention and relief, and informal networks.

4. **Inadequate Health Facilities:** Persons with disabilities have inadequate access to preventative, diagnostic, treatment and rehabilitative health services. Additionally, critical health services are often inaccessible. Psychosocial support is also lacking for both persons with disabilities and their care givers. Lastly, preventative health and public health education receive inadequate attention beyond health facilities.

[1]The capacity to speak for oneself and fulfil one's potential

5 **Inequitable Education:** Quality education to fulfil the fullest potential of persons with disabilities is culturally and intellectually exclusive, and very few continue their education after leaving Special Education Centres. While some attempts have been made at mainstreaming persons with disabilities, the physical and academic resources are insufficient in the educational facilities. Caregivers also call for increased access to formal education for themselves, as their caregiving duties limit their educational advancement.

6 **Weak Support for Non-Government Organisations:** NGOs who serve persons with disabilities receive insufficient support. They remain under-resourced and have limited impact and reach.

7 **Disaster Unreadiness:** Disaster management and preparedness as well as response and recovery measures are inadequate for persons with disabilities. Prevention of harm and reduction of exposure to risks for persons with disabilities are not top priorities.

8 **Communication Barriers:** Many persons with disabilities face significant challenges in accessing important information from service providers due to issues with how and when the information is shared. In some cases, the information is not provided in a timely manner, making it difficult for individuals to make informed decisions or take advantage of available opportunities.

Additionally, the format of the information is often not accessible—for example, it may not be available in braille, large print, sign language, or simplified language formats that suit the diverse needs of people with different types of disabilities. Furthermore, the frequency of communication is sometimes inconsistent or insufficient, leaving individuals unaware of updates, deadlines or changes in services. These communication barriers can result in exclusion from critical support systems, including employment-related services, education, healthcare and social assistance.

Micro/Community and Individual levels

1 **High Levels of Abuse:** Persons with disabilities are often subjected to various forms of abuse, including verbal, emotional, physical and even sexual abuse. This abuse can occur both in public spaces and within the supposed safety of their homes or communities. Alarmingly, some individuals reported being sexually abused by people they know and trusted, including family members, caregivers or close acquaintances. Such abuse not only causes immediate harm but also leads to long-term psychological trauma, fear and mistrust. The vulnerability of persons with disabilities, coupled with inadequate legal protection and weak reporting systems, often leaves them without justice or support.

2 **Immobility and Inaccessibility:** Mobility plays a crucial role in promoting independence, dignity and a sense of self-worth. However, for many persons with disabilities, simply moving around within their communities—or travelling to school, work or health facilities—is a major challenge. The transportation options available are often expensive, unreliable and not designed to accommodate their needs. Infrastructural inadequacies, such as the absence of ramps, elevators or paved walkways, further limit their ability to engage in daily activities. This lack of accessible transportation and infrastructure not only restricts their physical movement but also limits their access to essential services, opportunities and social interaction, contributing to feelings of isolation and exclusion.

3 **Emotional Strain and Mental Health Challenges:** Living with a disability often places a significant emotional and psychological burden on individuals, as well as on their caregivers. The constant struggle to access services, overcome discrimination, cope with financial difficulties and manage physical limitations can lead to overwhelming levels of stress. Many persons with disabilities experience depression, frustration, anxiety and/or helplessness due to the systemic and societal barriers they encounter. Caregivers, too, often experience burnout and emotional strain from the ongoing demands of care, especially when there is little support or respite. Without adequate mental health resources or social support systems, the emotional strain and mental

health challenges can severely impact their overall well-being and quality of life.

Based on data analysis, the main theme emerging from studies conducted in all four country-studies was: **Inclusivity, Dignity and Agency for All: A Disability Is Not an Inability**. Persons with disabilities called for reduced social exclusion, more dignified services and increased opportunities to fulfil their full potential. They wanted their governments and compatriots to become more tolerant and to note that a disability is not an inability to play their role in the development of their nations.

3 Key Recommendations and Strategic Priority Areas for Project/Programme Support

Introduction

Creating an inclusive society where persons with disabilities are fully integrated and empowered is a crucial goal for equitable and sustainable development in line with the UN2030 Agenda and the United Nations Convention on the Rights of Persons with Disabilities Convention (UNCRPD). This section presents a strategic framework for inclusion. It is organised thematically and divided into short-, medium- and long-term recommendations. Each strategy supports the rights specified in the UNCRPD and aims to remove systemic barriers to equality. All recommendations were reviewed at dissemination workshops with key stakeholders and persons with disabilities.

Legislative, Policy and Programmatic Inclusion

Short-Term Strategies (2024-2026)

- Nationalise the UNCRPD and set out national action plan with legislation and budget for implementation.
- Mandate that all programmes and policies, in keeping with CRPD, must factor in the interests and rights of persons with disabilities.
- Allocate resources to build capacity to integrate disability rights and the principles of gender equality in national and regional policy and programmes.
- Create a regional public service announcement platform for tracking the progress on the implementation of disability legislation in the region.

Medium-Term Strategies (2027-2030)

- Review national policies, laws and administrative measures to secure the rights recognised in United Nations Convention for the Rights of Persons with Disabilities (UNCRPD) and abolish laws, regulations, customs and practices that constitute discrimination, consistent with Article 4. National budgets should make adequate allocations across all ministries to ensure that persons with disabilities have equitable access to services.
- Ensure that national constitutions and laws guarantee equality for all before the law, prohibit discrimination based on disability and guarantee equal legal protection (Article 5); ensure equality in rights to own and inherit property, control financial affairs and have equal access to bank loans, credit and mortgages (Article 12); ensure equal access to justice on par with others (Article 13); and ensure the right to liberty and security and that persons with disabilities are not deprived of their liberty unlawfully or arbitrarily (Article 14, CRPD).

Long-Term Strategies (2030-2034)

- Review laws and administrative measures to ensure that they guarantee freedom from exploitation, violence and abuse of persons with disabilities. Establish measures to support the recovery, rehabilitation and reintegration of victims of abuse and to investigate the abuse (Article 16, CRPD).
- Monitor the implementation of the rights of persons with disabilities. Guarantee that persons with disabilities can enjoy their inherent right to life on an equal basis with others (Article 10, CRPD).
- Evaluate the implementation of the rights of persons with disabilities every five years. The recommendations should be tabled in the Parliament and implemented by the responsible ministry/department.

Public Expenditure on Persons with Disabilities

Short-Term Strategies (2024-2026)

- Ensure that budgets clearly state the public expenditure on persons with disabilities, as estimating it has proven difficult.

Medium-Term Strategies (2027-2030)

- Ensure that annual reports state the public expenditure on persons with disabilities.

Long-Term Strategies (2030-2034)

- All private, public, local, regional and international agencies must report on expenditure on persons with disabilities.

Intra-Island Inequities

Short-Term Strategies (2024-2026)

- Address the disparities in services provided for persons with disabilities in the smaller islands of Tobago, Carriacou and Petite Martinique. Ensure that accessible infrastructure is prioritised in the rebuilding of communities affected by natural disasters (such as Hurricane Beryl. The use of United Kingdom Caribbean Infrastructure Fund (UKCIF) infrastructural guide along with the Organisation of Eastern Caribbean States (OECS) building code can facilitate this process.
- Provide access to affordable emergency transportation services for persons with disabilities in Carriacou and Petite Martinique.

Medium-Term Strategies (2027-2030)

- Provide infrastructure to address issues with access to essential services such as health, education and banking in the smaller islands (e.g. Tobago, Carriacou and Petite Martinique)

Long-Term Strategies (2030-2034)

- Ensure that the inclusion of persons with disabilities in the smaller islands is prioritised across all initiatives from state and non-state actors.

Digital Inclusion

Short-Term Strategies (2024-2026)

- Conduct accessibility audits of all digital platforms and services in all countries to identify immediate barriers for persons with disabilities.
- Implement alt text (for images), keyboard navigation and colour contrast to improve communication with persons with disabilities in all countries.
- Provide training sessions for all developers of communicative and promotional material. These sessions should expose participants to accessible design principles and assistive technologies and increase their awareness of the importance of digital inclusion.
- Provide technological training for persons with disabilities.
- The public sector should lead by example by increasing the employment of persons with disabilities, demonstrating a commitment to inclusion and setting a benchmark for other sectors. The private sector must also be held accountable for its role in fostering inclusive workplaces. This includes providing reasonable accommodations, debunking stereotypes and addressing negative perceptions about the capabilities of persons with disabilities. The private sector should view the employment of persons with disabilities not as a legal obligation, but as an opportunity to tap into a diverse talent pool, enhance innovation and contribute to a more inclusive society.
- Provide the private sector organisations with incentives to encourage the inclusion of persons with disabilities in the labour force. This can include providing grants for retrofit working spaces and offering supportive devices. Provisions for remote working opportunities and the use of supportive devices in physical work spaces should be prioritised to ensure equal access and participation.
- Mandate disability awareness training for all employees, especially the managerial staff, across all sectors and encourage the adoption of UNCRPD into the operational plans of all organisations to promote a more inclusive workplace.

Medium-Term Strategies (2027-2030)

- Forge partnerships with advocacy groups and organisations to gain regular insights and feedback from persons with disabilities. To ensure inclusivity, involve persons with disabilities in the design and testing of digital products.
- Develop and implement procurement policies that ensure inclusive technologies. Mandate that all vendors of technologies provide strategies for ongoing support and regular updates of their products.
- All countries must invest in accessible infrastructure such as accessible information and communication technology centres and assistive technology labs to provide resources and support for persons with disabilities.
- Implement accessibility strategies using the Web Content Accessibility Guidelines (WCAG) to ensure that digital products meet minimum accessibility standards.
- Establish policies and mechanisms to ensure that persons with disabilities have access to comprehensive facilitation and rehabilitation services in the areas of health, employment and education, enabling them to achieve economic independence (Article 26, CRPD).
- Offer tax incentives for companies and organisations that employ and retain persons with disabilities, encouraging long-term inclusion in the workforce.

Long-Term Strategies (2030-2034)

- Ensure that residents in rural areas have access to required technologies.
- Implement stronger legislative measures and enforcement mechanisms to ensure compliance to digital accessibility and inclusion.
- To keep pace with technological advancements, regularly review and update accessibility guidelines and standards to ensure digital inclusion.
- Persons with disabilities should have equal rights to work and earn a living. Review and eliminate discriminatory workplace policies; provide financial support, technical assistance and training to promote self-employment and entrepreneurship; establish and implement quotas for employing persons with disabilities in the public sector; offer incentives to the private sector for encouraging their employment; and implement measures that support reasonable accommodation at work (Article 27, CRPD). Private organisations should be mandated to employ at least one person with disabilities.
- Provide the private sector incentives to encourage the inclusion of persons with disabilities in the labour force. This can include offering grants for retrofit working spaces and providing supportive devices. Provisions for remote working opportunities and the use of supportive devices in physical work spaces should be prioritised to ensure equal access and participation.
- Mandate disability awareness training for all employees, particularly the managerial staff, across all sectors and encourage the adoption of UNCRPD into the operational plans of all organisations to promote a more inclusive workplace.

Inclusive Disaster Management

Short-Term Strategies (2024-2026)

- Preparedness Phase
  Ensure that national registers clearly identify persons with disabilities who are most at risk, e.g. those who live alone. Personalise evacuation plans to include procedures for the timely and safe evacuation of all persons with disabilities. Map all shelters so that persons with disabilities can find one without trouble. Information should be accessible to persons with disabilities. Various modes of communication, e.g. text messages, visual alerts, and audio announcements, should be used to cater for different needs and preferences.

- Response Phase:
  Sign language interpreters and all assistive devices should be made available to ensure the comfort of persons with disabilities at shelters.

Medium-Term Strategies (2027-2030)

- Response Phase
  Train all emergency responders and volunteers on disability awareness, communication techniques and appropriate emergency methods to assist persons with disabilities during evacuations.
  Procure and implement appropriate and accessible transportation strategies/options.

Long-Term Strategies (2030-2034)

- Recovery Phase
  Develop inclusive recovery plans that include appropriate and accessible healthcare, counselling and the provision of assistive technology and mobility aids. Develop plans with guidelines/standards for collaborative assistance from local community groups to ensure ongoing support for all persons with disabilities. Organise capacity-building training sessions for family members/guardians, essential workers and community volunteer groups to increase awareness and skills for supporting persons with disabilities.

Holistic Health Care

Short-Term Strategies (2024-2026)

- 'Positive discrimination' – implement strategies that will ensure that persons with disabilities do not have to wait in long lines and can access social services as soon as possible.
- Support the development of rehabilitation centres in countries.
- Implement free access to 24/7 online helplines with psychiatrists, psychologists and counsellors to provide support to persons with disabilities and their caregivers.
- Establish and strengthen the capacity of half-way homes for persons with mental illnesses.

Medium-Term Strategies (2027-2030)

- Review health policies and services to ensure that they provide persons with disabilities access to the highest attainable standard of health without discrimination based on disability. Health services should also provide the same range, quality and standard of free or affordable healthcare as provided to other persons; they receive necessary health services because of their disabilities, so they should not be discriminated against in the provision of health insurance (Article 25).
- Mobile clinics should be set up to provide services to persons with disabilities, as transportation is expensive and can be tedious for them.
- Expand health services, considering various types of disabilities. They should include diagnostics, treatment and rehabilitation.
- Refurbish mental health hospitals to make them more habitable and reduce the stigma associated with hospitalisation at mental health hospitals. Further, enforce a no-abandonment policy at these hospitals to reduce the incidents of abandonment.

Long-Term Strategies (2030-2034)

- Use artificial intelligence (AI) to transform healthcare by enhancing diagnostics, accelerating drug discovery, personalising treatments and improving patient care through tools such chatbots and predictive analytics.
- Expand health services by considering various types of disabilities. They should include diagnostics, treatment and rehabilitation

Inclusive Education & Public Education

Short-Term Strategies (2024-2026)

- Organise sensitisation workshops for educators across all levels of the education system. These workshops should focus on the rights of persons with disabilities and promote equitable treatment to ensure that they are recognised as equal citizens.
- By adopting a multi-agency approach, establish and strengthen (where available) mentorship programmes for persons with disabilities in the region.
- Retrofit or build facilities that are accessible for persons with disabilities to allow for their integration into the mainstream education system.
- Create a regional repository/hub/app where resources (such as research, initiatives, and knowledge products) from each country can be accessed by members of the civil society, academia, governments and private sector. This will allow for regional collaborations to advance the rights of persons with disabilities.
- Provide support for private sector schools that assist children with disabilities through a government initiative, ensuring these institutions have the resources to offer inclusive education.

- Implement special accommodations for children with disabilities for both internal and external exams at all stages of school education, not just during the Caribbean Secondary Education Certificate (CSEC) or Caribbean Advanced Proficiency Examination (CAPE).

Medium-Term Strategies (2027-2030)

- Increase the number of special needs teachers at mainstream schools. Effective mainstreaming calls for the upskilling of all teachers and addressing a range of needs (while there may still be some specialist and special needs teachers). Provide them with the necessary tools for effective teaching and learning. Providing both support and teaching aids in public schools is vital.
- Provide scholarships for persons with disabilities at all levels of the education system to promote equal access to educational opportunities.
- Ensure that special education centres/schools are equipped with the necessary devices and a reliable internet connection to support regular online learning and resources.
- Develop or expand national public education and awareness programmes for the general public as well as for persons with diverse forms of disabilities to combat stereotypes and prejudices and promote awareness of the capabilities of persons with disabilities (Article 8, CRPD).

Long-Term Strategies (2030-2034)

- All formal and informal education facilities will be inclusive education and training institutions.
- Improve infrastructural capacity so that students with disabilities can access educational facilities. Specialised facilities are needed for persons with severe disabilities.
- Develop and implement public education programmes to promote changes in attitudes and behaviours, ensure that persons with disabilities are protected against arbitrary or illegal interference with their privacy, family, home, correspondence, communication and personal information and protect their health and rehabilitation on par with others in society (Article 22, CRPD). Public education programmes should also seek to eliminate discrimination against persons with disabilities in relation to personal relationships, marriage, family, parenting, access to sexual and reproductive and family planning education and services, and opportunities for the guardianship and adoption of children (Article 23, CRPD).

Disability Sensitive Social Protection

Short-Term Strategies (2024-2026)

- Provide food vouchers to persons with disabilities and their families as food insecurity is high. Establish and make universal use of the operative definition of "disability."
- Create a national register of persons with disabilities to improve targeting and coverage

Medium-Term Strategies (2027-2030)

- Review and adjust means-tests to ensure that persons with disabilities are not excluded from social protection programmes. Establish a universal disability support allowance that includes healthcare, food security and a combination of in-kind support and services (e.g. psychological support).
- Provide career opportunities for parents/guardians of persons with disabilities who are unable to engage in employment because of their care provision duties. Increase the value of the benefits for persons with disabilities.
- Establish a life-cycle approach to the provision of benefits for persons with disabilities

Long-Term Strategies (2030-2034)

- Establish a cohesive and seamless structure for the delivery of programmes and services for persons with disabilities. Provide dedicated trained staff who offers services to persons with disabilities. Provide disability sensitive housing.

Inclusive and Disability-Sensitive Justice System

Short-Term Strategies (2024-2026)

- Employ sign language interpreters across all levels of the justice system.
- Host disability-sensitive sessions for all categories of personnel in the justice system.
- Develop provisions to accommodate the special considerations for the testimonies of persons with intellectual disabilities.
- Ensure that court rooms are accessible to persons with disabilities.

Medium-Term Strategies (2027-2030)

- Provide a specified day for cases involving persons with disabilities and conduct an assessment of the referral mechanism for cases.

Long-Term Strategies (2030-2034)

- Legislative reform: swifter and harsher punishment for perpetrators of violence against persons with disabilities

Support for Care Givers

Short-Term Strategies (2024-2026)

- Establish 24-hour helpline for caregivers.
- Develop a short course for caregivers of persons with disabilities. Modules can include the following:
  Understanding Different Types of Disabilities
  Managing Expectations
  Ways to Care for Specific Types of Persons of with Disabilities
  Managing Stress and Promoting Good Mental Health
  How to Access Resources: A Directory of Services for Persons with Disabilities Regionally

Medium-Term Strategies (2027-2030)

- Through partnership with the private sector (e.g. hotels, restaurants and spas), provide access to respite care for caregivers of persons with disabilities.

Extreme Vulnerability

Short-Term Strategies (2024-2026)

- Children are the future. Implement measures to ensure that children with disabilities living with their families have adequate access to care services within the home or community. Review the situation of children with disabilities in state care to ensure that separation from their parents and family is in the best interest of the child (Article 23, CRPD).

Medium-Term Strategies (2027-2030)

- Review the current situation of women and children with disabilities and the intersecting factors that accelerate barriers to equality and inclusion.
- Ensure the equal rights and advancement of women and girls with disabilities (Article 6) and protect children with disabilities (Article 7, CRPD).

Housing

Short-Term Strategies (2024-2026)

- Review and update national policies and programmes to measure and respond to gaps in public housing, services and assistance for disability-related needs, as well as assistance with disability-related expenses in case of poverty (Article 28, CRPD).

Long-Term Strategies (2030-2034)

- Provide low-cost housing options for persons with disabilities

Monitoring and Evaluation

Short-Term Strategies (2024-2026)

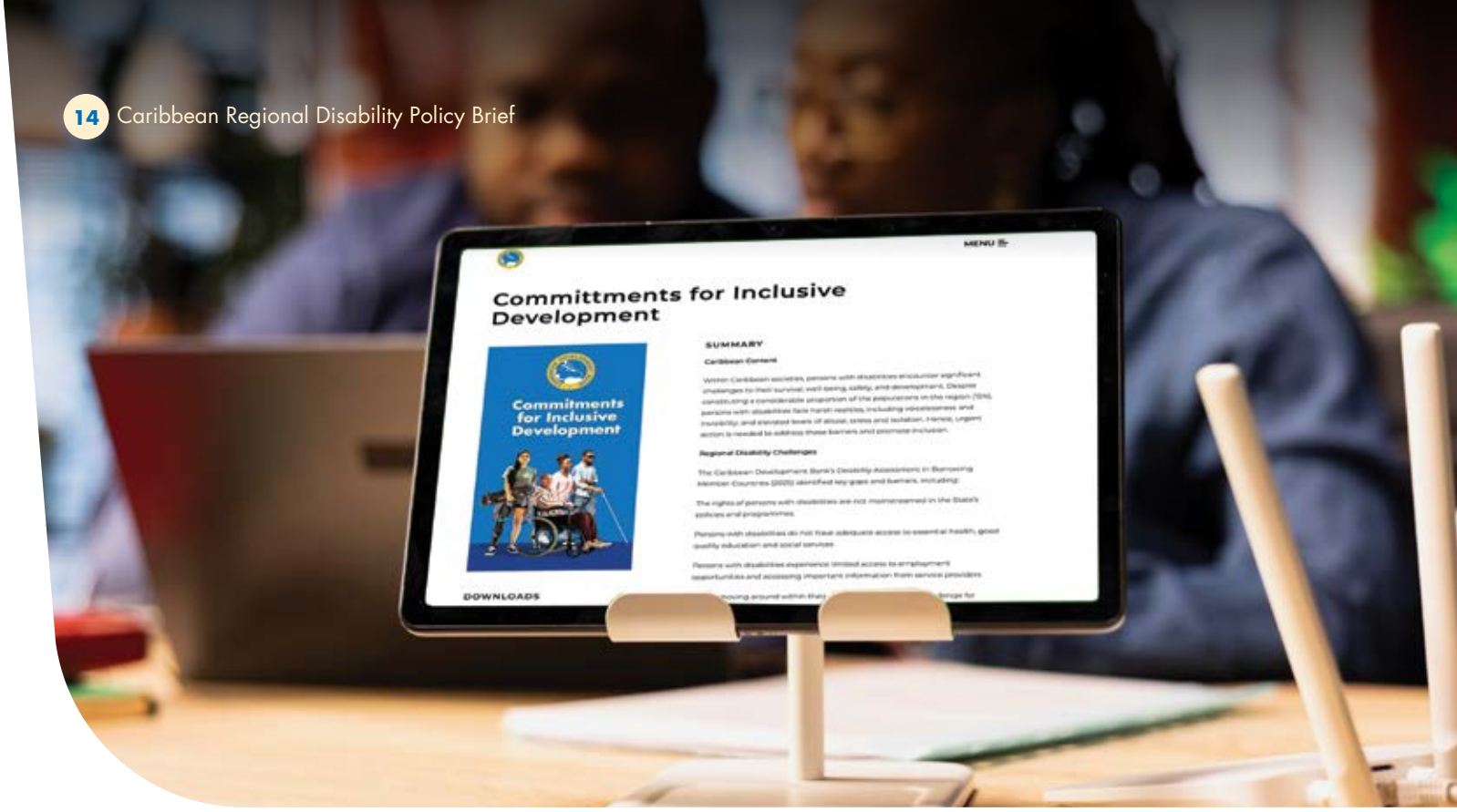
- Designate a focal point in the government and create a national mechanism to promote and monitor implementation (Article 33).

Medium-Term Strategies (2027-2030)

- Build the capacity of national statistical systems to collect and generate relevant and quality disability statistics based on regional and international guidelines. Organise national capacity development training workshops to foster harmonisation and complementarity. Strengthen systems for the collection and analysis of data disaggregated by sex, age, type of disability and location of persons with disabilities. Review and address current impediments to data sharing across government agencies to maximise access to quality data to promote the rights of persons with disabilities.

Long-Term Strategies (2030-2034)

- BMCs should move to adopt common definitions, concepts, standards and methodologies for the production of statistics on persons with disabilities to better identify and address the multiplexity of challenges faced by persons with disabilities.



4 Key Monitoring and Evaluation Recommendations

The regional study highlighted the deficiencies in the monitoring and evaluation processes in CDB's BMCs. The conceptualisation, implementation, monitoring and evaluation of policies and programmes targeted at persons with disabilities should be evidence-based. Here are some main policy recommendations for effective monitoring and evaluation:

- Build the capacity of national statistical systems to collect and generate relevant and quality disability statistics based on regional and international guidelines
- Host national capacity development training workshops to foster harmonisation and complementarity
- Enhance coordination between line ministries to ensure that a consistent approach is being taken to address cross-cutting issues and meet the needs of users within each ministry
- Establish comprehensive data banks nationally and regionally
- Establish a regional disability data portal to facilitate data-sharing and dissemination
- Enhance the monitoring of enrolment and participation of persons with disabilities in the educational system
- Undertake an in-depth review of BMC's data management tools to determine capacity for greater digitisation and suggest modifications to make them consistent with the country's data management needs
- The accurate measurement and improvement of the well-being of persons with disabilities require the development and effective monitoring of indicators that capture the full spectrum of the restrictions experienced. As such, it is important that BMCs move towards adopting common definitions, concepts, standards and methodologies for the production of statistics that better help them to identify and address the multiplexity of challenges persons with disabilities face. The framework of indicators presented in Table 3 can help BMCs establish baselines and identify trends, data gaps and constraints in data management capacity. In keeping with the SDGs and their indicators, the framework identifies 115 indicators that can be further tailored to the needs of each BMC through future consultation. It is therefore important that the KPIs identified in Table 3 are integrated into sectoral plans.
- The indicators used by the UN Rapporteur to assess BMCs triennially should also be considered for addition in the common framework of monitoring and evaluation disability indicators that is to be adopted.

Conclusion

The analysis of both quantitative and qualitative data from the four countries highlights the widespread discrimination, neglect and marginalisation faced by persons with disabilities. These challenges, rooted in societal attitudes, inadequate infrastructure and limited access to essential services, prevent individuals with disabilities from fully participating in society. It is clear that urgent action is needed to address these barriers and promote inclusion. By implementing targeted policies and interventions, such as improving access to education, healthcare and employment, we can create a more equitable society where persons with disabilities are treated with dignity and respect. These efforts will not only benefit individuals with disabilities but will also contribute to the overall well-being and development of society.

Some follow-up strategies are as follows:

1. Organise stakeholder engagement and consultation.
2. Strengthen policy development and advocacy.
3. Develop and implement strategy and operational guidelines inclusive of resource allocation and budgeting, capacity building and training, implementation of accessible services, monitoring and evaluation, public awareness campaigns and collaboration with international organisations.

The analysis of both quantitative and qualitative data from the four countries revealed that persons with disabilities face a significant amount of discrimination, neglect and marginalisation within the region. The adherence to the CRPD of the United Nations is low and persons with disabilities are treated as lesser human beings.

Achieving a more inclusive society for persons with disabilities requires a multidimensional and phased approach. This roadmap provided actionable strategies across policy, infrastructure, education, healthcare, justice, and more. By committing to these short-, medium- and long-term actions, we can collectively pave the way for a region that values and includes persons with disabilities.

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