

**ASIAN DEVELOPMENT BANK**

**TAR: OTH 33529**

**TECHNICAL ASSISTANCE**

**FOR**

**IDENTIFYING DISABILITY ISSUES**

**RELATED TO POVERTY REDUCTION**

**November 2000**

## ABBREVIATIONS

ADB	—	Asian Development Bank
DMC	—	developing member country
ESCAP	—	Economic and Social Commission for Asia and Pacific
TA	—	technical assistance
UN	—	United Nations

## NOTE

In this report, "\$" refers to US dollars.

## I. INTRODUCTION

1. By all definitions of poverty, disabled people in developing countries are overrepresented among the poor. The majority live in rural areas. Social exclusion and isolation are a frequent part of their daily experience.<sup>1</sup> Two thirds of disabled people are estimated to be without employment. Often, the disabled are deprived of the opportunity to participate in productive work, and thus become impoverished more easily than the rest of the population. Poverty also causes new disabilities as a result of poor and dangerous living and work conditions; malnutrition; and lack of adequate health care, education, and vocational training opportunities. Therefore, poverty is both a cause and a consequence of disability. Poverty and disability reinforce each other, contributing to increased vulnerability and exclusion. Eliminating world poverty is unlikely to be achieved unless the rights and needs of excluded people and disabled people are taken into account.

2. This regional technical assistance (TA)<sup>2</sup> aims to raise awareness of Asian Development Bank (ADB) staff and the developing member countries (DMCs) of the importance of disability as a development issue. The TA will provide guidance on how to (i) improve ADB's responsiveness to the needs, concerns, and potential of people with disabilities and (ii) include them when operationalizing ADB's poverty reduction strategy. The scope, cost estimates, and implementation arrangements of the TA reflect the findings of the July 2000 Fact-Finding Mission to Cambodia, India, and the Philippines.

## II. BACKGROUND AND RATIONALE

3. One of three Asians is poor; about 900 million poor people live in the region. According to the United Nations, 1 person in 20 has a disability and more than 75 percent of these live in developing countries.<sup>3</sup> More often than not, they are among the poorest of the poor. Disabled people are the most marginalized group in the Asian and Pacific region. In all societies, people with disabilities tend to be more vulnerable to poverty and excluded from mainstream society than those who do not have disabilities. Disability limits access to education and employment, and leads to economic and social exclusion. Poor people with disabilities are caught in a vicious cycle of poverty and disability, each being both a cause and a consequence of the other. Indicative evidence on poverty and disability is abundant, but comprehensive studies on the linkages are not available.<sup>4</sup> The lack of comprehensive information on the poverty of disabled people is another indicator of their marginalized and invisible status.

4. Many disabled people are also disadvantaged by social, economic, physical, and political conditions. Together, these conditions constitute barriers to freedom of movement in society, thus hampering their full participation. These barriers include the stigma of disability, and poor understanding of the abilities and aspirations of disabled

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<sup>1</sup> Kauppinen, L. 1995. Disability Awareness in Action, Newsletter 25.

<sup>2</sup> The TA was cleared by the regional TA Screening Committee on December 1999 and first appeared in the *ADB Business Opportunities* in February 2000.

<sup>3</sup> Helander, E. 1992. *Prejudice and Dignity: An Introduction to Community-Based Rehabilitation*. New York: United Nations Development Program.

<sup>4</sup> Elwan, A. 1999. *Poverty and Disability. A Background Paper for World Development Report*. Washington: World Bank.

people. Because of this, disabled people often face a life that is segregated and debased; many live in isolation and insecurity.

5. Women and girls with disabilities are often excluded from mainstream gender equity programs. They suffer double discrimination, on the grounds of gender and impairment, and their literacy rates are lower than of their male counterparts. According to a Department for International Development (DFID) report, disabled women are two to three times more likely to be victims of physical and sexual abuse than women with no disabilities. Their access to reproductive health care is also minimal; as a result, they suffer greater vulnerability to reproductive health problems.<sup>5</sup> Children and young people with disabilities have fewer opportunities to be part of education and skill development programs. Recent United Nations Educational, Scientific and Cultural Organization (UNESCO) studies suggest that only 1–2 percent of disabled children in developing countries receive an education. Girls with disabilities have even less access to school than boys with disabilities.<sup>6</sup>

6. As countries within the Asian and Pacific region develop and modernize, changes occur in the disability profile. With the rise in smoking habits and environmental pollution, disabilities associated with chronic nonspecific lung diseases are expected to increase significantly. Mental disabilities such as depression and alcohol abuse are also becoming more prominent. Furthermore, with populations aging, disabilities associated with increasing longevity, such as muscular diseases, will also increase. In addition, road traffic accidents in developing countries have received relatively little attention from public health experts.

7. In the last two decades, awareness of disability issues has increased and several significant landmarks were attained at the international and national levels. 1981 was declared International Year of Disabled Persons. Following this, 1983-1992 was proclaimed by the United Nations (UN) General Assembly as the UN Decade for Disabled Persons. The major outcome of the decade was the emergence of a global movement recognizing the importance of integrating people with disabilities into society through a world program of action.

8. The governments of the Asian and Pacific region made a historic decision in the concluding year of The UN Decade of Disabled Persons. The Economic and Social Commission for Asia and the Pacific (ESCAP), at its forty-eighth session in April 1992 declared 1993-2002 as the Asian and Pacific Decade of Disabled Persons. The unique regional initiative started at a meeting convened by ESCAP at Beijing in December 1992. That meeting formulated and adopted two key decade documents: the proclamation on the full participation and equality of people with disabilities in the Asian and Pacific region, and the agenda for action for the Asian and Pacific Decade of Disabled Persons.

9. Following the Asian and Pacific Decade of Disabled Persons, several DMCs passed comprehensive legislation to protect the rights of disabled people.<sup>7</sup> These

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<sup>5</sup> Department of International Development. 2000. *Disability, Poverty and Development*. London, United Kingdom.

<sup>6</sup> Lewis, C. and S. Sygall, eds. 1997. *Loud, Proud and Passionate: Including Women with Disabilities in International Development Programs*. Rome: UNESCO.

<sup>7</sup> *Report of the Regional Forum on Meeting the Targets for the Asian Decade of Disabled Persons*. Bangkok: ESCAP. 1999.

numerous regulations include mandatory requirements for the implementation of specific measures covering areas such as employment, access to public transport, rehabilitation and access to disability services, and antidiscrimination measures. Although the DMCs may make genuine efforts to implement laws and regulation on disability issues, they often lack the skills, resources, conceptual understanding, and institutional capacity to respond adequately to the needs of the disabled.

10. A recent survey in Cambodia estimated that disabled people comprise about 1.4 million or 15 percent of the total population.<sup>8</sup> Apart from congenital reasons and illness, disability in Cambodia has been caused by the long and severe war in the country. Although the war ended more than 20 years ago, one of its consequences is the high percentage of disabled people among the population, especially those with mobility handicap.

11. In 1991, the Indian National Sample Survey Organization indicated that in India, over 90 million people are disabled, of which 12 million are blind, 28.5 million have low vision, 12 million have speech and hearing defects, 6 million are orthopedically handicapped, 24 million are mentally retarded, 7.5 million are mentally ill, and 1.1 million persons have leprosy-related handicaps. In a majority of countries including India, the lack of inclusion of rehabilitation services in the regular health care services results in a higher death rate for disabled infants and children. Disabled children and youths rarely receive a formal education. It is difficult for disabled adolescents and adults to gain access to vocational training, and persons with disabilities are rarely entrusted with family and community responsibilities. While India has formulated broad policies, strategies, and plans to include people with disabilities as stated in the Disability Act 1995, implementation is often weak.

12. In the Philippines, groups and organizations of disabled people play a strong role at the national and international levels. State policies relating to the rights of disabled peoples are quite well developed. The Magna Carta for Disabled Persons also known as Republic Act No. 7277 of 1957 affirms the full participation and total integration of persons with disabilities into the mainstream of Philippine society. Furthermore, the Philippine National Antipoverty Action Agenda launched in July 2000 and responsible for poverty reduction policy and programming, includes persons with disabilities as 1 of the 10 groups vulnerable to poverty. The agenda envisions a country where the disabled can expect “enjoyment and full participation in a barrier-free society inclusively in all facets of society, especially education.” Thus, at the highest level, the Philippines addresses the needs of the disabled as part of its overall strategy to reduce poverty.

13. ADB recently adopted poverty reduction as its overarching goal.<sup>9</sup> This goal is highly relevant from the perspective of the prevention of disabling conditions, generation of appropriate support services and structures, and the equalization of opportunities for disabled people to contribute to poverty reduction, as well as to socially sensitive and pro-poor economic development.

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<sup>8</sup> United Nations. 1999. *United Nations and Disabled Persons*. Bangkok.

<sup>9</sup> ADB. 1999. *Fighting Poverty in Asia and the Pacific: The Poverty Reduction Strategy*. Manila.

### **III. THE TECHNICAL ASSISTANCE**

#### **A. Objectives**

14. The objectives of the TA are to (i) familiarize the DMCs with ADB's overarching objective of poverty reduction and other related ADB policies to help address the vulnerability and poverty situation of disabled peoples; (ii) identify and analyze the DMCs' national policies, programs, projects, and initiatives concerning disabilities and poverty to be used as a basis for action plans; (iii) provide a forum for ADB, Government, and disabled peoples' groups and organizations to identify and discuss disabled peoples' needs and concerns particularly those related to poverty; and (iv) develop a disability checklist for ADB. The TA framework is in Appendix 1.

#### **B. Scope**

15. The TA will support the following activities in Cambodia, India, and the Philippines. The first phase will consist of developing background and issue papers to assess country experiences, and analyze the connection between disability and poverty reduction. The background paper will examine priority issues within each country to address the needs of disabled people. The paper will be developed in consultation and liaison with key actors, including governments, international agencies, nongovernment organizations, representatives of disabled people, and relevant regional bodies in Asia, drawing on their experience and analysis. The paper will be discussed in national workshops in each DMC involving key stakeholders. The national workshop will build awareness about disability issues among stakeholders including government and civil society. Based on the findings, potential areas and modalities will be identified for future ADB operational policy dialogues, macroeconomic and sector work, TAs, and loans in addressing disability issues.

16. The second phase of the TA will consist of a regional workshop involving key stakeholders from 10 DMCs: Cambodia, People's Republic of China, Fiji Islands, India, Indonesia, Kazakhstan, Sri Lanka, Thailand, Uzbekistan, and Viet Nam. Broader regionwide concerns related to poverty reduction and disabled people will be discussed. A synthesis overview report will be prepared. Representatives of other international agencies will be invited to share information during the workshop.

17. Drawing from the background paper and consultations with each DMC, during the final phase of the TA, the consultant will review ADB's existing policies, guidelines, and staff instructions, and prepare a regional strategy and checklist on disability and poverty in key sectors where ADB is active and that are relevant to disability concerns.

#### **C. Cost Estimates and Financing Plan**

18. The total cost of the TA estimated to be \$300,000 equivalent will be financed by ADB on a grant basis from the ADB-funded TA program. The detailed cost estimates are provided in Appendix 2.

#### **D. Implementation Arrangements**

19. The TA will be implemented over six months and is expected to commence in the first quarter of 2001. The TA requires the services of one international consultant for 5 person-months and three domestic consultants for a total of 12 person-months. All consultants will have background in social sciences and significant experience with disability and poverty issues. The consultants will be selected on an individual basis and engaged by ADB in accordance with ADB's *Guidelines on the Use of Consultants* and other arrangements satisfactory to ADB on the selection and engagement of consultants. The outline terms of reference are in Appendix 3.

20. During the first month, the international consultant will (i) attend an inception meeting at ADB headquarters; (ii) finalize the checklist outline through discussions with the Social Development Division, the Poverty Reduction Unit, and key counterparts in agencies responsible for incorporating disability concerns in each DMC; (iii) assist in selecting domestic consultants; and (iv) prepare an inception report setting out the proposed work plan for the TA. The interim report and country work plan are due at the end of month two, and month four, respectively. The national workshops will take place in month three, the regional workshop in month four, and the draft final report in month five.

21. ADB will execute the TA through its Social Development Division. In each selected country, the participating agencies will include, as appropriate, the ministries or departments of social welfare and local government, together with civil society organizations.

#### **IV. THE PRESIDENT'S DECISION**

22. The President, acting under the authority delegated by the Board, has approved the provision of a technical assistance, on a grant basis, in an amount not exceeding the equivalent of \$300,000 for the purpose of Technical Assistance for Identifying Disability Issues Related to Poverty Reduction and hereby reports such action to the Board.

## TECHNICAL ASSISTANCE FRAMEWORK

Design Summary	Performance Targets	Monitoring Mechanisms	Assumptions and Risks
<p><b>Goal</b></p> <p>Include and mainstream disability concerns into the implementation of the Asian Development Bank (ADB) policy framework of poverty reduction and social development.</p>	<p>Develop a framework and action plan to address the needs of disabled people to reduce poverty.</p>	<p>Technical assistance (TA) report, and evaluation from the national and regional workshops</p>	<p>Disabled people are recognized as significant actors in development, contributing to the development process to reduce poverty.</p>
<p><b>Purpose</b></p> <ul style="list-style-type: none"> <li>• To engage in consultation and dialogue with key stakeholders through which ADB can gain the knowledge, experiences, and views of disability dimensions to be incorporated as appropriate in the implementation of ADB's and the developing member countries' (DMC) poverty reduction and social development strategies</li> <li>• To increase awareness, commitment, and practice of selected DMCs to incorporate disability concerns on the poverty reduction strategy</li> </ul>	<ul style="list-style-type: none"> <li>• Develop a theme paper on disability concerns and poverty reduction as a foundation for consultation and dialogue.</li> <li>• Identify an appropriate approach to consultation and dialogue that will serve the interests of all participants.</li> <li>• Develop a strategy paper and action plan to address disability concerns with the poverty reduction strategy.</li> <li>• Prepare three sets of case studies and initial plans of action for Cambodia, India, and Philippines at the workshops.</li> <li>• Receive three positive national workshop evaluations.</li> </ul>	<ul style="list-style-type: none"> <li>• Development of effective theme papers</li> <li>• Identification of an appropriate structure for consultations</li> <li>• Development of an appropriate strategy paper and action plan</li> <li>• Workshop reports and outputs</li> <li>• Reports and evaluations for national workshops</li> </ul>	<ul style="list-style-type: none"> <li>• TA outcomes may not be appropriate or effective.</li> <li>• Key stakeholders on disability concerns and poverty reduction programs and projects will participate.</li> <li>• Other international agencies will attend workshops.</li> </ul>
<p><b>Components/Outputs</b></p> <p>Country analysis and workshop for three selected countries in incorporating disability dimensions on poverty reduction strategy</p>	<p>Stakeholder analysis and consultations</p> <p>Review of disability policy and poverty reduction policy and implementation of recommendations</p>	<p>Country report</p> <p>Country report</p>	<ul style="list-style-type: none"> <li>• Delay or difficulty in identifying an appropriate consultation mechanism</li> <li>• Unsatisfactory consultations</li> <li>• Data are not available for review</li> <li>• Delay in execution of workshop</li> </ul>

Design Summary	Performance Targets	Monitoring Mechanisms	Assumptions and Risks
Theme papers, strategies and checklists	<p>Three workshop reports and budgets</p> <p>Developments of theme papers, strategies, and checklists that will be relevant and effective information resources, as well as an effective and appropriate foundation on which to base consultation efforts.</p>	<p>Reports</p> <p>Production of effective theme papers, strategies, and checklists</p>	<ul style="list-style-type: none"> <li>• Workshop not meeting intended objectives</li> <li>• Delays in identifying appropriate consultants</li> <li>• Delays in production of papers</li> <li>• Development of ineffective or inappropriate theme papers</li> </ul>
<p><b>Activities</b></p> <p>Production of theme papers:</p> <ul style="list-style-type: none"> <li>• Prepare inception report.</li> <li>• Prepare interim report.</li> <li>• Prepare country report.</li> <li>• Prepare summary synthesis report.</li> </ul> <p>Conduct workshops.</p> <p>Production of checklists, publication, dissemination, and application of strategy paper and action plan to incorporate disability dimensions into poverty reduction strategy and social development objectives</p>	<ul style="list-style-type: none"> <li>• Recruit a consultant in accordance with ADB requirements.</li> </ul> <p>Organize and plan an appropriate stakeholder workshop.</p> <p>Produce and disseminate a strategy paper and action plan that is relevant and of operational value.</p>	<ul style="list-style-type: none"> <li>• Identification and timely recruitment of consultants in accordance with ADB requirements</li> <li>• Production of the desired theme papers</li> <li>• Execution of workshop</li> <li>• Identification of appropriate stakeholders</li> <li>• Produce and disseminate an appropriate and effective strategy paper and action plan.</li> <li>• Identify measures for operationalization of strategy paper and action plan.</li> </ul>	<ul style="list-style-type: none"> <li>• Delay in identification or recruitment of consultants</li> <li>• Delay in development of the desired papers</li> <li>• Development of papers of inadequate quality</li> <li>• Difficulty identifying an appropriate or arranging participation of most appropriate participants</li> <li>• Workshops not meeting intended objectives</li> <li>• Delay in production or dissemination of strategy paper and action plan</li> <li>• Production of a final report of inadequate quality</li> <li>• Ineffective operationalization of measures identified in strategy paper and action plan</li> </ul>

**COST ESTIMATES**  
(in \$)

<b>Item</b>	<b>Total Cost</b>
A. Consultants	
1. Remuneration and Per diem	
a. International Consultant	88,500
b. Domestic Consultants	41,000
2. International and Local Travel	22,500
B. Workshops <sup>a</sup>	
1. National Workshops	15,000
2. Regional Workshop	75,000
C. Publications (includes editing and translation)	10,000
D. Communications	4,000
E. Miscellaneous Administration and Support Costs	5,000
F. Contingency	39,000
<b>Total</b>	<b>300,000</b>

<sup>a</sup> The regional workshop costs includes international airfares, accommodation, per diems and expenses, together with administrative costs. The national workshops include national airfares and travel, accommodation, per diems and expenses, together with administrative costs.  
Source: Staff estimates.

## OUTLINE TERMS OF REFERENCES

1. ADB will recruit one international consultant for five person-months and one domestic consultant for four person-months from each of the three participating countries: Cambodia, India, and Philippines.
2. The international consultant will have substantial experience with disability and poverty reduction policy analysis and planning preferably in region of the Asian Development Bank (ADB). The international consultant should be familiar with disability-related issues in the three countries selected for the regional technical assistance (TA). He/she must have analytical and writing skills and experience in workshop facilitation.
3. The domestic consultants will have significant experience in their respective countries on disability issues together with relevant educational qualifications. The domestic consultants will prepare case study materials for their respective countries, and help to arrange national workshops.
4. The international consultant, who will be the team leader, will be responsible for (i) organizing and supervising the research, consultations, and workshops; (ii) supervising the country studies; and (iii) producing the inception, interim, and final reports. The domestic consultants, supervised by the international consultant, will prepare the country studies.
5. The responsibilities of the international consultant will be to
  - (i) analyze, in liaison with other bilateral and multilateral assistance agencies, the elements of disability policies and practice and their relevance to poverty reduction;
  - (ii) in each selected country, supervise stakeholder analysis and consultations; and review the disability policies, laws, guidelines, and directives as collected by domestic consultants;
  - (iii) in each selected country, supervise the review of agencies responsible for disability-related issues in terms of mandates, understanding, commitments, staff and financial resources, and implementation experience;
  - (iv) supervise the preparation and production of each country study summarizing key findings and recommendations to enhance the policy and implementation framework, which will closely relate to ADB's poverty reduction strategy;
  - (v) prepare and conduct, with the assistance of the domestic consultants and key agencies, a national workshop in each country to discuss the findings and recommendations of the study, with participants from all relevant sectors and levels of government, together with other stakeholders from the nongovernment organizations, private sector, community-based organizations, and funding bodies;

- (vi) supervise the preparation of operational guidelines and an action plan on a country basis, and seek agreement of the country participants to each country plan of action;
  - (vii) compare the policy frameworks, procedures, and implementation capacities of each participating DMC to draw out key themes and issues;
  - (viii) prepare a synthesis report summary on key findings and recommendations to strengthen disability and poverty reduction action plans and build capacity;
  - (ix) prepare disability strategy for and sector-specific checklists with an objective incorporating disability concerns into poverty reduction and social development strategies; and
  - (x) organize regional workshops to discuss the theme papers, findings, and recommendations of the study, including the proposed regional plan of action.
6. The domestic consultants will carry out their assignments under the general supervision of the international consultant. They will each have responsibility to produce a country study. The tasks of the domestic consultants will be to
- (i) conduct stakeholder analysis to identify the key participants in disability planning and management, and consult with key stakeholder representatives;
  - (ii) liaise with other funding bodies involved in disability and poverty reduction to share information;
  - (iii) conduct actual visits to disability centers to assess firsthand the effectiveness of procedures and programs being implemented, and draw relevant recommendations and strategies based on the findings;
  - (iv) review the policies, laws, guidelines, and directives at the national level, identifying any areas or sectors that can address the needs of disabled people in the poverty reduction program; and provide copies of each of such policies, laws, guidelines, and directives;
  - (v) review three selected disability and poverty reduction projects to assess the nature and effectiveness of implementation procedures, and the extent to which policy objectives are being achieved and requirements met;
  - (vi) assess that the agencies (government and nongovernment organizations) responsible for disability projects and programs have the required mandates, understanding, commitment, staffing, financial resources, and experience to plan and implement the projects and programs;

- (vii) draw out an example of the current practice, analyze the reasons for success in addressing poverty reduction for disability-related projects and programs;
  - (viii) identify innovative practices and existing mechanisms in the local setting for disability projects and programs to achieve poverty reduction;
  - (ix) prepare a report summarizing key findings and recommendations to enhance the policy framework to include poverty reduction as an objective, to foster good practice, and to build implementation capacity;
  - (x) prepare country-specific training materials and operational checklists, and translate them into the official language;
  - (xi) assist in conducting a national workshop to discuss the findings and recommendations of the study with participants from all relevant sectors and levels of government, together with other key stakeholders from the nongovernment organizations, community-based organizations, private sector, and other funding bodies; and
  - (xii) prepare and discuss with government authorities initial country-specific plans of action for disability and poverty reduction programs and projects.
7. The consultants will produce the following outputs:
- (i) inception report, including proposed work plan for the TA and outline checklist;
  - (ii) interim report, containing country work plan and preparation and report on proceeding and achievement of country work plan (due in month four);
  - (iii) final report, containing country-level reports prepared for the regional workshop and country action plan (due in month five); and
  - (iv) monthly progress reports.