Mainstreaming disability in the new development paradigm

Evaluation of Norwegian support to promote the rights of persons with disabilities

Nepal country report
Report 1/2012 Study
Mainstreaming disability in the new development paradigm

Evaluation of Norwegian support to promote the rights of persons with disabilities

The Nepal country report

February 2012

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Disclaimer:
The report is the product of its authors, and responsibility for the accuracy of data included in this report rests with the authors. The findings, interpretations and conclusions presented in this report do not necessarily reflect the views of Norad Evaluation Department.

Note on layout and language
The layout of the document has tried to conform to guidelines for accessibility and ease of reading, which require Arial font and left (not full) justification of the text.

The report has also tried to avoid unnecessary use of acronyms and abbreviations.

An easy-read version of the Evaluation report Mainstreaming disability in the new development paradigm, will be made available on www.norad.no. A Nepali translation of the summary is also available.
Preface

During the last decade the approach to disability has changed from a medical approach to a social and a human rights-based approach where focus is on removing barriers in society.

Norway has been among the driving forces establishing a framework for including and mainstreaming disability in development cooperation. How has Norwegian support to the promotion of the rights of persons with disability in the last decade been reflecting this?

The purpose of the evaluation was twofold: to document and assess the results of the Norwegian support in the last decade, and to assess the adequacy of the current 2002 Guidelines for the future, with special reference to the Convention on the Rights of Persons with Disabilities.

The evaluation offers an overview of Norwegian support to promote the rights of persons with disabilities. Between 2000 and 2010 the total funding targeting persons with disabilities was 1.4 billion Norwegian kroner (USD240 million). In addition to the targeted support, the report identifies a few general programs in which disability aspects have been mainstreamed. These projects had a total budget of 1.6 billion Norwegian kroner of which only a small part (less than 1%) went to facilitating the inclusion of persons with disabilities.

The documentation and analysis of Norwegian support in the four case countries Malawi, Nepal, the Palestinian territory and Uganda, and the desk study of the support to Afghanistan, argue for a two-track approach, utilizing gender mainstreaming as a model. Targeted initiatives give short term results and empower the rights-holders. Mainstreamed initiatives may take more effort and time, but when successful – capacitate the governments (duty-bearers) in providing long term and sustainable results by removing barriers for inclusion and universal access.

The research team systematically analyzed the Norwegian funded projects in light of a human rights-based theory of change, relying on the assumptions that projects need to empower persons with disabilities and their organizations, as well as build the capacity and demand accountability of the duty-bearers to take their responsibility for fulfilling the rights of persons with disabilities as stipulated in international conventions and national laws. Ensuring that research, statistics and knowledge are fed into the programming is also a key dimension of this theory of
change. The evaluation found that very few stakeholders applied a human rights-based theory of change, but rather focused on service provision which the team suggests is more likely to address immediate needs rather than creating sustainable changes.

The main synthesis report is available electronically and in printed version. A braille copy can be downloaded from the web. The four country reports, written in English, are available electronically. As part of Norads efforts of ensuring universal access, the summaries of the country studies are made available electronically, with translations to the relevant local languages Nepali, Arabic and Chewa. In addition an easy-read version in English and Norwegian of the main report is available electronically. In the oral presentations, sign language interpretations were facilitated for the hearing impaired and the deaf.

Nordic Consulting Group, in cooperation with researchers from the countries involved, carried out the evaluation and is responsible for the contents of the report, including its findings, conclusions and recommendations.

Oslo, February 2012

Marie Gaarder
Director of Evaluation
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<th>Abbreviation</th>
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<tr>
<td>AIN</td>
<td>Association of International NGOs in Nepal</td>
</tr>
<tr>
<td>Aus Aid</td>
<td>Australian Government Overseas Aid Program</td>
</tr>
<tr>
<td>CBOs</td>
<td>Community Based Organisation</td>
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<tr>
<td>CCCD</td>
<td>Child Centred Community Development</td>
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<tr>
<td>CERID</td>
<td>Research Centre for Educational Innovation and Development</td>
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<tr>
<td>CEDAW</td>
<td>Convention on Elimination of all Forms of Discrimination Against Women</td>
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<tr>
<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>CRPD</td>
<td>UN Convention on the Rights of Persons with Disabilities</td>
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<tr>
<td>DDCs</td>
<td>District Development Committee</td>
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<tr>
<td>DIFD</td>
<td>Department for International Development</td>
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<tr>
<td>DPOs</td>
<td>Disabled People’s Organisation</td>
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<tr>
<td>FFO</td>
<td>The Norwegian Federation of Organisations of Disabled People</td>
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<tr>
<td>GESI</td>
<td>Gender Equity and Social Inclusion</td>
</tr>
<tr>
<td>GTZ/GiZ</td>
<td>The Deutsche Gesellschaft für Internationale Zusammenarbeit</td>
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<tr>
<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>IDEA</td>
<td>Institute for Democracy Electoral Assistance</td>
</tr>
<tr>
<td>INGOs</td>
<td>International Non-Governmental Organisation</td>
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<tr>
<td>INSEC</td>
<td>Informal Sector Service Center</td>
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<tr>
<td>LGBTI</td>
<td>Lesbian, gay, bisexual, transgender, and intersex</td>
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<tr>
<td>LGCDP</td>
<td>Local Governance &amp; Community Development Program</td>
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<tr>
<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>MFA</td>
<td>Ministry of Foreign Affairs, Norway</td>
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<tr>
<td>MIREST</td>
<td>Media Initiative for Rights, Equity and Social Transformation</td>
</tr>
<tr>
<td>MLD</td>
<td>Ministry of Local Development</td>
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<tr>
<td>MoPR</td>
<td>Ministry of Peace and Reconstruction</td>
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<tr>
<td>MoWCSC</td>
<td>Ministry of Women Children and Social Welfare</td>
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<tr>
<td>NABP</td>
<td>Norwegian Association of Blind and Partially Sighted</td>
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<tr>
<td>NFDN</td>
<td>National Federation of Disabled Nepal</td>
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<tr>
<td>NFU</td>
<td>Norwegian Association for Persons with Developmental Disabilities</td>
</tr>
<tr>
<td>NGOs</td>
<td>Non-Governmental Organisation</td>
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<tr>
<td>Norad</td>
<td>Norwegian Agency for Development Cooperation</td>
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<td>NHRC</td>
<td>National Human Rights Commissions</td>
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<td>NPTF</td>
<td>Nepal Peace Trust Fund</td>
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<tr>
<td>Acronym</td>
<td>Full Form</td>
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<tr>
<td>RNE</td>
<td>Royal Norwegian Embassy</td>
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<td>SDC</td>
<td>Swiss Development Corporation</td>
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<tr>
<td>SIAG</td>
<td>Social Inclusion Action Group</td>
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<tr>
<td>SIRF</td>
<td>Social Inclusion Research Fund</td>
</tr>
<tr>
<td>SNV</td>
<td>Netherlands Development Organisation</td>
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<tr>
<td>SWAP</td>
<td>Sector Wide Approach</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
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<tr>
<td>UNDP</td>
<td>United Nations Development Program</td>
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<tr>
<td>UNHCR</td>
<td>United Nations High Commission of the Refugee</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
</tr>
<tr>
<td>UNSCR</td>
<td>United Nations Security Council Resolution</td>
</tr>
<tr>
<td>ICESCR</td>
<td>International Covenant on Economic, Social and Cultural Rights</td>
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<tr>
<td>WAPPDCA</td>
<td>Women's Alliance for Peace Power Democracy and the Constituent Assembly (now Sankalpa)</td>
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<td>WFP</td>
<td>World Food Program</td>
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Executive summary

This field visit report on Nepal forms part of the Evaluation of the Norwegian Support to Promote the Rights of the persons with disabilities. It gives an overview of how the Norwegian funded programs in Nepal have related to the rights of persons with disabilities.

KEY FINDING
The Norwegian support has contributed to increased visibility and capacity of the disability movement in Nepal. This has enabled the movement to play a key role in the lobbying for policy change. The service provision projects have contributed to improved physical functioning, self-reliance and social inclusion of targeted children and adults. Although measures are taken in the education sector program, progress of inclusion of children with disabilities is slow. The social inclusion, democracy and human rights initiatives supported by Norway have in most cases not yet encompassed persons with disabilities.

The context
Diversity in Nepal meant discrimination based on caste, class, ethnicity, gender and even geographic location. Persons with disabilities are among those historically excluded from the mainstream socio-politics and economic development and facing multiple discriminations. The post conflict socio-political transformation process in Nepal has put social inclusion and human rights at the top of the political and development agenda. However, disability is not yet in the political and development discourse.

Nepal ratified the UN Convention on the Rights of Persons with Disabilities in 2010. The national legislation has not yet been aligned, but there have been some efforts to address the rights of persons with disabilities, such as:
– provisions in the new draft constitution protecting the rights of persons with disabilities;
– the annual program adopted by the parliament for 2011/12, which includes specific provision for rehabilitation for persons with disabilities (as a result of conflict);
– the national census carried out in July 2011 included more disability specific questions in the main questionnaire category;
– provision of disability ID cards which gives holders certain privileges; and
– allocation of small district budgets to disability programs.
However, policies alone have not translated to concrete benefits for people due to lack of awareness, advocacy and Government capacity to deliver its promise.
Norwegian support
2 billion Norwegian Kroner (NOK) have been channelled to Nepal (or 206 MNOK per year in average) from year 2000 to 2010. Around 2% of this support targeted persons with disabilities (4.4 MNOK per year) and Atlas Alliance was the main agreement partner. The targeted initiatives include capacity building of Disabled People's Organisations (44%), service delivery such as cataract operations, eye care (30%) and individual empowerment (26%).

In addition to the targeted initiatives, some programs funded by Norway have mainstreamed persons with disabilities in their regular programs. The most notable initiative that had mainstreamed disability was the Nepal Government's education program, where efforts have been made to reach and include children with disabilities. The mainstream initiatives focus on service provision (74%), capacity building of the duty-bearers (16%) and research (5%).

Other programs have included smaller components directed to persons with disabilities, for example:

- The National Human Rights Commission (supported via the UN Development Program) has a section working on the rights of persons with disabilities.

- The support to rehabilitation of ex-combatants via the Nepal Peace Trust Fund created under Ministry of Peace and Reconciliation provides rehabilitation support to persons with disabilities and land mine victims.

- The Social Inclusion Research Fund has provided research grant to researchers with disabilities.

- Sankalpa (women’s network supported by the Embassy) has included an organisation of women with disabilities.

Results
Results are more prominent in the targeted initiatives. Norway, together with other Scandinavian countries, is recognised as a long term supporter and promoter of the disability movement in Nepal. Support to organisations such as the National Association of the Blind; Parents Network of Persons with Intellectual Disability and National Federation of the Disabled People (NFDN) has been instrumental in strengthening the disability movement in Nepal. The visible results are various legislature and policy reforms; increasing budget allocation especially at the district level; ratification of CRPD. Funding of services such as rehabilitation, eye health, education, counselling, income generation/livelihood and vocational training have led to improved living conditions and self-reliance of persons with disabilities reached by the projects.

For the mainstreamed initiatives, efforts could be traced in the education sector where inclusive education was promoted through specific measures, budgets and monitoring indicators. However, the quality and concrete results for children with disabilities could still be questioned. Other results were improved living
conditions of conflict victims, mine victims and refugees reached by humanitarian assistance and disaster relief support. Other results were increased visibility of disability issues due to research (Social Inclusion Research Fund and Research Centre for Educational Innovation and Development) and promoting inclusion of women with disabilities in the women’s rights movement of Nepal and the peace building process (Sankalpa).

The challenges have however been the effective implementation of policy reforms. Reviews of the education program are not encouraging. The supplementary initiatives of Save the Children and UNICEF to support the Government’s education program such as “child friendly classrooms” and “education for all”, have not yet systematically addressed inclusion of children with disabilities as an integral part.

**Conclusion and Opportunities**

Concrete and visible results of the targeted initiatives can be directly attributed to the Norwegian support. However this accounts for only 2% of the Norwegian funding to Nepal. Disability has not been effectively mainstreamed in the majority of the general development programs. Although strengthened to some extent, the disability movement has not yet been strategic or able to promote mainstreaming or to position the rights of persons with disabilities as part of the socio-political and development agenda. Norway has not communicated disability as an important human rights or poverty reduction issue in the dialogue with the Government, the UN agencies or the Agreement partners.

However, there are many opportunities especially due to the high priority given to social inclusion and human rights in the country.

**Recommendations to the disability movement**

For better and more effective mainstreaming results, the disability movement has to re-strategize its approach and refocus advocacy initiatives. For this:

1. Competencies for effective advocacy need to be strengthened and strategic alliances developed with other civil society agencies for greater visibility and leverage.
2. Large development programs, mostly those implemented by the Government with support of external development partners have to be specifically targeted when advocating for mainstreaming. Systematic and comprehensive inclusion of persons with disabilities in the policy framework, program design, budgeting as well as monitoring and evaluation framework should be promoted.
3. Other Human Rights tools such as the CRC, ICESCR, CEDAW and other international development priorities such as MDGs, poverty alleviation should be used together with CRPD for evidence based advocacy.
4. Capacity to provide expertise input to those organisations willing to mainstream disability needs to be strengthened.
Recommendations to the Norwegian Government/Embassy

The Norwegian Government is recognised in Nepal for promoting issues that are side-tracked and putting them in mainstream development, such as gender mainstreaming and social inclusion (cast, ethnicity and LGBTI).

Therefore, Norwegian Government does have a very good leverage to play a more pro-active role in promoting the rights of persons with disabilities. For this, the Embassy/MFA could:

1. Consider taking the initiative in forming a donor group for this purpose. RNE could use the lessons from promoting of LGBT rights and from promoting gender equality. Linking up with likeminded agencies and using arguments based on CRPD and the Millennium goals could be a way forward.

2. Play a proactive role in influencing the various donors’ forums and networks such as the Social Inclusion Action Group (SIAG), Association of INGOs in Nepal, UN working groups/donor groups, External Development Partners Network (Health and Education sectors SWAP) in order to further leverage the efforts of the disability movement in influencing the development discourse in Nepal.

3. Play a catalytic role in supporting the disability movement to influence Government’s programs and priorities.

4. Further support institutional capacity of agreement partners, including the Government, as part of Norway’s strategy to mainstream disability in its development cooperation. Forums like annual partners meeting (hosted by the embassy) can be used for this, collaborating with DPOs/Disability movement as strategic partners for capacity building.

5. Start by focusing on inclusion of persons with disabilities in certain sectors such as governance, human rights and education programs. In all social inclusion programs disability should be a specific focus with its own indicators and budget.
1. Introduction

1.1 Background

This field visit report forms part of the evaluation of the Norwegian Support to Promote the Rights of persons with disabilities. The study included four case countries. Malawi, Uganda and the Palestinian territory were pre-selected by Norad’s Evaluation Department as case study countries. In the inception phase, Nepal was included as a case country for the field visits and Afghanistan as a case for desk studies.

Nepal is a small, landlocked South Asian country bordered by China and India. Over 85% of the people live in the rural area and nearly 80% of the population is engaged in agriculture. Nepal is seen as one of the world’s poorest and least developed, ranking 138th on UNDP’s 2010 Human Development Index (index of 0.428). The average per capita GDP for 2009 was US $440, or 1.2 US $/day. 1/3 of the population lives below the poverty line (World Bank, 2009).

The decade long conflict in Nepal (1996-2006), claimed more than 13,000 lives. Following a peace agreement in 2006, an Interim Constitution was accepted and Constituent Assembly elections were held, and the country was declared a Republic from a Kingdom.

1.2 Purpose

According to the Terms of Reference, the purpose of the evaluation is twofold:
– Document and assess the results of the Norwegian support to promote the rights of persons with disabilities in development cooperation in the last decade. The evaluation should include, but not be limited to an assessment of the extent to which the support to persons with disabilities has been mainstreamed and the special merits of such an approach within the cooperation.
– On the basis of the plan and guidelines from 2002, considering the recent developments on the international scene, with special reference to the Convention (and Art. 32), propose guidelines appropriate to meet the challenges for Norway related to the support and promotion of the rights of persons with disabilities.

1 Henceforth referred to as the Evaluation
1.3 Definitions

According to the CRPD, “persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.”

For the purpose of this evaluation:
– HIV/AIDS and TB are not considered a disability in most partner countries and therefore initiatives targeting persons living with HIV/TB will not be included.
– initiatives focusing on prevention of disability are not included as the persons targeted do not yet have a disability (e.g. mine clearance, vaccination campaigns, health education campaigns).

However:
– corrective surgery is included (e.g. operations to improve mobility, eye sight, or reconstruction due to gender-based violence etc.) as well as programs providing medication to persons with disabilities (e.g. epilepsy, mental health etc.) when this is part of a more comprehensive rehabilitation and empowerment program.

In this evaluation, the team has studied two types of projects:
1. Targeted/specific initiatives where the living conditions and rights of men, women, girls and boys with disabilities are the main focus. “Specific” or “targeted” initiatives have as their main aim to support service provision, empowerment, organizational capacity development, advocacy or other measures in to promote the rights of persons with disabilities.

2. Mainstreamed projects/programs, where persons with disabilities are part of a wider program targeting a sector, issue or geographical area. “Mainstreamed initiatives” have other main aims, but include persons with disabilities as part of their agenda.

For the purpose of this evaluation, we consider that mainstreaming of disability has only taken place when specific measures have been taken to include and facilitate the participation of persons with disabilities. We use two main criteria for claiming mainstreaming:

a. explicit measures to include persons with disabilities must be mentioned in the planning document and/or a budget linked to these measures; and
b. the progress, annual or end report(s) must include specific information on results and/or outcomes for persons with disabilities.

During the investigation it was found that few programs had met this definition of mainstreaming, but still had included some measures to reach or consider persons with disabilities. We therefore decided to add a category called “partly mainstreamed”.
1.4 Methodology

The evaluation team consisted of Annika Nilsson, team leader and Era Shrestha, from NCG’s associated partner in Nepal, the Organisation Development Centre (ODC). The field studies were carried out between 5 July to 31 October, 2011.

Sample

The selection of programs and partners was done to get a representative sample of all channels and sectors. Based on the country statistics (Norad’s database), the agreement partners were categorized according to size (see chapter 3):

Then 1-5 agreement partners within each of the categories were selected based on the scale of funding received and interviewed in the field. These categories were Government of Nepal, Multilateral institutions, Norwegian NGOs, Local NGOs, International NGOs and Other donors.

Supplementary interviews with the biggest Norwegian NGOs were carried out in Norway (Save the Children, Atlas Alliance, Red Cross, Plan Norway, Development Fund) after the field work was completed, while their implementing partners were visited during the field work.

To ensure that all DAC sectors were covered, sample representing the largest DAC sector were also selected, which included Government and civil society, education and conflict prevention and resolution (except energy, see section on limitation).

In addition to the scale of funding, partners with programs in Education and Humanitarian Assistance/Peace building were specifically selected; hence few stakeholder categories have more samples than the others. Balance has been made to select agreement partners with both targeted and mainstream initiatives (as identified through the list of project classified as targeted and mainstreamed).

In some cases, instead of the agreement partner, the initiative supported (project/program or the local NGO or agency) were selected as sample. The agreement partners had received the fund and channelled it to these project implementing agencies. Hence projects or the implementing agencies were considered to be more relevant sample than the fund recipient agency (agreement partners). In some cases both the agreement partner and the implementing agency (initiative funded) have been selected as sample (e.g. the Norwegian NGOs).

Following the interactions, samples identified as potential best practices during the interview were also added. Additionally one organisation, which was not an agreement partner of Norway, was also interviewed so as to get insight into good practices.
Interactions with the rights-holders

Interviews with the rights-holders and representatives of the DPOs were held at different stages of the evaluation process to get their perspective and feedback on the methodology from the viewpoint of persons with disabilities. In order to understand the disability context of the country better, interviews were also held with two individual experts.

Furthermore, a seminar with the rights-holders was conducted in October 31, 2011 to validate the preliminary findings of the study and solicit additional insights, prospective and comments from the rights-holders themselves. The workshop was valuable for jointly analysing the finding and working out recommendations for way forward. This seminar invited participants from different disability group and ensured their full participation by sign language interpreters, braille materials and easy to read summaries. The synthesis, findings and recommendations from this seminar is incorporated in the report.

Data Collection and Analysis

Standard interview guides were used to collect the data. Questions which required the respondent to score against a scale were converted into Questionnaire and respondent were asked to score in writing.

All relevant data, both of targeted and mainstreamed initiatives and the institutional practices related to system, strategies/policies and practices were gathered from the respondents, irrespective of it being promoted by Norwegian, other donors, or being a self-initiated initiative of the partners. The data were analysed to ascertain the extent of inclusion and promotion of rights of persons with disabilities in general and later attempt were made to trace Norwegian’s role in it.

The draft field visit report was submitted to Norad on October 3rd and shared with partners thereafter. The comments from Norad and partners were incorporated to finalise this report. A follow-up workshop was held in Oslo, Norway on November 2, 2011 to synthesize and consolidate the findings across all the case countries. The workshop was instrumental in further analysing and consolidation the finding of this field visit report along the theory of change developed and utilised. After the workshop, the field visit report was revised and finalised, incorporating the feedback from all the above processes and submitted to Norad in mid-December 2011.
Table 1: Projects reviewed and interviews by categories

<table>
<thead>
<tr>
<th>Stakeholder categories</th>
<th>Number of respondents</th>
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<tr>
<td>Extending Agency/Embassy</td>
<td>9</td>
</tr>
<tr>
<td>Norwegian NGOs and DPOs</td>
<td>10</td>
</tr>
<tr>
<td>Government of Nepal</td>
<td>6</td>
</tr>
<tr>
<td>Multilateral Institutions</td>
<td>8</td>
</tr>
<tr>
<td>Local NGOs</td>
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<tr>
<td>International NGO</td>
<td>6</td>
</tr>
<tr>
<td>Public Sector other Donor Countries</td>
<td>6</td>
</tr>
<tr>
<td>Other Country Private Sector</td>
<td>2</td>
</tr>
<tr>
<td>Projects/partner or initiative of agreement partner</td>
<td>9</td>
</tr>
<tr>
<td>Counterpart of Norwegian NGOs</td>
<td>9</td>
</tr>
<tr>
<td>Individual Experts</td>
<td>2</td>
</tr>
<tr>
<td>Non-agreement partners (INGO)</td>
<td>1</td>
</tr>
<tr>
<td>Sum</td>
<td>74</td>
</tr>
</tbody>
</table>

1.5 Limitations

Some of the samples selected were reluctant to participate in the review as they said they were “not involved in the Disability Sector”. However, they could be convinced later to participate in the interview, except for one sample (selected under private sector – Energy). The Norwegian public sector programs also could not be interviewed.

Some of the respondents, especially the representatives of government institutions, were not willing to score the questionnaire survey and hence had to be left out. Some respondents did not respond to some of the questions in the questionnaire survey as they felt that they did not have enough information for scoring (e.g. questions on their organisation’s or of the extending agencies capacity to promote the rights of persons with disabilities).

It was a challenge for the review team to find adequate and relevant literature, research and studies specific to the country. It was also difficult to draw a complete picture with regards to the kind and amount of funding coming to disability initiatives and the number and nature of donors supporting it (other than Norway), as there is no central agency with an overview of the funding and initiatives in the disability sector.

Since this evaluation covered the last 11 years, for some of the older projects, it was difficult to get detailed information as the concerned individuals were no longer with the organisations. In a few other organisations, where the agreement had been done in their Head Offices abroad, the staff in the local country office did not have information on the terms and conditions of the contract with the Norwegians and whether or not disability had been promoted or specifically mentioned during the negotiation process.

3 The above list does not include the participants of the Right holder’s workshop. As the participating DPOs are not direct agreement partners of the Norwegian Government and are partners of Atlas Alliance. Respondents of Atlas Alliance are counted under Norwegian NGOs.
2. Country Disability Context

This section builds upon the inputs from the various interviews with the stakeholders, workshop with the rights-holders and literature review.

Nepal, a home to more than 100 different ethnic/caste groups with distinct language, culture, religions and living in different geographic terrain (plains, mountain, high Himalayas), is a very diverse society. Social and power structures, institutionalized through the caste system, stratifies individuals into unequal positions from and by birth. As one of the most inequitable societies in the world, a sizeable proportion of the population is excluded and discriminated on basis of caste, class, ethnicity, gender and even geographic location. Persons with disabilities are among those who have been historically excluded from the mainstream socio-politics and economic development. If they are women and/or belong to marginalized castes, class or ethnic groups, then they often face multiple discriminations. Nepal experienced a decade long conflict, which is said to be an expression against the prevailing discrimination, exclusion, poverty and social injustice. The resulting socio-political transformation process after the Peace Agreement in 2006 put social inclusion and human rights at the top of the political and development agenda of Nepal, promoting rights of women, Dalits, Janjati and Madhesi. However, disability has not yet strongly come up in the political and development discourse of Nepal, probably because it was not seen as one of the conflict triggers.

2.1 Statistics

Acquiring accurate data on the prevalence of disability in Nepal is a difficult task for different reasons, including the lack of a common understanding how to define disability and the stigma associated with it. The official data from the latest population census in 2001 mentions 103,795 persons with disabilities in Nepal on a total population at that time of 23.1 million, or 0.45%. This figure has been challenged by many, in particular by the disability movement itself, as extremely inaccurate, given the inappropriate survey design and hesitation to disclose cases of disabilities due to social taboo.

---

4 National Census 2001, Central Bureau of Statistics
5 Religious classification defining position and status in society
6 Religiously classified as ‘untouchable’ caste
7 Indigenous and ethnic minorities, facing linguistic and religious discrimination
8 People living in the plain regions of Nepal, facing racial discrimination
9 National Census 2001, Central Bureau of Statistics, Preliminary result of the National Census 2011 published in September, 2011 indicates the population to be 26.6 million
A situation analysis on disability in Nepal conducted by UNICEF in 2000 found 1.63% of the total population was severely disabled.\textsuperscript{11} Surveys from different organizations have revealed disability prevalence ranging from 1 to 13% of the total population.\textsuperscript{12}

Nepal is currently conducting a national census which also includes detail questions on disability in the main questionnaire.\textsuperscript{13} If done properly, the data that will come out of this 2011 census might give a better idea of the number of persons with disabilities across the country.

\subsection*{2.2 Living Conditions}

In different Nepali cultures, disability is still viewed as a sin of the previous life\textsuperscript{14}, and hence a shame to the family, which often results in concealing the family members\textsuperscript{15} from society and denying them a dignified life. Lack of adequate human resources (e.g. in health and education), access to facilities and information, inaccessible infrastructure and transportation have been major obstacles in ensuring a dignified life for persons with disabilities. Assistive devices are not easily available, especially in rural areas and not affordable to many. Only a limited population of those with hearing impairment have been able to develop an adequate sign language and access interpreter services, limiting their active participation in social life. Many persons with visual impairments are not familiar with braille and do not have access to software that enables them to use computers.

Within this disadvantaged group, persons with developmental or intellectual disabilities and mental health problems are the most stigmatized and marginalized. There are cases reported in media where persons with disabilities (mostly with developmental disabilities and mental health problem) are confined and forced to live in inhumane conditions. There is no mental health act at the national level, though this is emerging as a burning need.\textsuperscript{16} One and a half decades of armed conflict in the country has “left up to one fourth of the population with traumas beyond their mental health coping capacity”.\textsuperscript{17}

There is a strong correlation between disability and poverty in Nepal. Due to poor educational chances, almost non-existent employment opportunities, and a weak social security system, persons with disabilities tend to fall low on the poverty ladder.

\begin{thebibliography}{99}
\bibitem{1} “A Situation Analysis of Disability in Nepal”. Unicef, National Planning Commission Nepal, February 2001, p.47
\bibitem{2} A ‘District Disabled Survey’ in 2005 in Sunaari district in Eastern Nepal, conducted jointly by the Local Government and the World Vision (NGO) revealed the population of Persons with disabilities to be 4.87%.
\bibitem{3} The National Census 2011 was undertaken during July 2011, with more than 45,000 data collectors going from house-to-house to collect different information of the population, including data about disability. The results of this census are expected to be available in 2012.
\bibitem{4} 50 % of the parents of persons with disabilities surveyed answered that the disability of their child was due to fate and God’s will (New Era 1999)
\bibitem{5} The study, Situation Analysis on Disability in Nepal (1999) indicated that 70% of Persons with Disabilities could not lead a dignified life as they were mocked and isolated.
\bibitem{6} WHO has estimated that 20 to 25% of total population in developing countries like Nepal has mental health problems, and mental health is the leading cause of disability (www.koshishnepal.org)
\bibitem{7} KOISHISH, Strategic Plan 2010, www.mentalhealthworldwide.com/2010/08/Nepal
\end{thebibliography}
In a patriarchal society like Nepal, where prevalence of gender discrimination and domestic violence is very high, women with disabilities are even at higher risk. Alwis (2010) states that “gender related violence is a cause and consequence of disability”. Research done by Dhungana (2007) has identified gender discrimination and poverty as the key cause of disability among women and argues that disability and its relation to gender has not been recognized by the state and programs of non-governmental organizations. Similarly, according to the Nepal Disabled Women Association, the traditional gender role foresees women as in-charge of all household chores. When she is no longer able to fulfil her obligations due to disability, she is considered useless and hence less care and support is provided. The national laws are in general discriminatory against women and even more against women with disability.

A pregnant women belonging to low-income groups are often deprived of nutritious food and proper health services and hence, their children are at higher risk of being born with disabilities. Cultural practices such as Chaupadi in rural Nepal, forces menstruating women and lactating mothers to live outside the comfort of a home in cowsheds (Alwis, 2010), making menstruation and motherhood a traumatic experience. Due to preferences for sons, women experience repeated pregnancy and abortions. Giving birth to daughters often means less care, as a result many suffer from post natal depression and psychosis and hence disability.

Education
Interim Constitution of Nepal has established education as one of the fundamental rights of every citizen so as to live a life with dignity. The UN Convention for the Right of persons with disabilities (CRPD) obliges Nepal to ensure that persons with disabilities are not excluded from the general education system on the basis of disability, and particularly children with disabilities must not be excluded from free and compulsory primary education, or from secondary education. Government of Nepal is slowly moving towards the concept of ‘Inclusive Education’; which refers to access to educational opportunities for children who are excluded and discriminated against due to caste, class, gender, ethnicity, religion and regional (remote or conflict affected) – and disability.

However, Children with Disabilities in general and specifically with developmental or intellectual disability and girl children with disability are among those most excluded from access to school and education. They have lower enrolment and higher dropout rate (Human Right Watch 2011, UNICEF Rosa 2007). Altogether, 68% of persons with disabilities have no education (59.6% of male and 77.7% of females) (UNICEF Rosa, 2007). The Flash I Report (B.S 2067) by the Ministry of Education reveals that out of 60,348 children officially registered with disabilities; only 1.2% is enrolled in the primary and basic education and 1% in lower secondary education. A recent study by Human Rights Watch (2011) states: “Despite Nepal’s Political commitment to persons with disabilities, particularly children, in practice, the Government is falling short in implementation where it is most needed”. Lack of disability friendly environment, adequate learning and
teaching materials and negative attitudes of teachers and parents are major challenges. Even if school buildings might be accessible the roads to schools are not. Education for children with disabilities is mostly organised as separate classes in the general school or as segregated initiatives in special schools and day care centres (for children with developmental disabilities). It is reported that Government scholarships are often collected by parents without sending their children with disability to schools.

Health
Under the obligation of international human rights treaties and the CPRD in particular, “a State must provide persons with disabilities with the same range, quality and standard of free and affordable health care and programs as provided to others without any discrimination”. However, in Nepal, persons with disabilities do not easily have access to health care facilities, safe drinking water, sanitation and nutrition. As a result, many children and older persons succumb to disabilities. Estimates in the Situation Analysis of Disability in Nepal by UNICEF in 2000 suggest that 30% of the persons with disabilities do not get any kind of treatment. Furthermore, 30.3% of the disabilities are attributed to a disease or lack of medical care (UNICEF, 2001). Health care and facilities provided by the Government are inadequate to meet the needs of persons with disabilities, particularly persons with mental and developmental disabilities. Professionals providing (re) habilitation services are also limited (about 400 physiotherapists and eight speech therapists to provide services to the entire country). Reproductive health issue of women with disabilities are neglected.

Livelihood and Employment
Where livelihood and economic support from the Government is often limited, NGOs and some of the DPOs are playing valuable role in filling this gap, but coverage and coordination among different actors has been a key issue. Hence most of the Persons with disabilities has to depend on support of their family members and hence are considered as an economic burden (UNICEF, 2001). Though not a significant amount, the Government allowance (social security benefit scheme) has meant relief for some, but many are not benefitting due to the hassle of getting the ID card which is necessary for availing the benefit, such as distance and cost of travelling to the Government Offices (Human Right Watch, 2011).

The Nepalese Social Protection and Welfare of Disabled Persons Act from 1982 have a provision of 5% quota in employment for persons with disabilities. However, implementation and adhering to this Act is still a challenge. Where some persons with disabilities might have benefitted in the government services, not much has happened in the corporate or the development sector. A base line study on staff composition and diversity done by working group of Association of International NGOs (AIN) among its members, found only 0.3% representation of persons with disabilities in the total workforce. Employers often hesitate in hir-

20 UN CRPD, Article 25 (a)
21 http://www.nepalability.org/sustain.htm
22 Survey revealed that 31.4% of the households felt that the disabled persons had posed a huge economic burden on the family (Unicef, 2001).
ing persons with disabilities due to stereotyped perception towards their capacity to perform their job but also because of the lack of willingness to invest in the infrastructure or support services to integrate them in the workplace. Women with disabilities are even less likely than men with disabilities to be employed, and often paid less. This lack of economic participation has a significant impact on the lives of persons with disabilities, as they are unable to earn an adequate standard of living and to live independently in the community.

2.3 **Government Policy, Programs and Laws**

Nepal ratified the UN Convention on the Rights of persons with disabilities (CRPD) in December 2009 and the optional protocol in 2010. The national legislation has not yet been aligned, but there have been some efforts to address the rights of persons with disabilities, the most important being:

- provisions in the new draft constitution protecting the rights of persons with disabilities.
- adoption of a national policy and plan of action on disability, 2006.
- provision of disability ID cards which gives holders certain privileges (allowances, free transportation, tax exemptions etc.).
- allocation of small district budgets to disability programs.

In addition, there are a range of laws and policies in addressing the needs and rights of persons with disabilities that obliges the Government to provide access to free services (education, health care) as well as employment (equalisation of opportunity) and social protection, allowance including accessible public infrastructure. The major problem is the limited enforcement and implementation of commitments made. For a more complete overview of the laws, see Annex 3.

2.4 **The disability movement**

National Federation of Disabled Nepal (NFDN) is an umbrella organization representing the Disabled Peoples’ Organizations (DPOs) working for the rights of persons with disabilities across the country. As an apex umbrella body it has been leading the disability movement in Nepal since 1993 and it works to ensure the human rights and dignified life of persons with disabilities by emphasizing social inclusion, mainstreaming and equalization opportunities. Norway, through Atlas Alliance and the Norwegian Federation of Organisations of Disabled People (FFO) is one of the five most important supporters of NFDN. Members of Atlas Alliance also support two of the member DPOs directly; the National Association of the Blind and the Network of parents of children with intellectual disabilities.

NFDN is entirely run by persons with disabilities and has adopted advocacy, awareness, capacity building and networking & collaboration as the key strategies to achieve its long term development goal.

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23 Four types of Identity Cards are offered: white (mild), yellow (moderate), blue (severe), and red (profound disabled); providing different grades of benefits.
Some important developments have been noted in the disability movement in recent years:

- There is an increasing number of DPOs, CBOs and self-help groups, not only in the capital (Kathmandu) but across Nepal, at the grass root level.
- The number of member DPOs in the NFDN has increased from only two DPOs in 1989 (2046 B.S) only for visual and physical disability, to 297 DPOs in September 2011, incorporating almost all disabilities (including developmental and women DPOs).

All this is an indication of a growing movement and the movement being more organized, gradually building up capacity. However, the movement is still new and in the process of consolidation. It is often accused of being fragmented and politicized. Within the movement, women, lower cast and developmental disability groups are still marginalized and disempowered. Very few women with disabilities are organized in DPOs, and their issues are seldom heard or recognized by the women's rights movements and the disability rights movement (Alwis, 2010).

### 2.5 Recent Developments

There is increasing awareness and acceptance of persons with disabilities in the society, as well as increasing access to services for persons with disabilities, though lot more can be desired. Though not adequate but resources are now being channelled to the local level (DDC/VDC) to fund initiative for persons with disabilities. The Government has now expanded the categories of disability from 4 categories to 7 categories.

The number of DPOs, CBOs and self-help groups for/of persons with disabilities are also increasing all across Nepal, which has been instrumental in building up of the disability movement and advocating for the rights and inclusion of persons with disabilities in the society and development programs. More and more I/NGOs are also being involved in the disability sector and supporting the disability movement.

The most important trend after the ratification of the Convention is the increased visibility of disability issues in Government plans and programs, for example:

1. **In the Annual policy and program** for the year 2068/2069 (2011/2012) adopted by the parliament the following provision were made for persons with disabilities.
   - The quality of education shall be improved by applying the disability friendly teaching and learning methodology in public schools.
   - Promotion, prevention and rehabilitation oriented health program will be extended, region wise.

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24 Shudarson Subedi President, DHRC-Nepal, Disabled Human Rights Centre (DHRC), states that the disability movement has existed in Nepal for the past 40 years. For approximately 26 years, only four organisations existed, due to the strong sanctioning of civil society organisations during the Royal Regime and the growth of the movement was possible only after democratisation in 1990([http://www.ddpun.org/dismov.html](http://www.ddpun.org/dismov.html)).

25 The paper reviews the intersections of the CEDAW and CRPD in four project countries in the Asian region which includes Bangladesh, Nepal, Cambodia and India.
- Appropriate arrangement will be set for the treatment to the injured of peoples’ movement (2005/06), armed conflict and Terai Madhesi movement.
- Community based rehabilitation (CBR) will be implemented for persons with disabilities.
- Self-employment program will be operated for the people having disability during the armed conflict.

2. In the Education for All plan, indicators have been set for construction of 100 accessible schools and for 175 000 scholarships to children with disabilities.

3. The National Census 2011 includes specific questions related to disability in the main questionnaire set, which may contribute to better knowledge of the situation on the ground.

4. The Ministry of Women, Children and Social Welfare have provided identity cards and social security benefits (allowance). The Ministry of Local Development has established a Gender and Social Inclusion (GESI) unit, which has developed a GESI strategy and Grant utilisation guidelines. These require that 35% of the total budget has to be set apart for disadvantaged and marginalized groups, of which 10% is foreseen for women, 10% for children, and the remaining 15% for others, including Janajatis, Dalits and persons with disabilities.

2.6 Challenges

Although Nepal has many legal provisions for persons with disabilities, the implementation of these laws is very weak. The awareness and understanding of disability as a human rights and social inclusion issue is still limited. Although the voices of DPOs are getting stronger, there is no systematic and forceful advocacy. Mainstreaming of disability in general programs is very limited. There is also lack of coordination among the different actors to address the issues of the persons with disabilities.

The national budget to address disability issues is small and programs are scattered over different ministries and departments. Local Government bodies do not always have sufficient budget to disburse the entitled benefits for persons with disabilities. Lack of donor harmonization and scarce funding for disability related programs were also cited as a major challenge by the rights-holders.
3. **Analysis of the Norwegian Portfolio**

3.1 **Statistical overview of the support 2000-2010**

Over the 11 years, 2 057 MNOK have been channelled from Norway to Nepal.\(^{26}\) Out of this, 2% have targeted persons with disabilities. Another 23% have gone to programs that have included persons with disabilities to some extent, mainly a) the education sector program and b) the contributions to the Nepal peace trust fund. Both these initiatives have very small components directed to persons with disabilities, but they are large programs in the budget.

![Figure 1: Share of total Norwegian aid to Nepal to disability, years 2000-10 (% of funding)](image)

Source: Norad database/information collected by the evaluation

In total 82 contracts out of the 760 disbursements\(^{27}\) were identified as having disability components, 46 related to targeted initiatives and 36 related to mainstreamed activities. These were reviewed and it was found that many contracts related to the same initiative. The targeted initiatives were only 11 and the mainstreamed were 16. The targeted initiatives had remained rather unchanged at 4.5 MNOK per year over the 11 years, while the mainstreamed had increased up to 2007 and then started to decrease again. The large contributions to education and to the Nepal Peace Trust Fund were the major reasons for the fluctuations.\(^{28}\)

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\(^{26}\) From Norad’s statistical database. The complete statistical analysis can be obtained from NCG

\(^{27}\) Norad statistical database of all disbursements to partners in Nepal years 2000-2010.

\(^{28}\) Annex A1
3.2 Targeted initiatives

The targeted initiatives amounted to 49 MNOK in the period 2000-2010 (2 % of the total budget). These all refer to three DAC sectors only:

- The Government and civil society sector, mostly related to capacity building of national disability organisations (44 %).
- The health sector support mainly for eye health care such as cataract operations and treatment of eye problems (30%).
- Other social programs, mainly focussing on rehabilitation for children with disabilities and persons with visual impairment (26 %) of the targeted support.

Figure 2: Largest DAC sectors of projects targeting persons with disabilities, years 2000-2010 (% of funding)

The following initiatives were identified:

Atlas Alliance and its member organisations (NABP, FFO and NFU) have supported the capacity development of three organisations in the DPO sector, i.e. the Federation NFDN, the National Association of the Blind and the Network of parents of children with intellectual disabilities. The Norwegian Association of the Blind and Partly Sighted (NABP) has also funded an eye health care program and an eye hospital in Dang district. The hospital was originally built and run by Norwegian Church Aid. Through this program, some 60 000 cataract operations have been carried out and around 800 000 patients have been examined/treated for eye problems. The program is still run by NABP. In addition, the NABP is running a rehabilitation program for blind and partly sighted persons in 6 out of 75 districts. Through this program some 400 persons per year have been given counselling and rehabilitation services. Some have received scholarships, vocational training and micro loans.

Save the Children Norway has also supported targeted initiatives. In total 5 different projects were supported. These have mainly focussed on community based rehabilitation of children with disabilities in selected districts. A resource centre was also established to provide technical support and backstopping to field workers. The support to the CBR initiative was phased out in 2005 after the
Mainstreaming disability in the new development paradigm – Nepal

3.3 Mainstreamed and partly mainstreamed initiatives

Mainstreamed and partly mainstreamed projects amounted to 465 MNOK in the period 2000-2010. The major implementing partners were the Government of Nepal and the Multilateral Agencies. The three major sectors which had included disability components were Education (62%), Governance and Civil Society (17%), and Conflict Prevention and Resolution, Peace and Security (16%).

Figure 3: Largest DAC sectors of disability mainstreamed projects, years 2000-2010 (% of funding)

Source: Norad database/information collected by the evaluation

The most important program to mention here is the MFA support to the education sector wide approach program (SWAP). Both the Embassy and the Ministry have highlighted the need to focus more on Children with Disabilities, and some objectives and indicators have been established:29

- 100 new primary schools established meeting the required accessibility standards for students with disabilities.
- Primary Education: 175,000 students with disabilities have received scholarships. (500 to 15,000 NPR per year per student based on severity).
- Secondary Education: 75,000 students with disabilities will have received scholarships.
- Introduction of incentive schemes to ensure access to and completion of secondary education for Dalits, marginalized groups, disabled, girls, and children from economically poor households.
- Special provisions to cater to the needs of public school students in Karnali Zone, students from the Dalit communities and students with disabilities across the country, paying special attention to girls.

Some of these objectives are neither measurable nor clearly linked to desired outcomes, which is an obstacle to effective programming. There is a unit in the Ministry responsible to promote inclusive education and there is a policy on

inclusive education, which states that units/classes for children with disabilities should be established in connection with regular schools until such time that regular classes are ready to include these children. Training on inclusive and child friendly approaches has been provided to teachers and model schools have been set up. In addition to the sector support, Norway supports UNICEF, Plan and Save the Children which have been supplementing the Government’s inclusive program through scholarships, outreach activities, and promotion of child friendly schools.

![Children on the way home from an inclusive school in the Kavre district supported by Save the Children Norway in 2006 (photo: Save the Children Norway)](image)

Norway has also supported UNICEF globally to develop its education program, with special focus on Education for All and inclusive schools. The intention has been that UNICEF should be able to provide technical support, backstopping
Guidelines have been developed to guide planning and monitoring of inclusive education sector programs. So far the main focus has been on inclusion of girls and to some extent on other marginalised groups such as ethnic minorities. Children with disabilities have not yet been a prioritised focus in the UNICEF global Fast track/GLOBAL action for education for all or in the UNICEF programs on child friendly class rooms, although there are some model countries where this has happened. UNICEF in Nepal has supported the education sector program, but children with disabilities have not been in focus so far (but planning to in the near future). UNICEF globally is currently recruiting a consultant to develop a web-based tool to raise awareness and sensitivity on disability.

Apart from the education program, very few initiatives funded by Norway have systematically mainstreamed persons with disabilities in their regular programs. The few other programs identified were Plan Nepal, Sankalpa, the Social Inclusion Research Fund, and to some extent the Nepali UNHCR office, Nepal Peace Trust Fund and NHRC and INSEC.

Plan Nepal is implementing a community based child rights program with special focus on Dalit and children with disabilities, which can be considered as a best practice of an inclusive approach (see also chapter six of best practices).

Sankalpa has been supported by the Royal Norwegian Embassy in Kathmandu (RNE) from the inception phase (and is the only donor so far), for strengthening women’s voice and participation at all levels in politics and the peace process. The forum has brought together 11 women’s organisations, including the organisation of women with disabilities, with diverse agenda in one single forum for a collective voice.

The Social Inclusion Research Fund (SIRF) supports both research on disability topics and researchers with disabilities. This has been a very intentional initiative with special quota set aside for researcher with disabilities and disability themes. Sometimes it has been a challenge to find researchers with disabilities as well as topics of relevance, so the number is still rather limited. Six researchers with disabilities and six different research themes were funded until 2007 (Ingdal 2007); and the number has been increasing (see section on research and study in chapter five). Full details are included in the reference list.

Norway has also supported the Nepal Peace Trust Fund, NPTF (a multi-donor pool fund managed by the Ministry of Peace and Reconstruction (MoPR)). NPTF has been funding centres to provide rehabilitation services (assistive devices, corrective surgeries, vocational training etc.) to ex-combatants who were disabled during the conflict. NPTF, UNICEF and NHRC (with support from UNDP) also have mine action programs which has identified persons with disabilities as a specific target group.

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32. Previously called Women Alliance for Peace, Power, Democracy, and Constitutional Assembly, WAPPDCA
3.4 **Partners**

When looking at the total portfolio, the Government is the largest partner, followed by the multilaterals and the Norwegian NGOs. The public sector in Norway is also a rather big agreement partner in Nepal. Programs are implemented through SN Power Invest AS (energy), SIU (Norwegian Centre for International Cooperation in Education), KD (Department of Education) and KRD (Department for Local Government) in Norway. They have each channeled between 10 and 70 MNOK during the period of review. Most of them do not consider disability as an issue in the programming.

Our analysis shows that Norad was the extending agency for all targeted disability initiatives in Nepal, while MFA was the extending agency for initiatives that have included disability components in general programs. Looking at the targeted disability initiatives, the biggest agreement partner is Atlas Alliance and its affiliate NABP (78% of the funding), followed by Save the Children (20%) and Norwegian Church Aid (2%). Both Save the Children and Norwegian Church Aid have phased out their targeted initiatives after 2005, making Atlas Alliance the only remaining agreement partner for targeted disability initiatives in Nepal.

**Table 2: Agreement partners targeted initiatives (’000 NOK)**

<table>
<thead>
<tr>
<th>Agreement partners 2000-2011</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atlas Alliance</td>
<td>38 461</td>
</tr>
<tr>
<td>Save the Children Norway</td>
<td>9 626</td>
</tr>
<tr>
<td>Norwegian Church Aid</td>
<td>981</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>49 068</strong></td>
</tr>
</tbody>
</table>

Source: Norad database/information collected by the evaluation

When analysing initiatives with disability components (mainstreamed and partly), the major agreement partners are as follows:

**Table 3: Agreement partners mainstreamed/partly initiatives (’000 NOK)**

<table>
<thead>
<tr>
<th>Agreement partners 2000-2011</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nepal Government via Ministry of Finance channelled to Ministry of Education</td>
<td>336 520</td>
</tr>
<tr>
<td>Save the Children Norway</td>
<td>50 011</td>
</tr>
<tr>
<td>SNV - Netherlands Development Organisation – SIRF</td>
<td>23 579</td>
</tr>
<tr>
<td>Plan Norway</td>
<td>20 649</td>
</tr>
<tr>
<td>UNHCHR</td>
<td>20 500</td>
</tr>
<tr>
<td>UNDP</td>
<td>11 000</td>
</tr>
<tr>
<td>FEDO</td>
<td>5 100</td>
</tr>
<tr>
<td>Fredskorpset</td>
<td>152</td>
</tr>
<tr>
<td>National Human Rights Commission</td>
<td>151</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>467 661</strong></td>
</tr>
</tbody>
</table>

Source: Norad database/information collected by the evaluation
The Nepal Government is the biggest agreement partner of Norway and the Ministry of Education is the most important implementing partner. The Ministry of Education rates inclusion of children with disabilities as a very important issue, although there are challenges in the implementation. Other big recipients are the Ministry of Local Development, receiving support for its Local Governance and Community Development Program (LGCDP) via UNDP, the Ministry of Peace and Reconstruction receiving support for the Nepal Peace Trust Fund and the Ministry of Finance for support for development of energy supply.

Apart from UNHCHR and UNDP Norway has also funded UNICEF and WFP programs. In general awareness and inclusion of disability issues was low in the UN agencies visited. They were not aware of the UN guidance note for country level programs and they had not had any special training in connection with the coming into force of the CRPD. However, via UNDP support has been given to the Nepal National Human Rights Commission and the OHCHR-Nepal, both have engaged in promotion of the rights of persons with disabilities. UNICEF has recently started to review their work in relation to disability. UNDP and UNHCHR rate disability as a rather important issue, while UNICEF and WFP rate it low.

Save the Children Norway and Plan Norway are getting quite substantial funding to supplement the Government’s education sector program. Plan Norway rate disability as a very important issue for them. Disability was a priority when Save the Children Norway was implementing its own programs (e.g. child clubs, rehabilitation programs etc.), before the unified presence of the Save the Children organisations. Now, there is no specific focus or reporting on children with disabilities.

3.5 Cause and type of disability

Our analysis of the database showed that 18% of the funding has been directed to programs specifically targeting persons injured during the conflict (ex-combatants or mine victims) while the rest is for all causes. The challenge is to ensure equal treatment and opportunities for all persons with disabilities. Often war veterans are favoured, but they can also pave the way for attitudinal and policy change.

When looking at the types of disabilities reached by the Norwegian initiatives, we found that the targeted initiatives had mainly been directed towards persons with visual impairments (60%) through eye health and cataract surgeries. Another 8% had been directed to persons with developmental/intellectual disabilities and their families. The remaining 32% went to all types of disabilities.

The mainstreamed initiatives often target all types of disabilities or disabilities in general. It was observed that projects targeting the general population of per-

33 Supported with substantial contributions from Norway through UNDP
34 Save the Children Norway, Save the Children US and Save the Children Japan have now merged to form Save the Children Nepal (united presence).
sons with disabilities often, by default, have a bias towards persons with mobility limitations. It seems to be easier to include this group as it only requires some practical measures as compared to inclusion of persons with other types of limitations (e.g. communication or cognitive limitations).

3.6 Activities of other donors and donor collaboration

During the evaluation process the evaluation team became aware of other donors in the field of disability. Some bilateral donors have shown extra interest in disability as a human rights and poverty reduction issue such as

- Denmark/Danida,
- Germany/GIZ,
- UK/DFID,
- Australia/AusAid
- Netherlands/SNV
- Finland/Finida

AusAid is the most advanced when it comes to having a policy on inclusion of persons with disabilities. Swedish Sida has a newly adopted action plan on disability, but only works via NGOs in Nepal (especially the Nepal Association of the Deaf has been supported). The World Bank has developed tools for inclusion of disability aspects in poverty reduction strategies and in World Bank analysis and programming. The Bank has also initiated the Global Partnership for disability and development. The Danish DPOs (funded by Danida) have made a substantial contribution to the capacity development of the disability movement (rated among the top most important along with Handicap International).

According to our mapping, at least 50 agencies are working with or for persons with disabilities in Nepal. The majority of them are working with prevention and medical rehabilitation in eye care, hearing impairment, leprosy, mental health, orthopaedic surgery etc. Fifteen agencies/organisations are working in the field of inclusive community development, CBR, promoting self-help groups or organisational strengthening of DPOs. Five of these are supported from Norway via Atlas Alliance, Plan and Save the Children.

The most important INGOs in the disability field, which could be potential partners and allies, are organisations such as Handicap International, ADD (Action on Disability and Development), CBM and Action Aid. Action Aid (INGO), a pioneer in promoting right based approach in Nepal is presently supporting development of district plan of action on disability (32 district in the last 5 years) and is also active in building the capacity of its local partners for mainstreaming disability in their regular program.

Presently there is very limited coordination or cooperation between donors and INGOs in the disability field. Ministry of Women Children And Social Welfare

36 http://www.gpdd-online.org/
37 This is a very rough estimate, as no authenticate data was available. Compiled from Disability Resource Book, 2068 (2011/2012), Ministry of Women, Children and Social Welfare, 2011, p. 118 and Situational Analysis of Disability in Nepal, UNICEF, Feb 2001 and own mapping as part of this evaluation, Appendix 4.
(MoWCSW) is responsible for disability and also has mandate for coordination of all disability programs. A separate unit is established in the ministry with a focal person. At the higher level, a CBR Central Coordination Committee chaired by Minister of MoWCSW has been established to coordinate disability initiative across different Ministries of Nepal. However, this forum is said to be not very active.

A National CBR Network, a forum of 62 organizations working for / with persons with disabilities, is however quite active. CBR networks also exits at the district level (DDC) and in some places at village (VDC) level. These networks are often coordinated by the Government agencies (DDCs/VDCs and MoWCSW), especially for disbursement of Government resources and implementing the Government’s CBR program.
4. Theory of change - tool for rights based analysis

In order to determine if and how the initiatives identified and funded by Norway were contributing to promoting the rights of persons with disabilities, we analysed them according to a theory of change built on a human rights based approach (HRBA) to development.

According to a human rights based approach to development, sustainable change requires:

a. empowering people (rights-holders), particularly the most powerless (with hope, assertiveness, knowledge, skills, tools, communication channels, legal mechanisms etc.) to enable them to improve their lives, organise and claim their rights as stipulated in national laws and UN conventions and

b. supporting and demanding that those in power (duty-bearers) respect and respond to these legitimate claims (as outlined in the laws and conventions).

A model theory of change based on the UN understanding and definition of a HRBA was designed by the team to indicate the building blocks that are required to achieve the desired outcome; i.e. the “rights of persons with disabilities fulfilled” (figure 4 below). The initiatives were then analysed against these components to see if and how they have contributed to the desired changes for persons with disabilities.

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38 A Theory of Change is a tool for defining the building blocks and processes required to bring about a long-term goal and social changes. Weiss (1995) defines it as ‘a theory of how and why an initiative works’.

According to this framework, human rights will be enhanced if individual rights-holders are empowered to address their situation, claim their rights and organise to enhance their voices, if organisations of rights-holders have capacity to take action and influence people of power and if duty-bearers are supported and/or pressurised to fulfil their obligations. Individual empowerment includes improved abilities in a range of areas such as improved functionality (through medical measures), confidence, skills, knowledge, mobility etc.

The framework recognises Disabled People’s Organisation (DPOs), representing the collective voice of persons with disabilities and their movement, as advocates and very important change agents. Similarly, research is also recognised as an important strategic tool for both rights-holders and duty-bearers. If properly disseminated and used, it can provide rights-holders with evidence and facts which can make advocacy more effective and it can provide duty-bearers with knowledge that enables them to develop and deliver relevant and effective services.

A sample of projects were analysed to determine if and how they had promoted the rights of persons with disabilities, with respect to the various dimensions identified above, how the extending, agreement and implementing partners viewed the present Norwegian policy direction in relation to disability and their awareness and importance of the issue. Since humanitarian assistance and
education were specified in the ToR as priority sectors, the evaluation deliberately focused on them. Attempts have also been made to analyse the findings from a gender, women’s rights, and children’s perspective.

The findings of the evaluation suggest that the most widely adopted theory of change appears to be based on a “medical approach” focusing on “rehabilitating” or “curing” individual persons with disabilities, reducing their impairments and improving/compensating bodily functions. The expectation is that this will lead to increased self-reliance and social inclusion. Humanitarian initiatives such as disaster relief services of Nepal Red Cross, World Food Program; Peace building (rehabilitation, mine actions) initiative of Nepal Peace Trust Fund and Norwegian Association of the Blind and Partially Sighted (eye health projects) adopt this kind of approach. It indicates that ‘disability’ is still approached with a medical perspective rather than a social or human rights one.

While the importance of medical interventions is not questioned as part of the individual empowerment, this theory of change does not address the key obstacles to inclusion of persons with disabilities, which are discriminative laws and attitudes, inaccessible environment and services, lack of awareness and compensation etc. It is also limited to persons and conditions that can be treated or ameliorated. Promotion of the rights of persons with disabilities has many other dimensions (as indicated in the figure). The demand for medical relief services by persons with disabilities themselves, the limited capacity and low priority of the state to fulfil its obligations, and the rather easy and quickly rewarded interventions, might also have encouraged donors to engage in this gap-filling.

There are, however, some initiatives that have indeed adopted a multi-pronged approach, engaging with individual, organisational as well as societal levels. Examples of such initiatives are the Community Based Rehabilitation programs supported by NGOs (such as Save the Children, Plan and some of the Atlas Alliance members). Also the support to capacity development of DPOs, which has been the main focus of the Atlas Alliance and its members, have adopted rights based approach focusing on empowerment of both the rights-holders and the duty-bearers and on different levels of change. Individuals were supported with awareness, education, livelihood, medical services and rehabilitation support. This support empowered the individuals as self-advocates and change agents who then took the lead in creating awareness and mobilising people at the grass root level. This process lead to getting persons with disabilities organised into self-help groups, establish community based organisation (Disabled People Organisations) and then form national level organisations and a Federation, which consolidated the voice of persons with disabilities across the nation and across different type of disabilities. Support for operating the organisation, strengthening their leadership, management and governance competencies helped to further strengthen the disability movement, as it enabled the DPOs to consolidate their collective strength to advocate for their rights. This also translated into enhanced awareness and responsiveness of the duty-bearers as well.

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40 Humanitarian assistance includes; peace building and rehabilitation, refugee rehabilitation and emergency/disaster relief initiatives.
Inadequate understanding of the human rights based approach as well as compartmentalised and uncoordinated initiatives and limited coordination among different stakeholders have been major challenges in the initiatives studied in this evaluation.
5. Achieving the rights of persons with disabilities

Building on the theory of change described in the previous chapter, this section will analyse the interventions funded by Norway and their potential effect and impact on promoting the rights of persons with disabilities. The findings are presented along five dimensions of change (categories) in the theory of change (figure 5 in previous chapter):

1. Service provision to persons with disabilities (contributing to individual empowerment of rights-holders)
2. Capacity building of the person with disabilities themselves (contributing to individual empowerment)
3. Capacity building of Disabled People Organisations (DPOs)
4. Capacity building of the Duty-bearers
5. Research

5.1 Focus of interventions

The targeted and mainstreamed initiatives were assessed to determine to what extent it had adopted the rights based approach, empowering both the rights-holders and duty-bearers.

Almost all programs had more than one of the five dimensions in combination. If looking only at the main focus of the interventions (figure below), the following was observed:

- The projects targeting persons with disabilities had focused mainly on building capacity of the DPOs (44%), followed by service provision (30%) and individual empowerment of persons with disabilities (26%). There was no capacity-building of the duty-bearerers (authorities) in the targeted projects.
Analysing the main focus of the projects where disability had been mainstreamed or partly mainstreamed (figure below), we found that the large majority (74%) was service provision.

**Figure 5: Main focus in targeted projects (% of funding)**

- Individual empowerment 26 %
- Service provision 30 %
- Capacity building of DPOs 44 %

Source: Norad database/information collected by the evaluation

**Figure 6: Main focus on mainstreamed and partly mainstreamed projects (%)**

- Service provision 74 %
- Duty-bearers 16 %
- Research 5 %
- Individual empowerment 5 %

Source: Norad database/information collected by the evaluation

**Service provision**

Health and (re)habilitation service provision has been the main focus in 30% of the targeted initiatives, especially in the medical eye health care programs through Atlas Alliance program. The targeted rehabilitation programs for persons with visual impairments (cataract operations, health camps, corrective surgeries for children) and the CBR program have big components of service provision, although individual empowerment (livelihood support, skill development) is sometimes a prominent feature. Atlas Alliance members (such as members of Parents Network) are involved in providing rehabilitation and income generation services for its members (as part of their CBR initiatives). Save the Children has also been funding Hospitals/Rehabilitation centres and are supporting local NGOs to identify and provide services to children, such as orthopaedic services, physiotherapy, day care, facilitation of access to health and educational services. Though the programs of Save the Children (Norway) have been phased out, many of the CBR initiatives are still alive, supported by other funds. Only the resource centre in Bhaktapur is still supported by Save the Children. Recently
the Government decided to provide budgets to districts so that they could continue funding CBR activities in their localities as CBR was seen as an important means to identify, inform, refer and empower persons with disabilities and their families. In this way the resources and capacities developed through the Save the Children program may continue to play a role.

Providing medical and rehabilitation services (in eye health corrective surgeries etc.) is an area where many other donors are also active and where there is a potential to work more closely and in line with the newly adopted national action plans. Service provision has also been the main focus of the mainstreamed initiatives (74%), especially education and humanitarian assistance.

**Education:** The education sector program has increasingly focussed on the children who are still out of school, many of them children with disabilities. There are budget allocations and efforts (such as teacher training, materials and tools, scholarships, physical adaptations etc.) as well as monitoring indicators for inclusion of children with disabilities, though adequacy and quality of support and relevance of the monitoring indicators can be challenged. UNICEF, Plan and Save the Children through scholarships, outreach activities, promotion of child friendly schools (e.g. accessible classroom, teacher’s training and disability friendly toilets), setting up of separate facilities (resource classes) and child clubs for empowering Children with Disabilities in school and community are supplementing the Government’s inclusive education program. Though some progress has been made, challenges are still huge. Children with disability are among those still left out of school (Human Right Watch 2011, UNICEF Rosa 2007). There are still many obstacles especially for children who require adjustments in pedagogic approaches or means of communication e.g. children with visual impairment or hearing impairment or developmental disability.41 Human Rights Watch (2011) states that the Government of Nepal does not yet have clear plans for inclusion of children with disabilities (especially children with developmental disabilities) in the mainstream regular classroom. Information about children with disabilities who are out of school is limited and indicators are missing to monitor enrolment and completion rates.

**Humanitarian Assistance:** After the peace agreement in Nepal, Norway has been supporting a range of humanitarian assistance programs. Mostly these programs entail basic services such as food, shelter, medical services, and rehabilitation of conflict victims and ex-combatants. Nepal Peace Trust Fund has been supporting hospitals to provide medical treatment and rehabilitation services (assistive devices, corrective surgeries etc.) to ex-combatants who acquired a disability during the armed conflict. NPTF42 and NHRC are supporting rehabilitation services for the victims. Women DPOs, as part of the network of women’s organisations (Sankalpa) are supporting the Ministry of Peace and Reconciliation for development and implementation of the National Plan of Action in

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41 Human Rights Watch (2011); ODC (2010)
42 NPTF have not yet implemented the mine actions program component and have activities like need assessment and funding of identified projects in their plans.
UNSCR 1820/1325, which promotes the security and rights of women (in general and also specifically women with disabilities) in the peace building process.

Though not a directly supported project, another agreement partner, GiZ, is implementing a rehabilitation and reintegration for victims’ assistance in humanitarian disarmament. GiZ has been working with the ex-combatants in the cantonments. In the past, persons with disabilities have been part of the various skills development and income generation programs. GiZ has also been promoting disability friendly toilets in the ex-combatants cantonments. Furthermore, NHRC has been monitoring the rights of persons with disabilities, but only with regards to those who were disabled during the conflict43 and those who have been unable to receive compensation from the Government.

Partners such as the Nepal Red Cross and WFP with mandate to provide humanitarian assistance during emergencies have identified persons with disabilities as one of their target groups ("vulnerable groups") along with children, elderly, pregnant women, nursing mothers and/or new mothers. This is only for disaster relief and integration programs and does not apply to other general humanitarian assistance programs. Similarly UNHCR’s refugees rehabilitation, re-integration and repatriation programs have identified persons with disabilities as a ‘special needs group’ and has special assistance programs for them such as medical services and support for education.

Though some important progress has been made in the area of humanitarian assistance, the focus appears to be within a ‘vulnerability’ and “needs” perspective. The reference to persons with disabilities comes up only with regards to a few specific themes such as mine victims, disaster relief or refugees. It is still not part of the general human rights agenda and the general programs. One example is the NPTF, where medical services are provided for ex-combatants disabled during the conflict as a separate project component while special support for disabled combatants living in cantonments with other combatants are not considered or incorporated in overall program planning and monitoring. Disabled ex-combatants and victims of conflict are often seen in media, expressing their grievances of the peace process and lack of incorporation of their rights.

**Individual empowerment**

Individual empowerment has been the main focus in 26% of the targeted initiatives, while only 5% of the mainstreamed initiatives. Many of the rehabilitation and DPO programs have had an individual empowerment part. These programs have focused on enhancing the abilities, confidence and self-reliance of persons with disabilities and on supporting them to form self-help groups and to access existing benefits and services such as education, vocational training, income generation support etc. The CBR programs include community rehabilitation centres for providing assistive devices and scholarships. Some communities have established special education projects and day care centres.

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43 24 cases filed so far as of April 2011 (Nepali Calendar year end - Chaitra 2067 B.S)
Many other donors are involved in similar programs, and the partners interviewed were also found to be supported by other donors. Donor coordination and cooperation with Government’s initiatives is an area of improvement.

Some efforts have also been made to promote awareness and empower persons with disabilities in mainstream programs, such as the cultural and research programs. Aarohan, a theatre group presently supported by RNE, has been part of documentary production on children with disabilities, supported by Save the Children Norway (Almost 10 years ago). With support from MS Nepal (Danish NGO), the Aarohan theatre group has also developed a range of disability inclusive plays. Through the SIRF research fund individual researchers with disabilities have also been empowered.

**Capacity Building of DPOs**

Capacity building of DPOs has been an important part of the targeted initiatives (44%), mainly through Atlas Alliance and its members and to some extent Plan Norway. The capacity building has included funding of governance systems, training in strategic planning and management, investments in sustainability measures, strengthening of local, national and international networks, and development of competencies and capacities of leaders and staff and advocacy capacity building. As a result, the DPOs have engaged in advocacy and sensitizing/awareness rising campaigns as well as support to members in areas such as rehabilitation, education, income generation, and vocational training and credit schemes. Norwegian DPOs have been especially appreciated for their long term, generous and flexible financial support, which has enabled partners to grow and become visible in policy discussions. Even more than this, what has been appreciated by the DPOs is the moral peer support they have received from the Norwegian sister organisations, which have given them voice and recognition, access to international networks and opportunity to experience a social life.

Apart from the support channelled through Norwegian DPOs, special technical assistance and backstopping for advocacy has been provided to the disability movement by other Norwegian agreement partners like NHRC and INSEC, in advocating for the CRPD, shadow reporting and producing relevant promotional materials. NFDN count Norway as one of their five most important supporters for strengthening the disability movement in Nepal. Still the contribution to disability related initiatives is only a very small part of the total Norwegian budget for governance and civil society (DAC sector).

There are also other donors supporting the disability movement of Nepal such as SHIA (Sweden) and DPOD (Denmark) Except for those working with NFDN, there seems to be less coordination among the various donors.

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44 Aarohan has also been supported by MS Nepal (Danish Development Agency) to produce 4 plays with PWDs (blind, physical, WWDs, MR) almost four years ago. The play was performed by PWDs themselves and all the production team had learned sign language during that period. The performers have now established their own theatre group with the support from one of Aarohan’s staff.

45 Analysis of Norad database
Very few women specific DPOs exist in Nepal. One such DPO is the National Disabled Women Association (NDWA). NDWA shared that they still have to strengthen their advocacy capacity to be able to promote the rights of women with disabilities within the disability movement and also develop their leadership capacity for meaningful participation in decision making. Since women’s rights and gender equality is a priority for Norway in Nepal, NDWA has been promoted as part of Norway’s support to the network of women organisations (Sankalpa), but NDWA is not directly supported for capacity building or program implementation46 by Norway.

Almost no mainstreamed or partly mainstreamed programs have supported DPOs, for strengthening their capacity and mobilising them as part of the civil society or as change agents or human right defenders. When involving DPOs, they are mainly as partners to implement a project (as Plan Nepal) with no investment for institutional capacity building.

**Capacity-building of duty-bearers**

Capacity building of duty-bearers has been the focus of only mainstream initiatives where 16% of the funds have been invested.

The most important mainstreamed initiative focusing the capacity building of duty-bearers is the education sector program which builds capacity of the education sector in terms of policy and practice, infrastructure (disability friendly school – class room/toilets), human resource (teachers training), materials (Braille).

Some capacity has also been developed in the UN Office of the High Commissioner for Human Rights in Nepal (OHCHR-Nepal), in the National Human Rights Commission (via UNDP) and in INSEC. They were involved in advocating for the CRPD ratification and promotion. The initiatives undertaken by INSEC and NHRC include translation of the CRPD in Nepali, promotion/awareness campaign and shadow reporting, influencing Government’s plans and enhancing the voice of the disability movement. However, in these cases it was neither the Norwegian extending agency nor the UNDP which were promoting the disability aspects, but it was the own initiatives of the local partner.

Though none of the targeted initiatives directly focused on capacity building of duty-bearers, many of them have indirectly contributed to it by influencing duty-bearers through advocacy for rights and demanding of accountability. This has indirectly contributed to development of capacity among duty-bearers. The CBR program has also built capacity of resource centres and local resource persons such as CBR services providers, therapist, councillors etc. Capacity development of duty-bearers was mostly an indirect results ,except in the case of the education and health programs such as the CBR initiatives where, fund were allocated for capacity building of duty-bearers. Initiatives supported included school infrastructure development, teachers and health workers training. Other

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46 National Disabled Women Association is supported by SHIA, Sweden for institutional strengthening/ organizational capacity building and program implementation.
than that, no investment was made to develop capacity of policy-makers on disability issues such as training/orientation on CRPD. Direct support has also not been provided for strengthening their institutional capacity such as support for developing strategic plans, monitoring and evaluation framework etc.  

Research and Studies

Some progress, though little, has also been made by the agreement partners in the area of research. Norway has promoted the Social Inclusion agenda through SIRF which was especially established to facilitate research on the socially excluded groups. In the first phase of the program, the socially excluded groups were identified only as Women, Dalit, Janjati and Madheshi. From the second phase onwards persons with disabilities and sexual minorities (LGBTI) were added to the priority list. Two quotas in SIRF have been allocated for study on disability by persons with disabilities themselves and study of issues related to the sexual minorities by LGBTIs. With CERID there has been an institutional cooperation with the Ministry of Knowledge in Norway on long term research in education. Some of CERID’s research topics have been on inclusive education through the formative research attached to the Education for All Program.

The present national population census capturing persons with disabilities specific statistics and household mapping by MoWCSW can be said to be a key milestone adding information on persons with disabilities and their situation. Norway has not directly contributed to this. However, the lobbying from the Norwegian funded agencies and DPOs played a role.

Though some progress in knowledge generation through research could be traced, it was difficult for the study team to establish concrete use or utility of such studies. Rights-holders were not very familiar with such opportunity or had challenges accessing these studies or the research funds (such as SIRF). Further, most of the studies were focused on situation analyses or on specific topics with limited coverage or for specific program (situation analysis or base line study for program design, project evaluations). Formative research and contextual studies linking disability with broader national development agenda were not easily available locally and existing international studies were not effectively used by the disability movement for evidence based advocacy.

5.2 Partners capacity and approaches

The rights of persons with disabilities have mainly been promoted by Atlas Alliance and Plan Norway. Understanding of disability as a human rights issue and mainstreaming of disability in general programs is limited among most partners, but some good examples were found in GiZ, UNHCR, Sankalpa (WAPPDCA) and SIRF. Others have showed low interest and/or limited knowledge of the

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47 As part of Norway’s Action Plan for promoting Gender Equality, funds have been channelled to Ministries for building capacity in gender budgeting, under taking gender reviews etc.
48 Groups of the plain regions (Terai) of Nepal, who are who are facing racial discrimination (against those residing in the hilly regions).
49 In total 6 researchers with disabilities and eight disability related topics have been funded. Full details can be found in the reference list. (Provided by SIRF)
50 CERID was not one of the sample organizations selected for the study, this information has been gathered from secondary sources and CERID’s website, www.cerid.org. Some of the studies by CERID that include disability are Access of disadvantaged children to education 2005 and Situation of inclusive classroom in Nepal. Kathmandu 2006.
51 Done by the Disability Desk, 50 out of 75 districts completed so far.
issue. According to the self-assessment made by the respondents, using scores from 1 to 5 (where 1= low/poor and 5=excellent/high), the following emerged:

Table 4: Scores on knowledge, awareness and attitudes by type of organisation

<table>
<thead>
<tr>
<th>Question</th>
<th>INGOs</th>
<th>Bilaterals</th>
<th>UN agencies</th>
<th>Local partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>How would you rate the level of competence within your organisation on disability issues?</td>
<td>2.23</td>
<td>2.42</td>
<td>3.25</td>
<td>3.02</td>
</tr>
<tr>
<td>How would you rate your own level of competence on disability issues?</td>
<td>2.17</td>
<td>2.58</td>
<td>3.50</td>
<td>3.64</td>
</tr>
<tr>
<td>How important do you think the rights of PWDs are compared to other cross cutting issues?</td>
<td>4.47</td>
<td>4.00</td>
<td>3.38</td>
<td>4.30</td>
</tr>
<tr>
<td>How would you rate the attitudes towards rights of persons with disabilities of the extending agency (i.e. Norwegian Embassy/ Norad/Ministry of Foreign Affairs) towards disability issues?</td>
<td>3.28</td>
<td>1.75</td>
<td>3.50</td>
<td>2.67</td>
</tr>
<tr>
<td>How would you rate the attitudes of national and/or local partners towards the rights of persons with disabilities compared to other cross cutting issues?</td>
<td>4.08</td>
<td>2.04</td>
<td>2.50</td>
<td>1.69</td>
</tr>
</tbody>
</table>

Analysis of questionnaires filled in by respondents. 5 is excellent/very high and 1 is poor/very low.

It seems that disability is seen as a rather important issue by all stakeholders (except perhaps among UN agencies), while the level of competency is scored rather low by all, especially the INGOs and bilateral agencies. It should be noted that the local partners interviewed were more likely to have engaged in disability related issues as they were often the key implementers of both targeted and mainstreamed initiatives. When the respondents were asked to grade the general attitudes among local stakeholders towards disability, they scored very low.

In the following sections the partners’ capacity and approaches to mainstreaming are analysed.

Policies, Plans and Guidelines
Most of the 26 responding agreement partners have guidelines or manuals to guide local level program implementation. Except for two partners (Plan, UNHRC), others do not have any reference to mainstreaming of disability in their program implementation guidelines or have any other specific disability guidelines to guide the process of mainstreaming. Atlas Alliance being a disability organisation in itself naturally has this as its overarching aim. The Local Govern-

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52 The number includes both agreement partners and their projects/initiatives interviewed, but not DPOs/NFDN.
ance and Community Development Program (LGCDP), being part of the Ministry of Local Government’s (MLD) program is guided by the block grant guidelines of MLD, which mandates resource allocation for marginalized groups (including persons with disabilities).

There is a UN guidance note on mainstreaming, which appears not to be well-followed or even clearly communicated within its agencies, although some agencies like UNICEF/UNDP have been addressing disability issues at the implementation level without following any specific guideline (often as a consequence of individual interest of staff members or responding to local demand/need).

Disability is mentioned in the strategic plans of six agreement partners (out of the 26 interviewed), but this does not necessarily mean that they actually have de facto mainstreamed disability in their programs. Sometimes persons with disabilities are merely listed among the “marginalised groups”, without any further efforts to address their issues. 9 of the responding agreement partners have identified explicitly or implicitly persons with disabilities or children with disabilities as their target group (Plan, UNICEF, Save the children, INSEC, NHRC, GIZ, UNHCR, Atlas Alliance and Ministry of Education), but only 6 of them have actually translated this into action by mainstreaming persons with disabilities issues in their regular programs. Others have only separate components or targeted initiatives. In INSEC and NHRC, though having separate units for CRPD, disability has not been embedded (mainstream) in their other general programs. Although Save the Children is working with a child rights perspective, and has mentioned Children with Disability in their country strategy, there has been no deliberate effort to mainstream disability in the on-going programs, except for promotion of disability friendly infrastructure in school/sanitation program. Since children with disabilities are only part of “vulnerable/marginalised children” in general, they became invisible in plans, budgets and reports.

The Norwegian agreement partners work through their local partners (implementing agency at the local level) to implement projects. It appears that for most of the agreement partners ‘Disability’ has not been a topic of discussion with their local implementing partners. Agreement partners usually have partnership guidelines, a partnership agreement framework and also a systematic process of assessing and selecting their implementing partners to work with the local communities. Disability has not been specifically mentioned in such frameworks or agreements of any of the partners except for Plan’s Nepal partnership selection guideline (see good practice section), and of course for Atlas Alliance. All members (INGOs) of the Association of International NGOs (AIN) follow the AIN partnership guidelines while working with their NGO/CBO partners, which is a widely circulated and rigorously promoted document. However, inclusion of persons with disabilities is not reflected as an issue in these AIN partnership guidelines.
The Norad policy and guidelines on disability were not known by agreement partners and the extending agencies confirmed that the status of these guidelines had become outdated as policy focus changed.

**Institutional structure and support mechanisms for mainstreaming**

Except for GiZ, institutional structures or mechanisms to promote mainstreaming, such as a focal person or task force or a technical support unit do not exist in other agreement partners. GiZ’s advisory support unit is available to provide technical inputs and resources (hand book, best practices) to encourage mainstreaming. Plan Norway is increasingly providing backstopping and support to Plan country offices for mainstreaming disability and are using Nepal’s experience for replication on other countries.

Institutional structures for promoting rights of persons with disabilities do not necessarily result in effective mainstreaming. Two of the agreement partners (INSEC and NHRC), both human rights protection and human rights promotion focused, have a separate unit with the mandate of promoting and protecting the rights of persons with disabilities These organisations operate on the basis of international HR instruments and are hence structured around different HR conventions, of which CRPD is one of them. But this arrangement has not necessarily translated into effective mainstreaming of disability in general programs. Disability is confined only to the CRPD specific activities as separate initiatives.

**Figure 7: Best practice - Action Aid**

Action Aid, not an agreement partner, had very good practices of mainstreaming disability, which was reflected not only in their program but in the institutional structure as well.

A focal person (with a disability) has been appointed as a program officer especially to promote disability mainstreaming, who also represents in the senior level advisory team responsible for strategic input. The mandate of this position is also to technically assist other regular programs to mainstream disability; analysis, monitor and report on mainstreaming initiatives; and train the implementing partners at the local level to mainstream disability (package program for training partners have been developed). Focal persons have also been identified in all the regional offices (one of the program officers takes this responsible) who work in a team with the disability officer.

Similar arrangements have also been seen in SDC, in mainstreaming of Gender and Social Inclusion (though persons with disabilities are not included). An ‘equity group’ is formed, as an internal lobby and advocacy team to promote the gender equity/gender mainstreaming agenda.

**Skills and Competencies**

Very few have attended any course or session on disability or CRPD. Only 3 partners (UNDP, Plan, Atlas Alliance)\(^53\) reported in-house institutional training program including content on disability while 1 partner (Save the Children) reported participation in a session delivered by an expert on CRPD. 2 others

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\(^53\) UNDP reported having an on-line training package on disability for all its staff members (mandatory).
reported general orientation sessions for staff members involved in the specific program on CRPD (INSEC and NHRC). Mostly awareness and competency on disability was rated low by respondents.

**Human Resource (Staff recruitment) policies**

Very few agreement partners had a staff policy or a strategy regarding employment of persons with disabilities or representation of persons with disabilities as board, advisory or general members. Apart from the DPOs, only 2 organisations explicitly mentioned preferential treatment (quota) for disadvantage group including persons with disabilities. Further one UN agency stated that they have a policy to shortlist at least 2 representatives from marginalized group but persons with disabilities are not mentioned as part of this group (only women, Dalit, Janjati and Madeshi).

In some of the agreement partners, persons with disabilities have been hired (mostly physical disability), but not through some affirmative action policies.

Further, one of the agreement partners have explicitly mentioned in their HR policy that they will not inappropriate and actively discriminate against and may have affirmative action for women and disadvantage group including persons with disabilities. However, in practice any specific effort for inclusion of persons with disabilities or affirmative action has not been taken.

**Process, Tools and Practices for Mainstreaming**

Policy level commitment is important but at the same time program level tools and approaches are essential for translation into meaningful action.

**Program Planning:** Starting point for mainstreaming of disability at the program level is inclusion of persons with disabilities and their agenda in the very first step of context analysis for program planning and design. Almost all the organisations have processes for program planning and context or situational analysis such as the vulnerability assessment of WFP, Impact Poverty Mapping and the Social mapping Community Action Processes by UNICEF. However, none of these tools were reported to include any disability specific indicators. Plan’s program guideline can be said to include some guidance notes on including persons with disabilities and related indicators, but no tools or a framework as such for context analysis was shared.

**Baseline study, Monitoring/Evaluation and Reporting Practices:** Only three organisations (UNHCR, Plan, GIZ) have been including disability indicators in their baseline studies and incorporate it in planning. Others, though they say they have attempted mainstreaming, are only at the philosophical level without any mechanism for translating it into actual action. Similar is the case with one specific organisation working on the basis of international rights instruments (including CRPD). They have appointed “Special Rapporteurs” for monitoring of violation of Rights against different theme based on HR instruments/conventions, but no one has been appointed for monitoring the violation of CRPD.
The same three organisations having baseline data on persons with disabilities are the only organisations monitoring their programs against disability indicators and reporting accordingly. They have monitoring formats that capture information against disability specific indicators. At the Government level the Education SWAP and School Sector Reform Plan have disability specific indicators while the LGCDP/MLD’s block grant utilization framework requires monitoring and reporting of grant utilization for disadvantage groups (including persons with disabilities). Other agreement partners are not undertaking such practices unless specifically required for targeted project or where the main target group are persons with disabilities (e.g. mine action programs).

However, the Education Sector Program lacks baseline data on disability (only some monitoring data exists against generic indicators such as scholarship distribution. Specific disaggregated progress indicators for enrolment and completion rates of children with disabilities do not exist. In case of the LGCDP/MLD, since persons with disabilities are merged with other disadvantaged groups and not separately specified, it does not require specific spending on persons with disabilities. As long as the allocated fund is spent on any of the identified disadvantaged group such as Dalit or Janjati (without a rupee for persons with disabilities) the target would be considered met. Hence, at the program level, incorporation of persons with disabilities in the program planning and monitoring of results can be said to be quite limited.

In contrast, regarding gender mainstreaming Nepal can be said to have progressed quite well with designing and implementing gender and social inclusion tools: gender audits, gender budgeting; good governance guidelines that promotes gender equity and social inclusion, inclusion-sensitive monitoring and evaluation systems focusing on the Government’s Sector Poverty Monitoring and Analysis System and Management Information System promoted by SIAG54 etc. Some of Norway’s agreement partners are undertaking these exercises. However no such tools exist for promoting disability mainstreaming and disability programming.

5.3 Results and Attribution

Prominent and visible results could be traced in the targeted initiatives. The initiatives have been able to make valuable contribution.55 Persons with disabilities and other respondents have reported improvements in attitudes and greater acceptance of persons with disabilities. Increased access to basic services such as education (special and inclusive classes), health, skill development and vocational trainings, counselling and leadership development support have been important results. These services filled a huge gap where Government’s services were minimal, by complimenting or supplementing the Government’s programs which strengthened the outreach, access and quality of local services.

54 The Social Inclusion Action Group is a multi-agency multi-donor coordination forum on social inclusion, established in 2005, by members of previous group such as Social Development Learning Group (DFID, Social Inclusion/Affirmative Action Network (UNDP) and the social scientists, civil society activists and development practitioners with the objective to influence the social inclusion agenda in Nepal. (http://www.un.org.np/coordinationmechanism/siag)

55 Other studies such as evaluation of NFU’s support to Parents network (ODC 2010) and on-going evaluation of the NABP program in Nepal (Annika Nilsson, forthcoming 2012) also confirms this results in terms of services provided
The results are manifested in improved living conditions, increased awareness, improved physical functioning and self-reliance of persons with disabilities.

Earlier evaluations as well as interviews with the leadership of NFDN, confirm that the Norwegian support has also strengthened DPOs institutionally and given them a more prominent voice. Especially the Association of the Blind and the Nepal Parents Network have depended a lot on the Norwegian support for their capacity development. With the Norwegian funding support, the Nepal Parent Network has developed and expanded locally at the grass root level and constitute 27 DPOs, 4 cells and 3 likeminded affiliate member organizations as of August 2010. Before the Norwegian support none of them existed. The Network has managed to establish self-support groups and influence services in targeted communities which have empowered families and reduced the stigma (ODC, 2010).

NFDN considers Norway to be one of their most reliable and long term partners and appreciate their contribution for institutional sustainability by helping them develop their network and governance. This support has been instrumental for strengthening the disability movement in Nepal. Support for developing their network and advocacy capacity has helped the disability moment transform from welfare to a self-help and advocacy movement that is able to successfully advocate for the rights of persons with disabilities. As a result, the rights of persons with disabilities are increasingly recognised. The visible impacts are the various law and policy reforms such as the ratification of the CRPD, the Plan of Action on Human Rights, the setting up of a disability unit in the NHRC and INSEC, the engagement of OHCHR in monitoring the rights of persons with disabilities, the Annual Program adopted by the Parliament which sets out specific priorities for persons with disabilities, the Education for All program (inclusive education), the National Census which includes persons with disabilities and increasing budget allocation especially at the grass roots. The disability ID card and the national security benefit (allowance), though small is also considered as key milestones. These progress and achievements are the results of the continuous struggle of the disability movement in Nepal. Since the Norwegian Government and Norwegian NGOs are the key supporters and promoters of the disability movement together with other Scandinavian countries (Sweden and Denmark, in the forefront) the progress and achievement of the disability movement can be partly attributed to the support of the Norwegian Government and the Norwegian NGOs.

Though policy reforms have been achieved, the implementation of these plans and policies remain a challenge due to lack of awareness among the public, among decision makers, and lack of human and technical capacity of the Government including financial resources. Policy reform alone have not translated to greater improvement in the general living conditions of persons with disabilities, although improvements have been noted in the communities where the Norwegian partners have implemented programs. District level Government and CSOs need to work together to develop their capacity and to address the obstacles locally.
With regards to mainstreaming, the Norwegian contributions were not so visible. However, in the education sector’s program efforts are made to reach children with disabilities; to make schools accessible; to train teachers on inclusive practices and support with some facilitating material and resources. Although the progresses are slow and not very encouraging, it has however made a valuable contribution in promoting the concept of inclusive education and initiating the process of change. Some results in humanitarian assistance are also noted in terms of rehabilitation support to conflict victims, treatment/rehabilitation to mine victims, rehabilitation of refugee and disaster relief support. Support to Sankalpa, is another milestone initiative for promoting inclusion of women with disabilities in the general women’s rights movement of Nepal. Its work with the Government for implementing the national plan of action on 1820/1325 has also promoted the issues of women with disabilities in the national peace process of Nepal. Although small, the support to research initiatives such as SIRF, –and CERID can be said to have added value by giving visibility to persons with disabilities and their issues and strengthening the knowledge base on disabilities.

The above assessment of results indicates that it was easier to trace the results and the role of Norway in promoting the rights of persons with disabilities in the targeted initiatives than in the mainstreaming. Results of the mainstream initiatives could not be concretely identified. Since the Norwegian Government had not played a direct proactive role in promoting the agenda, it was very difficult to attribute the results of the mainstreamed initiative to the Norwegian support or policies. In case of mainstreaming, the results were mostly because of the partner’s own initiatives rather than promoted by Norwegians. This was possible because the Norwegian support was open, flexible and allowing space for local needs and aspirations.56

5.4 Extending Agencies

Norad has been more involved in funding targeted initiatives and less in mainstreamed initiatives while MFA/Embassy has been more involved in mainstreamed initiative and less in targeted initiatives.

The Norwegian Government has a very positive reputation in Nepal for promoting the human rights agenda, especially gender mainstreaming and social inclusion. The focus is mainly on inclusion of Madhesi and LGBTI, but earlier on Dalits and Janjati were focused. RNE is taking a lead in coordinating a donor’s forum for promoting this issue. But it appears that ‘disability’ is not yet a priority of the Norwegian Government, and thus not the Embassy. Disability has not been communicated as a priority or a human rights issue to the Embassy (by MFA) or to the agreement partners. Neither has it been part of any formal or informal dialogue. Apart from the DPOs, most of the partners candidly shared that they have never considered disability or discussed it as part of social inclu-

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56 Save the Children Norway could spend 10% of their budget on country specific priorities, and hence was able to implement the disability project although it was not part of their overall organisational priorities. Social Inclusion Research Fund’s proposal to include PWDs and LGBTI in the second phase of the project was approved by the Norwegians.
sion initiatives, neither have they ever discussed this issue with the Norwegian donor nor have they heard of the Norad disability guidelines.

RNE has not yet played an active role in promoting coordination and collaboration between DPOs and agreement partners regarding the human rights based approach and a disability focus. So far, mainly gender and LGBT issues are on the agenda, RNE hosts annual seminars with the agreement partners, which provide a unique opportunity for dialogue in the future. Interviews with the RNE confirm that the main obstacles to inclusion of persons with disabilities in development aid are:

- the lack of political backing of disability as an important human rights/social, justice and poverty issue;
- limited in-house awareness and capacity;
- too many competing demands and issues.

At the same time disability is rated as a very important development and social inclusion issue by staff, especially in education, governance and peace process (as shown in the scoring table above). There is a call for more capacity building, earmarked funding and guidelines on disability. A comparison was made with the gender equality work of MFA, where Nepal has been selected as a pilot country to work strategically on improving the focus on gender equality. This has included a review of the portfolio (2010)\(^57\) and the development of a strategic plan for 2010-2012, with a very concrete results framework. The model used for working with gender could be an excellent practice also for disability issues.\(^58\)

\(^58\) Ibid.
6. Good practices and challenges

6.1 Good Practices

Some good practices identified during the review are presented here.

Program design and delivery: From concept to action

The organisations pioneering mainstreaming of disability are the ones who have been able to understand poverty and human rights violations in a border sense, with strong analysis of root causes, hence linking disability to the general development challenges. It began with the conceptual understanding of disability as an important part of the poverty reduction and human rights agenda. Success also is dependent on how organisations are able to translate this conceptual thought into practical implementation. One such best practice could be identified in Plan Nepal.

Figure 8: Good practice - Features of the Plan Nepal approach

**Identification of Target Group:** Children with Disabilities are identified specifically as the vulnerable group and not left to interpretation or generalization with other vulnerable groups (Girls, Dalits, Janjati, the Disabled and the Poor’ children).

**Articulation in Strategic Document:** Plan Nepal has identified disability as one of the dimensions of poverty in their strategic documents (country strategic plan, Child poverty framework) and hence an issue that needs to be addressed.

**Careful Selection of Implementation Partners:** To realize it strategic intent, Plan is careful with selecting its NGO partners who shall be actually implementing the programmes at the ground level, so as to ensure they internalise the conceptual thought process. Plan’s ‘Guidelines for Selection and Review of NGO Partnerships’ have indicator to assess disability sensitivity of the partners.

**Monitoring and Evaluation:** The global level programme guidelines help in analysis of the status of child rights using disaggregated data to identify those groups of children most excluded or discriminated against (context analysis) and Children with Disabilities specific indicators are included. All the monitoring and the reporting formats are aligned to capture Children with Disabilities specific information and impacts on Children with Disabilities are analysed.

UNICEF’s previous programs in Nepal did not focus on, or include children with disabilities specifically. However, UNICEF is presently in the process of developing their country strategy paper. UNICEF has hired a consultant with expertise in disability to do a context analysis for them as well as assessing UNICEF’s current program and provide recommendations for programming. UNICEF is also
presently in discussion with WFP for undertaking vulnerability assessment of the communities for identifying children with disabilities and their needs, as part of their strategic planning process. The tool that WFP uses for assessing the status of food security presently does not include disability specific indicators. But for UNICEF, WFP shall be making special arrangement to capture disability data. This process is a good example, which should be carefully monitored for concrete results.

**Affirmative action and budgets for mainstreaming**
Mainstreaming a disadvantaged group needs deliberate efforts and extra initiative. It also requires a separate, dedicated funding (financing affirmative action), concrete, disaggregated monitoring indicators and a focal point responsible for follow up and support. Inclusion will not happen without deliberate effort and funding. UNICEF has a provision for an “Equity Fund” which can be used to finance the extra/additional initiative for mainstreaming disadvantaged groups at program level. Although children with disabilities have still not benefited from this provision, it is a budget model that could be helpful in supporting mainstreaming efforts.

UNHCR has also special provision for contingencies to address the special needs and 20% of the budget is earmarked for addressing special needs.

UNDP has an online orientation package for staff members. All staff are encouraged to attend this online session. Disability and related convention/policies are part of the content of this orientation package.

GiZ has an advisory team which supports interested programs with concepts notes on disability, sharing of best practices and toolbox for inclusion/handbooks. In Nepal the team had assisted the Reintegration and Reconstruction Project to mainstream disability in all aspects of their projects from planning, baseline data, monitoring and reporting, all along working with disability indicators.

UNHCR has tools and guidelines “Assisting Disabled Refugees, A Community-Based Approach, UNHCR Community Service Guidelines, 1992” guiding them on how to identify persons in need of special assistance, and enable the quantification and assessment of needs and finding appropriate solutions.

The UN and the EU have guidance notes on disability, but they are not promoted or used. Also the World Bank has tools (e.g. inclusion of disability dimensions in poverty reduction strategies). Other donors (especially USAID and Australia Aid) have recently developed tools for staff.

**Participation of DPOs and persons with disabilities as self-advocates**
Organisations where persons with disabilities themselves were involved in the decision making or promotion of the agenda were found to be more progressive in raising this agenda and promoting mainstreaming as in case of the DPOs and Sankalpa. The members of this networks share that including Women with Disa-
Action Research for informed advocacy
The Social Inclusion Research Fund has allocated quotas for the research on disability or by persons with disabilities. Allocating quota has been useful for targeting specific research for highlighting knowledge on specific group (persons with disabilities). These approaches have the potential for highlighting disability as one of the causes of exclusion and are hence milestones in getting disability in the development discourse. This potential is yet to be fully and strategically utilised. Research is still limited in distribution and utilisation.

6.2 Challenges
Results have been achieved in targeted initiatives, but huge gap lie in terms of effectively mainstreaming disability in the general mainstream development programs. The key challenges of effectively mainstreaming are:

Disability in the Development Discourse and Partners Capacity
When organisations were approached for this review, some of them not working specifically in the disability sector were reluctant as they felt they were not relevant organisation for the study. The response the study team received were:

- Seriously we have never thought about this issue.
- This is not our mandate; our kind of work does not allow us to incorporate this issue.
- There are so many cross cutting issues we are already struggling with ranging from gender, social inclusion, climate change.
- Our project documents do not include programs for persons with disabilities, so we cannot address it.
- We are conscious of giving persons with disabilities space in the project and try to incorporate them if we come across one, but we do not intentionally go out looking for them.
- We are very much aware of the right of persons with disabilities and the need to mainstream them, but we do not have the resources to address it. It’s the Government’s responsibility; hence the most we could do and have done is advocate for their right with the Government.

It appears that disability has not been an area of strategic importance for most of the agreement partners and has not been considered as an important development dimension. Many of the agreement partners interviewed were candid in sharing that disability was not a theme relevant to their area of work. Partners are not aware of possible linkages of disability with their priority sectors or themes such as human rights, poverty alleviation, MDGs, empowerment or social inclusion. This has resulted to limited incorporation of disability in their programming and hence limited results in the area of mainstreaming disability. The increased focus on disability on the international arena, such as the adoption of the CRPD and the development of guidance notes and tools for main-
streaming disability by the World Bank and the UN agencies have gone unnoticed and has not penetrated to national level offices and agencies. The occasion of the coming into fore of CRPD has not been highlighted by any agencies. Agreement partners clearly indicated the lack of policy guidance (country policies or from their international head-quarters or donors) as well as institutional capacity as the key factors limiting mainstreaming. This includes both technical knowhow and resources. Awareness and competencies on disability were rated low by most respondents. Some partners recognised disability to be an important but difficult issue to mainstream while many did not see it as their priority. Since disability was not an institutional priority, appropriate training and support were not available for effective mainstreaming. When inclusion of persons with disabilities was not incorporated in the project design and planning, it did not translate into implementation. Rigid project design did not allow flexibility for mainstreaming persons with disabilities when not prioritised. The evaluation also found that the coordination among the partners themselves and with other donors, civil society and Government was also not very strong.

Almost all the responding agreement partners agreed that disability has not come up clear and loud in the development discourse, as against inclusion/participation of women, Dalits, Janjati, and recently Madeshi, Muslim and even LBGTI. Most partner organisations are part of groups, alliances or forums constituted for coordination or advocating/promoting some specific issue, such as the donors groups (External Development Partner) for Health and Education SWAP, Association of INGOs (AIN) which has working group for different thematic issues (such as education, HIV/AIDS, capacity building) and the Social Inclusion Action Group (SIAG). But mainstreaming disability has not been a topic of discussion in any of these groups. However, few references were made to discussions that took place or efforts made for mainstreaming disability. Those were;

- One of the working groups of the Association of International NGOs (AIN) have discussed and included persons with disabilities in the workforce diversity study they undertook, in which SHIA\(^59\) is a member and promoter of the disability issue.
- A women's DPO is a member of Sankalpa and hence issue of women with disability is part of their advocacy agenda.
- Disability is sometimes discussed in the context of employment and social security in the meetings of Social Protection Partner Group.
- Disability is occasionally discussed especially within the context of social protection and gender based violence in the meetings of the Core Donor Group.

In Nepal many forums and groups exits for coordinating development efforts or promoting some specific agenda like human rights and social inclusion. Yet, disability is not part of the discussion in these forums. Whatever little discussion that is taking place is mostly related to social protection or welfare issues. This might be the reason why there is still limited inclusion of disability in mainstream development programs.

\(^{59}\) Umbrella organization of Swedish DPOs like Atlas Alliance
Strength of disability movement

Even though the disability movement has been able to achieve some remarkable progress, it has not yet been able to penetrate the wider mainstream development. The disability movement is not yet as strong as the Dalit or Janjati movements. They have not been able to position “Disability” as a socio-political agenda, promoting it as an important development theme by strategically linking it to international priorities such as poverty, human rights, the Millennium Development Goals and climate change. Lack of political access, networking skills and capacity to influence large agencies and their development programs (like UN, World Bank) are identified by the disability movement as the key constraints.

The disability movement is said to be less effective in influencing mainstream program because of lack of strategic vision as many of the upcoming DPOs are still struggling to fulfill the basic needs and negotiating for individual benefits for its members. While accessing mainstream development programs, the DPOs mostly lose out in the competitive process due to lack of institutional capacity and strategic orientation. DPOs also do not have enough strategic alliances with other organisations, core actors of the civil society and the broader development community to achieve their objectives.

On the contrary, the Madeshi and the LGBTI movement, in spite of being recent movements, postdating the disability movement have been much more successful to be part of the social inclusion and mainstreaming agenda in Nepal. The Madeshi movement was able to raise nationwide voice with aggressive actions. LGBTI – via more peaceful actions - is presently in the main inclusion and development discourse as it is a priority of the donor community. As compared to these two movements, disability, in spite of its much longer history is not yet powerful and influential. Many of the agreement partners not engaged in disability were not aware of the National Federation Disability Nepal and have never been approached by any DPOs or persons with disabilities advocating for their rights.

One of the Government representatives shared that they are often visited or invited by different women, Dalit, Janjati organisations for interactions, discussion or training/orientation where their issue and agenda are promoted but it is not the same with DPOs. Presently, many interest groups are actively lobbying for their rights in the Constitution making process and agreement partners like IDEA60 are supporting this process. No such pressure group exits61 for promoting rights of persons with disabilities and hence donors do not have a mechanism to back them. Unless the advocacy from the disability movement is strong, it will have limited leverage to promote its agenda.

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60 Four collectives advocate for the right of women, Dalits, Janjati and Madheshi
61 Disability is dealt with by the ‘fundamental right committee’ which is responsible for many other interest groups.
7. Opportunities, conclusions and lessons learnt

7.1 Opportunities

Today social exclusion/inclusion is on the national agenda and hence as a development priority. Almost all the development agencies emphasized on Gender Equity and Social inclusion and have been seriously mainstreaming it. But somewhere within this development the inclusion of persons with disabilities have been lost, because the definition of exclusion has been limited to exclusion on basis of gender, caste and ethnic identity (conflict triggering injustices) – hence women, Dalits, Janjatis, Madeshi have made it to the priority but not persons with disabilities. When efforts to mainstream women, Dalits and Janjati are made, persons with disabilities are (un)knowingly left out, perhaps because they are not conflict triggers. However, the strong social inclusion agenda provides good opportunities for persons with disabilities to join the same development agenda.

The focus on rehabilitation of persons with disabilities injured by the conflict could also provide an opportunity for persons with disabilities due to other causes to approach these systems and mechanisms to lobby for similar rights.

As a result of the ratification of the CRPD, mechanisms are set up for the implementation and monitoring of this convention. This could be used by the disability movement to argue for separate coca in the constitutional reform process. It could also be used as a tool in advocating for inclusion in all Government and donor programs.

The decentralisation process and the capacity development of local Government structures provide a good opportunity to advocate for inclusion of persons with disabilities in community development programs. The Government commitment towards CBR and the allocation of budgets for disability programs to districts could be used as tools in this advocacy.

The recent developments in UNICEF Head office, focussing more on disability and hiring a consultant to assist in developing a training module on disability, the reinforcement of the Fast Track Initiative on Education for All (now called the Global Initiative) and the efforts in Nepal to review the UNICEF portfolio in rela-

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62 The study done by SIAG on Workforce Diversity in International Agencies in Nepal, (2008) did not include PWDs even though SIAG recognizes them as a group experiencing exclusion.

63 http://www.unicef.org/about/employ/index_59879.html
tion to children with disabilities, could provide an opportunity to involve UNICEF more actively in promotion of the rights of children with disabilities.

The World Bank is an untapped opportunity for funding and support to disability related initiatives.

### 7.2 Conclusions

The results so far have been encouraging in the targeted initiatives, leading to improving attitudes, better conditions, increased opportunities and acceptance of persons with disabilities. Rights of persons with disabilities have been systematically promoted in the targeted initiatives, results of which can be directly attributed to the Norwegian Government. However this accounts for only 2% of the Norwegian funding. Mainstreaming disability is still considered difficult and not prioritised by agreement partners. Many opportunities are hence missed due to lack of interest and understanding of most development agencies/agreement partners and poor advocacy and networking by DPOs. Hence, the extent of mainstreaming of disability agenda in the development initiatives in Nepal and the role of the Norwegian Government in promotion of the mainstreaming can also be said to be limited.

The rights of persons with disabilities have not been discussed or communicated as an important human rights or poverty reduction issue by the Norwegian extending agencies, whatever little has happened has been due to partners own interest than being aggressively promoted by Norway. Norway’s role and contribution has been only that of a core funder and flexible donor accommodating local priorities. Beside the Atlas Alliance, none of the agreement partners are aware of the Norwegian disability guideline.

However, the strong emphasize on the social inclusion agenda in the country provides a very good opportunities for persons with disabilities to join the general development process. There are many opportunities where Norway could do more to promote the rights of persons with disabilities.

### 7.3 Lessons Learnt and Recommendations

Promoting the rights of persons with disabilities requires both targeted and mainstreamed initiatives. Persons with disabilities will not be included in mainstream programs unless there is an element of deliberate affirmative action, including provisions in the planning and monitoring framework and in terms of budgets. Lessons could be learnt from the gender equality strategies where these aspects have been successfully combined. The on-going work carried out in selected RNE (including Nepal) to review the gender equality approaches in pilot countries could serve as a model. From the gender mainstreaming experiences it was also learnt that the following are of utmost importance

- Having designated staff or focal points in key units/departments with the mandate to promote and monitor progress
Allocating designated budgets for affirmative action in each program and demanding disaggregated indicators for monitoring of progress

Supporting the rights-holders to develop the institutional capacity of their organisations as well as strategic and advocacy skills has been of key importance for policy change at national level. Being able to work as a disability movement on district level where decisions are increasingly made, will be of key importance to ensure proper and timely implementation. Therefore it will be important to:

- Ensure that information about reforms, promises and budgets are spread in a transparent and accessible manner
- Invest in capacity development of the disability movement, especially on district level. These interventions should be designed to counteract the fragmentation and promote networking and cooperation.

A milestone has been achieved in terms of targeted initiatives, but experience shows targeted initiative in itself is not enough. A significant leap has to be taken to transform the present approaches so as to mainstream disability in all the development cooperation. Raising awareness of disability as an important part of the social inclusion, human rights and poverty reduction agenda is highly needed. Also, service provision initiatives must always be accompanied by building capacity of rights-holders and duty-bearers so that conditions and services can be continued and developed in the long term.

**Recommendation to the disability movement**
For effective mainstreaming the disability movement has to re-strategize its approach and refocus the advocacy initiative. For this:

1. Competencies for effective advocacy need to be strengthened and strategic alliances and networks developed with other civil society agencies for greater visibility and leverage.
2. Strategic alliances and network should be developed with other civil society agencies for greater visibility and leverage.
3. Large development programs, mostly those implemented by the government with support of external development partners have to be specifically targeted when advocating for mainstreaming. Systematic and comprehensive inclusion of persons with disabilities in the policy framework, program design, budgeting as well as monitoring and evaluation framework should be promoted.
4. Other Human Rights tools such as the CRC, ICESCR, CEDAW and other international development priorities such as MDGs, poverty alleviation should be used together with CRPD for evidence based advocacy.
5. Capacity to provide expertise input to those organisations willing to mainstream disability needs to be strengthened.

**Recommendation to the Norwegian Government/Embassy**
The Norwegian government is recognised in Nepal for promoting the rights of poor and marginalised persons and putting them in mainstream development, such as gender mainstreaming and social inclusion (cast, ethnicity and LGBTI).
Therefore, the Norwegian government has a very good leverage to play a more pro-active role in promoting the rights of persons with disabilities. For this:

1. The Embassy could consider taking the initiative in forming a donor group for this purpose. RNE could use the lessons from promoting of LGBT rights and from promoting gender equality. Linking up with likeminded agencies and using arguments based on CRPD and the Millennium goals could be a way forward.

2. Norway (RNE and likeminded partners) can play a proactive role in influencing the existing donors’ forums and networks such as the Social Inclusion Action Group (SIAG), Association of INGOs in Nepal, UN working groups/donor groups, the External Development Partners Network (Health and Education sectors SWAP) etc. in order to further leverage the efforts of the disability movement in promoting the rights of persons with disabilities in Nepal.

3. RNE or MFA through dialogue with the government of Nepal can also play a catalytic role in supporting the disability movement to influence government programs and priorities

4. RNE can further support institutional capacity building of agreement partners, including government, as part of Norway’s strategy to mainstream disability in its development corporation. Forums like annual partners meeting (hosted by the embassy) can be used for this, collaborating with DPOs/Disability movement as strategic partners for capacity building.

5. The Embassy could start by focussing on inclusion of disability aspects in certain sectors such as governance, human rights and education programs. In all social inclusion programs disability should be a specific focus with its own indicators and budget.
Albert, Bill (2004), Is disability really on the development agenda? A review of official disability policies of the major governmental and international development agencies, Disability knowledge and research program.
Alwis, Rangita de Silva de (2010), The Intersections of the CEDAW and CRPD: Integrating Women’s Rights and Disability Rights into Concrete Action in Four Asian Countries, International Human rights Policy, Wellesley Centers for Women.
Dalit Studies and Development Centre (DSDC), Kathmandu, Nepal: Final Evaluation of inclusion of Dalit and persons with disabilities Project (April 2008).
Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) GMBH: The ABC of Human Rights for Development Cooperation” E-info tools (Update August 2010).
Plan Limited: Promoting child rights to end child poverty Achieving lasting change through Child-Centred Community Development 2010 (Plan’s program guide).
Plan Nepal : Partnership Strategy (Date NA).

Social Inclusion Research Fund/Topics on disability and/or researchers with disability

Websites:
National Federation of the Disabled Nepal (http://www.nfdn.org.np)
Nepal Ability (http://www.nepalability.org/sustain.htm)
Annexes
### Annex 1: List of projects in Nepal 2000-10 (000’NOK)

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# Annex 2: List of interviewees (in alphabetical order)

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<td>Section Officer</td>
<td>Ministry of Women &amp; Children Social Welfare - Disability Unit</td>
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<td>Chairman</td>
<td>Media Initiative for Rights, Equity and Social Transformation (MIREST)</td>
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<td>Geir</td>
<td>Program adviser</td>
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<td>Gunnar</td>
<td>International director Former Country Director</td>
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<td>Ministry of Education/Dep. of Education</td>
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<td>Sushma</td>
<td>Support to the Peace Process/ Technical Team Leader</td>
<td>The Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ/GTZ)</td>
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<td>Baral</td>
<td>Ramesh</td>
<td>Advocacy Mobilization Coordinator</td>
<td>DPO (Right Holders) - National Federation of the Disabled Nepal (NFDN) (Partner of Atlas Alliance)</td>
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<td>Jan Olav</td>
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<td>Sadhana Ghimire</td>
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<td>International Alert</td>
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<td>Rikke</td>
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<td>Pokhrel</td>
<td>Sunil</td>
<td>Director</td>
<td>Arohan Theatre Group, partner - Royal Norwegian Embassy</td>
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<tr>
<td>Poudel</td>
<td>Chodomari</td>
<td>General Secretary</td>
<td>DPO (Right Holders) - Nepal Apanga Tatha Asahaya Balbalika ko Lagi Bhabisya (Parents organisation of intellectual disabled)</td>
</tr>
<tr>
<td>Poudel</td>
<td>Meena</td>
<td>Member</td>
<td>DPO (Right Holders) - Nepal Disabled Women Association (NDWA)</td>
</tr>
<tr>
<td>Pradhan</td>
<td>Sony</td>
<td>Program Coordinator</td>
<td>Plan Nepal</td>
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<tr>
<td>Rai</td>
<td>Raj Kumar</td>
<td>Improvement of Livelihood in Rural Areas/ Head of Agriculture Sector</td>
<td>The Deutsche Gesellschaft für Internationale Zusammenarbeit (GiZ/GTZ)</td>
</tr>
<tr>
<td>Rimal</td>
<td>Arvind Kumar</td>
<td>Under Secretary</td>
<td>Ministry of Peace and Reconciliation - Nepal Peace Trust Fund</td>
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<tr>
<td>Riis-Hansen</td>
<td>Trine</td>
<td>Advocacy officer</td>
<td>Atlas Alliance secretariat, Norway</td>
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<tr>
<td>Sanders</td>
<td>Sammy</td>
<td>Monitoring &amp; Evaluation officer</td>
<td>Plan Norway, Norway</td>
</tr>
<tr>
<td>Schild</td>
<td>Andreas</td>
<td>Director General</td>
<td>International Centre for Integrated Mountain Development (ICIMOD)</td>
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<tr>
<td>Shah</td>
<td>Iman</td>
<td>Director</td>
<td>Nepal Music Centre</td>
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<tr>
<td>Shakya</td>
<td>Amrit R.</td>
<td>President</td>
<td>DPO (Right Holders) - National Association of Physical Disabled</td>
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<tr>
<td>Sharma</td>
<td>Narayan</td>
<td>Staff</td>
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<tr>
<td>Shiwakoti</td>
<td>Murari</td>
<td>Deputy Program Coordinator</td>
<td>Danida HUGOU (Human Right and Good Governance) - Program Initiative of Agreement Partner (Danish Embassy)</td>
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<tr>
<td>Shrestha</td>
<td>Krishna Kumar</td>
<td>PME Officer</td>
<td>Plan Nepal</td>
</tr>
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<td>Shrestha</td>
<td>Narayan Sundar</td>
<td>President</td>
<td>DPO (Right Holders) - Sustamanasthi Abhibhawan Kalyan Sangh (Parents organization of intellectual disabled)</td>
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<tr>
<td>Shrestha</td>
<td>Ramesh Lal</td>
<td>President</td>
<td>DPO (Right Holders) - National Federation of Deaf and Hard of Hearing</td>
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<tr>
<td>Shrestha</td>
<td>Saroj</td>
<td>Programme Manager</td>
<td>Nepal Red Cross</td>
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<tr>
<td>Silwal</td>
<td>Surya Prasad</td>
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<td>Ministry of Peace and Reconciliation - Nepal Peace Trust Fund</td>
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<tr>
<td>Singh</td>
<td>Suresh</td>
<td>Field Coordinator</td>
<td>World Food Programme (WFP)</td>
</tr>
<tr>
<td>Surname</td>
<td>First name</td>
<td>Position/title</td>
<td>Institution</td>
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<tr>
<td>Sob</td>
<td>Durga</td>
<td>Chairperson Member organisation - Feminist Dalit Organisation (FEDO)</td>
<td>SANKALPA - Previous initiative supported by the Royal Norwegian Embassy “Women’s Alliance for Peace Power Democracy and the Constituent Assembly (WAPPDCA)” FEDO - Agreement Partner</td>
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<tr>
<td>Storholt</td>
<td>Kristine</td>
<td>Counsellor</td>
<td>Royal Norwegian Embassy in Kathmandu</td>
</tr>
<tr>
<td>Tamta</td>
<td>Tek</td>
<td>Programme Coordinator</td>
<td>United Nations Development Programme (UNDP)</td>
</tr>
<tr>
<td>Thapa</td>
<td>Nirmala</td>
<td>GESI Expert</td>
<td>Ministry of Local Department Gender and Social Inclusion (GESI) Unit</td>
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<tr>
<td>Thapa</td>
<td>Reeta</td>
<td>Interim Director</td>
<td>SANKALPA - Previous initiative supported by the Royal Norwegian Embassy “Women’s Alliance for Peace Power Democracy and the Constituent Assembly (WAPPDCA)”</td>
</tr>
<tr>
<td>Tharu</td>
<td>Khushi</td>
<td>Dialogue/Constitution Building Coordinator</td>
<td>Institute for Democracy Electoral Assistance (IDEA)</td>
</tr>
<tr>
<td>Tiwari</td>
<td>Tej Kumar</td>
<td>President</td>
<td>DPO (Right Holders) - Nepal Society of Disabled</td>
</tr>
<tr>
<td>Tuladhar</td>
<td>Manju</td>
<td>Coordinator</td>
<td>Social Inclusion Research Fund - Initiative of RNE; Fund managed by SNV(Netherlands Development Organisation)</td>
</tr>
<tr>
<td>Vigtel</td>
<td>Terje</td>
<td>Director</td>
<td>Norad, Department for Civil Society, Norway</td>
</tr>
<tr>
<td>Vold</td>
<td>Silje</td>
<td>Child Rights and Advocacy Adviser</td>
<td>Plan Norway, Norway</td>
</tr>
<tr>
<td>Wood</td>
<td>Peter</td>
<td>Regional director</td>
<td>Save the Children Norway, Norway</td>
</tr>
<tr>
<td>Øye</td>
<td>Kjell Erik</td>
<td>Program Director</td>
<td>Plan Norway, Norway</td>
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</tbody>
</table>
Annex 3: List of laws and polices

**Education Act, 1971**: provides for the “Special Education” of children with visual, hearing, intellectual or mental disabilities.

**Money Order Act, 1972**: stipulates that there should be a guardian to draw the money from money order with consent and present for mentally retarded children.

**Protection and Welfare of Disabled Persons Act, 1982**: is a comprehensive disability legislation which aims to protect and promote rights and interests of persons with disabilities in Nepal.

**Labour Act, 1992**: provides for safety measure and precaution in the factory and workplace for persons with disabilities.

**Social Welfare Act, 1992**: provides for programs for the welfare of persons with disabilities, among others.

**Children’s Act, 1992**: has provisions in relation to providing care to children with disabilities in children’s welfare home. The Act imposes duty on the Government to establish homes for orphaned children with disabilities and educate them.

**Protection and Welfare of the Disabled Persons Rules, 1994**: are the implementing regulations for Protection and Welfare Act of Disabled Persons

**Disabled Service National Policy, 1996**: is aimed at providing equal opportunities in all spheres of society by empowering persons with disabilities. The National Policy covers the following areas and services for the welfare and right of the persons with disabilities.

**National Mental Health Policy (1997)**: the government of Nepal adopted a national mental health policy and included mental health as an element in primary health care. There is no mental health act till date and the National Mental Health Policy (1997) is yet to be fully operational.

**Local Self Governance Act, 1999**: provides guidelines for the Village Development Committees (VDC) and directs the VDC and the VDC Ward Committee to assist in activities of persons with disabilities of the village, and keep and update the data of the persons with disabilities residing their respective territory, among others.

**Financial Administration Regulation, 2000**: mentions that an employee and his/her family will receive daily and travel allowances while being transferred, promoted or temporarily assigned from one district to another, or within the district from one office to another that are at least 6 kosh (18 kilometers) apart. In relation to the family there is a provision of providing allowance to mother, father,
husband or wife, and two children under 18 years who are living together, but in relation to children with disability or physical weakness, the age limit according to this rule will not apply.

**Nepal National Building Code, 2003:** has recognized the special need of the persons with disabilities and sets standards to ensure physical access of persons with disabilities to the buildings and public infrastructures, including provisions to have elevators, access ramps for wheelchairs wherever possible.

**Social Security Program Operation Procedures, 2004:** has provisions for allowances and pension to people above 16 years and above for those who are blind, those who have lost both hands or whose hands cannot perform work, and those who have lost both legs or both legs cannot function to do work (Nepal 2004a).

**National Policy and Plan of Action on Disability, 2006:** presents the disability situation in Nepal, and identifies the legal basis for respective programs, plans and activities. It is one of the key policy and program documents of the government and is currently into existence. The Action Plan, which envisages to develop an inclusive, just and obstacle free society for persons with disabilities, identifies seventeen core areas that include health, education, employment, sports and entertainment, distribution of allowances, rehabilitation, awareness raising and increasing access of persons with disabilities to public places, including transport, among others. However, the effective implementation of the National Policy and Plan of Action, has remained a challenge. Also, this and other legal and policy measures—especially the sectoral ones such as health, education, transport, labour, physical infrastructures, agriculture, information—applicable to persons with disabilities need to align with the CRPD.

**Special Education Policy, 1996:** incorporates a number of provisions to mainstream disability by making arrangement of special education. It aims to develop primary education, being provided to the various types of children with disabilities, as an integral part of the Education for All; construct school buildings with special physical facilities, taking into consideration the mobility of children with disabilities; provide primary to secondary level education free of cost; provide integrated special education free of cost in regular schools, and make arrangement of special schools for that matter as per the necessity, among others.

**The Special Education Policy (Nepal 2006b):** promotes inclusive education through provision of educational material production and distribution, teacher training, integrated education for children with disabilities.

**The Social Sector Policies from 2007, Section 13.5 on “People with Physical Disability”** it is stated that “Nepal lacks disability-friendly programs”. “As a result, persons with disabilities find it difficult to participate in the development process. Opportunities will be created to enable persons with disabilities to live an independent and dignified life. Policy will be adopted to mainstream the rights and concerns of the persons with disabilities in all sector policies and programs.
Programs will be launched to prevent disability and empower persons with disabilities.\textsuperscript{64}


UN Convention on the Rights of persons with disabilities
Nepal has signed (2007) and ratified (Dec 2009) the Convention on the Rights of persons with disabilities and its Optional Protocol. This is a significant step on the part of the government to advance the right of persons with disabilities in Nepal and there are a number of reasons: First, the Convention not only offers guidance to have legal and policy measures to combat the injustice, discrimination and violation of the rights of persons with disabilities, but creates legal entitlements of persons with disabilities in Nepal. Secondly, and most importantly, it challenges the conventional notion of viewing persons with disabilities as “object” of charity, medical treatment and social protection and calls on to view them as “subjects” with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society; a “paradigm shift” in attitudes and approaches to view persons with disabilities.

National Youth Policy (2010): places youth with disabilities under “special priority group” and defines "youth with disabilities” as “youth having all types of physical and mental disabilities." Under the “principal working policies,” the youth policy guarantees the right to be free from discrimination which is, among others, based on disability; and ensures the right to live with dignity in a fearless environment. Besides, the policy aims at furthering the recreational activities by organizing friendly events involving the youth with disabilities.


“It has established the right to reproductive health and other reproductive matters for every woman. Forum for Women, Law and Development (FWLD) and Nepal Disable women association (NDWA) had jointly filed a written claim the women with disability have different need in reproductive functioning. As a result, a directive order dated 28th July 2010 has been issued to address reproductive health and reproductive rights for persons with disabilities.

The National Human Rights Action Plan\textsuperscript{65} outlines a number of priority areas of the government to advance the rights of persons with disabilities. They include review and amendment of the existing discriminatory legal provisions concerning disabilities and adoption of necessary measures to implement them; reform and

\textsuperscript{64} Social Sector Policies 2007, Section 13.5
\textsuperscript{65} Introduced by the Government in 2010, the National Human Rights Action Plan (NHRAP) outlines the government plans and priorities in the areas of health, education, work and employment, legal and institutional reform and administration of justice for next three years.
adjustment of educational institutes to ensure access of persons with disabilities to school level education, including launching special education programs for persons with disabilities and providing vocational trainings; raising awareness of persons with disabilities on their rights; and providing allowances to persons with disabilities based on the severity of the case with a view to improve their living standard.

**The Annual policy and program for the year 2068/2069 (2011/2012)**
The national annual plan presented by the legislative parliament has following provision for persons with disabilities

- The quality of education shall be improved by applying the disability friendly teaching and learning methodology in public schools
- Promotion, prevention and rehabilitation oriented health program will be extended, region wise. Appropriate arrangement will be set for the treatment to the injured of peoples’ movement (2005/06), arm conflict and Terai Madhes movement
- Community based rehabilitation will be implemented for persons with disabilities.
- Self-employment program will be operated for the people having disability during the armed conflict.

**Facilities/benefits for persons with disabilities**

- Disability ID card is provided through each district administration office.
- Disability Allowance (per month), through Village Development Committee (VDC) or Office of Municipality, depending upon the degree of disability (as stated in ID card).
- Special education for deaf and blind children through government school.
- Free education for persons with disabilities in Government colleges (in all affiliated campuses with TU)
- Free education to Children with Disabilities in government schools.
- Scholarship to Children with Disabilities in government school (Rs. 50/- to 1000/- per month as per the intensity of necessity).
- 5% Quota is reserved for persons with disabilities in civil service according to the amended civil service Act 2063.
- 50% discount on air fare for one person with disabilities in each domestic flight of private and government airlines.
- Quota is reserved for persons with disabilities in teaching profession in government school.
- General health check-up and minor treatments are free of cost for persons with disabilities in government hospitals and health centre.
- Vocational training to persons with disabilities is provided through Centre for Technical Educational and Vocational Training (CTEVT). CTEVT provides additional 10 marks to persons with disabilities participants in examination.
- News broadcasting in sign language from Nepal Television once in a week for deaf people.
- Seats are reserved in public land transports for disabled persons to travel.
Custom duty and taxes are free to import the assisting devices to be used by persons with disabilities such as wheelchair, white-can, hearing aids, Braille equipment/materials, artificial limbs, callipers, crutches, walking sticks, elbow crutches, specially made scooter with four wheels and other orthopaedic appliances etc.

The range of taxable amount has been increased by 50% for persons with disabilities in the normal
## Annex 4: List of stakeholders working in the field of disability

<table>
<thead>
<tr>
<th>Name of EDPs</th>
<th>Work area in terms of Disability</th>
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<tbody>
<tr>
<td>1</td>
<td>Action Aid Nepal</td>
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<td>2</td>
<td>ADRA Nepal</td>
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<td>3</td>
<td>Christopher Blinden Mission, Germany</td>
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<td>4</td>
<td>DANIDA</td>
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<td>5</td>
<td>Department for International Development (DFID) UK</td>
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<td>6</td>
<td>European Commission</td>
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<td>7</td>
<td>Atlas Alliance/FFO Norway</td>
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<td>8</td>
<td>Handicap International</td>
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<td>9</td>
<td>Hellen Keller International</td>
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<td>10</td>
<td>Impact Foundation UK</td>
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<td>11</td>
<td>International Nepal Fellowship Worldwide (INF worldwide)</td>
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<td>12</td>
<td>Interplast Germany</td>
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<td>13</td>
<td>Japan International Cooperation Agency (JICA)</td>
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<td>15</td>
<td>Norwegian Church Aid (NCA)</td>
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<td></td>
<td>Organization</td>
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<tr>
<td>16</td>
<td>Netherlands Leprosy Relief, Netherlands</td>
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<td>17</td>
<td>Plan Nepal</td>
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<tr>
<td>18</td>
<td>Save the Children Norway</td>
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<td>19</td>
<td>Swedish Organization’s of Disabled persons International Devi Association (SHIA) Sweden</td>
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<td>Terres Des Homes</td>
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<td>United Mission to Nepal</td>
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<td>VSO/UK</td>
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<td>World Vision International</td>
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<td>Karuna Foundation Nepal</td>
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<td>Latter - Day Saint Charities USA</td>
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<td>27</td>
<td>Atlas Alliance/ Norwegian Association for Person with Dev’t Disability - Norway</td>
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<tr>
<td>28</td>
<td>Atlas Alliance/The Norwegian Association of the Blind and partially Sighted - Norway</td>
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<td>29</td>
<td>Stitching People’s Trust Netherlands</td>
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<td>30</td>
<td>FIDA International -Finland</td>
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<td>31</td>
<td>The Esther Benjamin’s Trust (EBT)</td>
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Annex 5: Rights-holders feedback

A fruitful workshop with the right holders (23 participants) was held on 21st October 2011. The feedback and recommendation were somewhat similar to what is in the report, key comments included:

1. Key achievements of the disability movement: Policy reforms, enhanced services, awareness:
   a. Success factor: collaborative advocacy (DPOs/PWDs coming together); support of donor agencies and most important collaboration of other organizations (non DPOS) and especially support of the civil society as a whole + international support
   b. Key learning: Efforts of DPOs alone not enough, have to mobilize the civil society for effective advocacy and have to ensure international support
   c. Main Challenges: Macro (policy) level policy reform alone does not necessary change lives of PWDs, so challenges it to ensure micro level implementation of the policies and program

2. Norwegian support: Results of targeted initiative
   a. Institutionalising DPOs
   b. Strengthening DPOs,
   c. Strengthening advocacy capacity
   d. Services for PWDs

3. Other key institutions supporting the rights of people with disability
   a. Scandinavia countries – Denmark, Norway, Sweden,
   b. Finland
   c. Austria
   d. EU
   e. USA now coming; doesn’t think UN agency prioritizes disability
   f. Norway one of the key supporters

4. The key challenges identified for not accessing mainstream programme:
   a. Mainstreaming disability not yet a development agenda
   b. Weak advocacy- lack of common understanding of mainstreaming among the disability movement itself/no technical capacity or expertise
   c. Do not have capacity to influence – Do not have access to big institutions; large programmes (Weak networking)
5. Support (Interventions for bettering accessing mainstream programs):
   a. Support for developing a clear and common understanding and technical
capacity/expertise of disability mainstreaming among the disability move-
ment– what it entails, how it can be done
   b. Capacity to lobby
   c. Developing Expertise (in NFDN/DPOs) – who can support other organisa-
tion to mainstream disability. DPOS can technically supports agreement
partners of Norway to understand and effectively mainstream disability

6. They have identified livelihood as the key sector to target for mainstreaming

7. They have identified government agencies; private sector (Federation of the
Nepalese Chamber of Commerce and Industry – FNCCI) and right based
institutions (NHRC/INSEC) as well as AIN and NGO federation as stake-
holders to work with for promoting the mainstreaming agenda

8. Recommendation to Norwegian Government
   a. One of the key agency supporting the disability movement of Nepal:
      but still have to focus in mainstreaming
   b. Coordination among the different agencies
   c. Making mainstreaming disability as a criteria for awarding the funding
      support
   d. Orientation to all the agreement partners –about mainstreaming
      (capacity building)
   e. Monitoring the extend of mainstreaming – disability based indicators for
      assessing performance; criteria of good governance of the agreement
      partners
   f. Cooperate with the disability movement to develop policy/approach/
      methodology/tool for mainstreaming
   g. Capacity building of the disability movement for lobby/influence
      – especially at the leadership position (with technical expertise for
      mainstreaming)
Mainstreaming disability in the new development paradigm

Evaluation of Norwegian support to promote the rights of persons with disabilities

Nepal country report

Report 1/2012 Study