# Programme proposal – 4th Funding Round 2021

**Instructions – please read carefully**

1. The programme proposal will have to be developed based on the log frame developed and agreed with partners and validated by the UNPRPD Technical Secretariat within the situational analysis process (annex 2 of the situational analysis). Please do not start developing the proposal before output formulation has been cleared by the Technical Secretariat,
2. The UN system is expected to lead on the draft of the programme proposal. Please note the proposal will have to be consulted in detail and validated with UNCT, government and OPDs. Kindly ensure words limits are respected and that the documents are fully accessible. You can find more information on how you can ensure your documents are accessible in WORD [here](https://support.microsoft.com/en-us/office/make-your-word-documents-accessible-to-people-with-disabilities-d9bf3683-87ac-47ea-b91a-78dcacb3c66d) and in PDF [**here**](https://www.adobe.com/accessibility/pdf/pdf-accessibility-overview.html)**.**
3. Please note the RC has the programmatic oversight of the programme, therefore the RC is expected to be involved and updated on the development of the proposal and give clearance on the last version of the proposal.
4. Before or at the end date of the inception phase the full-fledged proposal needs to be submitted as a draft for quality assurance to the Technical Secretariat to natalia.mattioli@undp.org and unprpd.fund.calls@undp.org, once the Technical Secretariat clears the proposal it will be submitted to the Management Committee of the UNPRPD MPTF for final approval. Please note this process may take up to 4 weeks.
5. Kindly follow attentively word limit and instructions in every section.
6. Once the UNPRPD Management Committee approves the proposal we will proceed with the transfer of funds. Please note the RC and the Implementing Agencies will need to sign the documents related to the transfer request.

*For support, please reach out to* *natalia.mattioli@undp.org cc unprpd.fund.calls@undp.org.*

**Documents to be submitted**

* Programme proposal (please make sure you include the country name in the name of the document for Instance UNPRPD R4 programme Proposal Zimbabwe.doc)
* Budget template
* Workplan

# Cover page

| **Title of the programme:** #NoOneLeftBehind: Empowering Persons with Disabilities to Promote Inclusion, Awareness and Access in Trinidad and Tobago (**Empowerment. Inclusion. Awareness**) |
| --- |
| **Country:**  UNPRPD R4 Programme Proposal Trinidad and Tobago  **Region or provinces:** LAC |
| **Duration (max. 24 months):**  January 2022 to December 2024 |
| **Total Budget:** US$300K |
| **Co-funding:** None |
| **Resident Coordinator (name and contact details):**Marina WaltersEmail: Marina.Walters@un.org  |
| **Overall focal point of the programme (name and contact details): Dr. Taraleen Malcolm, Advisor Noncommunicable Diseases and Mental Health, PAHO/WHO.** **malcolmt@paho.org** |
| **Participating UN Organizations (max 3) and focal points names and contact details:****Office of UN Resident Coordinator[[1]](#footnote-2):** Mark Thomas, Associate Development Coordination Officer Partnerships and Development Finance Email: Mark.Thomas@un.org (Mobile 1-868-363-6103)**PAHO/WHO:** Dr Taraleen Malcolm, Advisor Noncommunicable Diseases and Mental Health Email: malcolmt@paho.org (Mobile: 1-868-678-5503)**UNFPA:** Alexander Gittens, GBV Project OfficerEmail:agittens@unfpa.org (Mobile: 1-868-397-9048) |
| **OPDs focal points names and contact details:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Organization**  | **Name of Participant**  | **Email Address**  | **Contact Number**  |
| Combined Disabilities of Trinidad & Tobago (CDTT) | Patricia Ison  | pfi9094@gmail.com  | (868)-763 1460 |
| Trinidad and Tobago Chapter of Disabled Peoples International | Kerwin Thomas  | kerwin\_thomas@yahoo.com | (868)-468-0816 or (868)- 228-8115 |
| Consortium of Disability Organizations | Jacqueline Leotaud | jleotaud@hotmail.com / codocrpd@gmail.com | (868)-378-1430 |
| Trinidad and Tobago Association for Retarded Children | Louis Johntson  | Louis.m.johnston@gmail.com | (868).622-4495/4714 or (868)- 686-4560  |
| Trinidad and Tobago Blind Welfare Association  | Kenneth Suratt | ttbwa1914@gmail.com | (868) 718-6373 |
| Tobago Region of the Trinidad and Tobago Chapter of Disabled Peoples’ International  | Wren Gray | Wren0009@yahoo.com  | (868)-497-9652 |
| Tobago Affairs Committee for the Blind and Visually Impaired  | Carol Ottley | ottleycarol@gmail.com | (868)-792-7292 |
| Parents Advocating for Children with Disabilities | Mary Bastien | Marybastien@gmail.com  | (868)-793-3576 |

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| **Government focal points name and contact details:** * **Ministry of Social Development and Family Services:** Terrez Herrera (Email: Terrez.Herrera@social.gov.tt)
* **Ministry of Health:** Dr Rohit Doon (Email: rohit.doon@health.gov.tt)
* **Ministry of Planning and Development**: Stephanie Hem Lee (Email: Stephanie.hemlee@planning.gov.tt)
* **Office of the Prime Minister, Gender and Child Affairs:** Deokie Ramnarine (Email: Deokie.Ramnarine@gov.tt)
* **Central Statistical Office**: Andre Blanchard (Email: andre.blanchard@gov.tt)
* **Ministry of Education:** Leticia Rodriguez-Cupid (leticia.rodriguez-cupid@moe.gov.tt)
* **Tobago House of Assembly** - Disability Affairs Unit – Jason Clarke (Email: realchairman@hotmail.com)
* **Office of the Attorney General and Legal Affairs:** Ian Rampersad
 |
| **Other Partners names and contact details:*** **National Centre for Persons with Disabilities**: Dr. Marva Ribeiro (Email: ncpdtrinidad@gmail.com / marva.ribeiro@gmail.com)
* **Princes Elizabeth Centre**: Jan Sirjusingh (Email: jansirjusingh@pecentrett@gmail.com)
* **Digicel Foundation:** Penny Gomez (Email: penny.gomez@digicelgroup.com)
* **Care Helpers Association:** Michelle Lashley-Bisram (Email: carehelpersorganisationtt@gmail.com)
* **University of the West Indies:** Jacquline Huggins (Email: Jacquline.Huggins@sta.uwi.edu)
* **Angels of Light Cerebral Palsy Foundation** – Alana Felician (Email: angelsoflight.cp.tt@gmail.com)
* **Autistic Society of Trinidad and Tobago:** Amoy Raymond-Boodoo (autismplace@gmail.com)
* **Trinidad and Tobago Occupational Therapists Association:** Zakiya Malchan-Murray (Email: anointed100@hotmail.com)
* **The Association of Administrators for Public Special Schools:**  Derrick Mundy (dermun64@gmail.com, taapss.tt@gmail.com)
* **University of the Southern Caribbean:** Kimarah Reefe (Email: reefek@usc.edu.tt)
* **Special Olympics of Trinidad and Tobago:** Ferdinand Bibby (Email: ferdinandbibby@yahoo.com)
* **Private Special Schools Association:** Phillis Griffith (Email:newbegincentre@gmail.com)
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| **Programme description (max 250 words): (please describe what problem the programme intends to address and what will be the approach to do so please refer to all three UNPRPD outcomes)**A participatory situational analysis identified the lack of consistent data collection and lack of inclusion of disability considerations in legislative processes as being major obstacles to the advancement of the CRPD and disability inclusive SGDs. Disability support services, in particular rehabilitation and assistive technologies extending to the community level were also noted to be lacking or fragmented. Structural barriers such as inaccessible information and buildings and social barriers such as stereotyping and discrimination also remained highly prevalent. There is no OPD specifically representing women with disabilities and many underrepresented groups of people with disabilities are either invisible or largely represented by non-disabled persons. The proposed intervention will focus on strengthening mechanisms for the effective participation and inclusion of PWDs through:* Improved mechanism for the inclusion of PWDs to enable their active participation in legislation development and amendment processes by the establishment of a legislative review panel and the development of guidelines and a checklist.
* Standardised methodology for collecting reliable disability data across sectors.
* Improved access to rehabilitation and assistive technology programmes by evaluating the existing system and developing a national plan aimed at improving access at the community level.
* Improved disability mainstreaming within the UN’s collective response to the SDGs through the MSDF 2022-2023 Trinidad and Tobago country implementation plan.

A multi-tiered systems approach will be taken by building the capacity of PWDs and OPDs who will then actively guide the system changes and reforms indicated. Since the issues being addressed are influenced by different actors/stakeholders, building capacity at the Government and the UN level will also be done. There will be a particular focus and emphasis across all outcomes on women and underrepresented groups. By focusing on the preconditions and developing mechanisms for change, the project aims to build long term sustainability beyond 2023. |
| **Targeted CRPD articles:** Articles 5 (Equality and non-discrimination), 6 (Women with disabilities), 12 (Equal recognition before the law), 20 (Personal Mobility), 25 (Health), 26 (Habilitation and rehabilitation), 31 (Statistics and data collection), 33 (National implementation and monitoring) |
| **Targeted SDGs:** Good health and wellbeing (SDG 3); gender equality (SDG 5); reduced inequalities (SGD 10); partnerships for the goals (SDG 17) |
| **Preconditions[[2]](#footnote-3):** Accountability and governance; Equality and non-discrimination; Accessibility. |
| **Target groups[[3]](#footnote-4):** all persons with disabilities |
| **Thematic focus [[4]](#footnote-5):** Statistics and data collection; Inclusive SDGs planning and monitoring; OPDs capacity building; Access to Health; Awareness raising. |

# Acronyms and Abbreviations

AGLA Office of the Attorney General and Ministry of Legal Affairs

CDTT Combined Disability of Trinidad and Tobago

CODO Consortium of Disability Organisations

CRPD Convention of the Rights of Persons with Disabilities

CSO Central Statistical Office

DAU Disability Affairs Unit

DEAF Deaf Empowerment and Advancement Foundation

DPI Trinidad and Tobago Chapter for Disabled Peoples International

EOA Equal Opportunity Act

EOC Equal Opportunity Commission

NGO Non-Governmental Organization

OPDs Organisations of Persons with Disabilities

PAHO Pan American Health Organisation

PWDs Persons/People with Disabilities

RCO Resident Coordinator Office

SPO Service Providing Organisation

T&T Trinidad and Tobago

TTBWA Trinidad and Tobago Blind Welfare Association

UN United Nations

UNFPA United Nations Population Fund

# Background and rationale

PWDs in Trinidad and Tobago continue to face issues of inequality, a general lack of access to services and poor socio-economic outcomes. This is largely due to weak legislations and enforcement, lack of public awareness of the capabilities of PWDs, limited sensitization of PWDs on their rights as citizens, limited knowledge and competencies among key service providing organisations, and limited access to rehabilitation services at the community level. The presence of an umbrella organisation not fully endorsed by OPDs also lends to an un-coordinated and fragmented disability sector. Additionally, the methodology used for national surveys limits availability of accurate disaggregated disability data.

The 2011 T&T Population and Housing Census revealed that there are approximately 52,244 persons living with a disability, representing at least 4% of the total population of 1,328,019. Of this total, 96.5% (50,390) reside in Trinidad and 3.5% (1,858) in Tobago. The 2011 Census data also indicates that the number of PWDs when categorized using gender, showed a slightly greater number of females. Females accounted for approximately 26,234 (50.2%) and males 26,010 (49.8%) of the population of PWDs. However, based on the questions in the survey, PWDs are concerned that the data is inaccurate and does not reflect the reality on the ground. National surveys are generally limited in scope to disaggregate data to provide specific information on PWDs in relation to income, employment, education, social protection, and other important aspects of national development. The current data is unable to show the different situations faced by men and women with disabilities as well as in comparison to the general population and thus neglects to ensure positive visibility and action on specific issues affecting women with disabilities.

Additionally, since March 2020, T&T has been facing a health, social and economic crisis caused by COVID-19. The crisis has deepened pre-existing inequalities, revealed the extent to which PWDs are excluded and highlighted the urgency of including PWDs in public policy actions taken in the short, medium and long term. Recommendations emanating from the situational analysis focus on (1) strengthening and improving disability data collection; (2) scoping review of existing laws and policies; (3) system strengthening and capacity building; (4) increase public awareness and understanding of disability; (5) investment in specific programmes and services for PWDs[[5]](#footnote-6); (6) improving the governance and coordination of OPDs, and (7) strengthening disability inclusion within the UN.

To improve the systems, programmes and policies, the agreed areas of work relate to reform in the legislative development and amendment process, national data collection methodology, rehabilitation programme and mainstreaming disability in the UN system. Achievements in these areas would support and contribute to sustained changes required for the achievement of the CRPD and SDGs.

Within the UN agencies in Trinidad and Tobago, the level of disability inclusion in development activities is unknown. The participating UN agencies (UNFPA and PAHO) will provide technical support and facilitate multi-stakeholder partnerships with PWDs and OPDs to strengthen and improve the capacity of the UN system. This approach will help to support disability inclusion in the planning and implementation of UN development activities.

The project has the potential to contribute to the goal of an inclusive society, thereby enabling PWDs to realise the goal of living independently and participating in the economic, social, and cultural lives of their communities.

**3.1. Proposal development process**

Actions to inform the development of the proposal began in May 2021 with the induction workshop. 70 participants (31.4% men and 68.6% women) attended the workshop with 25.7% government representatives, 37.1% OPD, 7.1% academic institutions, 1.4% youth advocacy, and 22.9% UN entities. Of the OPDs, 6 represented all disabilities, 1 represented physical disabilities, 3 represented intellectual disabilities and 6 represented sensory disabilities. Thirteen participants identified as PWDs with some preferring not to disclose.

Information from the workshop along with interviews and focus group discussions informed the situational analysis on which this proposal is based. Stakeholders including PWDs contributed to the proposal through:

* Workshop steering committee - 6 Government Ministries, 2 OPDs, 1 NGO, 1 University and 3 UN agencies[[6]](#footnote-7) with four individuals identified as PWDs.
* Situational analysis steering committee that also guide the development of the proposal consisted of 8 OPDs including underrepresented groups, 4 Government Ministries, 1 SPO, 1 parent advocate group, 2 academia, 1 NGO and 3 UN agencies[[7]](#footnote-8) with six persons identified as PWDs.
* Consultation sessions – 3 sessions held to validate the information collected during the situational analysis and informed the proposal.[[8]](#footnote-9) Over 30 persons participated in each session. 3 sessions held to inform the proposal development with over 50 participants.[[9]](#footnote-10)

In addition to the two lead UN agencies, two representatives from the UNRC office are on the steering committee. PWDs and OPDs were involved in identifying the gaps in the preconditions for inclusion, defined the project objectives and strategies, and guided the preparation of the proposal. Having women with disability and underrepresented groups on the steering committee was a key strategy used to ensure their full participation. Three of the 6 PWDs are women and two underrepresented groups including intellectual disabilities are on the committee. Meetings were held virtually and included sign interpretation and closed captioning.

# Overall programme results framework –

**Table 1. Results framework**

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| --- |
| **Outcome 1 Capacity of national stakeholders, especially of key duty bearers and rights holders, is enhanced, to ensure more effective contributions towards disability inclusive policies, systems and - for the implementation of the CRPD and SDGs.** |
| ***Please describe how the project will contribute to outcome 1 of the UNPRPD results framework. (200 words)***The situational analysis highlighted a dedicated but fragmented disability community, with marginalized and underrepresented groups of persons with disabilities often not being included in national policy and programme development. With no consistent, structured, and organised programmes directed to build capacity of PWDs, their ability to fully participate and contribute to policy development and reviews, and actively lead and advocate for change, is greatly compromised. The project will help build both organizational capacity and specialised capacity to empower PWDs to be their own advocates and increase their participation in formulating and implementing policies, laws, and services. The project is designed to improve capacity at the PWDs/OPDs, government, and the UN levels allowing all to actively participate and lead the process for the required reforms at the policy, programme and service levels. These capacity building exercises aim to increase knowledge and empower rights holders and key duty bearers to contribute to system changes for improved inclusive legislations, data collection, rehabilitation and assistive technology services, and mainstreamed UN activities. All of these areas will ultimately contribute to the implementation of the CRPD and SDGs. |
| **Output 1.1(a)** *Please insert outputs agreed further to situational analysis completion*Capacity of OPDs and People with disabilities including women and underrepresented groups enhanced to improve the organization and individual’s ability to lead meaningful participation in the reform of the regulatory amendment and development system, data collection, and rehabilitation assessment. |
| **Indicators** *please select indicators from the UNPRPD menu of indicators (annex 1) against which output progress will be reported, please select as many indicators as appropriate* ***PLEASE DO NOT CHANGE THE INDICATORS LANGUAGE AND KINDLY KEEP THE INDICATORS NUMBER AS IT IS IN THE MENU*** |
| **1.1.1** **# of trainings (disaggregation by type of capacity building[[10]](#footnote-11)) developed and delivered in the UNPRPD programme. (Disaggregated by topics[[11]](#footnote-12))** |
| **Description:** This indicator will monitor the delivery of training workshops and facilitate the reporting of the project in enhancing the capacity of OPDs and PWDs to engage in meaningful participation. |
| **Baseline:** 1 inception UNPRPD training on CRPD and SDGs |
|  | **Milestone year 1**: 8 training events as listed in the workplan (proposal writing, budgeting, planning and financial management, change management, leadership, and advocacy, communication to include both oral and written, UNPRPD inclusive policy training, Specific policy trainings to review the Equal Opportunity Act (EOA), Mental Health Act, Education Act, and the immigration Act andspecific trainings on data collection and management to participate in in the development of national guidelines for collection of disability data).  |
|  | **Milestone year 2**: 8 training events as listed in the workplan (proposal writing, budgeting, planning and financial management, change management, leadership, and advocacy, communication to include both oral and written, UNPRPD inclusive policy training, Specific policy trainings to review the Equal Opportunity Act (EOA), Mental Health Act, Education Act, and the immigration Act andspecific trainings on data collection and management to participate in in the development of national guidelines for collection of disability data). |
| **Target**: 16 training events |
| **Means of verification**: training workshop reports (disaggregated by training type), materials |
| **Responsible**: UNFPA  |
| **1.1.2 # of participants (disaggregated by type of stakeholder3) disaggregated by sex, disability, rural/urban participating in capacity building activities funded or provided by UNPRPD programmes** |
| **Description:**  This indicator will facilitate monitoring and reporting on the level, type and characteristics of participants of OPDs and PWDs engaged in project capacity building activities.  |
| **Baseline**: 25 |
| **Milestone year 1**: 50 participants |
| **Milestone year 2**: 50 participants |
| **Target**: 100 participants |
| **Means of verification**: Workshop reports comprising participant registration lists & sign-in sheets. |
| **Responsible**: UNFPA |
| **1.1.4 # of OPDs (disaggregated by type umbrella- disability specific- women- underrepresented other) that benefitted from capacity building activities (type of activities4) funded by UNPRPD programmes to strengthen the capacity of organizations of persons with disabilities.** |
| **Description:**  This indicator will measure the project’s achievements engaging OPDs in capacity strengthening initiatives. It will reflect the number and type of organizations that have been engaged and the type of activities performed to bolster their competencies. |
| **Baseline**: 0 |
| **Milestone year 1**: 15 Organizations of Persons with Disabilities |
| **Milestone year 2**: 5 Organizations of Persons with Disabilities |
| **Target**: 20 Organizations of Persons with Disabilities |
| **Means of verification**: Workshop reports comprising participant registration lists |
| **Responsible**: UNFPA |
| **Output 1.1 (b)** Capacity of policy advisors, legal staff, and support technicians across the Government Ministries improved to facilitate review of the Equal Opportunity Act (EOA), Mental Health Act, and Education Act, and to support the development of the national disability legislation, and the development of the guidelines and checklist for disability inclusive policy reform.  |
| **1.1.3 # and % of participants reporting increased knowledge or capacity to design or revise policies or systems to be more disability inclusive.** |
| **Description:** This indicator will monitor the participation of policy advisors, legal staff and support technicians in each training workshop and will facilitate reporting of project’s work in enhancing the capacity of policy and legal advisors and technicians in Government to facilitate legislative review in support of disability inclusive policy reform. |
| **Baseline:** 0 |
| **Milestone year 1**: 30 policy advisors, legal staff, and support technicians |
| **Milestone year 2:** 15 of the initial 30 participants to serve as trainers |
| **Target**: 15 inclusive policy trainers identified and trained. |
| **Means of verification:** training workshop reports (disaggregated by training participants and pre/post test results); materials |
| **Responsible**: PAHO/WHO |
| **1.1.2 # of participants (disaggregated by type of stakeholder) disaggregated by sex, disability, rural/urban participating in capacity building activities funded or provided by UNPRPD programmes**  |
| **Description:** This indicator will facilitate monitoring and reporting on the level, type and characteristics of participants of government stakeholders engaged in project capacity building activities.  |
| **Baseline:** 18 |
| **Milestone year 1**: 30 participants |
| **Milestone year 2**: 25 participants |
| **Target**: 50 participants |
| **Means of verification:** training workshop reports (disaggregated by training participant profile) including completed workshop registration forms, attendance lists, and screenshots / video recordings |
| **Responsible**: PAHO/WHO |
| **Output 1.1(c)** Capacity of UN staff improved to facilitate mainstreaming of disability in the UNMSDF. |
| **1.1.2** # and % of participants reporting increased knowledge or capacity to design or revise policies or systems to be more disability inclusive.    |
| **Description**: This indicator will facilitate tracking and reporting on UN staff engagement in training aimed at developing their capacity to mainstream disability programming into the UNMSDF country implementation plan. |
| **Baseline**: 0 |
| **Milestone year 1:** 20 participants (UN staff) |
| **Milestone year 2**: 15 participants |
| **Target:** 35 participants |
| **Means of verification:** Training workshop reports (disaggregated by training participants and pre/post test results) |
| **Responsible:** UNFPA |
| **Output 1.2(a)** Guidelines and checklist to support the review of the EOA, Mental Health Act, Education Act, and or the immigration Act developed, piloted, and disseminated.  |
| **1.2.1 # of knowledge products (disaggregated by type of product[[12]](#footnote-13)/thematic focus[[13]](#footnote-14)) developed, piloted and disseminated to the relevant stakeholders to inform inclusive practices** |
| **Description:** This indicator tracks the generation, piloting and dissemination of guidelines and corresponding checklists that facilitate the review of legislative Acts in order to ensure the active and meaningful participation of PWDs in national policy creation. |
| **Baseline:** 0 |
| **Milestone year 1**: 1 guideline document and corresponding checklist to inform the legislative process |
| **Milestone year 2:** Successful piloting of the guidelines and checklist |
| **Target**: 1 Guideline and correcting checklist developed and disseminated to facilitate the review of the EOA, Mental Health Act, Education Act, and or the immigration Act.  |
| **Means of verification**: Guidelines Document, Checklist Form, Dissemination Reports |
| **Responsible:** PAHO/WHO |
| **1.2.2 # of knowledge products developed that address gaps related to inclusion of women and girls with disabilities and/or underrepresented groups of persons with disabilities (disaggregated by thematic focus).** |
| **Description:** This indicator enables tracking and reporting on the project’s generation of knowledge products that promote the inclusion of women and girls with disabilities and other underrepresented groups in the review of legislation. |
| **Baseline:** 0 |
| **Milestone year 1**: 1 guideline document and corresponding checklist to inform the legislative process with inclusion of women and girls and underrepresented groups of persons with disabilities.  |
| **Milestone year 2:** Successful piloting of the guidelines and checklist for appropriateness for woman and girls with disabilities.  |
| **Target**: 1 Guideline and correcting checklist developed and disseminated to facilitate to inclusion of women and girls with disabilities and/or underrepresented groups of persons with disabilities |
| **Means of verification**: Knowledge products, Guidelines Document, Checklists and dissemination reports.  |
| **Responsible:** PAHO/WHO |
| **1.2.3 # actors involved in developing and testing of knowledge products (disaggregated by actor (GOV/NGOs/OPDs/Other)** |
| **Description:** This indicator will track the engagement of representatives (actors) in the development of knowledge products thereby demonstrating full engagement of Government, civil society and OPDs in this social change process.  |
| **Baseline:** 0 |
| **Milestone year 1**: 30 Actors (Gov, NGOs/OPDs/Others) |
| **Milestone year 2**: 40 Actors inclusive of new actors not involved in the development phase.  |
| **Target**: 40 Actors |
| **Means of verification**: Reports on engagement activities; Notes from Legislative review panels; suggested amendments to update Legislative Acts. |
| **Responsible:** PAHO/WHO |
| **Output 1.2.b** Guidelines for collection of disability data consistent with international standards developed, piloted, and launched. |
| **1.2.1 # of knowledge products (disaggregated by type of product[[14]](#footnote-15)/thematic focus[[15]](#footnote-16)) developed, piloted and disseminated to the relevant stakeholders to inform inclusive practices** |
| **Description:** This indicator will track and facilitate reporting on the project’s intervention to enable the collection and reporting of disability data  |
| **Baseline:** 0 |
| **Milestone year 1**: 1 guideline document to facilitate inclusive standardised data collection practices  |
| **Milestone year 2:** Piloting and revision of the guidelines based on feedback from the pilot  |
| **Target**: 1 guideline document agreed |
| **Means of verification:** Guideline document, report on pilot exercise, dissemination report |
| **Responsible**: UNFPA |
| **1.2.3 # actors involved in developing and testing of knowledge products (disaggregated by actor (GOV/NGOs/OPDs/Other)** |
| **Description:** This indicator will track the engagement of representatives (actors) thereby demonstrating full engagement of Government, civil society and OPDs in this social change process.  |
| **Baseline:** 0 |
| **Milestone year 1**: 15 Actors (Gov, NGOs/OPDs/Others) |
| **Milestone year 2**: 15 actors involved in the piloting of the guidelines through 1 National survey  |
| **Target**: 15 actors |
| **Means of verification**: Report on the pilot of the survey.  |
| **Responsible:** UNFPA |
| **Outcome 2. Gaps in achievement of essential building blocks or preconditions to CPRD implementation in development and humanitarian programs are addressed.** |
| ***Please describe how the project will contribute to outcome 2 of the UNPRPD results framework. (200 words)***The situational analysis highlighted the lack of access to rehabilitation services and assistive technology at the community level as a key barrier to inclusion. Furthermore, some existing legislations are allowing discrimination and with no established mechanism for active participation of PWDs, their inputs in national policy, programmes and budgeting have been limited. This is further compounded by the lack of accurate disaggregated disability data.The project outputs will focus on undertaking a rehabilitation and assistive technology (AT) programme evaluation and develop a new national plan to strengthen access to services and assistive technology (AT) at the community level. The project will also cause the review and draft amendments of three existing Acts aligning them with CRPD by addressing the non-discrimination gaps. Guidelines and a checklist along with a policy review panel will be established as a long-term mechanism to facilitate the active involvement of PWDs during and beyond the project. The developed guidelines for standardised disaggregated disability data and its application to a national survey, will significantly improve availability of suitable disability data. These three project outputs will contribute to the achievements of the CRPD preconditions. |
| **Output 2.1(a) Three Acts (EOA, Mental Health Act, Education Act, or the immigration Act) reviewed in line with CRPD to address non-discrimination gaps through multi-stakeholder participation (Legislative review panel committee).**  |
| **Indicators** *please selected appropriate indicators from the shared UNPRPD menu of indicators, please selected as many indicators as appropriate* |
| **2.1.1 # of national regulatory frameworks and systems changes targeted by the UNPRPD program disaggregated by 1) legislation/regulation, 2) policies/plans/strategies, 3) capacity building programs, 4) operational guidance/standards, 5) direct services/service overhaul/service modelling, 6) audits/reviews/assessments, 7) governmental programs, 8) administrative procedures, 9) formal monitoring and accountability mechanisms or bodies, 10) regulatory/oversite/monitoring systems, 11) financing and budgeting or 12) other (please explain)**  |
| **Description**: This indicator will reflect the project’s achievement in adjusting national regulatory frameworks (Acts) to address existing discriminatory gaps that prevent the full inclusion of PWDs. |
| **Baseline**: 0 |
| **Milestone year 1:** One Act reviewed and amendments drafted |
| **Milestone year 2**: Two Acts reviewed and amendments drafted |
| **Target:** Review and amendments drafted for 3 Acts |
| **Means of verification**: Draft amendment reports, Acknowledge receipt by relevant Permanent Secretary |
| **Responsible:** PAHO/WHO |
| **Output 2.1(b) National rehabilitation and assistive technology programmes evaluated and a new national plan established to strengthen access for people with disabilities.**  |
| **Indicators** *please selected appropriate indicators from the shared UNPRPD menu of indicators, please selected as many indicators as appropriate* |
| **2.1.1 # of national regulatory frameworks and systems changes targeted by the UNPRPD program disaggregated by 1) legislation/regulation, 2) policies/plans/strategies, 3) capacity building programs, 4) operational guidance/standards, 5) direct services/service overhaul/service modelling, 6) audits/reviews/assessments, 7) governmental programs, 8) administrative procedures, 9) formal monitoring and accountability mechanisms or bodies, 10) regulatory/oversite/monitoring systems, 11) financing and budgeting or 12) other (please explain)** |
| **Description:** This indicator will reflect the project’s achievements in strengthening access for PWDs to rehabilitative and assistive technology through programme evaluation and improved planning  |
| **Baseline:** 0 |
| **Milestone year 1:** Assessment of national rehabilitation and assistive technology programme |
| **Milestone year 2:** National plan developed and accepted by stakeholders |
| **Target:** Assessment and national plan completed |
| **Means of verification:** Assessment report including findings and corresponding recommendations; National rehabilitation plan; Stakeholder's consultation report. |
| **Responsible:** PAHO/WHO |
| **Output 2.2 National standards for disability data collection implemented, and launched with an established system for integration into national surveys and data collection.** |
| **2.2.1 # of multi-stakeholder coordination mechanisms (disaggregated formal/informal) to support legislative policy and systems changes developed or strengthened** |
| **Description:** This indicator will facilitate reporting on the engagement through participation and meaningful contribution of a range of stakeholders in legislative policy and systems review and changes. |
| **Baseline:** 0 |
| **Milestone year 1:** 1 legislative review panel (coordination mechanism) |
| **Milestone year 2:**  Continuation of 1 legislative review panel (coordination mechanism) |
| **Target:** 1 legislative review panel.  |
| **Means of verification:** Reports on engagement activities detailing the range of stakeholders involved and their contributions to the legislative review panel; Meeting minutes.  |
| **Responsible:** PAHO/WHO |
| **2.2.2 # of stakeholders within each mechanism (disaggregated by type of stakeholder Gov/ UN/OPDs/other)** |
| **Description:** This indicator will reflect the project’s effectiveness in engaging relevant stakeholders in the review of national surveys and data collection standards to reflect disability parameters. |
| **Baseline:** 0 |
| **Milestone year 1**: 20 stakeholders with optimal mix of OPDs, GOV, UN, NGOs, SPOs, and academia |
| **Milestone year 2:** 5 stakeholders with optimal mix of OPDs, GOV, UN, NGOs, SPOs, and academia |
| **Target:** 20 stakeholders within 5 data collection mechanisms |
| **Means of verification:** Stakeholder's consultation report, revised data collection instrument, Commitment agreement  |
| **Responsible**: PAHO/WHO |
| **2.2.3 # stakeholders involved in consultation and validation processes (disaggregation by stakeholder (GOV/UN/OPDs/other)** |
| **Description:** This indicator will track the involvement of stakeholders by reflecting the number and profile of those engaged, by sector.  |
| **Baseline:** 0 |
| **Milestone year 1:** 20 stakeholders |
| **Milestone year 2:**  5 additional stakeholders |
| **Target:** 20 stakeholders |
| **Means of verification:** Programme reports on all consultations and validation sessions. Participation List. |
| **Responsible: PAHO/WHO** |
| **Outcome 3. National development and humanitarian plans, budgets, programs and monitoring processes are disability inclusive.** |
| **Please describe how the project will contribute to outcome 3 of the UNPRPD results framework. (200 words)**The level to which disability is integrated into the work of the UN at all levels is unknown. There is also no established formalised mechanism for OPDs including women with disabilities and underrepresented groups to systematically engage with the UN system. The project output will focus on establishing a baseline by assessing the level to which disability inclusion is mainstreamed within the joint UN activities delivered through the UNMSDF country implementation plan. This information will support the development of the next MSDF country plan commencing in 2022 using a disability inclusive approach as outlined in the UNDIS. Furthermore, by strengthening the OPDs through organizational capacity building and support, a coordinated and effective engagement with the UN system will take place. This will allow meaningful participation of PWDs in the planning, formulation of activities, implementation, and the monitoring and evaluation of those activities. This project will therefore actively contribute to achieving the preconditions to CPRD implementation and the monitoring of the SDGs. This project, coupled with the UN Disability inclusion strategy, will provide key opportunities to ensure that disability inclusion is targeted at all levels of the UN system supporting national development and humanitarian plans. |
| **Output 3.1 Disability inclusion is strengthened in planning, implementation, and monitoring of UN development activities through the Multi-Country Sustainable Development Framework (MSDF).** |
| **Indicators** *please selected appropriate indicators from the shared UNPRPD menu of indicators, please selected as many indicators as appropriate* |
| **3.1.2 # UNSDCF where disability inclusion has been mainstreamed and/or targeted** |
| **Description:**  This indicator will reflect the project’s work toward disability inclusion in the planning, implementation and monitoring of UN development activities (MSDF) at the country level.  |
| **Baseline**: Unknown  |
| **Milestone year 1:** Baseline assessment report; UN interagency coordinating committee |
| **Milestone year 2:** 1 MSDF country implementation plan adjusted to reflect disability inclusion  |
| **Target:** 1 MSDF Country implementation plan  |
| **Means of verification:** Assessment Report, Revised MSDF workplan 2022-2023 |
| **Responsible**: UNFPA |
| **3.1.3 # of joint programmes funded through MPTFs where the rights of persons with disabilities have been addressed (disaggregation by disability group) through collaboration with UNPRPD programmes.** |
| **Description:**  This indicator will facilitate tracking and reporting on the number of MPTF funded programmes that have addressed the rights of specific groups of persons with disabilities.  |
| **Baseline**: Unknown  |
| **Milestone year 1:** Baseline assessment report; UN interagency coordinating committee |
| **Milestone year 2:** 1 MSDF country implementation plan adjusted to reflect disability inclusion  |
| **Target:** 1 MSDF Country implementation plan  |
| **Means of verification:** Revised MSDF workplan 2022-2023;  |
| **Responsible**: UNFPA |
| **Output 3.3 OPDs including women with disabilities and underrepresented groups are supported to systematically engaged in disability mainstreaming in the UN MSDF.**  |
| 3.3.1 # UN led national and/or regional coordination mechanisms with established consultation processes undertaken to ensure the active involvement of persons with disabilities, including through their representative organizations, in the design, implementation and monitoring of instruments for planning and implementation of UN development activities at the country level |
| **Description:** This indicator will track the active inclusion of women with disabilities and other underrepresented groups in disability mainstreaming in the UNMSDF country implementation plan.  |
| **Baseline**: Unknown |
| **Milestone year 1:** Baseline Assessment |
| **Milestone year 2:** Working sessions to establish partnership model for PWDs/OPDs engagement with the UNMSDF |
| **Target:** Mechanism for engagement with PWDs/OPDs in the MSDF development and implementation process |
| **Means of verification:** PWDs involvement and satisfaction survey results |
| **Responsible:** UNFPA |

# Outcomes strategy

## 4.1 Theory of change

The Project seeks to enable focused social action aimed at addressing the critical gaps in three of the six pre-conditions for the inclusion of PWDs: Accountability and governance; Equality and non-discrimination; service delivery. The levers of change focus on the normative environment to strengthen national disability inclusive legislation; improve standards for collection and use of disability data and improve services (specifically rehabilitation and AT) This will be achieved though capacity building of partners, development of tools standards and guidelines and the fostering of collaborative approaches, with OPDs at the center of the change. We have adapted the UNPRPD theory of change to the context of this proposal for Trinidad and Tobago:

|  |  |  |
| --- | --- | --- |
| **Vision** |  | The rights of persons with disabilities to be respected, protected and fulfilled and for all persons with disabilities to fully participate in society. |
|  |  |  |  |  |  |  |
| **Mission** |  | Accelerate the implementation of the CRPD and disability inclusive SDGs for all persons with disabilities with the full involvement of OPD |
|  |  |  |  |  |  |  |
| **Principle Outcome** |  | Trinidad and Tobago develops and implements policies, plans, budgets, programs and services with the meaningful participation of OPDs in line with their CRPD obligations and commitments to the SDGs |
|  |  |  |  |  |  |  |
| **Intermediate Outcomes** |  | National stakeholders are equipped with the knowledge and practical tools for disability inclusive legislative change, data collection and strengthening disability support services |  | Gaps in achieving essential building blocks or preconditions of CRPD implementation relating to Accountability and governance; Equality and non-discrimination; and service delivery are addressed.  |  | National development plans and monitoring processes within the UN system include disability mainstreaming.  |
|  |  |  |  |  |  |  |
| **Strategic Approaches** |  | 1. Capacity building activities among OPDs and key governmental stakeholders on:
2. Inclusive policy/legislative change
3. Data collection
4. Rehabilitation and Assistive Technology
5. UN coordination processes
6. Tools and guidelines developed and disseminated to support:
7. Inclusive policy development
8. Standardized data collection on disability
9. Capacity building activities on disability inclusive mainstreaming among UN agencies and staff
 |  | 1. Approaches for integrating an inclusive and participatory approach into legislative change have been piloted.
2. Rehabilitation and Assistive Technology services have been comprehensively assessed and strategic plans developed.
 |  | 1. Disability programming is integrated into the UN country framework and plan
2. Regular engagement between OPDs and UN agencies is facilitated.
 |

In the above model, the vision and mission directly correspond to the UNPRPD vision and mission within their Theory of change. The principle outcome has been adapted from the UNPRPD global version to be specific to Trinidad and Tobago. The intermediate outcomes and strategic approaches directly relate to the objectives and activities contained within this project. The focus of the approaches and subsequent outcomes of the project – to strengthen the participation and engagement of people with disabilities in legislative creation, to develop a standard for disability data collection and to asses and plan for national rehabilitation and assistive technology services to strengthen disability support services – all contribute to the principle outcome for **Trinidad and Tobago to develop and implement policies, plans, budgets, programs and services with the meaningful participation of OPDs in line with their CRPD obligations and commitments to the SDGs.**

## 4.2 Result Chains

This section presents the basic sequence for addressing the critical gaps in achieving the three of the six pre-conditions for the inclusion of PWDs. It begins with the inputs, moves through the activities, outputs, outcomes and culminates with the goal/impact. It is based on the theory of change.

**Outcome 1:** National Stakeholders have the knowledge and practical tools to effectively contribute to the development and implementation of disability inclusive policies.

Financial and human resources are needed to achieve **Output 1.1a**, OPDs members’ capacity enhanced to improve the organization’s ability to lead meaningful participation in the national agenda towards achieving the CRPD and SDGs. This will be realized through a series of trainings.

Financial, human resources, technical expertise will be utilized and a series of training workshops will be held to achieve **Output 1.1b.** Capacity of policy advisors, legal staff, support technicians across the Government Ministries improved to facilitate national reform initiatives.

Financial, human resources, technical expertise will be utilized and a series of training workshops will be held to achieve **Output 1.1c.** Capacity of UN staff improved to facilitate mainstreaming of disability in the UNMSDF T&T.

Financial, human resources, and technical expertise with the use of a technical working group to achieve **Output 1.2a.** Guidelines and checklist to support the review of the EOA, Mental Health Act, Education Act, and or the immigration Act developed, piloted, and disseminated.

Financial, human resources, technical expertise is needed to achieve **Output 1.2b**, Guidelines for consistent collection of disability data developed, piloted, and launched. A technical working group will be used to achieve this outcome.

**Outcome 2**. Gaps in achievement of essential building blocks or preconditions to CPRD implementation in development and humanitarian programs are addressed

Human resources, technical expertise will be utilized to achieve **Output 2.1a** Three Acts (EOA, Mental Health Act, Education Act, or the immigration Act) reviewed in line with CRPD to address non-discrimination gaps through multi-stakeholder participation. A legislative review panel will be used to achieve this outcome using the guidelines and checklist from outcome 1.2a.

Financial, human resources and technical expertise is required to achieve **Output 2.1b**, National rehabilitation and assistive technology programmes evaluated and a new national plan established to strengthen access for people with disabilities.

Financial, human resources and technical expertise will be required to achieve **Output 2.2.**, National standards for disability data collection implemented, with an established system for integration into national surveys and data collection. Using the guidelines developed in 1.2b to inform the implementation of a national survey.

**Outcome 3:** National development and humanitarian plans, budgets, programs and monitoring processes are disability inclusive.

Human Resources, financial, and technical expertise will be utilized to achieve **Output 3.1**, Disability inclusion is strengthened in UNMSDF T&T implementation plan.

Financial, human resources and technical expertise will be utilized to achieve **Output 3.2,** OPDs including women with disabilities and underrepresented groups are supported to systematically engaged in disability mainstreaming in the UN MSDF. A partnership model will be established for sustained engagement.

## 4.3 Geographic scope

The twin-island nation of Trinidad and Tobago forms a unitary state situated in the southernmost end of the Caribbean islands between the Caribbean Sea and the Atlantic Ocean. Trinidad is the larger of the two, comprising 93 per cent of the country’s total area (5,066 km2/1,956 sq. mi) and 93 per cent of the total population of 1,327.367 (665,736 males and 661,631 females) (Census 2011). Tobago is 30 km (19 mi) and is located northeast of Trinidad and measures around 298 km2 (115 sq. mi) in area, or 5.8% of the country's area, 41 km (25.5 mi) in length and 12 km (7.5 mi) in width. This nation is recognised by the World Bank as having the largest economy and being the third most populated country in the Caribbean.

There are approximately 52,244 persons living with a disability, representing at least 4% of the total population with females accounting for approximately 50.2% and males 49.8%. 96.5% (50,390) of PWDs reside in Trinidad and 3.5% (1,858) in Tobago. (National Policy on Policy on Persons with Disabilities, 2019). Given the size of the country and the PWD population, the intervention will target all PWDs in rural and urban areas across Trinidad and Tobago.

## 4.4. Sustainability

Each output is designed to ensure a mechanism for sustainability. Financial, organizational, structural and programmatic aspects of sustainability was discussed with the project planning team and has contributed to the design of each output.

The steering committee will develop a detailed implementation road map for the two-year period which will include strategic actions aimed at ensuring that the expected outputs are maintained and continue to support the needs of target groups in the community after the project. The key actions will include: (1) alignment and synergy with existing and ongoing programmes; (2) active stakeholder engagement with those beyond the reach of this project; (3) increasing communication and awareness; (4) capacity and institutional strengthening of rights holders and duty bearers; and (5) active involvement of OPDs and government stakeholders.

During all the phases of this project, the partnerships developed with the various OPDs, government departments, and other stakeholders will be maintained and incorporated into the plan for sustainability. High value will be placed on the integration stakeholders in decision-making and management of various aspects of the project from inception to implementation. This approach will foster ownership and will allow PWDs, OPDs and other stakeholders to identify actions to be achieved in the short term, medium and long term.

This multi-stakeholder approach helps to develop positive relationships necessary for full participation during and beyond this project. The strong stakeholder engagement that is embedded in the project makes it easier to share information, have joint decision making and establish linkages with ongoing programmes for sustained actions. Built into this proposal are actions to create synergies with other projects and programme contributing to reforms to other areas that are beyond this project.

The involvement of government stakeholders from the beginning is critical to long term sustainability since they provide finances to OPDs and SPOs and have the power to make legislative and policy changes. Since the project already has the buy-in and commitment from a large cross-section of these key stakeholders, long-term sustainability is achievable.

Furthermore, key tenets of this project are building the capacity of PWDs, OPDs, government representatives and the UN partners for individual and institutional strengthening. This is an effective strategy for sustainability as persons will be empowered and have the knowledge to facilitate continued actions.

A communication strategy will be developed to sensitize the general public, stakeholders, and community about the benefits of the project while initiating advocacy initiatives for policy changes. This coupled with the continuous monitoring and evaluation and an astute project team that will leverage the project achievements and help to support long-term sustainability.

## 4.5 Innovation

This project is embarking on uncharted territories, hence creating opportunities for innovation to emerge. Many of the gaps highlighted by the situational analysis are not unique to T&T and actions to bring about the required changes remains a challenge in many countries. The steps to be taken include creating an environment that utilises innovative resources and practices to facilitate the process of inclusion.

A diverse project team and steering committee is the first step to creating an environment to foster, promote, and develop innovations based on the different experiences, knowledge, and background. From inception, the team will be encouraged to think outside the box and present ways that can be taken to achieve the outputs. For example, a central element of the project is to get the involvement of women and girls with disability and underrepresented groups. The project will identify and utilise different strategies to reach these groups. These will involve new approaches and strategies which will be documented and incorporated in the guidelines and checklist that will be developed. These guidelines and checklist will be promoted and disseminated with an established mechanism to translate them into practice.

Within the boundaries of the approved outcome framework, the project team and key stakeholders will be asked for ideas on how to effectively develop and implement each output. While the project workplan is developed as part of the project proposal process, a more detailed workplan will be developed. Innovative strategies in support of each activity will be brainstormed, documented and feasibly assessed. This collaborative approach of involving and seeking new ideas from the project team, PWDs/OPDs and other stakeholders, will significantly improve the opportunity for innovation.

Innovative resources and materials will be defined as something new and creative. Applying principles or strategies in ways not previously done for the activities and or target group. This definition will make it easier for the team to have a clear understanding and direction. Some strategies to be explored include the use of technologies such as animation, apps, and virtual/augmented reality, in combination with more traditional classroom-based learning, and the development of a database using GIS technology to capture demographics of underrepresented groups including women and girls with disabilities.

## 4.6 Complementarity with other ongoing initiatives.

The USD 721,400 ‘Modernising the Statistical Ecosystem’ project will be implemented in 2022 and 2023, led by PAHO/WHO and the Ministry of Planning and Development. It accelerates accomplishment of SDG target 17.18 that requires disaggregated SDG data (65 SDG indicators are disability-specific or suitable for disaggregation by disability). By improving SDG data, the project will strengthen SDG-related policy making, partnership and investment. Outcomes include: National statistical architecture that makes greater use of digital technologies and international standards for data and statistics (including those that increase PWD participation in surveys); Development actors across sectors (including the private sector) have the knowledge and networks required to formalise partnerships and collaborate on data and statistics; and Strengthened environment for legislative best practice on data and statistics (as data and statistics laws have trailed international standards).

The USD 1 million ‘Bringing High and Low Technology (HALT) to COVID-19’ project is being implemented by PAHO/WHO in 2021 and 2022, with the Ministry of Health. It seeks to make the country more pandemic resilient via a healthcare system that is more accessible and at less risk of being overburdened; places even greater emphasis on prevention and protecting the vulnerable; and is more integrative of digital technology. Outputs include: A PWD-accessible telemedicine system that allows clinicians to provide routine medical services via the telephone and internet; Healthcare robots that perform preliminary registration, evaluation and communication with patients (including PWDs) visiting health centres; 55,000 washable fabric masks for persons with high risks of contracting COVID-19 (including PWDs); and 50 PWD-accessible handwashing stations in high-traffic areas, each with graphical and large text information on hand hygiene.

The UN Resident Coordinator Office (RCO) hosts the Spotlight Initiative in T&T. Spotlight is a global partnership to eliminate all forms of violence against women (VAW) and girls by 2030. The initiative pays special attention to contradicting VAW and girls in vulnerable groups, including PWDs (and their caregivers). Spotlight invests in gender equality and women’s empowerment as a driver for achievement of the SDGs. The RCO and Spotlight coordination unit convened a Steering Committee to guide, govern and monitor implementation of the initiative in T&T, and OPDs (e.g., the NCPD) are included in this body. UNFPA is also involved in Spotlight Initiative, and is supporting the delivery of information on VAW to PWDs and those who support them.

**CONTRIBUTION TO UNPRPD IMPACT**

Table 1 Progress against UNPRPD Impact Indicators

|  |  |  |
| --- | --- | --- |
| UNPRPD MPTF IMPACT(2025) | Reduce the inequality and exclusion for all persons with disabilities within and across countries. |   |
| Indicators  | How will the project contribute to this indicator?  |  Country Baseline 2021 (please indicate the source) |
| *Proportion of population living below the national poverty line by sex and age (SDG indicator 1.2.1) and disability.*  |  This project will not contribute to this indicator.  |   |
| *Proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions (SDG indicator 1.2.2) disaggregated by disability, before and after social transfers.*  |  This project will not contribute to this indicator. |   |
| *Rates of children with disabilities out of school, rate of enrolment, attendance, promotion by grade, completion, and drop out in mainstream primary, secondary, tertiary educational institutions, vocational training, lifelong learning courses, as compared to others, disaggregated by sex, age, disability.* |  This project will not contribute to this indicator. |   |
| *Proportion of children and young people: (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics, by sex (SDG indicator 4.1.1), age and disability.*  |  This project will not contribute to this indicator. |   |
| *Coverage of essential health services/Universal Health Coverage disaggregated as a proportion of the population, by sex, age and disability (SDG indicator 3.8.1)* |  The project will contribute to this indicator based on work to be done in two outputs. Output 1.2b – the guidelines will support the collection of standadised data that will allow for disaggregation. Output 2.1b assessment of the rehabilitation and assistive technology and the development of a national plan to increase access to services at community level will increase coverage of essential health services. | Country baseline requested is not available. |
| *Percentage of persons with disabilities employed as compared to other persons and to overall employment rate, disaggregated by type of employment (public, private, self-employed), age, sex and disability* |  The project will indirectly contribute to this indicator by ensuring that PWDs are able to actively participate in society without inherent barriers (labour market, education, AT, disability support services etc.). With the increase awareness to be generated by the project, potential employers will be more informed of the capabilities of PWDs thereby improving access to meaningful employment opportunities  | Country baseline requested is not available. |
| *Average hourly earnings of female and male employees, by occupation, age and persons with disabilities (SDG indicator 8.5.1).* |  This project will not contribute to this indicator. | Country baseline requested is not available |
| *SDG indicator 11.2.1 Proportion of population that has convenient access to public transport, by sex, age and persons with disabilities.* | This project will not contribute to this indicator. |  |
| *#Number of persons with disabilities who have undergone a CRPD aligned disability assessment and are in possession of disability certification compared to statistical estimations of the number persons with disabilities.* | The project will contribute to this indicatorthrough the standardised data collection guidelines that will be applied to at least one national survey that will generate more realistic data on the number of persons with disabilities.Furthermore, the new national disability plan will allow for greater access to services at the community level thereby increasing access to disability assessment.  | Country baseline requested is not available. |
| *Percentage of public spending on disability rights and inclusion, as a proportion of the GDP/sector budgets, disaggregated by disability specific budget allocations and allocations within mainstream budget.* | The project will contribute indirectly to this indicator. Through the project, high level government officials such as permanent secretaries will be sensitised on the CRPD and other treaties with the aim of improving actions to support achievement of the preconditions for disability inclusion including the allocation of resources to support implementation of action.  | Country baseline data requested is not available. |
| *Increase of disability data/disaggregation (including by sex) within standard data and CRPD compliant collection processes.* |  The project will directly contribute to this indicator based on work to be done in two outputs. Output 1.2b and 2.2. The guidelines will support the collection of standardised data that will allow for disaggregation and will then be applied to a national survey. | Country baseline data requested is not available. |
| *SDG indicator 16.7.2 Proportion of population who believe decision-making is inclusive and responsive, by sex, age and population group.* | The project will contribute to this indicator as mechanisms with government and the UN system will be established to facilitate active and meaningful participation of PWDs in decision making processes.  | Country baseline data requested is not available. |

# Cross cutting approaches

## 6.1 Equality between men and women.

SDG 5 Gender equality articulates that gender equality is not only a fundamental human right, but a necessary foundation for a peaceful, prosperous and sustainable world. Although there has been progress towards this goal, many challenges remain. These include discriminatory laws and social norms, the underrepresentation or exclusion of women at all levels of political leadership, and the all-pervasive gender-based violence, which the Spotlight Initiative is tackling head-on.

The inequalities between men and women which currently exist in the wider society are exacerbated by disabilities and further increased within the community of persons with disabilities. Women and girls with disabilities are among the most marginalised and underrepresented of all groups in society. They however, make up the larger proportion of members of organisations for persons with disabilities and informal groupings seeking to bring awareness to the plight of persons with disabilities. To achieve a more equitable space, the project will build the capacity of OPDs with specific focus on women and other underrepresented groups. The trainings to include change management, advocacy, budgeting, leadership, communications, and proposal writing. It will establish multi-stakeholder participation, including women with disabilities to develop disability inclusive policies which address the special challenges faced by women and girls with disabilities.

The project will seek to ensure gender equality through ensuring that the steering committee is made up of at leastleaseleast 50% women, that each capacity building exercise for OPDs has a minimum quota of 50% women and that the legislative working groups that are created will contain a gender mix.

Furthermore, the tools that are developed on legislative change and on data standards will contain specific reference and inclusion of considerations for women with disabilities to ensure that this is included and embedded within future action. For example, the checklist on legislative change will likely contain a specific point on whether women with disabilities have been afforded an opportunity to specifically participate on the legislation and whether any specific considerations for women with disabilities have been considered.

Monitoring and evaluation of the project and data collection as part of the project will ensure that information on men and women are collected to allow for an analysis of gender balance and equality.

Unfortunately, at present, there is no OPD that is specifically focussed on women with disabilities. There has been some discussion about the creation of such a group and there is a hope that the project activities could see an emergence of such a group. Should such a group emerge during the course of the project, they will be invited to be a part of the steering committee and project activities as able.

## 6.2 Full and effective participation of persons with disabilities.

From the inception of the project, there has been full and effective participation of persons with disabilities via the organizations of persons with disabilities. OPDs constitute the majority number of members on the Steering Committee for the project to ensure that persons with disabilities are actively involved in project governance. Further, the project intends to strengthen the capacity of OPDs to allow for more effective monitoring and evaluation of the activities. The project will ensure diverse representation of OPDs, identify and establish the reasonable accommodations required for the full and effective participation. Additionally, a partnership model for working with OPDs will be established to increase their participation in the work of the UNCT and in accordance with the UN Disability Inclusion Strategy.

The specific outputs that will strengthen the capacity of OPDs include:

1. Output 1.1, Delivery of training workshops to improve OPDS capacity to lead meaningful participation in the reform of the regulatory amendment, data collection, rehabilitation assessment.
2. Output 3.3 OPDs including women with disabilities and underrepresented groups are supported to systematically engage in disability mainstreaming in the UN MSDF.

## 6.3 Full and effective participation of most marginalized groups.

The situational analysis identified a number of groups who seem to be underrepresented within the disability community and more generally within Trinidad and Tobago. Therefore, the project will ensure that the following more marginalised communities of people with disabilities are specifically included:

1. People with intellectual disabilities. While there was a voice of people with ID raised fairly frequently during the workshop and the situational analysis, the perspectives tended to often come from parent and teacher/school groups
2. Migrants with disabilities. There is an important migrant population within Trinidad and Tobago, however there was very little to no voice from these groups represented within the discussions to date, although they face intersecting forms of discrimination.
3. Older people with disabilities. While children with disabilities had strong representation though parent groups and school group, there was very little perspectives provided by older people’s groups into the disability discourse.
4. People with invisible/hidden disabilities. While physical, sensory and certain mental disabilities were represented, there was a clear need for people with more invisible disabilities to be better represented. Amongst others, this includes an important group of people who have seizures who have very little voice within the general discourse.
5. Deaf-Blind Persons. While organisations representing people who are Deaf/Hard of Hearing and those who are Blind/low vision exist, they are limited in their scope and capacity to represent people who are Deaf-Blind.

We will ensure that one representative from each of the above groups is named within the steering committee and within project training activities. It must be noted that not all of these groups have representative OPDs, so where an OPD is not available, we will invite individual leaders from that community to participate in activities. It must be noted that not all of these groups have representative OPDs, so where an OPD is not available to represent that community, we will invite individual leaders to participate in activities. This will involve, in the first phase of the project, a mapping of these five groups to identify potential leaders and organisations who can represent these communities.

* Governance and management arrangements –

 Table 3. Implementation arrangements

| **Output number** | **Implementing UN agencies[[16]](#footnote-17) include contact details of focal points & role and responsibility in the programme** | **Government include contact details of focal points & role and responsibility in the programme** | **OPDs include contact details of focal points & role and responsibility in the programme** | **Other partners include contact details of focal points & role and responsibility in the programme** |
| --- | --- | --- | --- | --- |
| **1.1a** | **UNFPA**  Alexander Gittens GBV Project OfficerEmail:agittens@unfpa.org **Role:** Overall lead **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Provide support to coordinate and deliver the legislative and rehabilitation specific trainings.  | MPD[[17]](#footnote-18)Stephanie Hem-LeeStephanie.hemlee@planning.gov.ttMSDFS[[18]](#footnote-19)Terrez HerreraTerrez.herrera@social.gov.tt THA[[19]](#footnote-20)Jason Clarkerealchairman@hotmail.com**Role:** Provide support to review and modify training material and conduct training. | CODO[[20]](#footnote-21) Jacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role:** Provide support to review and modify training material and conduct training.  | UWI[[21]](#footnote-22)Jacqueline HugginsJacqueline.huggins@sta.uwi.eduDigicel FoundationPenny GomezPenny.gomez@digicelgroup.com**Role:** Provide support to review and modify training material and conduct training. |
| **1.1b** | **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Overall lead**UNFPA**  Alexander Gittens GBV Project OfficerEmail:agittens@unfpa.org **Role:** Provide support to coordinate and deliver the data specific trainings**UNRC**Reba Grenado- JohnHuman Rights Advisorreba.granado.john@one.un.org**Role:** Provide Technical support and guidance for the legislation specific trainings | OPM[[22]](#footnote-23)Deokie RamnarineDeokie.ramarine@gov.ttMSDFSTerrez HerreraTerrez.herrera@social.gov.ttTHAJason Clarkerealchairman@hotmail.comMOE[[23]](#footnote-24)Leticia Rodriguez-CupidLeticia.rodriguez-cupid@moe.gov.tt**Role:** Provide support to review and modify the UNPRPD induction training materials and conduct training | CODOJacqueline Leotaudjleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role:** Provide support to review and modify the UNPRPD induction training materials and conduct training. | UWIJacqueline HugginsJacqueline.huggins@sta.uwi.edu**Role:** Provide support to review and modify the UNPRPD induction training materials and conduct training.  |
| **1.1c** | **UNFPA**Alexander Gittens GBV Project Officeragittens@unfpa.org **Role:** Overall lead **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Provide support | OPM[[24]](#footnote-25)Deokie RamnarineDeokie.ramarine@gov.ttMSDFSTerrez HerreraTerrez.herrera@social.gov.ttMOELeticia Rodriguez-CupidLeticia.rodriguez-cupid@moe.gov.ttTHA Jason Clarke realchairman@hotmail.com**Role:** Provide support to review and modify the UNPRPD induction training materials and conduct training. | CODOJacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role:** Provide support to review and modify the UNPRPD induction training materials and conduct training | Parent Advocate Group Mary Bastien marybastien@gmail.com**Role**: Provide support to review and modify the UNPRPD induction training materials. |
| **1.2a** | **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Overall lead**UNRC**Reba Grenado- JohnHuman Rights Advisorreba.granado.john@one.un.org**Role:** Provide Technical support and guidance  | AGLA[[25]](#footnote-26)Ian RamnarineMSDFSTerrez HerreraTerrez.herrera@social.gov.ttMOH[[26]](#footnote-27)Rohit DoonRohit.doon@health.gov.ttMOE[[27]](#footnote-28)Leticia Rodriguez-CupidLeticia.rodriguez-cupid@moe.gov.ttTHAJason Clarkerealchairman@hotmail.comEqual Opportunity CommissionH.R. Ian Roach NALIS Jasmin Simmons jasmin.Simmons@nalis.gov.tt **Role:** Provide support through the technical working group to develop the guidelines and checklist to support the review of the EOA, Mental Health Act, Education Act. | CODOJacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role:** Provide support through the technical working group to develop the guidelines and checklist to support the review of the EOA, Mental Health Act, Education Act. | UWIJacqueline Huggins Jacqueline.huggins@sta.uwi.eduRole: Provide support through the technical working group to develop the guidelines and checklist to support the review of the EOA, Mental Health Act, Education Act. |
| **1.2b** | **UNFPA**Alexander Gittens GBV Project OfficerEmail:agittens@unfpa.org **Role:** Overall lead  | CSO[[28]](#footnote-29)Caron London caronlondon@yahoo.comMPD Stephanie Hem Leestephanie.hemlee@planning.gov.ttMSDFS[[29]](#footnote-30)Terrez HerreraTerrez.herrera@social.gov.ttTHA Jason Clarke realchairman@hotmail.com**Role:** Provide support through the technical working group to develop the guidelines for collection of disability data consistent with international standards. | CODOJacqueline Leotaudjleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role:** Provide support through the technical working group to develop the guidelines for collection of disability data consistent with international standards. | UWIJacqueline HugginsJacqueline.huggins@sta.uwi.eduCOSTAATT Dr. Helen Williams – Cumberbatch hcumberbatch@costaatt.edu.tt **Role:** Provide support through the technical working group to develop the guidelines for collection of disability data consistent with international standards. |
| **2.1a** | **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Overall lead**UNFPA**  Alexander Gittens GBV Project OfficerEmail:agittens@unfpa.org **Role:** Provide support **UNRC**Reba Grenado- JohnHuman Rights Advisorreba.granado.john@one.un.org**Role:** Provide Technical support and guidance  | AGLA Ian Rampersad irampersad@ag.gov.ttEOC H.R.Ian RoachMSDFS Terrez Herrera terrez.herrera@social.gov.ttMOH Rohit Doon rohit.doon@health.gov.tt MOE Letecia Rodriguez-Cupid leticia.rodriguez-cupid@moe.gov.ttOPM Deokie Ramnarine deokie.ramnarine@gov.ttTHA Jason Clarkerealchairman@hotmail.com NALIS Jasmin Simmons jasmin.Simmons@nalis.gov.tt**Role:** Conduct the review of one of the three legislations (EOA, Mental Health Act, Education Act or Immigration Act) using the guidelines and checklist developed in 1.2. | CODO Jacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role:** Conduct the review of one of the three legislations (EOA, Mental Health Act, Education Act or Immigration Act) using the guidelines and checklist developed in 1.2. | UWI Jacqueline Huggins Jacqueline.huggins@sta.uwi.edu**Role:** Conduct the review of one of the three legislations (EOA, Mental Health Act, Education Act or Immigration Act) using the guidelines and checklist developed in 1.2. |
| **2.1b** | **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Overall lead | MOH Rohit Doon rohit.doon@health.gov.tt MSDFS Terrez Herrera terrez.herrera@social.gov.tt**Role:** Support the Development of the TOR for the assessors of the National rehabilitation and assistive technology programmes evaluated and a new national plan established to strengthen access for people with disabilities. | CODOJacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role**: Support the Development of the TOR for the assessors of the National rehabilitation and assistive technology programmes evaluated and a new national plan established to strengthen access for people with disabilities. | Digicel Foundation Penny Gomez Penny.Gomez@digicelgroup.comParent Advocate Group Mary Bastien marybastien@gmail.com**Role:** Support the Development of the TOR for the assessors of the National rehabilitation and assistive technology programmes evaluated and a new national plan established to strengthen access for people with disabilities. |
| **2.2** | **UNFPA**Alexander Gittens GBV Project OfficerEmail:agittens@unfpa.org **Role:** Overall lead  | CSO[[30]](#footnote-31)Caron London caronlondon@yahoo.comMPD Stephanie Hem Leestephanie.hemlee@planning.gov.ttMSDFS[[31]](#footnote-32)Terrez HerreraTerrez.herrera@social.gov.ttMSDFS Terrez Herrera Terrez.herrera@social.gov.ttTHA Jason Clarke realchairman@hotmail.com**Role:** Provide support through the technical working group to develop the guidelines for collection of disability data consistent with international standards. | CODO Jacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved. **Role:** Provide support through the technical working group to develop the guidelines for collection of disability data consistent with international standards. | University of the Southern Caribbean Kimarah Reefe (Email: reefek@usc.edu.tt**Role:** Provide support through the technical working group to develop the guidelines for collection of disability data consistent with international standards. |
| **3.1** | **UNFPA**Alexander Gittens GBV Project OfficerEmail:agittens@unfpa.org **Role:** Overall lead **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Provide support | MSDFS Terrez Herrera Terrez.herrera@social.gov.ttOPM Deokie Ramnarine Deokie.ramarine@gov.ttMPD Stephanie Hem Lee stephanie.hemlee@planning.gov.tt **Role**: **Role:** Work with the technical team to conduct the assessment of the country MSDF implementation plan and together with the team ensure disability is mainstreamed in the new plan. | CODO Jacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved.**Role:** Work with the technical team to conduct the assessment of the country MSDF implementation plan and together with the team ensure disability is mainstreamed in the new plan. | UWI Jacqueline Huggins Jacqueline.huggins@sta.uwi.edu**Role:** Provide inputs in the discussion of the MSDF assessment and mainstreaming. |
| **3.3** | **UNFPA**Alexander Gittens GBV Project OfficerEmail:agittens@unfpa.org **Role:** Overall lead **PAHO/WHO** Taraleen Malcolm. malcolmt@paho.org**Role**: Provide support | MSDFS Terrez Herrera Terrez.herrera@social.gov.ttOPM Deokie Ramnarine Deokie.ramarine@gov.ttMPD Stephanie Hem Lee stephanie.hemlee@planning.gov.tt **Role**: Support the establishment of a partnership model that will guide engagement of OPDs with the UNMSDF country implementation plan. | CODO Jacqueline Leotaud jleotuad@hotmail.comAs the current umbrella body CODO will play a coordinating role in the Project but other Organisations will be involved.**Role**: Support the establishment of a partnership model that will guide engagement of OPDs with the UNMSDF country implementation plan. | University of the Southern Caribbean Kimarah Reefe (Email: reefek@usc.edu.tt**Role**: Support the establishment of a partnership model that will guide engagement of OPDs with the UNMSDF country implementation plan. |

The project will be led jointly by UNFPA and PAHO/WHO with each agency having a clear leadership role for different outputs. Accountability will be a shared responsibility for the two-implementing agency with the RCO having overall project oversight. The management and coordination mechanism will be twofold: within each agency and an overall governance structure.

 A project coordinator will be engaged by PAHO to lead the overall coordination and implementation of the specific outputs, facilitate the internal routine M&E, and ensure streamlined, efficient flow of communication within the agency, between the implementing agencies, and with the project steering committee. UNFPA will hire a consultant to lead the implementation of activities related to their scope of work.

A project steering committee will be established to provide support and guidance for the implementation in accordance with the workplan and consistent with the signed UNPRPD MPTF agreement. People who self-identify as a person with disability will form at least 50% of the steering committee. These individuals. Further, at least 50% of the committee will be women to ensure gender equity.

The committee will be multisectoral comprising of:

1. Representatives of organizations of persons with disabilities (OPDs) who are PWDs representing diverse disabilities including women with disabilities and members of underrepresented groups including the 5 underrepresented groups described in section 6.3. Should an OPD be unavailable to represent one of the 5 groups, individual leaders will be identified from that community and included.
2. A representative from each Government ministry and agency related to the target areas of the project[[32]](#footnote-33)
3. At least one university, and at least three NGOs are actively engaged on disability related programmes.
4. Representative from each of the implementing agencies and a representative from the RCO.

The Committee’s role is to ensure overall coordination of the project, discuss the strategic focus for each year with the expected milestones, facilitate the development of the detailed annual workplan and logframe, identify and share best practices to support implementation of each output, and if necessary, suggest modifications based on lessons learned from past year or other programs. The Committee will also support the overall monitoring in accordance with the M&E and reporting requirement of the UNPRPD MPTF Secretariat. A TOR will be developed and agreed on by the members once established.

Other mechanisms for the coordination of the day-to-day technical issues within and between each agency will be necessary. These mechanisms will operate at a lower level than the Steering Committee and convened in collaboration with the required team.

The RC’s Office (RCO) will support this project via the expertise of its personnel as needed, for example the Human Rights Advisor who will ensure that a human rights-based approach to programming is implemented, including gender mainstreaming, and ensuring that the vulnerable groups are not left behind.

Quarterly updates will be provided to the RC and the Heads of Agency. Reporting on the project progress to the Secretariat will be based on the requested frequency in the agreement.

# Partnership-building potential

The proposed project streamlines inclusive and far-reaching partnerships of all relevant stakeholders, led by the UNCT. These partnerships stretch throughout the process of drafting and implementation of activities and are existing and newly founded. Despite the verticality of partnerships going from the governmental to non-governmental partners, the project is strongly rooted in the idea of fostering and formalising the full participation and modalities of collaborations of all participants including OPDs, PWDs and underrepresented groups including women with disabilities.

The project will also build on existing regional and national structures to further strengthen already existing partnerships that focus on supporting inclusive and sustainable growth involving key government ministries or State institutions, OPDs and non-governmental organisations working on the rights of persons with disabilities. These institutions, each one of them from their corresponding roles, have been involved in the identification of key recommendations outlined in the situational analysis and development of the outcomes presented in the Operational Framework. This represents a fundamental comparative advantage: we have the various perspectives and a base line which allow us to start with already existing capacities in public policy and standardisation of data, building up on this and making further progress. Work will be carried out with other State institutions which are the ones that have specific mandates on issues related to data collection, health, and rehabilitation. These institutions are part of larger platforms that allow for policies and actions to be executed in a coordinated approach.

For instance, civil society organisations, in particular OPDs, will coordinate and network at national and local level to better voice their needs and fight for access to rights. Underrepresented groups and women with disabilities are expected to network and establish cooperation with homologue organizations of non-disabled people. It is expected that the organisations and forums of PWDs will partner with media and academia which will be involved in the project respectively for visibility and capacity-building purposes. Finally, the project will help strengthen the partnership between UN agencies, the government and OPDs in implementing activities to improve the national consultative mechanisms to ensure active, meaningful participation of PWDs in all processes in support of the reforms for national disability inclusive legislation, policies and standards for collection of data to advance CRPD and SDG achievements.

# Long-term UN engagement in the area of disability –

Trinidad and Tobago is one of the countries and territories covered by the Multi-Country Office (MCO) in Trinidad and Tobago. There are 19 UN agencies serving Trinidad and Tobago but to a great extent, the United Nations Development Programme (UNDP), Pan American Health Organization/World Health Organization (PAHO/WHO), United Nations Population Fund (UNFPA) and the International Labour Organisation (ILO) have been the main entities involved in disability specific programmes. It was clear from the situational analysis that though the UN agencies continue to actively support the government to strengthen disability inclusion and in advancing efforts to achieve the SDGs, there are noted limitations in mainstreaming disability throughout the UN system. The extent to which disability is mainstreamed in planning, implementation, and monitoring of all UN development activities is unknown. While the United Nations Disability Inclusive Strategy (UNDIS) exists with a clear entity accountability framework and implementation, the level of implementation at the UN wide level is unknown.

Through this project, the Multi-Country Sustainable Development Framework (MSDF) 2020-2021 country implementation plan will be assessed to determine the level of disability inclusion and establish a baseline. The findings from the assessment, coupled with the CRPD principles, and the UNDIS will guide the development of the MSDF 2022-2023 country implementation plan. This approach will facilitate mainstreaming of the disability rights perspective at all levels including strategic planning, management, programming, and organizational culture. This country project will further contribute to mainstreaming in other countries given the multicountry nature of the Trinidad and Tobago UN office.

The MSDF is the ideal system to target under this joint programme as improvement at this level will improve the broader work of the UN System. The four priority areas of the MSDF seek to safeguard the jointly agreed commitments reflected in the human rights conventions and treaties as key strategies to accelerate progress towards the SDGs. The four priority areas: (1) An Inclusive, Equitable and Prosperous Trinidad and Tobago; (2) A Healthy Trinidad and Tobago; (3) A Safe, Cohesive, and Just Trinidad and Tobago; and (4) A Sustainable and Resilient Trinidad and Tobago will help to achieve the CRPD and SDGs. Furthermore, the UN are supporting the COVID-19 recovery planning and through the MSDF mechanism will ensure mainstreaming.

The establishment of an interagency coordinating mechanism will also help to leverage strengths and accelerate progress within each UN entity while ensuring monitoring and evaluation.

# Knowledge Management

This proposed project is a unique opportunity to document good practices and lessons learnt, as it is the first of this nature in recent years to be implemented through a joint multi-stakeholder approach which includes the UN, OPDs, SPOs and the Government.

Multi-stakeholder involvement is embedded in the project as its focus is to build capacities of stakeholders and establish mechanisms to improve collaboration among stakeholders. Stakeholders will be involved throughout all stages of the project including (1) preparation of the project proposal, (2) selection of the priority areas, and (3) implementation arrangements. To demonstrate a multi-stakeholder approach, OPDs, Governmental Organizations, NGOs, SPOs, and Universities are part of the steering committee that led the development of the proposal. A similar mechanism will be established to facilitate the implementation of the project including the monitoring and evaluation.

A major output of the project is the development of guidelines on engaging PWDs in national legislative consultations and a checklist based on the six preconditions that policy advisors can apply to check the status of current policies/plans/legislations and use as a guide for the development of new ones. The information produced will help to inform the amendment, drafting and enactment of legislation that ensures PWDs and/or their organisations are equally represented in consultations.

Another output is a set of standards and guidelines for the consistent collection of disability data. This will ensure disability related data is collected in a standardised way that will allow for disaggregated reporting of the data. This will support the collection of baseline data, and allow disability data to be collected alongside other key socio-demographic strata such as gender, age, or ethnicity.

The process used to develop, validate, and disseminate each tool will be documented. Furthermore, the process used to evaluate the UNMSDF 2020-2021 to determine the level of disability inclusion and how the findings will support the development of the 2022-2023 and 2024-25 country implementation plans will be documented. The lessons learnt during the development and roll-out of the action will be documented.

Given that UN Trinidad and Tobago is a multi-country office, offers an opportunity to share the knowledge products and lessons learnt with those countries. In addition, the UNMSDF is a partnership with 18 English- and Dutch-speaking Caribbean countries and Overseas Territories which is a good starting point for the dissemination of these knowledge products and lessons learnt.

A written report on the steps taken will be shared with the UNPRPD Secretariat and the wider UN system in the Region of the Americas. Steps will also be taken to publish lessons learnt through peer reviewed articles or other suitable platforms.

All knowledge products listed in Table 4 below will be published in English and available in various accessible formats as guided by the Steering committee and disability community.

Table 4 Knowledge products

|  |  |  |
| --- | --- | --- |
| ***Product*** | ***Type of knowledge product*** | ***Expected dissemination and use*** |
| Guideline for Disability Inclusive policy/legislation creation and reform | Guidelines | The guidelines will be disseminated to all branches of government involved in the development, revision, and amendments of national policies and plans. These guidelines are to be used when national policies and plans are being developed or reviewed for amendments to ensure the active and meaningful participation of OPDs throughout the process. The guidelines will include strategies on how to reach underrepresented groups to ensure their involvement in the process. |
| Checklist for Disability Inclusive policy/legislation creation and reform | Tool | Similar to the guidelines, the checklist will be disseminated to the government Ministries that lead the policy and plan development process. The checklist is to be used to apply it to new developed or amended policy/plan before finalization to ensure adherence to disability inclusion |
| National Guideline for the collection and use of disability data. | Guidelines | The guidelines will be published with OPDs and the Central Statistical Office (CSO) and disseminated widely for use by all organizations, agencies, and universities involved in surveys national or localised. The standards and guidelines are to be used to guide the development of surveys and other data collection instruments. This will ensure disability data is collected in accurate way that will allow for disaggregation and appropriate reporting |

* Communications and visibility

The Communication and Visibility (C&V) plan will guide internal and external communication for the project, providing a framework for responsibilities, target groups, messages, communication tools, key messages and activities. It will ensure that timely information is shared among partners and with appropriate audiences by the most effective means, and that the role and funds of the UNPRPD MPTF is appropriately recognised.

Specifically, the C&V plan will have two specific objectives:

* + - 1. To promote this project to the target groups, stakeholders, and the wider public in a timely, consistent and context-specific manner to increase visibility in line with the relevant UNPRPD MPTF C&V guidelines, as well as PAHO/WHO’s, UNFPA, and the UNCT communication and branding policy and procedures.
			2. To share information to promote, educate and sensitise the public on preconditions for disability inclusion and other topics relating to the project, the CRPD and disability inclusive SGDs.

A comprehensive communication strategy and plan will be developed detailing strategies for accessible and inclusive communication. Strategies to reach women with disability and underrepresented groups will be detailed and will incorporate multiple communication methods and channels.

Using the project output as the framing template, the C&V will take on an overarching behaviour and social change approach with key messages and ‘calls-to action.’ Messages will focus on the project priorities of inclusive legislations, disability data, and rehabilitation and assistive technology. Promoting the capacity of PWDs, their capabilities, and contribution to national development will be important elements of the C&V plan. Due to the diverse target audience, multiple approaches will be taken including the use of social and digital media to maximise reach. Messages will be designed to boost engagement, encourage ‘comments’ and ‘shares’ in an attempt to make the movement visible and inclusive.

Technology will be used in various formats such as virtual reality, animation, augmented reality, and storytelling reflecting the communication needs and habits of the audience. Human interest stories will also be captured and strategically shared throughout the project along with key messages.

Traditional media will also be incorporated on a bi-monthly and quarterly basis, satisfying partnership needs with external stakeholders. Using TV and Radio interviews and press releases as mainstream media will be used to build awareness on issues that affect persons with disabilities and actions being discussed to mitigate, inclusive of outputs and outcomes arising out of the project objectives. Using billboards and deliberate ad placement to generate discourse within the national population.

The table below highlights the steps that will be taken to keep the stakeholders and the general public informed of the project while promoting, educating, and empowering individuals for an inclusive society.

Table 5 Communications products

|  |  |  |
| --- | --- | --- |
| ***Product*** | ***Type of communication product*** | ***Expected dissemination and use*** |
| **Mass Media Campaigns** These media campaigns are geared towards building awareness, to highlight key achievements of the projects and to capture the impact stories of stakeholders. | Radio | Quarterly Radio spots will be booked with radio stations in Trinidad and Tobago to highlight various aspects of the Project. Key stakeholders including PWDs and OPD representatives will be identified for each interview. |
| TV Interviews | Quarterly TV interviews for morning shows will be booked. These interviews will be done virtually. Key stakeholders including women with disabilities and underrepresented groups will be identified. |
| Social Media | Ongoing social media posts will be made via PAHO’s, UNFPA, UNCT and partnering OPDs, NGOs and other suitable stakeholders' website and social media platforms. The written text and video social impact stories, updates, general information on the Project will be highlighted. Content will be boosted across available social media platforms. Virtual social media interviews will be considered at the start of the project to generate interest and to publicize the objectives of the project. After this, quarterly interviews and end of project interviews. |
| **Press Relations** This type of communication will be ongoing and will be utilized to keep the press, stakeholders and the general public informed about various aspects of the project. | Press invitations/press conferences  | Press conference to launch the project and then annually to provide updates. |
| Press releases | Press releases will be issued as the need arises to highlight the progress of the Project and major achievements, thus keeping the stakeholders and general public informed. |
| **Interpersonal Channels or Campaigns** Ongoing dissemination of information to the various stakeholders during workshops, meetings/discussions, training sessions. | Workshops | Through the various workshops stakeholders are kept informed and are able to share their ideas and contribute to the implementation of the Project.  |
| Meetings/discussions | Meetings will be held with stakeholders to provide updates and gain feedback. |
| Training sessions | Video impact stories of various stakeholders are captured and shared via social media and other channels. |
| **Printed Material** The dissemination of printed material will be used to create awareness among various stakeholders. | Brochures/ Booklets | Dissemination of the Brochure or Booklet with the guidelines or checklist, plus dissemination of the guidelines for consistent collection of disability data have been developed. |
| **Audio Visual Campaigns** This type of campaign will be done to reach a wide cross section of persons.  | Documentaries/Infomercials | Bi-annual documentaries or infomercials will be produced to highlight key aspects of the project and the testimonials of stakeholders. |
| Newsletter  | An annual newsletter will be published to highlight the achievement of the Project and showcase the involvement of PWDs and other stakeholders. |

* Monitoring and Evaluation

 The M&E System will demonstrate achievement of expected results detailed in the project’s Performance Framework. Output Indicator reference sheets and reporting templates will be produced for use by all implementing partners to facilitate reporting in the form of Bi-Monthly Project Monitoring Reports. All Means of Verification will be collected and collated in order to facilitate evidence-based reporting. The project M&E system will assure active participation of OPDs and women with disabilities in data collection, analysis and reporting phases. Two core components of M& E are described:

1. Development and implementation of and Indicator Framework which will detail for each indicator in the Results Framework, corresponding data collection forms / templates, person or entity responsible for data collection and reporting. This will be produced within the first month of the project by an M&E expert. Each collaborating entity named in Section 7 will have a reporting responsibility. Indicator monitoring reports will be submitted every two months to the Project Steering Committee by the project coordinators who will engage in joint review of milestone achievement, reflection and course correction. Project Monitoring in the form of an Internal Project Evaluation will also be performed based on careful analysis of the Annual Monitoring Report and an End of Project Report. Implementers will be supported in the conduct of After-Action Reviews to facilitate their own project learning and self-improvement which will constitute the Mid-Term Evaluation. Critically, the involvement and feedback of PWD and OPDs will be central to this internal evaluation phase.
2. External Evaluation: An Evaluation and Learning system will be established to facilitate the demonstration of change through achievement of project outputs. An end of Project, an External Evaluation will be conducted during the last 3 months of the project and will focus on assessing the relevance, effectiveness, efficiency, and sustainability of the project. A suitable Consultant will be hired to perform this evaluation which will review project monitoring reports and related outputs; conduct relevant key informant interviews and focus group discussions with beneficiaries and implementers.

 The Evaluation Objectives include:

* Assessment of the overall impact of UNPRPD project by determining how project activities contributed to the achievement of the UNPRPD project outcomes.
* Evaluation of project results based on stated Results Framework outputs and how they have contributed to the outcomes to provide undisputed evidence that responds clearly to the following questions.

**Evaluation Question 1**:

* Has the capacity of national stakeholders, especially of key duty bearers and rights holders been enhanced to ensure more effective contributions towards disability inclusive policies, systems and for the implementation of the CRPD and SDGs?

**Evaluation Question 2:**

* Have the identified gaps in the achievement of essential building blocks or preconditions to CPRD implementation in development and humanitarian programs been addressed? To what extent?

**Evaluation Question 3**:

* Have National development and humanitarian plans, budgets, programs and monitoring processes been adapted to become disability inclusive. What is the evidence of this?

 Evaluation sub-questions have been developed and will form part of the End of Project Evaluation’s Terms of Reference.

* Risk Management

 As a country that is relatively stable from a geo-political perspective, the main risks were identified to be programmatic and institutional rather than contextual. Table 6 below shows the main risks identified:

 Table 6 Risks Management Strategy

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Type of risk\**** ***(contextual*** ***programmatic, institutional)***  | ***Risk***  | ***Likelihood (L, M, H)***  | ***Impact on result***  | ***Mitigation strategies***  | ***Risk treatment owners***  |
| Programmatic | Risk of failure to achieve the aims and objectives | L  | Significant aspects of the project will not be implemented within the timeframe for the completion of the project.  | Project implementation Steering Committee meetings will be held regularly to be able to identify obstacles and challenges early in order to address them. Getting regular feedback from stakeholders who are responsible for various aspects to track their progress and ensure the project is being implemented within the specified timeframe.  |  UNFPA, PAHO, Project Steering Committee |
| Programmatic  | Risk of causing harm through engagements. | L  | A part of the disability community becomes more fragmented or isolated as a result of the project.   | Frequent meetings and engagement with stakeholders help to track output. Ensuring that the Steering Committee is at least 50% people with disabilities. Reassign task where necessary and create team cohesion.    | ***PAHO, UNFPA, Steering Committee***  |
| Institutional   | Fiduciary failure  | M | If beneficiaries do not feel that their concerns are being acknowledged and addressed, they may withdraw from the project.  | Include beneficiaries in the decision- making process so they have buy-in and they can be a part of selecting the major concerns that need to be addressed, any risk of them withdrawing from the project because they feel their concerns are not being addresses will be reduced.Maintain transparency and openness in communication with beneficiaries. Recognise and address concerns raised.  |  ***PAHO, UNFPA, Steering Committee*** |

\* Please specify here the type of risk and refer to the following definitions:

Contextual: risk of state failure, return to conflict, development failure, humanitarian crisis; factors over which external actors have limited control.

Programmatic: risk of failure to achieve the aims and objectives; risk of causing harm through engagements.

Institutional: risk to the donor agency, security, fiduciary failure, reputational loss, domestic political damage etc.

# Budget

*Please use the template attached (annex 2) to fill in the budget based on the format approved by the UNDG Financial Policy Working Group. (please refer to the* [*2015 ANNUAL FINANCIAL REPORTING AND THE UNDG REPORTING CATEGORIES*](http://mdtf.undp.org/document/download/5489)

*While developing the budget please ensure that appropriate allocations are made for project including the following:*

1. *Full time coordination costs*
2. *Monitoring and Evaluation activities*
3. *Accessibility and reasonable accommodation costs*
4. *Communication and visibility costs*

*Please note the UNPRPD will not cover the following costs:*

1. *The direct provision of services, e.g., assistive devices, educational services, or rehabilitation services*
2. *Acquisition of land or buildings or reconstruction or renovation of physical spaces*
3. *Equipment costs, such as computers, vehicles, furniture etc.*
4. *Operating costs for running an office e.g. rent.*
5. *Grants for filling a ‘funding gap’ for fulfilling the mandates of UN entities*
6. *Re-granting activities*
7. *Scholarships*
8. *Infrastructure work*
9. *Travel to countries outside of the target country unless it is part of capacity building*
10. *Regional activities, unless it is part of UNPRPD MPTF knowledge management programs*

*Please also note that:*

1. *Minimum amount received by each PUNO should be of 100.000USD*
2. *No funds transfer between PUNOs is allowed*

**13.**1 Value for money

*Please describe value for a money approach including key cost drivers. Use as a guidance the questions below. (max 500)*

1. *Economy: What are the project’s major costs categories and what drives the pricing of those costs? What actions can you take to control those costs? What cost categories will be subject to a competitive procurement process, and how robust is that process?*

The costs of the project relate mainly to the delivery of capacity building to the various stakeholders involved across the different outputs; the implementation of the legislative reviews; the implementation of the national rehabilitation and AT evaluation and the development of the subsequent national plans; and the development of a national guideline on disability data collection and use.

Costs were ascertained using current costs based on the inception phase and also from the cost of similar activity implementation in other countries.

1. *Efficiency: What controls will you put in place to ensure that you are delivering the goods or services in the most efficient manner?*

Wherever possible, we will source goods and experts locally in Trinidad and Tobago so as to minimize costs such as travel and higher salary scales. Where a local supplier of goods or expertise cannot be sourced, we will seek at least three bids from potential suppliers and, once their quality and relevance has been verified, will select the bidder with the lowest bid.

1. *Effectiveness: What elements of the theory of change are the weakest and have you considered project activities to overcome these weaknesses? If your project will be delivered in a fragile state, how can you demonstrate your capability to deliver in difficult environments?* *Can you demonstrate clearly that you cannot carry out the project without support from UNPRPD? If not, how much of the programme could you have achieved on your own without support?*

Trinidad and Tobago is a stable state from a political and conflict perspective, but is vulnerable to the seasonal rains and floods which can impact capacities to implement initiatives during these months.

Without this UNPRPD funding, most of the actions would either not be able to take place or, if they did, would be undertaken by individual agencies rather than in a collaborative manner. For example, PAHO was looking for funding during the 2020-2021 biennium to undertake national rehabilitation and AT assessments but so far has been unsuccessful to secure funds to undertake this work. There has not been, to date, specific discussions on a project to move forward inclusive legislative change in the country. Finally, while data standards have been frequently discussed for a number of years within the disability community, no specific actions to move this agenda forward have yet taken place. The UNPRPD MPTF will make this joint programming possible to advance actions in three critical areas (legislation, data, and rehabilitation/AT) while building capacity of OPDs and establishing mechanisms for their active participation.

**13.2 Co-funding**

*No co-funding is provided for this project*

#  Safeguarding

 This project is guided by the UN Secretary-General's Bulletin on Special Measures for Protection from Sexual Exploitation and Abuse (ST/SGB/2003/13) (ST/SGB/2003/13). Capacity building training on the Prevention of Sexual Abuse and Exploitation (PSEA) will be provided to the project coordinators and consultants hired as part of this project.[[33]](#footnote-34) The training will seek to ensure the awareness of the zero-tolerance policy with respect to sexual abuse and exploitation which this project is subjected to.

 Additionally, the identification of PSEA focal points and methods to report any incidences in accordance with UNCT’s PSEA action plan will be covered in the sensitization. The mechanisms for reporting will be sensitive to gender, age, diversity and accessible to all and will encourage individuals to report instances of sexual abuse and exploitation easily and confidentially. Further, the corrective measures to be taken to end violations and the protection of victims and witnesses in accordance with the United Nations Protocol on the Provision of Assistance to Victims of Sexual Exploitation and Abuse will be highlighted and implemented.[[34]](#footnote-35) Clear referral for pathways is established in accordance with the UNCT PSEA Action plan to ensure that all victims have the support they need without delay, including to material assistance, psychosocial support, medical and legal services. The Steering Committee will ensure that the appropriate due diligence is exercised throughout the duration of the programme and any SEA risks during the cycle of the project are to be identified and dealt with.

# Workplan

**YEAR 1 JANUARY – DECEMBER 2022**

*please do not repeat activities under different outputs*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome** | **Output**  | **Activity**  | **Responsible Partner** | **Timeline**  |
| **Outcome 1: National Stakeholders have the knowledge and practical tools to effectively contribute the development and implementation of disability inclusive policies** | **Output 1.1.a** Capacity of OPDs and People with disabilities including women and underrepresented groups enhanced to improve the organization and individual’s ability to lead meaningful participation in the reform of the Equal Opportunity Act (EOA), Mental Health Act, Education Act, data collection, and rehabilitation assessment.  | **Adaptation of the UNPRPD training with specific focus on inclusive policy** 1. Identify facilitators and trainers to conduct the UNPRPD inclusive policy training for PWDs and OPD representatives
2. Establish a team to review and modify training materials
3. Review and modify the UNPRPD induction training materials with a special focus on inclusive policy.
4. Select training modalities and accessibility needs of PWDs and OPDs representatives
5. Conduct the UNPRPD inclusive policy training
6. Evaluate the UNPRPD inclusive policy training for the PWDs and OPD representatives and write the training report
 | PAHO/WHO |  March – May 2022 |
| **Organizational capacity building of OPDs with specific focus on women and other underrepresented groups. Trainings to include change management, advocacy, budgeting, leadership, communications, and proposal writing** 1. Identify facilitators and trainers
2. Develop training curriculum and materials for the different training courses

 i. proposal writing for OPDs ii. budgeting, planning and financial management for OPDs iii. change management, leadership, and advocacy for OPDs iv. communication to include both oral and written 1. Select training modalities and accessibility needs to support the OPD organizational capacity trainings
2. Develop monitoring and evaluation forms

for both facilitators/trainers and participants1. Conduct the organizational capacity building trainings sessions for the PWDs and OPDs representatives
2. Conduct evaluation of trainings
3. Collate, and analyse evaluation data and develop training report
 | UNFPA  |  March-May 2022 |
| **Specific policy trainings to OPDs to review the Equal Opportunity Act (EOA), Mental Health Act, Education Act, and the immigration Act.**1. Identify facilitators and trainers for inclusive legislations for PWDs and OPDs representatives
2. Develop training curriculum and materials to conduct a comparative analysis of the CRPD with each of the Act and regional best practices
3. Select training modalities and accessibility needs to support targeted legislative trainings for PWDs and OPDs representatives
4. Develop monitoring and evaluation forms for both facilitators/trainers and participants
5. Conduct the targeted legislative trainings
6. Conduct the evaluation to determine the impact of the targeted legislative training on the PWDs and OPDs representatives
7. Collate, analyse evaluation data and develop training report for the targeted legislative trainings conducted for PWDs and OPDs representatives
 | PAHO/WHO |  June - August 2022 |
| **Specific trainings on data collection and management to participate in in the development of national guidelines for collection of disability data.** 1. Identify facilitators and trainers for disability data collection and management for PWDs and OPDs representatives
2. Develop training curriculum and materials
3. Select training modalities and accessibility needs to support data collection and management trainings for PWDs and OPDs representatives
4. Develop monitoring and evaluation forms for both facilitators/trainers and participants
5. Conduct the data training
6. Conduct the evaluation to determine the impact of the data training on the PWDs and OPDs representatives
7. Collate, analyse evaluation data and develop training report for the data trainings conducted for PWDs and OPDs representatives

  | UNFPA |  April-June 2022 |
| **Specific trainings on rehabilitation for OPDs to participate in the rehabilitation and AT assessment**1. Identify facilitators and trainers for the rehabilitation and AT training for PWDs and OPDs representatives
2. Develop training curriculum and materials
3. Select training modalities and accessibility needs to support rehabilitation and AT trainings for PWDs and OPDs representatives
4. Develop monitoring and evaluation forms for both facilitators/trainers and participants
5. Conduct the rehabilitation and AT training
6. Evaluate the training to determine the impact of the rehabilitation and AT training on the PWDs and OPDs representatives
7. Collate, analyse evaluation data and develop training report for the rehabilitation and AT trainings conducted for PWDs and OPDs representatives

 | PAHO/WHO |  April – June 2022 |
|   | **Output 1.1.b** Capacity building of policy advisors, legal staff, and support technicians across the Government Ministries improved to facilitate review of the Equal Opportunity Act (EOA), Mental Health Act, and Education Act; supporting the development of the national disability legislation, and the development of the guidelines and checklist for disability inclusive policy reform.   | 1. Review and modify the UNPRPD induction training materials with a special focus on inclusive policy for government representatives
2. Identify facilitators and trainers to conduct the trainings of the government representatives
3. Develop training curriculum and materials for the different training courses

 i. targeted legislative trainings (PAHO) ii. data collection and management (UNFPA) iii. rehabilitation and AT (PAHO)1. Select training modalities and accessibility needs to support government representative participation in the different training courses
2. Conduct the trainings for the government participants
3. Evaluate the trainings to determine effect on the government participants
4. Write training report for the government specific trainings
 | PAHO/WHOAND UNFPA  |  May – August 2022 |
|   | **Output 1.1.c** Capacity of UN staff improved to facilitate mainstreaming of disability in the UNMSDF.   | 1. Review and modify the UNPRPD induction training materials with a special focus on disability inclusive programmes
2. Identify facilitators and trainers
3. Select training modalities
4. Conduct the trainings for the UN staff
5. Conduct the evaluation of the UN staff trainings
6. Write training report for the UN staff specific trainings
 | UNFPA |  July 2022 |
|   | **Output 1.2.a** Guidelines and checklist to support the review of the EOA, Mental Health Act, Education Act, and or the immigration Act developed, piloted, and disseminated.   | 1. Create technical working groups with OPDs, Policy advisors, UN, and other stakeholders
2. Develop guidelines and checklist against regional and international best practices
3. Identify the 3 legislations (EOA, Mental Health, Education Act or immigration Act) to be reviewed
4. Develop a dissemination plan to facilitate sensitization of all stakeholders to the guidelines and checklist
 | PAHO/WHO |  April – September 2022 |
|   | **Output 1.2.b** Guidelines for collection of disability data consistent with international standards developed, piloted, and launched.  | 1. Establish working group of OPDs, CSO, UN, and other stakeholders
2. Develop guidelines in alignment with international standards
3. Identify a survey to which the guidelines can be applied in Year 2
 | UNFPA |  April – July 2022 |
| **Outcome 2. Gaps in achievement of essential building blocks or preconditions to CPRD implementation in development and humanitarian programs are addressed** | **Output 2.1.a** Three Acts (EOA, Mental Health Act, Education Act, or the immigration Act) reviewed in line with CRPD to address non-discrimination gaps.   | 1. Identify and agree on the composition of the legislative review panel
2. Conduct the review of one of the three legislations (EOA, Mental Health Act, Education Act or Immigration Act) using the guidelines and checklist developed in 1.2
3. Prepare draft amendments for the reviewed Act
4. Submit draft amendments to the AGLA
 | PAHO/WHO |  October – December 2022 |
|  | **Output 2.1.b** National rehabilitation and assistive technology programmes evaluated and a new national plan established to strengthen access for people with disabilities.  | 1. Develop TOR for the assessors
2. Identify the team to conduct assessment
3. Undertake comprehensive assessments of the rehabilitation sector and AT using existing WHO tools (STARS and ATA-C).
4. Prepare assessment Report
5. Present final report to stakeholders

  | PAHO/WHO |  March – August 2022 |
| **Outcome 3: National development and humanitarian plans, budgets, programs and monitoring processes are disability inclusive** | **Output 3.1** Disability inclusion is strengthened in planning, implementation, and monitoring of UN development activities through the Multi-Country Sustainable Development Framework (MSDF) Trinidad and Tobago country implementation plan. | 1. Identify assessment team to conduct the assessment of the MSDF
2. Agree on the assessment tool
3. Conduct assessment of the 1st MSDF to establish a baseline
4. Prepare the MSDF assessment report
5. Disseminate assessment findings to the UN agencies
6. Establish a UN interagency coordinating mechanism that will leverage strengths and accelerate progress

  | UNFPA |  March – August 2022 |
|  | **Output 3.3** OPDs including women with disabilities and underrepresented groups are supported to systematically engaged in disability mainstreaming in the UN MSDF TT implementation plan.  | 1. Conduct analysis of OPDs including underrepresented groups and women with disabilities to determine their level of engagement with the UN system and the mechanism in place for this engagement
 | UNFPA | September - December 2022 |

**YEAR 2 – JANUARY –DECEMBER 2023**

*please do not repeat activities under outcomes or outputs*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Outcome** | **Output**  | **Activity**  | **Responsible Partner** | **Timeline**  |
| **Outcome 1: National Stakeholders have the knowledge and practical tools to effectively contribute the development and implementation of disability inclusive policies** | **Output 1.1.a** Capacity of OPDs and People with disabilities including women and underrepresented groups enhanced to improve the organization and individual’s ability to lead meaningful participation in the reform of the Equal Opportunity Act (EOA), Mental Health Act, Education Act, data collection, and rehabilitation assessment.   | 1. Identify PWDs and representatives from OPDs to be trained
2. Repeat the trainings that were conducted in year 1
3. Identify PWDs and OPDs representative that can serve as trainers
4. Conduct a train the trainers workshop for PWDs and OPDs representatives
5. Create a list of PWDs and OPDs representatives to serve as trainers to conduct future trainings beyond the project.
 | UNFPAAnd PAHO/WHO |  April 2023 – June 2023 |
|   | **Output 1.1.b** Capacity building of policy advisors, legal staff, and support technicians across the Government Ministries improved to facilitate review of the Equal Opportunity Act (EOA), Mental Health Act, and Education Act; supporting the development of the national disability legislation, and the development of the guidelines and checklist for disability inclusive policy reform. | 1. Identify at least 15 government staff that were trained in year 1 to serve as trainers
2. Prepare the train the trainers curriculum and training materials
3. Conduct training
4. Prepare a list of trainers to facilitate future trainings of new or existing government staff that did not participate in the year 1 trainings
 | PAHO/WHO |  March – May 2023 |
|   | **Output 1.1.c** Capacity of UN staff improved to facilitate mainstreaming of disability in the UNMSDF.   | 1. Identify staff to be trained from each agency
2. Repeat training conducted in year 1
3. Conduct evaluation and prepare training report
 | UNFPA |  July – September 2023 |
| **Outcome 2.** Gaps in achievement of essential building blocks or preconditions to CPRD implementation in development and humanitarian programs are addressed | **Output 2.1.a** Three Acts (EOA, Mental Health Act, Education Act, or the immigration Act) reviewed in line with CRPD to address non-discrimination gaps.   |  1. Conduct the review of the remaining two legislations (EOA, Mental Health Act, Education Act or Immigration Act) using the guidelines and checklist developed in 1.2
2. Prepare draft amendments for each the Act
3. Submit draft amendments of those two Acts to the AGLA
4. Conduct sensitization sessions on the guidelines and checklist as part of the dissemination plan to facilitate sensitization of all stakeholders and adoption for use
 | PAHO/WHO |  February – August 2023 |
| 1. Share the guidelines and checklist with the team working on the development of the national disability legislation
2. Use the guidelines and checklist to support the National Disability Legislation development process which is a new legislation (***not expected to be completed and approved during the period of the project, but the mechanism established will support the development of an inclusive legislation when completed***)
 | PAHO/WHO |  October 2022 – December 2023 |
|  | **Output 2.1.b** National rehabilitation and assistive technology programmes evaluated and a new national plan established to strengthen access for people with disabilities. | 1. Use the results of the assessment conducted in year 1, develop a national rehabilitation plan that will improve access to rehabilitation and assistive technology
2. Conduct stakeholders’ consultation on the draft national plan to gain consensus
3. Finalize and disseminate the plan
4. Develop and publish a priority assistive products list based on extensive consultation and research aligned to the WHO/UNICEF work on AT.
 | PAHO/WHO |  February – September 2023 |
|  | **Output 2.2.** National standards for disability data collection implemented, and launched with an established system for integration into national surveys and data collection. | 1. Apply the guidelines to a national survey
2. Validate the standards
3. Promote the disability data guidelines with CSO, Senior Government Officials and UN
4. Get agreement on the use of the guidelines from organizations for use in national and other local surveys and data collection.
 | UNFPA |  October 2022 – March 2023 |
| **Outcome 3: National development and humanitarian plans, budgets, programs and monitoring processes are disability inclusive** | **Output 3.1** Disability inclusion is strengthened in planning, implementation, and monitoring of UN development activities through the Multi-Country Sustainable Development Framework (MSDF). | 1. Use partnership model to ensure full and active participation in the UN activities reflected in the MSDF
2. Use the UNDIS accountability framework to measure if the MSDF TT implementation plan meets the requirements
3. Present the TT country assessment to the other countries within the MSDF highlighting best practices and lessons learnt
 | UNFPA |  June – August 2023 |
|   | **Output 3.3** OPDs including women with disabilities and underrepresented groups are supported to systematically engaged in disability mainstreaming in the UN MSDF.   | 1. Establish a partnership model that will guide engagement of OPDs with the UNMSDF country implementation plan.
2. Conduct an evaluation of PWDs level of involvement and their satisfaction with the engagement mechanism in place.
 | UNFPA | September – December 2023 |

1. Note that the UNRC is not eligible to receive funds as it is not an implementing agency, but has been heavily involved in the development of the proposal and will continue to be heavily involved in its implementation. [↑](#footnote-ref-2)
2. List at least one and max of 3. Equality and non-discrimination; service delivery; accessibility; CRPD-compliant budgeting and financial management; Accountability and governance. [↑](#footnote-ref-3)
3. 1) all persons with disabilities, 2) children & youth with disabilities 3) primary focus on women and girls with disabilities, or 4) primary focus on one or more underrepresented groups of persons with disabilitiespersons with intellectual and or psychosocial disabilities/ other underrepresented group of persons with disabilities (please specify) migrants/ indigenous persons with disabilities/ minorities etc.) [↑](#footnote-ref-4)
4. Please list at least one and a maximum of 5. COVID-19 response and recovery; Inclusive SDGs planning and monitoring; Climate change; Inclusive education; Early childhood development; Access to health; Access to Justice; Social protection; Employment; GBV & sexual and reproductive health; Statistics and data collection; CRPD monitoring (art 33); Intersectionality; Political participation; Disability assessment and referral services; National Disability Policy and/or Law; Access to Information and ICTs; Deinstitutionalization; Legal Capacity; Independent living; Awareness raising; OPDs capacity building [↑](#footnote-ref-5)
5. Numerous areas for programmatic strengthening emerged during the assessment including systems of rehabilitation, assistive technology, education, and disability assessment and referral [↑](#footnote-ref-6)
6. **Government** (Ministry of Social Development and Family Services, Ministry of Health, Office of the Prime Minister, Gender and Child Services, Ministry of Planning and Development, Tobago House of Assembly Disability Affairs Unit, Ministry of Education); **OPDs** (Consortium of Disability Organisations, Trinidad and Tobago Blind Welfare Association); **NGOs** (Digicel Foundation); **Academia** (The University of the West Indies); and **UN** (PAHO/WHO, UNFPA, UNRCO). [↑](#footnote-ref-7)
7. **Government** (Ministry of Social Development and Family Services, Ministry of Planning and Development, Central Statistical Office); **OPDs** (Consortium of Disability Organisations, Trinidad and Tobago Blind Welfare Association, Combined Disabilities of T&T, Down Syndrome Family Network, Special Olympics TT, T&T Chapter of Disabled Peoples’ International, Tobago Affairs Committee for the Blind and Visually Impaired, Seizure Awareness Foundation); **SPO** (Association of Public Special Schools), Academia (University of the West Indies), and UN (PAHO/WHO, UNFPA, UNRCO, UN T&T Association). [↑](#footnote-ref-8)
8. The first of these meetings was held on 24 June 2021 with the presence of OPDs and PWDs, the second on 2 July 2021 with state institutions and other stakeholders including OPDs and UNCTs and the third on 8 July 2021 to review and the outputs of the outcomes framework. [↑](#footnote-ref-9)
9. On September 27, the recommended Outcomes Framework was presented to the steering committee and on September 28, to a larger stakeholder group. [↑](#footnote-ref-10)
10. Training (in person/online), workshops, seminars etc. [↑](#footnote-ref-11)
11. 1. CRPD 2. Preconditions for disability inclusion 3 National development plans for the SDGs. 4.women with disabilities and underrepresented groups needs and rights 5 instruments for planning and implementation of UN development 6. other [↑](#footnote-ref-12)
12. Tools, guidelines, protocols, reports [↑](#footnote-ref-13)
13. COVID-19 response and recovery; Inclusive SDGs planning and monitoring; Climate change; Inclusive education; Early childhood development; Access to health; Access to Justice; Social protection; Employment; GBV & sexual and reproductive health; Statistics and data collection; CRPD monitoring (art 33); Intersectionality; Political participation; Disability assessment and referral services; Disability Policy and/or Law; Access to Information and ICTs; Deinstitutionalization; Legal Capacity; Independent living; Awareness raising; OPDs capacity building [↑](#footnote-ref-14)
14. Tools, guidelines, protocols, reports [↑](#footnote-ref-15)
15. COVID-19 response and recovery; Inclusive SDGs planning and monitoring; Climate change; Inclusive education; Early childhood development; Access to health; Access to Justice; Social protection; Employment; GBV & sexual and reproductive health; Statistics and data collection; CRPD monitoring (art 33); Intersectionality; Political participation; Disability assessment and referral services; Disability Policy and/or Law; Access to Information and ICTs; Deinstitutionalization; Legal Capacity; Independent living; Awareness raising; OPDs capacity building [↑](#footnote-ref-16)
16. Please note minimum amount of UN Participating Agencies is 2 and maximum is 3. [↑](#footnote-ref-17)
17. [↑](#footnote-ref-18)
18. [↑](#footnote-ref-19)
19. [↑](#footnote-ref-20)
20. Consortium of Disability Organisations. While CODO is listed, OPDs that are not member of CODO will also be part of the governance and management arrangement. [↑](#footnote-ref-21)
21. University of the West Indies, Student Life and Development Division [↑](#footnote-ref-22)
22. Office of the Prime Minister [↑](#footnote-ref-23)
23. Ministry of Education [↑](#footnote-ref-24)
24. Office of the Prime Minister [↑](#footnote-ref-25)
25. Attorney General and Legal Affairs [↑](#footnote-ref-26)
26. Ministry of Health [↑](#footnote-ref-27)
27. Ministry of Education [↑](#footnote-ref-28)
28. Central Statistical Office [↑](#footnote-ref-29)
29. Ministry of Social Development and Family Services [↑](#footnote-ref-30)
30. Central Statistical Office [↑](#footnote-ref-31)
31. Ministry of Social Development and Family Services [↑](#footnote-ref-32)
32. Including, but not limited to, Ministry of Health, Office of the Attorney General and Legal Affairs, the Ministry of social Development and Family Services, and the Central Statistical Office. [↑](#footnote-ref-33)
33. http://www.un.org/en/pdfs/UN%20Protocol%20on%20SEA%20Allegations%20involving%20Implementing%20Partners%20-%20English\_Final.pdf [↑](#footnote-ref-34)
34. http://www.un.org/en/pdfs/UN%20Victim%20Assistance%20Protocol\_English\_Final.pdf [↑](#footnote-ref-35)