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**END OF PROJECT REPORT**

**Title of Project- Empower for Change – Reducing violence and discrimination against women and children with disabilities.**

**Name of Country- Timor-Leste**

**Project Duration: February 2018 – 31 January 2021**

**DISCLAIMER**

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# Introduction

The Empower for Change project - reducing violence and discrimination against women and children with disabilities in Timor-Leste – commenced in February 2018 and ended on 31 January of 2021. The Empower for change – reducing violence and discrimination against women and children with disabilities in Timor-Leste has made progress during three years of project implementation by enhanced the rights of persons with disabilities to live free from discrimination and violence and advanced the equal rights of women and children with disabilities facing multiple forms of discrimination. Through the UNCT coordination mechanism in Timor-Leste were leveraged the Partnership on the Rights of Persons with Disabilities funded by Multi-Project Trust Fund managed and participated by UN organization which included UN Women and WHO (in collaboration with UNFPA, UNICEF, OHRAU/Human Rights Advisor’s Unit in the Resident Coordinator’s office), aim to prevent and address violence, in particular gender -based violence(GBV), typically to end violence against persons with disabilities which focus on women and children with disabilities in Timor-Leste. The Main partner of the government institution were engaged directly from Ministry of Social Solidarity and Inclusion as key main partner to coordinate with relevance ministries for instance of Ministry of Education, SEII, Ministry of Justice towards ratification convention of the right of person with disabilities. The Empower for change established a partnership with two organization for persons with disabilities, The Community Based Rehabilitation Network (CBRN), a women-led organization for persons with disabilities (OPDs) focused on developed a toolkit for Gender Based Violence prevention, typical Ending violence against women and children with disabilities in Timor-Leste. And the Timor-Leste Disability Association (ADTL) focus on National campaign on the rights of persons with disabilities in the country of Timor- Leste.

The empower for change project enhanced capacities of service providers which refer to the coordination works with Ministry of social Solidarity and Inclusion, the Ministries of education and Health and Justice/Judiciary, the Secretary of State for Equality and Inclusion.

The capacity of two organization of persons with disabilities have been increased in term of advocacy for rights of persons with disabilities, stakeholder, Government Institution, and engagements with parliaments on gender responsive budgeting in institution were increased. The ongoing advocacy work led by ADTL with stakeholders, government institution and parliaments member were attention to the urgent need for ratifications of the UN convention on the Rights of Persons with Disabilities (UN-CRPD) not able to ratify through end of the project, with delays institution ratify that convention as part of government institution’s planning to reinform national and international commitments (SDG’s Principles), the Ministry of Social Solidarity and Inclusion led the revision of the national action plan for rights of person with disabilities though 2024 in coordination with UNHRAU, ADTL and funded by government of Australia through PHP, which that NAP-PWDs is pending approval from council of ministries, and response to other requirements as member of ASEAN and contribute to the UN treaty bodies and the Universal Periodic Review (UPR) of this year – November 2021.

The empower of change project were strengthen capacity of government institution and Organization of persons with disabilities for legal and policy analysis, capacity building for prevention of violence against women and children with disabilities in line with the right of persons with disabilities.

The project engaged regularly with individual partners, OPDs, after the change of the government in July 2018, political support from the new Minister and Vice-Minister of Social Solidarity and Inclusion, whose Ministry performs a coordinating within Government in disability, was ensured for the empower for change project. Launched of the project through established of the two main organizations of person with disabilities for the advocacy work and capacity building of the ending violence against women and children with disabilities, established of the empower for change project steering committee aim to support of monitoring and evaluate of the project implementation. So, the project started and end with its engagements with a wide range of partners from Government, persons with disabilities and organizations of person with disabilities (OPDs, others civil society members, the National human Rights Institution, Development Partners, Donors and UN Agencies.

In term of responding to Covid-19 pandemic, the UN Project team-maintained communication with the OPDs partners ADTL and CBRN-TL, shared information regarding the prevention of COVID-19, and invited OPDs to share their experiences and recommendations as part of the Gender and Protection Working Group led by UN Women and UNICEF. The WHO was also able to support one ADTL member focused on persons with visual disabilities (*Asosiasaun Halibur Defisiensia Matan-AHDMTL*) with medical masks (1000), buckets (1000) soap (1000 pieces) and posters (19). In the coming six months, the project team will work to advance the work with institutions and legislative environment, with consideration to the new ways of working with the COVID-19.

# 1. Overall progress

Please describe the progress made during the reporting period towards the realization of the project’s expected impact. Please make sure to capture, in your description, relevant shifts in capacity development as well as in the wider disability inclusion agenda and implementation of the SDGs in the country. Please also comment, as appropriate, on the variations in impact indicators reported in Table 1.

Overall, the empower for change progress was made to increase awareness of a wide range of partners on disability rights. The awareness raising efforts conducted and those that will continue through the project benefitted from the findings of the first ever knowledge, attitudes and behavior (KAP) survey, awareness – raising during project activities showed that a significant number of participants’ knowledge on the human rights approach, The engagement of persons with disabilities as trainers during life of the project through workshop, capacity building among organization of persons with disabilities and persons with disabilities were increased to facilitate discussion, training/workshop around ending violence against women and children with disabilities, advocacy against violence and discrimination for women and children with disabilities for service provider.

Engaged with the government institutions, for instance the Ministry of Education regarding inclusive education, parliaments members for gender responsive budgeting works, Ministry of Social Solidarity, and Inclusion for national action plan on rights of person disability revision and ratification of the rights of person with disabilities. Mapped of the justice actors in term of addressing violence against women and children with disabilities and some of the recommendation to enhance of the justice actors to work for right of persons with disabilities in the country, for Secretary of State for Equality and Inclusion in relation to the prevention of violence against women and children with disabilities and integrate of disabilities issue in to SEII’s gender coordination works, and GBV referral and advocacy meeting which led by SEII every year were included organization of persons with disabilities in that’s mechanism works.

Project activities served as an important opportunity to facilitate increased discussion, and thereby raising the visibility of the issue of disability, but also to build connections amongst a variety of stakeholders from Government, DPOs, NGOs, the UN and the National Human Rights Institution, who did not engage much prior to the project, including those who provide key services to the public. Now that five UN agencies are jointly working as part of the project, and are regularly updating the UN Country Team and different UN Working Groups on the status of the project, disability is getting additional visibility within the UN system. This is supporting better integration of disability in overall UN programming and has increased the frequency of persons with disabilities working with different UN agencies.

The Empower for change approach of the work were helping to reduce violence and discrimination against women and children with disabilities in Timor-Leste. By provided some best practices (tools and plans) for OPDs and Government partner is able to support stakeholder for addressing violence and discrimination against women and children with disabilities.

OPD (ADTL) engaged with Parliamentarians, which resulted in the adoption of a Parliamentary declaration, based on the civil society guidelines on how to integrate disability in law and policy making and planning developed through the Project. Parliament also adopted a 12-point resolution, containing specific actions for the government to pursue to protect the rights of persons with disabilities, including the ratification of the Convention on the Rights of Persons with Disabilities.

The project facilitated sector-specific assessments, which enabled the Ministry of Health and Ministry of Education to integrate recommendations for increasing accessibility of their services into their 2020 workplan. The Ministry of Health incorporated four tools into the National Guideline for Health Care Providers to address Gender-Based Violence Including Intimate Partner Violence, supporting health practitioners, GBV service providers and DPOs when dealing with survivors of violence who have disabilities, and the Education Sectoral Plan (2020 – 20124) incorporates actions for the reduction of violence and discrimination against children with disabilities. These recommendations followed two comprehensive assessments supported by the project on 1) existing health-sector activities and support services (including referral mechanisms) for gender-based violence (GBV) survivors with disabilities jointly with the Ministry of Health, and 2) assessment on current interventions and capacity needs of MoEYS, Services Providers and Key

Development Partners to meet the educational needs of children and adolescents with disabilities.

Community Based Rehabilitation Network (CBRN), a women-led DPO, finalized and tested a toolkit for GBV prevention for women and children with disabilities (GBV toolkit), jointly with 10 lead facilitators, and with the technical and financial support from UN Women and the UN Human Rights Advisor’s Unit. The 10 lead facilitators (5 women with a disability, 1 man with a disability and 2 women without a disability representing DPOs and 2 women without disability representing service provider (Casa Vida and VPU) helped finalize the toolkit by revising the material to ensure compatibility with adult learning techniques. This was done as part of the facilitators’ 6-months learning process and resulted in greater understanding and ownership of the toolkit’s content by CBRN and the facilitators. The toolkit was tested in a five-day training with 34 representatives from DPOs (25 women and 9 men, including 3 women with disabilities (all deaf), 3 men with disabilities (1 physical disability and 2 with a visual disability) in November 2019. And for 2020, ADTL continue led coordinated with CBRN and other OPDs able to roll-out toolkit on GBV/EVAW prevention for women and children with disabilities to service provides (The government institution and CSOs which engaged with GBV referral networks)

**Under Outcome 1: Timor-Leste has an enabling legislative and policy environment, free from discriminatory attitudes, in which persons with disabilities meaningfully participate and key service providers respect and realize rights**

During three years of project implementation, under the support of the *Empower for Change* project, ADTL continued to increase awareness at the highest level of Government and Parliament of the Convention on the Rights of Persons with Disabilities (CRPD), of the various actions that Timor-Leste has already undertaken to date in line with CRPD and the benefits of ratification. Despite the change in the government on 29 of May 2020, the project has continued to support DPOs in reinforcing their calls for ratification of CRPD during the reporting period, including through different national media and ADTL’s Facebook page, among other activities. See: <https://neonmetin.info/buletin/2020/06/13/adtl-husu-governu-ratifika-konvensaun-onu-direitu-ema-ho-difisiensia/> and

<https://web.facebook.com/718694811640483/posts/1681612135348741/?d=n&_rdc=11&_rdr>

ADTL also continues its national campaign on the rights of persons with disabilities, with advocacy via a video campaign and visual material (posters, brochures) with the theme of “respectful language” <https://adtlresources.home.blog/> for 2 years ago (2019 – 2020). The campaign has been disseminated through difference national media platforms and socia media.

ADTL developed a second video to raise awareness about appropriate terminology related to persons with disabilities, promoting the talent and skills of persons with disabilities, and urging viewers to use respectful language for persons with disabilities, to counter the verbal abuse, bias and stereotypes persons with disabilities are facing. The video (“*inspiration*” focuses on history of successful persons with a disability in their life: [https://drive.google.com/file/d/17mz4BRBWeDYnNkjPyXZyO2OQymz5UK0j/view?ts=5ea7936c}](https://drive.google.com/file/d/17mz4BRBWeDYnNkjPyXZyO2OQymz5UK0j/view?ts=5ea7936c%7d)).

The UN Human Rights Advisor’s Unit is reviewing and discussing within the project team proposals from organization of visual impairment for awareness raising activities in the context of COVID-19 on the radio and television, and through distribution of hygiene kits and food. In coordination with WHO, $25,000 in kind was provided to an organization of persons with visual impairments by purchasing hygiene kits such as face masks, hand soap, buckets and plastic bags. By end of June 2020, the goods were provided to the organization of persons with visual impairments and monitoring of the covid-19 pandemic against of the person with disabilities at the national level of Timor-Leste.

**Under Outcome 2: Capacity of key service providers (education, health, rehabilitation and justice) to deliver disability inclusive services, and capacity of rights holders to access such services, enhanced with a focus on prevention and response to violence against women and children with disabilities**

From February 2019 – 31 January 2021, capacity development of key service providers for instance of Ministry of Justice, Security/PNTL and Vulnerable Unit Police, Ministry of Health, the Ministry of Education, SEPFOPE and Ministry of Social Solidarity and Inclusion, Secretary of State for Equality and Inclusion were increased their knowledge and ability about rights of person with disability, - basic understanding around terminology of the disabilities, and action plan to prevent and response of the disability issues in their daily works and annual planning. In term of the coordination with Ministry of Health, and Ministry of social Solidarity and Inclusion will keep going in term of finalizing the national assistive product list, the finding of the national assistive product list were shared with both main government since 2019, and due to covid-19 pandemic the final product list was pending approval until end of the project, WHO commit to continue coordinate with both main government institution to approval those national assistive product list and ensure National Rehabilitation Center adopted through end of this year.

The Empower for change through WHO has provide capacity building for health professional on non – communicable diseases and mental health related to COVID -19 Pandemic prevention during and GBV prevention training for the health professional to ensure that health professional more sensible in addressing of the person with disabilities for women and children more access to health sectors.

UNICEF worked closely with the Ministry of Education, Youth and Sport and the Australian-funded Partnership for Human Development to prepare for piloting of the functional screening tools for children in six cities, although the training was delayed due to the COVID-19 pandemic.

**Under Outcome 3: Capacity of DPO staff, specifically women with disabilities, to access and to advocate for disability inclusive services, including GBV services, is strengthened.**

Capacity building provided for the Community Based Rehabilitation Network (CBRN), a women-led DPO, to developed, finalized and tested a toolkit for GBV prevention for women and children with disabilities (GBV prevention toolkit), jointly with 10 lead facilitators, and with the technical and financial support from UN Women and the UN Human Rights Advisor’s Unit. The 10 lead facilitators (5 women with a disability, 1 man with a disability and 2 women without a disability representing DPOs and 2 women without disability representing service provider (Casa Vida and VPU) helped finalize the toolkit by revising the material to ensure compatibility with adult learning techniques. This was done as part of the facilitators’ 6-months learning process and resulted in greater understanding and ownership of the toolkit’s content by CBRN and the facilitators. The toolkit was tested in a five-day training with 34 representatives from DPOs (25 women and 9 men, including 3 women with disabilities (all deaf), 3 men with disabilities (1 physical disability and 2 with a visual disability) in November 2019.

UN Women extended the partnership with ADTL through the end of 2020 with a focus on the national campaign for the rights of persons with disabilities and support for facilitators to finalize and roll-out the toolkit for gender-based violence prevention for women with disabilities with service providers. With the State of the Emergency from end March-end June 2020 and changes in the government structure, the training sessions using the toolkit were delayed. During this time, UN Women continued to support the Community-Based Rehabilitation Network to finalize the toolkit versions in English and Tetum, which will serve as a knowledge product for key strategic partners (from both government and civil society, including DPOs) to use for their future capacity development efforts. During the COVID-19 pandemic, the process of the toolkit development and content were shared through a webinar organized by UN Women with the Prevention Collaborative. In support of the project’s exit strategy and sustainability, DPOs related to opportunities to engage in the EU-UN Spotlight Initiative Civil Society National Reference Group. This can ensure advocacy on the rights of persons with a disability is visible in the initiative and DPOs access opportunities to utilize their capacities as facilitators and share their views related with prevention of gender-based violence against women with disabilities. The toolkit on GBV prevention only available in tetum version, with limited resource that toolkit not available in English version for the proof reading, layout and printing, most important to have local languages for reach most audience in the country, including services providers, CSOs, and OPDs.

# Progress towards impact and specific outcomes

Using the table format provided below, please provide information on the progress towards impact and the achievement of outcome indicators that took place during the reporting period. Where it has not been possible to collect data on indicators, additional narrative information should be provided detailing why that was the case and what plans have been put in place to ensure that the relevant data will be provided.

## Table 2. Progress against outcome indicators

*(Add a table for each outcome in the approved project document)*

| **Outcome 1** |
| --- |
| **Timor-Leste has an enabling legislative and policy environment, free from discriminatory attitudes, in which persons with disabilities meaningfully participate and key service providers respect and realize rights** |
| **Type of Lever:** Legislation |

### Outcome 1 Indicators

| **Indicator\*** | **Start level**  Baseline  (Beginning of the project reporting period)\* | **Target\*** | **End level**  End line  (End of the project reporting period)\* | **Means of Verification** |
| --- | --- | --- | --- | --- |
| 1.1. CRPD ratified by the Government of Timor-Leste. | CRPD is not ratified. | Reporting mechanism for the UNCRPD, within all ministries is set up and functioning by early 2020. | No ratification as of yet  **No ratification yet,** although the Government of Timor-Leste appears to be taking firm steps towards the ratification of the Convention on the Rights of Persons with Disabilities. Three key Ministries, of Social Solidarity and Inclusion, of Foreign Affairs and Cooperation and of Legislative Reform and Parliamentary Affairs held discussions in September 2019 and concluded that Timor-Leste is ready to become a member to the Convention. Adoption of the necessary legislation was included in the Government’s legislative agenda for 2019. While the Government should propose such legislation, the Parliament has the mandate to adopt resolutions to become party to international laws and agreements.  Advocacy for ratification was supported through visibility materials, such as a poster produced by ADTL, which was shared with members of 7 government ( 1 female and 5 male) and parliament (2 female an 2 man) during the period of national campaign in 2020 – raise awareness focus for government and parliament members member of the importance of UN-CRPD ratification for persons with disabilities in Timor – Leste that they can commit the ratification of the UN-CRPD.  The government institution responsible for raising the CRPD ratification with the Council of Ministers is the Ministry of Social Solidarity and Inclusion (MSSI). As a response to COVID-19, MSSI led a national cash transfer programme as a social protection measure, which delayed attention to ratification of CRPD. However, steps were taken to advance the National Action Plan on Persons with Disabilities (NAPPD), which demonstrates the continued effort towards implement-ng the Convention. | Government’s official website: Jornal de la Republica  Sticker for ratification UNCRPR <https://drive.google.com/file/d/1Mm46Ec2cFoLDdKJVCz_5b2nNuEu2HhzQ/view>  <http://timor-leste.gov.tl/wp-content/uploads/2020/03/TT-Decreto-Lei-estado-Emergencia.pdf> |
| 1.2 Number of policies/laws, plans, strategies, mechanisms that integrate the rights of people with disabilities | 16 relevant policies, strategies, plans and laws.  Note: complete list of policies, strategies, etc. included in baseline report | Two drafts of new laws/policies/plans or amendments to existing ones; One new mechanism set-up | **By 31 Dec 2019:**  1 - Educational sectoral plan 2020 – 2024 integrates recommendations from the assessment of current interventions and capacity needs of the MoEYS, service providers and key development partners to meet the learning needs of children and adolescents with disabilities in Timor-Leste in collaboration with the Ministry of Education.  2. National Guideline for Health Care Providers to address Gender-Based Violence, including Intimate Partner Violence, includes a section on disability and also four adapted tools on assistance/services to ensure that the guideline is more inclusive of persons with disability.  3. On 3 October 2019, the Parliament passed the resolution Nr 21/2019 of 3rd of October with 12 strategic provisions, including the ratification of the Convention on the Rights of Persons with Disability; adoption of a gender-responsive policy that promotes the inclusion of persons with disability.  The Ministry of Legislative Reform and Parliamentary Affairs (MRLAP) also shared that they started to review the Civil Code, where it denies legal capacity for persons with disabilities. They also prepared rules for use of respectful language and terminology on disability in law, and they have also signed an agreement with organizations of persons with hearing disabilities (KDTL) to provide sign language training to 10 young people so the latter can facilitate sign language on public television.  **By 31 Dec 2020:**  No new ones yet. Guidelines on how to integrate disability in legislation, policies and plans finalized under the project.  The Ministry of Public Works approved a Ministerial Dispatch which required public buildings to be accessible for persons with physical disabilities.  The National Action Plan for Persons with Disabilities 2021-2030 was drafted and is pending presentation to and approval by the Council of Ministers, supported by the Government of Australia | Education Sectoral Plan 2020-2024  National Guidelines for Health Care Providers to Address GBV  Resolution21/2019 of 3 October 2019, from the National Parliament <https://www.parlamento.tl/node/1270?language=tl>  and <http://www.mj.gov.tl/jornal/public/docs/2019/serie_1/SERIE_I_NO_39_B.pdf>  Minutes meeting MRLAP  Inclusion legislative poster <https://drive.google.com/file/d/11mrKY-1bPlYtLvenFx0k-vsWUtfu_MW0/view?usp=sharing>  MOP Dispatch number 07/MOP/VIII/2020 [http://www.mj.gov.tl/.../2020/serie\_2/SERIE\_II\_NO\_39.pdf](https://l.facebook.com/l.php?u=http%3A%2F%2Fwww.mj.gov.tl%2Fjornal%2Fpublic%2Fdocs%2F2020%2Fserie_2%2FSERIE_II_NO_39.pdf%3Ffbclid%3DIwAR3vywaufD2aSy9g0fHkxtnnbs1lGQ7IZNOGzOHQjQIjyL2zCpfjB7RLXtY&h=AT1TAqddJb3GE_rl2g89v82B9UywLpaAN6tWLJWcGzLh_0V14mCIWSEYQwJ0DVcpM2MWWbDd9g3hG7g4Ma61Fj80E0BX2Y9JVvHKICXBTBPxQOa_OhGOMW9btwTXcmJ-KVI&__tn__=-UK-R&c%5b0%5d=AT3Rs2I9W3iRigUVxBLUikkdPPyVfQyJkWSawfQSgSgucwJFNZjDfS3vLK1wta-rYoW4eyhoGRmVVQmHFajOdnHPKUjSzhuybXJDn6DxLumqpf5HGeL1llVisa2PipRnJAX7WFRukojqxhApMW9B89DcOlj48c2uaEbtuJLklDYTeWk)  Draft National Action Plan available in Tetum version  <https://drive.google.com/file/d/1BSQrvwQ7E6e1a9eUt5mCCBlTbGLcC6-y/view?usp=sharing> |
| 1.3. Number of persons with disabilities, legislators and legal drafters (disaggregated by sex and age) supported by the project with enhanced knowledge on integrating disability in law and policy making | 0 | 37 persons (15 from government, 12 from DPOs and civil society), Where 50% are female. | **41 representatives from DPOs** (21 men, 20 women), of which 21 are persons with disabilities (7 women and 14 men), participated in a 2-day workshop on inclusive budgeting for persons with disabilities from 28-29 May 2019. As result of the workshop, participants increased knowledge on how to analyse, monitor and advocate for inclusive state planning and budgeting for the rights of person with disabilities. The workshop was organized by ADTL with the technical support of UN Women and the cooperation of Oxfam TL.  29 persons, 13 female, 16 male, from Government, the NHRI, civil society and DPOs, who took part in consultations on draft guidelines to integrate disability.  **41 participants** (21 male, 20 female), of which 21 are persons with disabilities (7 women and 14 men), participated in a 2-day workshop on inclusive budgeting for persons with disabilities from 28-29 May. As result of the workshop, participants increased knowledge on how to analyse, monitor and advocate for inclusive state planning and budgeting for the rights of person with disabilities.  The Inclusive Legislation, Policy and Planning Guidelines were validated from OPDs and members. HRAU develop key messages extracted from the guidelines to be used in advocacy posters, which were designed and published for distribution | Consultancy Report– integrating disability in law, policy making and planning  Report on consultancy – integrating disability in law, policy making and planning  Consultancy Report– integrating disability in law, policy making and planning |
| 1.4 National mechanism monitors and reports on implementation of rights of persons with disabilities. | 0 | 1 | **National mechanism not yet established.** Establishment of a National Council on Disability remains a priority of the Government. The Ministry of Social Solidarity and Inclusion (MSSI) will be developing the decree law establishing the National Council after approval of the National Action Plan on Persons with Disabilities.  The Establishment of a National Council on Disability remains a priority of the Government and has been discussed since 2018. As of December 2020, MSSI was still reviewing the draft Decree Law for the National Council (it was submitted to the Council of Ministers in 2020, but came back to MSSI because it did not include a budget for the mechanism). | Minutes of meeting with MSSI staff  Minutes of meeting with MSSI staff  Meeting with head of the Promotion of the Rights of Persons with Disabilities in MSSI  [https://shared-assets.adobe.com/link/c38ff0b5-ab69-44f1-62f1-2621115d84b1](https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fshared-assets.adobe.com%2Flink%2Fc38ff0b5-ab69-44f1-62f1-2621115d84b1&data=04%7C01%7Cmaria.ferreira%40one.un.org%7C6966e1c1b74041b606fd08d8a2ac127d%7Cb3e5db5e2944483799f57488ace54319%7C0%7C0%7C637438207222007867%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=uff0PkQPMMYyJCqWujwhdL8nUky9Muri9OK87OeE1ec%3D&reserved=0) |

*\* Please provide sex disaggregation here.[[1]](#footnote-1)*

| **Outcome 2** |
| --- |
| Capacity of key service providers (education, health, rehabilitation and justice) to deliver disability inclusive services, and capacity of rights holders to access such services, enhanced with a focus on prevention and response to violence against women and children with disabilities |
| **Type of Lever: Capacity** |

| **Indicator\*** | **Start level**  Baseline  (Beginning of the project reporting period)\* | **Target level\*** | **End level**  End line  (End of the project reporting period)\* | **Means of Verification** |
| --- | --- | --- | --- | --- |
| 2.1. Number of GBV survivors with disabilities (disaggregated by sex/ type disability/age) referred by the National Rehabilitation Centre (CNR) to the GBV referral networks disaggregated by sex, age, type of disability). | 0 | By 2020, 60 GBV survivors with disabilities are attended to by service providers. | National Guideline for Health Care Providers to Address Gender-Based Violence developed and agreed by MOH for endorsement. The guidelines include tools clarifying the referral pathways between DPOs, CNR and the GBV referral network.  Referral for social support: 6 (4 females and 2 males, information on disability and age not available);  Referral of women and child survivors of GBV were not reported from CNR Mother and Child Health Dili officer.  Collaborate with ADTL and production of Campaign materials to raise public awareness about essential services, opportunity, and referrals for persons with disabilities. | Technical report Orientation Program on GVB <https://drive.google.com/file/d/1KaSaihhZfcNFOO8zg_wjREbDRfrvD2Tl/view?usp=sharing>  UN Monitoring /reports from CNR  Document: Referral Guideline CNR |
| 2.2. Number of civil servants and judicial actors (MOE, MSS, MH, CNR, judiciary) who have enhanced knowledge and skills to integrate disability (disaggregated by sex, age, type of disability) courts in Timor-Leste. | 0 | Community Health Center staff: 30 (15 women, 15 men)CNR staff: 10(5 women, 5 men)Judicial actors: 25 (13 women, 12 men)MOE 20 (8 women, 12 men) MoH staff: 10 (5 women, 5 men) MSS 13 GBV focal pointsNational Hospital staff: 5 (3 women, 2 men)National Police Vulnerable Persons Unit and Gender Unit 10 (7 women, 5 men) | **57 participants** (25 female and 32 male) including 4 persons with disabilities (1 female and 3 male) consisting of civil servants from MoEYS (Education Management Information System, Inclusive Education, Basic Education, Inspection, Pre- school, recurrent schooling and INFORDEPE), National University of Timor-Leste, and NGO staff working with persons with disabilities (ICFP, Alola, RHTO, ADTL, CREI Taibessi, PMY sisters Buruma, ALMA sisters**)** attended 4 day-training (18 to 21 November) on how to use child functional assessment  **50 civil servants** from MoEYS, and representatives from DPOs and NGOs working with People with Disabilities attended 3 day-training (18 to 21 November) on how to use child functional assessment tool . The training was organized by Partnership for Human Development (PHD) in collaboration with MoEYS and UNICEF. The child functional assessment tool will help MOEYS to better identify children with disability and provide them adapted assistance.  ADTL and GBV Toolkit lead facilitators provided training on human rights, GBV, understanding disability and the National Action Plan to 18 participants (10 Females and 8 Males) from line ministers on 23-24 October 2020. This involved MSSI, MEJD, MoJ, SECOMS, CNR, SEII and SEFOPE.  Two batches of health care service providers totaling 83 participants (73 female, 10 male, including 2 men with disabilities), and partners such CNR, HNGV, OPDs and local NGOs in Dili municipality received a full-day training session on Gender Based Violence, Disability, Human Rights and the referral system. The training was facilitated by 1 CNR staff with a physical disability as the Community-based Rehabilitation Coordinator, CBR (Community based rehabilitation) Network, MOH and WHO.  On 20 November, 21 staff (11 women, 9 men) from the Ministry of Justice received training gender equality and access to general court services for persons with disabilities This was conducted by 3 lead facilitators with disabilities (2 women and 1 man) using the Toolkit for prevention of Gender Based Violence for women and children with disabilities.  22 health workers (Female: 18 and Male: 4) from Dili, Ermera and Manatuto municipality participated in the dissemination of the National Guideline on Health Sector Response National Guidelines for Health Care Providers has increased their knowledge how to use that tool from the national guideline to Address Gender-Based Violence including IPV. The 22 participants will continue to use the Health Sector Response guideline and tools.  Two batches of health care service providers totaling 83 participants (73 female, 10 male, including 2 men with disabilities), and partners such CNR, HNGV, OPDs and local NGOs in Dili municipality received a full-day training session on Gender Based Violence, Disability, Human Rights and the referral system. The training was facilitated by 1 CNR staff with a physical disability as the Community-based Rehabilitation Coordinator, CBR (Community based rehabilitation) Network, MOH and WHO.  Support ADTL and partners in developing the campaign material to increase public awareness about the rights of persons with disabilities; increase respect and promotion of persons with disabilities in Timor-Leste  123 actors (101 female and 22 male) from justice, health and various line ministries gained knowledge on integrating disability into their work.  87 Education service providers (62 male; 25 female) trained (Ermera 23-25/02/2021 and Viqueque 2-4/03/2021) on the rights of persons with disabilities and the importance of Inclusive Education. tool. The training also aimed to raise awareness of participants on disability inclusion in teaching and learning process. The training was organized by Partnership for Human Development (PHD) in collaboration with MoEYS and UNICEF. The child functional assessment tool will help MOEYS to better identify children with disability and provide them adapted assistance | UNICEF Training report  Assessment Tool for teacher <https://drive.google.com/file/d/1nG1QVyUaTWgrkF3EhESG9_kvNTU4KzsA/view?usp=sharing>  And assessment tool for parents <https://drive.google.com/file/d/1rBz0ST38oFk5ajjymneaYfyTsvHKWca-/view?usp=sharing>  Action Plan from line Ministry available in Tetum version <https://drive.google.com/file/d/1ODKMgI9bFXRI1rPeeClA4vkPIq9ETmS1/view?usp=sharing>  GVB Training documents <https://drive.google.com/drive/folders/1PReKf365wnRzVSwP9P5F03GCo2rLHaiF>  WHO Technical Report and Participants list      Ministry of Justice Action Plan available in Tetum version: <https://drive.google.com/file/d/1xv8m8f-5trEdT8YgK7uFtQh35gZDuVPH/view?usp=sharing>  Documentation of GVB training for Ministry of Justice staff : <https://drive.google.com/drive/folders/1ep2VbmWkL0n4cv0dv_N6jB6c_6hPWiUv?usp=sharing>  Campaign Material (Poster) <https://drive.google.com/drive/folders/19C_FxvYjyBZzpHX-Wej_4Pdl1R7P-HHt>  Participants List  <https://drive.google.com/drive/folders/1MxPyTBNb7xwTobWbW0jzGLRWUlAlMlau?usp=sharing> |
| 2.3. Number of survivors of GBV with disabilities (disaggregated by sex and type of disability) who are attended to by service providers in Dili (justice, health, MSS, and social services) | 21 (in 2017)[[2]](#footnote-2) | By 2020, 60 GBV survivors with disabilities are attended to by service providers. | Disability and GBV assessment for the health sector was finalized during reporting period and tools developed are included in the National Guideline for health sector response to GBV. The guideline were disseminated once at national level in October 2019 and once in the Municipality of Aileu in November 2019. The workshops were attended by 60 people (29 women and 31 men) from various units within the Ministry of Health, the Secretary of State for Equality and Inclusion, DPOs, Local NGO, INGOs and relevant UN Agencies.  WHO and UNFPA: National Guideline for Health Care Providers to Address Gender-Based Violence including Intimate Partner Violence. Through the direct support of the E4C project, MoH through the Mother and Child Health (MCH) department conducted dissemination workshop on the guideline to 22 health workers (Female: 18 and Male: 4) from Dili, Ermera and Manatuto municipality. Also a total of 190 copies (140 in Tetum and 50 in English) of the guideline were printed and distributed to health facilities in Dili, Ermera, Manatuto, Bobonaro and RAEOA.  Though not directly supported by the project however the E4C project positively motivated the MoH (particularly the MCH Department in the development of a reporting template on the number cases attended by health facility and the template has a question related to whether a survivor has a disability and type of disability. The template was disseminated to health facilities in 2020 and MCH expects to receive reporting in 2021.  ADTL supported efforts to seek support by producing a poster "*No violence and discrimination for women with disabilities*" which will be used to advocate for public awareness to reduces violence against women and children in | Line ministry reports/ UN monitoring  Poster  <https://drive.google.com/file/d/1RpUDS2_zhq4H0ncA-IwXbowUukAHTLXd/view?usp=sharing> |
| 2.4. Mechanisms are in place to monitor number of cases of GBV against women with disabilities that have reached the courts in Timor-Leste | NGO JSMP (Judicial System Monitoring Program) monitors all GBV cases brought to the court. While they have a form that asks them to indicate that a person has a disability and which type, JSMP reports did not have any information on persons with disabilities. | Specific monitoring questions are added to the JSMP monitoring form about persons with disability in the court and data is analyzed and publicized. | The NGO JSMP continued monitoring GBV cases in court and is now including data on disability. Staff took part in training on disability under the project.  The NGO JSMP staff took part in workshops on disability under the project in 2019  Initial discussions have taken place between UN Women and JSMP to explore further support on disability inclusive case monitoring. Those discussions will be continued in 2020.  In 2020 JSMP monitored the Dili court. Most of the cases range from domestic violence, violence against children and other forms of GBV, but there are no new cases of women and children with disabilities. | JSMP report about monitors GBV cases of a person with disabilities brought to the court in 2018 <https://drive.google.com/file/d/1MmNumjN4oJlL9cGA93N6DiOhJpMvRRcW/view?usp=sharing>  JSMP reports[[3]](#footnote-3) |
| 2.5. National assistive products list adopted. | Not yet adopted. | National assistive products list adopted. | The National Assistive Device Product List was drafted through participatory assessment process involving 65 participants representing the Ministry of Education, Ministry of Social Solidarity, Ministry of Health, National Hospitals, Secretariat State of Gender and Equality, Dili Municipality Health Services, NRC, DPOs and Timor-Leste Disability Association. The draft list was discussed at the first national multisectoral consultation workshop in November 2019 lead by CNR and MOH. The meeting was chaired by the Vice Ministers of Health and Social Solidarity and Inclusion. | supporting documents for workshop consultation for national assistive device product <https://drive.google.com/drive/folders/1QaFWqz4r1mXfxwqn5dDHHl8yNsaawHbn?usp=sharing> |
| 2.6. Dili Inclusive Education Resource Center puts in place mechanism to identify out-of-school children with disabilities and support their enrolment in basic education schools. | No mechanism in place. | Mechanism established for Dili Inclusive Education Resource Center. | The MoEYS and UNICEF undertook an assessment of current interventions and capacity needs of the education service providers and key development partners to meet the learning needs of children and adolescents with disabilities. Further to the assessment MoEYS developed an action plan and integrated the recommendations in the 2020-2024 Education Sectoral Plan.  During January until March 2020, UNCEF supported The Ministry of Education and the partnership with PHD to trial and pilot the screening tool. In total, 278 Grade 2 students (174 boys and 104 girls) a participated in the interview. The data collection training and preparation held in Dili and 7 municipalities (Ainaro 5 schools, Baucau 10 schools, Ermera 5 schools, Liquisa 5 schools, Lautem 10 schools, Oe-Cussi 5 schools and Viqueque 10 schools) focus on 50 Basic Education Schools. | UN monitoring  Inclusive Education Action Plans |

| **Outcome 3** |
| --- |
| **Capacity of DPO staff, specifically women with disabilities, to access and to advocate for disability inclusive services, including GBV services, is strengthened.** |
| **Type of Lever: Capacity** |

| **Indicator\*** | **Start level**  Baseline  (Beginning of project reporting)\* | **Target level\*** | **End level**  End line  (End of the project reporting period)\* | **Means of Verification** |
| --- | --- | --- | --- | --- |
| 3.1 Level of participation of DPOs in GBV referral networks.  Scale: Level 0: No participation of DPO in referral network.  Level 1: DPO organization are member of referral network  Level 2: DPO are participating at least in  Level 3: DPO are participating and referring cases of GBV to the referral network  Level 4: DPO are participating, referring cases of GBV to the referral network, and monitor service provision. | Level 0 | Level 4 | 0 - GBV referral networks were not functioning as there was no budget during the year. Through the development of the GBV toolkit, DPOs and organizations working on GBV have started collaborating.  Level 1 – The TORs for the GBV referral network, both at strategic as well at technical level were revised to integrate DPOs as members of the network. However, DPOs cannot be active in the implementation as there was no referral meeting organized by Government/main responsible during organization in 2019.  2 workshops were organized in 2019 bringing together DPOs, service providers and Government organizations (MSSI, SEII) to present, and clarify the referral partners’ roles and the referral pathways. Those workshops were organized in partnership with CBRN, a woman led DPO, and with support from UN Women.  The engagement of OPDs in the GBV referral pathways remains at **Level 1** since there were no GBV referral meeting organized through end of December 2020 by the Government (led by the Ministry of Social Solidarity and Inclusion at the national level.  It should be noted that OPD members (ADTL and CBRN-TL) participated in the national Gender Coordination Group meeting facilitated by the Secretary of State for Equality and Inclusion and UN Women in February 2020. Two OPD members are also representatives of the EU-UN Spotlight Initiative National Civil Society Reference Group, which was established in 2020 and ensures OPD voices are included in efforts to address GBV.  In end of 2020 , total 10 lead facilitators (9 women and 1 man), including 5 women with disabilities and 1 man with a disability, and 2 women without disability who work with DPOs, and 2 women without disability part of the GBV referral network (Casa Vida/Social service, Vulnerable Unit Police/ Protection services)  Training using the Toolkit for prevention of GBV for women and children with disabilities to service providers in Dili (justice, health, MSSI, and social services) on 14 October 2020. A total of 28 participants received the training (18 females and 13 males), including 8 females with disabilities and 5 males with disabilities. The disabilities included 5 with physical disabilities, 3 with visual and 2 with hearing impairments.  Timor-Leste Disability Association (ADTL), in collaboration with organization persons with disabilities (OPDs), engaged 5 (five) speakers and 1 (one) moderator (2 women and 4 males) with different type of disabilities (physical, psycho-social (intellectual), and sensory (visual and hearing) impairments through two TV talk show sessions for raising community awareness on the rights of people with disabilities, accessibility, inclusion, and non-discrimination. | UN Monitoring/ Reports from DPOs  List of GBV facilitator available in Tetum version <https://drive.google.com/file/d/1Mt-ODNfdAOUyBuurE3gmF8PB9qQ9dbph/view?usp=sharing>  ADTL publication about provide GVB training for service providers on ADTL Facebook page <https://web.facebook.com/asosiasaundefisiensiatimorleste/posts/1765416296968324>  Technical report <https://drive.google.com/file/d/1RwJ5nJgpauBeOzMqRu8QRBg7OwNk78Xt/view?usp=sharing>  ADTL publication  on ADTL Facebook page  <https://www.facebook.com/asosiasaundefisiensiatimorleste/posts/1802736096569677> |
| 3.2. Number of persons with disabilities, disaggregated by sex and disability, supported by the project with enhanced skills to conduct capacity building and outreach on the rights of persons with disabilities. | 0 | 10 (7 women and 3 men) | **10 people (9 women and 1 man)** have increased their skills and knowledge on adult learning techniques. They are 6 women with disabilities, 1 man with a disability, and 4 women without disabilities who work with DPOs. The representatives of DPOs, are now able to provide training and facilitate discussions on rights of persons with disabilities and gender-based violence against persons with disabilities to service providers in health, education and justice.  As lead facilitators on the Toolkit for GBV prevention for women and children with disabilities (GBV Toolkit), the trainees participated in a six-month programme, including 10 days of face-to-face training with a facilitation expert, as well as 4 months of on the job mentoring. The 10 facilitators revised the GBV toolkit, incorporating best practices of adult learning  Two persons from DPOs (one male and one female, one of them with a physical and one with a sensory disability) mentored to conduct joint training during inception.  One DPO and two NGOs (TLM-TL and CBRN and ADTL) mentored to prepare GBV toolkit and conduct public rights campaign  **10 people (9 women and 1 man)** have increased their skills and knowledge on adult learning techniques. They are 6 women with disabilities, 1 man with a disability, and 4 women without disabilities who work with DPOs. The representatives of DPOs, organizations working in the area of disability are now able to provide training and facilitate discussions on rights of persons with disabilities and gender-based violence against persons with disabilities to service providers in health, education and justice.  As lead facilitators on the Toolkit for GBV prevention for women and children with disabilities (GBV Toolkit), the trainees participated in a six-month programme, including 10 days of face-to-face training with a facilitation expert, as well as 4 months of on the job mentoring. The 10 facilitators revised the GBV toolkit, including 1 sign languages incorporating best practices of adult learning.  Through collaboration with organization persons with disabilities (OPDs) which lead by Timor-Leste Disability Association (ADTL) conducted two session of TV talk show on changing of community thinking on right of people with disabilities, accessibilities, inclusion, and no discrimination. There were 5 (five) speakers and 1 (one) moderator (2 women and 4 males) from different type of disabilities such physical, physic social (intellectual), seeing, and hearing impairment. | Final training report and TOT Lead facilitator guide (right now available in Tetum version).  Inception report  TLM-TL progress report. ADTL progress report  Training report of lead facilitators  Technical report <https://drive.google.com/file/d/1RwJ5nJgpauBeOzMqRu8QRBg7OwNk78Xt/view?usp=sharing>  Publication in ADTL Facebooks  <https://www.facebook.com/asosiasaundefisiensiatimorleste/posts/1802736096569677> |
| 3.3 Percentage of capacity building programmes that are facilitated or co-facilitated by people with disabilities (disaggregated by sex). | 0 | 70% of the CB programmes supported by the project of which 50% are women. | **By 31 December 2019: Achieved**  80% - 4 out of 5 capacity building activities under the E4C project implemented in 2019 were facilitated or co-facilitated by persons with disabilities.   1. Lead facilitators training – yes (co-facilitated) 2. GBV and Disability lead facilitators training – Yes (co-facilitated) 3. GBV and Disability training – yes (facilitated) 4. Inclusive Budgeting training – yes (co-facilitated)   Trainers on how to use child functional screening tool – No  **By 31 December 2020:**  100% - PRPD awareness raising activities on rights of persons with disabilities, integrating disability in law, policies, planning and budgeting carried out fully by persons with disabilities or jointly by the project team and a person with disabilities, more than 50% of which are women  In 2020, 100% of the capacity development activities supported by the E4C programme involved persons with disabilities as facilitators or co-facilitators.  Capacity development efforts in 2020 included:  1). Two women with physical disabilities co-facilitated the E4CP reflection meeting to capture lessons and in January 2020.  2) Training on how to use the child functional screening tool to 30 enumerators (INFORDEPE, Inspector General, MOEYS and UNICEF) in February, March and August 2020.  3) One woman with a physical disability facilitated GBV prevention training, including human rights/rights of persons with disabilities for 83 health care professionals from community health centre, rehabilitation department of national hospital, community rehabilitation center (CNR) and partners of health service providers. Two men with physical disabilities participated in the training.  A member of the CBR (Community based rehabilitation) Network, co-facilitated with MOH and WHO a full day training for two batches for health care service providers and partners such CNR, HNGV, DPOs and local nongovernmental organization in Dili municipality on Gender Based | Inception report. UNICEF report on training to MoE  Notes of meetings and of seminars  Reports on awareness- raising campaign by ADTL  ADTL Final report <https://drive.google.com/file/d/1MoxFBobLI06xYY6ZW28w10KtMfhR0Mso/view?usp=sharing> |
| 3.4 Number of persons with disabilities, disaggregated by sex and disability, supported by the project with enhanced skills to conduct capacity building on the GBV toolkit | 0 | 10 persons (80% women, 50% persons with disability) | **By 31 Dec 2019:**  10 persons (9 women and 1 man) have enhanced skills to conduct capacity building on the GBV toolkit, of which **7 persons with disabilities** (2 with physical disabilities, 1 with visual disabilities and 2 with hearing disabilities), 1 man with a physical disability,  (2 women with physical disabilities, 1 woman with visual disabilities and 2 women with hearing disabilities) benefitted from refresher training and preparation of the GBV Toolkit Training roll-out organized by ADTL and UN Women on 21 July 2020.  They rolled out the GBV toolkit with 34 representatives from DPOs (25 women and 9 men, of which 3 women with disabilities [1 women with visual disability, and 2 women with hearing disabilities] and 3 men [1 man with physical disability 2 man with visual disabilities] from 16 to 20 December 2019. | ADTL publication about refreshing training for facilitators on ADTL Facebook page  <https://web.facebook.com/asosiasaundefisiensiatimorleste/posts/1685971618246126>  UN monitoring/DPO reports  UN monitoring/ DPO reports |

# 3. Progress towards specific outcomes

Please describe the progress made during the project period towards the realization of each of the outcomes envisaged in the approved project document. To the extent that is possible, clearly outline the link between the outputs delivered by the project and the described outcome-related progress. Please also comment, as appropriate, on the variations in outcome indicators reported in Table 2.

**Outcome 1:**

The Timor-Leste Disability Association (ADTL), a project grantee, started developing a strategy and materials for a national advocacy campaign on the rights of persons with disabilities, that will also include advocacy for the ratification of the CRPD. ADTL conducted desk research on best practices in advocacy from other countries and consulted with partners to learnt from successful behavior change campaigns on various issues in Timor-Leste. It conducted consultations in rural areas, mainly with persons with disabilities and DPOs, as to what messages need to form the basis of the campaign and how to spread these most effectively. The campaign will be launched in the second quarter of 2019 and is expected to contribute significantly to increasing the respect for the equal rights people on the rights of persons with disabilities. The campaign also aims to garner further support from the public for ratification of CRPD.

Guidelines to integrate disability in legislation, policies and plans were finalized by a consultant in October 2018, in a highly participatory process that included individual consultations with various Government partners, civil society, persons with disabilities and donors, as well as a validation workshop. The guidelines, which set out eight steps to consider when drafting laws, policies and plans, were largely informed by the CRPD, General Comments of the Committee on the Rights of Persons with Disabilities and reports by the Special Rapporteur on the Rights of Persons with Disabilities. By end of year, the ADTL had agreed with UN Agencies to conduct joint advocacy for the adoption of the guidelines by the Government, with the aim of strengthening the integration of disability in governance.

The importance of integrating disability in budgeting was raised during the 2019 State Budget debate in the National Parliament, when a Member of Parliament raised concerns about the lack of funding for persons with disabilities. The intervention was made after DPOs and members of an Inclusive Budgeting Working Group made a submission to a Parliamentary Committee setting out concerns that the State Budget was not sufficiently inclusive. The project team contributed to this result as it supported the Inclusive Budgeting Working Group, which evolved from a pre-existing Gender-Responsive Budgeting Working Group supported by UN Women, bringing together over 20 representatives from youth groups, LGBTI, DPOs, and women's organizations. UNICEF and UN Women facilitated a two-day training to the group, that included nine representatives from DPOs (eight women and one male) on State Budget Analysis. The Inclusive Budgeting group subsequently analyzed the 2019 State Budget looking at 5 cross-cutting issues: gender equality, youth, LGBTI, disability and children. They made a submission to one of the Parliamentary Committees and the Women’s Parliamentarian Group (GMPTL), and held a press conference which was broadcasted on national television (see <https://m.facebook.com/story.php?story_fbid=2076220872688021&id=1843854022591375>).

**Outcome 2:**

Orientation training for key education stakeholders in Dili on the rights of persons with disabilities contributed to increasing their awareness on the issue, and was aimed at improving services to meet the education of children with disabilities. A total of 87 education service providers (62 male; 25 female) were trained on the rights of persons with disabilities and the importance of Inclusive Education. Training was undertaken in September 2018 in collaboration with DPOs. Participants included Ministry of Education (MoE) officials, school inspectors, school principals and their deputies and teachers from Dili. In 2019, UNICEF will support the MoE to strengthen interventions in Dili towards the implementation of the Inclusive Education Policy. UNICEF also supported the Ministry of Education coordinate with different Development Partners supporting Inclusive Education to ensure there is no overlap in the support and there is better understanding of the gaps, particularly in supporting capacity development for the Inclusive Education Resource Center and teacher training. A Terms of Reference for a consultant to support a capacity assessment and needs analysis on education needs of children with disabilities was approved by the MoE. The assessment aims to identify recommendations and action plan to support inclusion of children with disabilities.

**Outcome 3:**

The Community Based Rehabilitation Centre (CBRN), a women-led DPO and project grantee, in collaboration with the Leprosy Mission Timor-Leste (TLMTL), started developing a toolkit on GBV against women and girls with disabilities. A toolkit on the same subject developed by DPOs from Fiji with UN Women’s support is serving as a key reference document in this effort. A technical committee to support the drafting of the toolkit, was set up and includes representatives from Government, including the Ministries of Social Solidarity and Inclusion, and Education, GBV Referral network members (Pradet, Casa Vida, Alfela) and DPOs (RHTO). By end 2018, CBRN and TLMTL had carried out seven consultations with key stakeholders and collected local and international research and training materials that will be adapted for the Timor-Leste specific toolkit. The production of the toolkit by DPOs, which will be followed by training of DPO staff on the toolkit, is expected to build sufficient knowledge and skills among DPO staff, with a focus on women, to subsequently strengthen knowledge and skills amongst service providers to better integrate disability and respect the equal rights of persons with disabilities. It should be noted that through technical support in development of the toolkit, knowledge gaps in GBV by DPOs and on disability rights were identified as a factor that will require additional technical assistance as the toolkit is developed.

As the GBV referral network in Dili did not function during the year, apparently due to a lack of Government budget for its activities, there was no progress ensuring DPO participation in these networks. With the approval of a regular 2019 State Budget in early 2019, it is expected that the network will recommence activities and DPOs will take part. In 2018, the project supported the increase in links between DPOs and members of the referral networks. This is expected to facilitate integration of DPOs in the network.

Through the year, in addition to the Toolkit development, UN agencies created opportunities for collaboration between women’s rights organizations and GBV service providers with DPOs, for example in the State Budgeting Process, in a preparatory workshop on CEDAW and LGBTI rights, during international Youth Day, the 16 Days of Activism and International Human Rights Day, among other events. These opportunities contribute to strengthening relationships, awareness of issues and collaboration across groups.

# 4. Equality between men and women

* *How did the project take into account differences in the barriers faced by men and women with disabilities?*
* *In what way did the project advance gender equality?*
* *How have the specific actions undertaken by the project contributed directly to the empowerment of women and girls with disabilities? Please include here baseline and end line data on how women with disabilities were included and impacted while implementing the project. Kindly note that in the expenditure section below projects are requested to state the overall funding spent on these activities.*

The inception activities increased awareness of inequities between men and women, have promoted women with disabilities as speakers and trainers, and ensured that women were equitably represented in the inception workshop (55% of the participants were women, 45% men). The inception phase also helped further clarify the understanding of DPOs and partners on gender equality and women’s rights, and how discrimination affects women with a disability. More specifically, inception workshops raised awareness among participants of multiple forms of discrimination against persons with disabilities, including discrimination based on gender. Data from a 2017 study by the Association of Persons with Disabilities (ADTL) on discrimination and violence against persons with psycho-social disabilities, the large majority of them women, were shared during the inception workshop and is being used in the preparation of the GBV Toolkit. Whereas DPOs have more male than female staff, there was a gender balance as regards the DPO trainers (one male, one female) conducting the inception workshops alongside two female UN staff. Two women with disabilities, and one man with a disability facilitated a specific session to share with participants challenges persons with disabilities face in exercising their rights in Timorese society.

The Knowledge, Attitude and Practices (KAP) survey included specific questions on people’s attitudes and perceptions of women and men with disabilities, looking at their rights to be free from GBV and the right to reproductive health. In the baseline survey, specific attention on was paid to collecting data as to how many male and female lead DPOs, highlighting the limited number of women-led DPOs. The survey also included specific questions related to partners’ attitudes towards gender equality and disability, and their knowledge of the legal framework on gender equality. The guidelines on how to integrate disability in legislation, policy and planning also calls for gender analysis and for the use of disaggregated data, including based on sex.

As foreseen in the project document, but as also recommended in the baseline survey, the focus of building capacity and skills is on women with disabilities. Throughout the project particular attention was given to strengthening the capacity of women representatives in DPOs. The partners in the development of the GBV and Disability toolkit are CBRN and TLMTL, one of them a local network of DPOs led by women. The manager of the E4C project supported Disability Rights Campaign in ADTL is a woman. ADTL itself has several women in senior management. Before the partnership with the two grantees was signed, their work in the area of gender equality was reviewed as part of the UN Women mandatory capacity assessment.

Considering the widespread gender inequality that exists across society, the project will continue to raise understanding and encourage project partners to take action to promote gender equality through their organizations.

# 5. Full and effective participation of persons with disabilities

*Please describe how the project ensured the full and effective participation of persons with disabilities and their representative organizations. Kindly include the following information in your response:*

*How were persons with disabilities involved in the project’s governance as well as in the planning, implementation, monitoring and evaluation phases of the project cycle?*

*Please provide details on how OPDs were engaged in project implementation and describe how OPDs participated and contributed on specific outcomes and outputs.*

*How did the project support OPD engagement in national policy and systems as a result of the UNPRPD project actions?*

*Which specific actions were undertaken by the project that contributed directly to strengthening the capacity of organizations of persons with disabilities including underrepresented groups? (Kindly note that in the budget section below projects are requested to state the overall funding spent on these activities).*

* *In addressing the above points, please elaborate as appropriate on how the heterogeneity of the various groups of persons with disabilities, and their experience of multiple and compound discrimination, was taken into account throughout the project cycle.*
* *Please provide information on the level of representation of type of Organization of persons with disabilities involved.*

The project benefitted throughout the year from the full participations of persons with disabilities, in particular persons with physical and sensory disabilities. Persons with disabilities sit on the Steering Committee of the project, and are actively participating in Steering Committee meetings. The Steering Committee is composed of seven members, one of them representing a key DPO (Ra’es Hadomi Timor Oan), and one of them the umbrella organization of about fifteen NGOs working in the area of disability (ADTL). Both Steering Committee members have a disability (physical) themselves. As also noted in the inception report, persons with disabilities were consulted on the project during the drafting of the project proposal, and provided inputs into the list of the inception activities. Persons with physical and sensory impairments were involved in all inception activities, as participants in the joint planning meeting, consultants for the accessibility audit and as participants but also as speakers and trainers in the rights workshops. Persons with disabilities provided suggestions on the draft questions for the knowledge, attitudes and practices (KAP) survey, and took the final survey at the start of the inception workshops. Trainers with disabilities reviewed the draft workshop agenda as well as the materials for the workshops and conducted training alongside UN staff. Persons with disabilities were consulted when data was collected for the baseline survey.

Training materials used during the inception workshops were sent electronically to persons with visual impairments, and copies were made in Braille. A summary of the project document in Tetum, as well as the agenda of the joint planning meeting, were also made available in Braille. The workshops and joint planning meeting benefitted from sign-language interpretation for participants with a hearing impairment. Venue for all activities during the year were chosen in consultation with DPOs to ensure full access for persons with physical disabilities.

Both grants under the project during the year were provided to a DPO and an NGO working on disability rights. Persons with various types of disabilities were consulted on various occasions in the process of drafting the guidelines to integrate disability in law and policy making and planning. The draft guidelines were shared in electronic form before and after the consultations for comments. A braille version was made available at one of the consultations, as well as sign language interpretation.

All trainings under the project – during inception and as part of project activity implementation - were systematically co-facilitated by persons with disabilities.

## Table 3. Meaningful participation of persons with disabilities

| **Meaningful participation objective** |
| --- |
| Persons with various type of disabilities take part in a meaningful manner in all activities carried out as part of the project |

### Indicators- Meaningful participation of persons with disabilities

| **Indicator\*** | **Baseline\*** | **Target\*** | **End line\*** | **Means of verification** |
| --- | --- | --- | --- | --- |
| % of Project Activities co-facilitated with persons with disabilities (with attention to gender parity) | 0 | 100% | 100% of project activities are co-facilitated by persons with disabilities, with women representing at least 40% of co-facilitators | Annual Project Activity Reports |

*\* Please provide sex disaggregation here as relevant or include indicators on meaningful participation of representative organizations of women and girls with disabilities as well as disaggregate by type of disability.*

# 6. Partnership-Building

How has the project contributed to partnership-building across key constituencies? Please describe the different stakeholders involved and how they worked together. Please indicate if new partnerships (formal and informal) with OPDs have been established.

Both the inception activities and project activities carried out during the year brought together a diverse group of stakeholders, that included UN colleagues, DPOs, civil society, representatives of Government entities, the National Human Rights Institution and donors. Several of those who took part in inception activities noted that this was the first time they directly engaged in a meaningful way with persons with disabilities, and expressed commitment to continue to do so. This approach has continued throughout the year. For example, the women’s network organization Rede Feto has started involving regularly DPOs in their work. They actively engage women with disabilities in the municipal consultations in preparation to their National Women’s Congress, planned for 2019. DPOs, especially women representatives, were actively involved in the preparation of the press release organized by Rede Feto in regards to the State Budget 2019, as noted above.

The Ministry of Social Solidary and Inclusion, the focal ministry in Government for disability noted the positive impact of the activities organized under the project, in that these brought together a range of institutions and organizations from within and outside of Government to jointly discuss disability. It appreciated that this has resulted in increased interest in the issue of disability and rights among key partners, and that, having a wider group of stakeholders with a better understanding of disability and interest disability rights, may facilitate the work of this coordinating Ministry in bringing the actors together to support its key priority actions in the area of disability.

On 30 October 2018, the project officially launched new partnerships with national DPOs, the Timor-Leste Disability Association (ADTL), The Leprosy Mission Timor-Leste (TLMTL) and the Community-Based Rehabilitation Network (CBRN) to address and prevent discrimination and gender-based violence against persons with disabilities in Timor-Leste. The launch took place in the presence and with strong support from UN Resident Coordinator and the Minister of Social Solidarity and Inclusion and the Secretary of State for Equality and Inclusion. It also connected project partners with Ms. Pascoela dos Santos, who won a bronze medal at the ASEAN paralympic games. She gave an emotional speech about the importance of supporting persons with disabilities and the barriers they face in their daily lives.

Through the project, DPOs are now better connected to new partners including the National Parliament, as well as Government Institutions as MRLAP and the GBV service providers (Government, Police, Judicial and CSO) through the development of the GBV toolkit, the development of specific tools that reinforce DPOs participation in the GBV referral mechanism and workshops and consultations which bring all partners together.

UN Women, as part of their capacity development with DPOs on advocacy, has helped ADTL to engage with the National Parliament, through the linkages with the Caucus of Women’s Parliamentarians. UN Women technical expertise encouraged ADTL to conduct a state budget seminar and collaborated with Oxfam International, who also supports ADTL and is funded by the Government of Australia (one of the UNPRPD Multi-Donor Trust Fund contributors). The collaboration contributed to the Parliament Resolution calling government to prioritize disability inclusion in their 2020 annual work plans. The close work with DPOs (CBRN) also enabled stronger partnerships across DPOs, where CBRN identified 190 lead facilitators, 9 DPOs, 1 non-DPO civil society organization, 1 from National Police Vulnerable Person’s Unit, both representing service providers/social sectors.

The UN partners under Empower for Change continue to ensure strong coordination with other international partners working in the area of disability inclusion, gender equality and human rights. For example, UNICEF and UNFPA have continued to work closely with the Australian-funded Partnership for Development (PHD) project to support amplification of efforts and avoid duplication. PHD were involved in the two assessments (Education and Health sector) and in 2020, UNICEF ad PHD partners will support MoEYS with data collection of tools developed by PHD for increasing identification of children with disabilities by schools.

HRAU also work closely with the Ministry of Social Solidary and Inclusion, the lead ministry in Government on disability rights, and Ministry of Justice, who noted the positive impact of the activities organized under the project, in that these brought together a range of institutions and organizations from within and outside of Government to jointly discuss disability.

# 7. Promoting ONE UN approach to disability Inclusion

How has the project contributed to greater UN inter-agency collaboration to advance the rights of persons with disabilities in the country? How has it contributed towards disability mainstreaming within your offices and at the broader UNCT level? Please describe how the UNPRPD project has contributed directly to the UNDIS scorecard reporting and has contributed towards progress against the UNDIS indicators. How has the project contributed to disability mainstreaming within the UN system including the UN Sustainable Development Cooperation Frameworks/ UNDAFs.

As a result of the project, the five UN agencies implementing Empower for Change collaborate on a weekly basis to advance the rights of persons with disabilities. Most of the activities under the project are carried out by more than one agency. The five agencies come together in monthly project meetings to do strategic planning, monitoring of progress, and coordination of project activities. Results and products of activities carried out under the project are brought to the attention of other UN agencies. For instance, the audit of accessibility of the UN compound was shared with the inter-agency Operations Management Team, and this has resulted the UN Common Premises Team starting to make adaptations to the compound to improve accessibility to UN agency offices and to common areas for meeting and events, for persons with physical and sensory disabilities.

Due to the increase in the work on disability rights by a larger group of UN agencies as a result of the project, the issue of disability and the importance of including persons with disabilities in development is being raised regularly by staff of various agencies in different UN platforms. Overall, the UN Country Team and all agencies are supportive of better integrating disability in their work. As an example, the UNCT invited DPOs on a civil society advisory committee that should start functioning in 2019. Products prepared under the project are also shared with all UN agencies, some of these already being used. All UN Agencies which sit on the Operations Management Team appreciated the audit of the compound’s accessibility and expressed support to allocate resources and start making improvements to the UN compound. This included physical changes, but also attitudinal changes among security guards to ensuring smooth entrance of persons with disabilities to the compound. Subsequent to the E4C project launch, the UNCT is facilitating space at the UN Compound for Ms. Pascoela’s association, the Table Tennis Federation, to practice for regional games given the lack of space for the Paralympic players to practice prior to international competitions.

As highlighted through the report, the project has significantly contributed to disability mainstreaming within UN agencies and broader UNCT level.

The Accessibility Survey done in 2018 has contributed to a remodeling of the UN Compound in Dili to make the compound more accessible for persons with physical impairments. UNICEF meeting room, HRAU entrance and the main UN compound conference room were re-designed with enlarged doors and toilets to allow persons with wheelchairs to access. The changes to the compound will continue in 2020 to further improve compound accessibility. Trainings were provided to the maintenance staff and guards on the rights of persons with disabilities.

UN Women is systematically engaging DPO partners in their work through the new partnerships that were established further to the project. DPO partners were invited in the 2019 and 2020 UN Women’s strategic partnership meetings, were part of the consultations on the EU-UN Spotlight Initiative, which is a substantive project to eliminate violence against women and girls in Timor-Leste, and invited to contribute to coordination mechanisms and advocacy efforts on gender equality (via the Gender Equality Coordination Group meetings chaired by the Secretary of State for Equality and Inclusion and UN Women and 16 Days of Activism).

UNFPA has also strengthened their work on disability, which takes a bigger role in the new country programme, through their main partner such as Ministry of Health.

**8. Linkages to national development agenda**

Please reflect on the project’s influence on and linkage to the national development agenda and initiatives including SDGs implementation, monitoring, budgeting etc.

The empower for change project has contribute to the legal frameworks such as CEDAW’s principles, national Strategic Planning, the national action plan on gender based violence, National action plan of women peace and security, national action plan for rights of person with disabilities, national action plan on child rights, including respond to the SDG’s principles and disabilities issues mainstreaming in the State’s Program Budgeting planning ,national human rights, and ADTL and women’s networks on their Gender Responsive budgeting networks.

The *Empower for Change (E4C)* project has maintained strong coordination with stakeholders (MSSI, MoE, MoH, CNR, PhD and DPOs). E4C will continue to coordinate and organize regular meetings with partners, especially at the decision-making level. Considering the diversity of partners that are relevant for realizing rights of persons with disabilities, especially women and girls, the project has invested significant time to build collaborative relationships and coordinate among different partners. For example, to expand collaboration with additional partners supporting DPOs in piloting the functional screening tools for children in primary education, UNICEF utilizes the shared partnership with the MoE to collaborate with the DFAT-funded PHD Programme. Similarly, although DPOs might not regularly meet as a network, the project regularly convened the Steering Committee to ensure updates on the project were shared across the different partners. This also supports joint advocacy, for example, so the government uses the toolkit on GBV prevention and referral networks consider persons with disabilities in their agenda and standard operation procedures.

**9. COVID-19**

Please indicate if the project has contributed directly to disability inclusion in COVID 19 response and recovery plans. Please list specific products and activities.

**DPO organizational preparedness for COVID-19:** The immediate changes brought with COVID-19 has placed a strain on all organizations, including DPOs. The transition to remote ways of operation required organizations to have accessible technology, financial and human resources to manage the new context, alongside the increased strain placed on persons with disabilities in the context of the pandemic. As such, there is a need for increased attention to capacity development efforts to equip DPOs, especially those working on gender-based violence prevention, to have the tools and knowledge to provide support to their members and communities with the context of COVID-19.

**Limited human resources reduce engagement in the justice sector**: The main justice partner for the project, the Legal Training Center, did not join consultations of the toolkit on prevention for GBV, noting the Center might not have dedicated personnel for issues of GBV and disability inclusion. Addressing this challenge, the UN – Empower for Change Project team (UN Women and the Human Rights Advisor’s Unit) is working closely with ADTL and approached the Ministry of Justice to discuss ways to improve access to justice for persons with disabilities. This will include a mapping of the justice service providers for persons with disabilities, specifically survivors of GBV, and roll out the GBV prevention toolkit with justice sector actors as part of linking DPOs to services (justice, social, health, security and education).

The result chain, as described in the project document, remains relevant. The Toolkit on GBV Prevention for women with disabilities was edited and finalized through the end of June 2020 (for the Tetum version). The English version will be finalized in the second half of the year. Considering the delays caused by COVID-19, a revised Annual Workplan is attached.

# 10. Creation of knowledge and communications materials

How has the project contributed to generating new knowledge on how best to promote the rights of persons with disabilities to support policy and system changes? Please also describe in this section any unique expertise and products developed by the project that could be used to support other countries within a south-south cooperation framework. Please list type of knowledge products.

Several knowledge and communication materials were produced as evidence for project activities and for use in outreach during the entire lifespan of the project. The knowledge, attitudes and practices (KAP) survey, the first of its kind in Timor-Leste, has identified gaps and has resulted in recommendations that are informing UN agencies and project partners on the content and how to advocate best for better respect of the rights of persons with disabilities.

The questionnaire used for the KAP survey - produced locally with DPOs, but benefitted from feedback from disability focal points at various UN Agencies and of the UNPRPD Secretariat - could possibly to be used in other countries.

Knowledge and communication materials are made available in English and Tetum to the public online. These are not only used for project activities, but also used at various other meetings/workshops and UN-organized activities (like UN Day, International Human Rights) which are not just focused on disabilities, ensuring that key messages reach a wider audience. Updates on project activities are also consistently integrated in UN Women’s quarterly Newsletters (in English and Tetum), which reach at least 300 national and international stakeholders. The project team is also using the UN in Timor-Leste’s Facebook page to provide updates to the public on project activities.

The project has made UN agencies more aware of using better and adequate means of communication with persons with disabilities. For International Human Rights Day, a video on the Universal Declaration on Human Rights, produced by the Office of the High Commissioner for Human Rights, was adapted locally with local sign language translation (with individual agency, not project support). It can be accessed on

<https://www.facebook.com/watch/?v=1061607880686971>. Similarly, UN Women, UNFPA and UNICEF (separate from the project through in-kind private sector support) developed a video on safety in public spaces that included a person with a disability to raise the visibility of inclusive and gender-responsive public spaces. The video can be accessed at: <https://www.youtube.com/watch?v=TCJ-t4PWzWM&feature=youtu.be>.

| **Name of Product** | **Type of Product (Toolkit, Video, Poster, Report etc.)** | **Purpose** | **Dissemination** | **Links/ Annex** | **Language** | **Accessible formats** | **Validation**  **Has the product been externally validated for CRPD compliance? If so, by whom?** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Video on rights of persons with disabilities to education | Video | Raise awareness on rights of persons with disabilities, particularly children and adolescents to an inclusive education. | UNICEF meetings and UN organized activities | <https://www.youtube.com/watch?v=9c9kNHZ8OhM> | English (To be translated to Tetum). | No | Product was reviewed by DPO representatives and Inclusive Education teachers before it was finalized |
| Inclusive Education posters/banners | Poster / banner | Raise awareness on rights of persons with disabilities, particularly children and adolescents to an inclusive education and links to the SDGs. | UNICEF meetings and UN organized activities | None | English and Tetum | No | Material is adapted from international disability and development consortium |
| KAP survey | Report | Understanding knowledge, attitudes and behavior on disability and rights to inform project activities | Public | UNCT website  https://www.un.org.tl/en/component/jdownloads/category/8-human-rights?Itemid=-1 | English and Tetum | No | No |
| Training materials on rights of persons with disabilities and CRPD | Training materials. | Training during inception phase. | 90 trainees during inception. Subsequently used for teacher training and in outreach in communities by a DPO. | None | Tetum | No | Yes. Based on OHCHR package on CRPD. Adapted to local context with DPOs |
| Guidelines on integrating disability in law and policymaking, planning | Tool | Support law and decision makers into better integrate disability. | With stakeholders consulted during the process of drafting. Key Ministries. | Annex 6 | English and Tetum | No | Draft shared with OHCHR colleagues working on disability for review |
| Report on accessibility of UN compound common areas | Report | Improving UN compound access | UN Operations Management Team | Too large to annex | English | No | No |
| Press Release | Online article published | To inform partners, stakeholders and public of the project | Public | <http://asiapacific.unwomen.org/en/news-and-events/stories/2018/11/un-agencies-partner-with-organizations-of-persons-with-disabilities> | English | No | No |
| Human Interest Story | Online UN Women Newsletter (Quarter 3 2018) | Visibility and voice of women with disabilities | Public | <http://www2.unwomen.org/-/media/field%20office%20eseasia/docs/publications/2019/01/tl-newsletter_q4_2018-compressed.pdf?la=en&vs=1718> | English and Tetum | No | No |
| Quarterly Newsletter article | Online UN Women Newsletter (Quarter 2 2018) | Project Updates to stakeholders, public and partners | Public | Quarter 1 2018: <http://www2.unwomen.org/-/media/field%20office%20eseasia/docs/publications/2019/01/tl-newsletter-q3_english.pdf?la=en&vs=2407>  Quarter 2 2018: <http://www2.unwomen.org/-/media/field%20office%20eseasia/docs/publications/2019/01/tl-newsletter_q4_fm-english.pdf?la=en&vs=2346> | English and Tetum | No | No |
| Two-pager on PRPD E4C project | Flyer | To inform stakeholders, partners and public of the project. | Public | UNCT website  https://www.un.org.tl/en/component/jdownloads/category/8-human-rights?Itemid=-1 | English and Tetum | No | No |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of product** | **Type of product (report, guidelines, assessment etc.)** | **Purpose and process**  **Describe what was the purpose of the product who participated in the development of product (OPDs, NGOs, Academia etc) and if the product was tested/ validated.** | **Link /attachment** | **Accessible formats** | **Validation**  **Has the product been validated by national actors. If yes by whom?** |
| […] | […] | […] | […] | […] | […] |
| […] | […] | […] | […] | […] | […] |

* What communications strategies did the project adopt?
* Please list type of communications materials.

| **Name of Product** | **Type of Product (Toolkit, Video, Poster, publication etc.)** | **Purpose** | **Dissemination** | **Links/ Attachments** | **Language** | **Accessible formats** |
| --- | --- | --- | --- | --- | --- | --- |
| […] | […] | […] | […] | […] | […] | […] |
| […] | […] | […] | […] | […] | […] | […] |
| […] | […] | […] | […] | […] | […] | […] |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Product** | **Type of Product (Toolkit, Video, Poster, Report etc.)** | **Purpose** | **Dissemination** | **Links/ Annex** | **Language** | **Accessible formats** | **Validation**  **Has the product been externally validated for CRPD compliance? If so, by whom?** |
| Video campaign rights of persons with disabilities to change your language | Video | Raise awareness on rights of persons with disabilities, particularly terminology to respect rights of persons with disabilities | Launched on IDD day, 3 Dec, UNCT and ADTL FB page; Twitter | [https://youtu.be/Kdv2yOc\_cKg](https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyoutu.be%2FKdv2yOc_cKg&data=02%7C01%7Cmaria.ferreira%40one.un.org%7Cbbb57aaa34b3443f04d808d778795a5c%7Cb3e5db5e2944483799f57488ace54319%7C0%7C0%7C637110334906723942&sdata=8ILFs%2F4IjntsWzemFYdgyC2%2Bhm6IhW9IMLyIYdGZl7I%3D&reserved=0) | Tetum/local language with English subtitle | Sign language | ADTL Product was reviewed by DPO representatives and project team member |
| Campaign to raise awareness on rights of persons with disabilities posters postcard | Poster / banner | Raise awareness on rights of persons with disabilities, particularly terminology to respect rights of person | ADTL FB page and ADTL organized activities | None | Tetum | No | Material is adapted from international disability |
| Toolkit on Gender based Violence Prevention for women and children with disability | Manual | Guides for lead Facilitators and service provider raising awareness on GBV prevention for women and children with disability (more focus on understanding of the human rights principles, gender, violence and action to end violence against women and children with disabilities) | Toolkit on GBV prevention for woman and children with disabilities have been roll out to DPOs in 2019 and to be roll out for the service provider in 2020 | Not yet available | Tetum/Local language | No | Material adapted from Fiji toolkit, in consultation with stakeholder in the country and reviewed by UN Project team as well, and lead facilitators (of which 7 with disabilities). |
| Training of Trainers for Lead Facilitators manual | Manual | Guide to support lead facilitator roll out the toolkit on GBV prevention for women and children with disabilities in the country | The manual has been validated during training or capacity building for 11 facilitators on GBV prevention (10 women, including 6 women with disabilities, 4 women without disabilities who work for DPOs and 1 man with a disability) | Not yet available | Tetum/local language | Document accessible | Material have been reviewed by Project team (HRAU and UNW) |
| Online UN Women Newsletter (Quarter 1 2019) | Newsletter | Sharing of information to key partners | Email/UN women Regional website | <https://asiapacific.unwomen.org/en/digital-library/publications/2019/06/un-women-timor-leste-quartery-newsletter-q1-2019> | English/Tetum | No | No |
| Online UN Women Newsletter (Quarter 2 2019) | Newsletter | Sharing of information to key partners | Email/UN women Regional website | <https://asiapacific.unwomen.org/en/digital-library/publications/2019/08/un-women-timor-leste-quartery-newsletter-q2-2019> | English/Tetum | No | No |
| Online UN Women Newsletter (Quarter 3 2019) | Newsletter | Sharing of information to key partners | Email/UN women Regional website | <https://asiapacific.unwomen.org/en/digital-library/publications/2019/12/un-women-timor-leste-quartery-newsletter-q3-2019> | English/Tetum | No | No |
| Online UN Women Newsletter (Quarter 4 2019) | Newsletter | Sharing of information to key partners | Email/UN women Regional website | <https://asiapacific.unwomen.org/en/digital-library/publications/2020/01/un-women-timor-leste-newsletter-q4-2019> | English/Tetum | No | No |
| Improving integration of prevention and management of GBV for people with disabilities in the health sector | Assessment Report | Too understand the current available services/support for persons with disability who are survivors of GBV. | Within the project team and was shared with DPOs and relevant Ministry during the workshop I June when consultant presented the draft tools. | Annex | English | No | No |
| Health Sector Response to GBV/IPV: National Guideline for Health Care Providers to address Gender-Based Violence Including Intimate Partner Violence | Guideline | MoH Guideline to health providers on responding to GBV including IPV | At national level and in one region covering three municipalities (Hard copies were provided to participants) the Guideline is yet to be printed in Q1 2020 due to the delay in the final layout format of the document. | Annex | English and Tetum | TBC | NO |
| President of Parliament committed to people living with disabilities | Article | Article about activity | UN women Regional website/ UN Timor-Leste website | <https://asiapacific.unwomen.org/en/news-and-events/stories/2019/06/president-of-parliament-committed-to-people-living-with-disabilities> | English/Tetum | No | No |
| Café Dader (12 December 2019) | TV talk show | Sharing experience on Veronika Tillman’s experience as lead facilitator on the GBV toolkit, as well as her participation to the Beijing +25 preparations in Bangkok. Organized by UN Women. | Timor-Leste National TV (RTTL) (‘28) | <https://www.youtube.com/watch?v=A2jZLDoCuMk> | Tetum | No | No |
| Ita Nia Bainaka (8 December 2019) | TV Debate | Debate on the 16 days to combat against violence against women, jointly with ADTL representative. | Timor-Leste National TV (RTTL) (‘28) | [https://youtu.be/eXJ5WTHJS6A](https://nam01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fyoutu.be%2FeXJ5WTHJS6A&data=02%7C01%7C%7C11cec4401588414b794508d7b82b014b%7C2bcd07449e18487d85c3c9a325220be8%7C0%7C0%7C637180367172094625&sdata=Ctxvw2yPoJGzkY5dXAncF%2BMzdGotr6kDTE3vkmp%2Fkgk%3D&reserved=0) | Tetum | No | No |

# 11. Challenges

Please describe any major challenges that arose during the project’s implementation. Please indicate specifically if due to the COVID 19 emergency the project implementation has been affected.

* National Rehabilitation Center staff were not able to be fully involved due to the conflicting in schedules and priority during the assessment period. As the dissemination of the National Guideline will continue in 2020, WHO, UNFPA collaboration with MoH will ensure that CNR be part of the target participants

The gap in capacity of DPO partners on gender equality and gender-based violence required specific and long-term accompaniment more than foreseen in the initial workplan. Considering the risk of doing harm by proceeding without partners having the adequate knowledge to roll out the GBV Toolkit independently, which would also impact the value added and ownership of the tool, the project team decided to develop the DPO’s capacity by developing the toolkit jointly. Under DPO leadership, the Toolkit was developed with support of international experts on adult learning techniques and GBV.

The 2020 Government budget was rejected by the National Parliament, resulting in a political impasse that may lead to a change of Government or new elections in 2020. This could further delay the ratification process of the CRPD, as well as impact progress on the policy improvements in the Education, Health and Justice sectors. The Project team continues to engage government staff at technical levels to ensure project activities can continue where possible, despite the political transitions.

* Inclusive Education Resource Centers do not have adequate financial and human resources to support their work on disability. UNICEF will work with MoEYS particularly the Inclusive Education Resource Center to increase their partnership with various education partners.
* The ratification of convention for right of person with disabilities haven’t ratify yet, however the national action plan for right of person with disabilities have been approved by council of ministry for another five year through 2025.

Project follow up and Sustainability

Please provide an overview of initiatives planned by various stakeholders in order to follow up on activities initiated by the project. Kindly make sure to cover at least the following stakeholders: relevant parts of Government, organizations of persons with disabilities, UN system, and other development partners operating in the country. Please outline how the medium-to-long term sustainability of the work initiated by the project will be ensured after the end of the Project.

For the project follow-up and sustainability:

* The opportunity to link with current EU - UN Spotlight Initiative – Ending violence against women and girl:
  + UN Women will work closely with human Right advisor Unit for the advocacy works, which continue connecting with OPDs (ADTL) to review of policy and legislation on violence against women and girl including women and girl with disabilities, through SEII – advocacy for the right of person with disabilities.
  + UNDP and HRAU and UN Women to work with Ministry of Justice for the capacity building on GBV prevention and response to violence against women and children including women and children with disabilities, which use toolkit on GBV prevention to roll-out for justice actors.
  + The partnership with CBRN – to enhance person with disabilities/OPDs access to essential services, by using of the existing works from UNPRPD with service provider
* UN Agencies continues integrated of the disabilities issues in to their own program to continue the works to promote and facilitate of the rights of person with disabilities capacity building and access to services (education, health, justice and security).

**13.** **Detailed expenditure in relation to sections 5 and 6 above.**

| **Category** | **Activity (please describe)** | **Budget Allocated** | **Total Expenditure** |
| --- | --- | --- | --- |
| Direct impact on empowerment of women and girls with disabilities |  |  |  |
|  | Attendance of OPDs (woman with physical disability) to Asia-Pacific Beijing+25 Regional CSO Forum from 24 to 26 November 2019. | USD 4,000 | USD 3,964 |
|  | Development of Toolkit for GBV prevention for women and children with disability (GBV Toolkit) | 31,420.00 | 16,385.30 |
|  | Training of Trainers for DPO staff with focus on women with disabilities | 20,000.00 | 23,300.25 |
|  |  |  |  |
| Direct Impact on DPOs’ capacity |  |  |  |
|  | 5 days training to DPOs using the GBV Toolkit | 9,000 | 1,300.00 |
|  | Development of Toolkit for GBV prevention for women and children with disabilities (GBV Toolkit) | 31,420.00 | 16,385.30 |
|  | Training of trainers of staff of DPOs with focus on women with disabilities | 20,000.00 | 23,300.25 |
|  | Advocacy strategy by DPOs and other civil society groups for the ratification of UN-CRPD | 18,386 | 15,150 |
|  | Workshop on Inclusive Budgeting for DPOs and National seminar with the Parliament on Rights of Persons with Disabilities | 2,500 | 3,825 |
| Accessibility costs | Sign language translation | 2,000 | 1,228 |

# 14. Life stories and testimonies

Please provide one or more life stories or direct testimonies to illustrate the results described in sections 2-6. To the extent that is possible, reporting teams are encouraged to share photos, video and other materials to accompany the stories described in this section. Also include testimonies from other stakeholders involved in the project and their perception of the value added of the UNPRPD intervention- representatives of government, civil society including organization of persons with disabilities (DPOs) and private sector as relevant.

| **Name** | **Sex** | **Designation and Organization** | **Is this a testimony from a person with a disability? If so, what kind of disability do they have?[[4]](#footnote-4)** | **Testimony** | **Photo Shared (Y/N)[[5]](#footnote-5)** | **Consent for Use of Photo obtained (Y/N)** | **Photo Caption** | **Photo Credit** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Veronika Tilman | F | Staff, RHTO -ADTL | Physical | Yes | Yes | Yes | Training on rights of persons with disabilities to government, civil society, DPOs and UN agencies | Human Rights Advisor’s Unit |
| Pascoela dos Santos Pereira | F | Table Tennis Federation | Physical | As above | Yes | Yes | Timorese paralympic athlete brings home bronze medal | @UN Women Timor-Leste/ K. Park |

*Testimony 1:*

**Interviewed with Veronica Tilman, Civil Society Representative**

I particularly appreciated the support and the trust that was given to me in the joint training program on rights of persons with disabilities to the government institutions, civil society, DPOs and UN agencies. The programme has increase my knowledge of the rights of persons with disabilities because the subject was very detailed. Honestly, before I was a nervous and also trembling when I stood up and talked in front of many people, but after becoming a training facilitator in this programme, now I felt more confident standing in the front of many people and having the courage to speak. I have also integrated some knowledge in my organization’s own training program to DPOs.

*Testimony 2* (Focus is on promoting positive visibility of women with disabilities – as role models – to counter stereotypes of victimization)

**From Where I Stand: Pascoela dos Santos Pereira – a Timorese athlete with a physical disability**.

“Since I was young, I really loved to watch sports. Unfortunately, I didn’t know how persons with disabilities could enjoy sports, and I was afraid if there would be no way for us to join. I started to find out ways to do sports by myself. When I asked my mum to give me an opportunity to participate in sports, my family really supported me.

However, some people in the community said that I would not be able to do well, making me feel ashamed for the first time. Motivated and encouraged by my family, I found that there is ‘Paralympics’, which is a major international multi-sport event involving athletes with a range of disabilities and realized that I’m not alone. Becoming an athlete was really challenging. It is not just an issue for me, but for my table tennis team. In Timor-Leste, there are not enough places where athletes can practice table tennis, trainers, and equipment. We tend to use a place offered by a congregation of nuns and we are allowed to use it twice a week, on Saturday and Sunday.

Also, I want to highlight that we need support from trainers who have enough information and are able to teach us how to play well. I expect that the project ‘Empower for Change’ will help raise the engagement of persons with disabilities in sport so that the Disability Federation creates places for us to get trained. “If you have skills, do not be shy and hide. Let’s motivate ourselves. If our friends can do something, we also can do it. Don’t be afraid of failure. We can try it again.”

I am Generation Equality: Norberta Vicente Soares da Cruz, person with disability and gender-based violence’s survivor and advocate

***Women with disability often faced extra vulnerabilities to Gender-Based Violence (GBV) in*** ***Timor-Leste. They are frequently treated with less respect and left behind. Now, more activists and human right defenders stand up fight for their right and advance their life.*** ***This is Generation Equality.***

**I am Generation Equality because**

I advocate to end GBV for person with disabilities to accelerate a rights-based response to gender-based violence.

In 2008 I finished High School in my hometown of Viqueque. Then I decided to continue my study at a well-known university in the capital of Dili. I sat the university entrance exam and passed the written test, but when I went for the interview, I was rejected by a professor because of physical condition. I sought for support and some of the professors stood up for me and got me in. I took seven years to earn my degree in Biology, as I did a club foot surgery. When I was emerging from anaesthesia after the surgery, I was sexually harassed in the hospital by a staff . I couldn’t help myself and just cried.

After graduation, I volunteered in a Disable People’s Organization (DPO) called RHTO to lead a research about women and girls with disability’s life experiences in three municipalities. It was my first-time to encounter with group of people with disability. I was in tear because I used to think that I was alone living with this condition. Out of hundreds being interview, majority revealed a highly exposure to discrimination by their family and community. They encouraged me to advocate even more for our voices to be heard and our rights to be respected.

In 2019 I joined CBRN, the first DPO lead by a woman, and a leading advocate in Timor-Leste for extending health, rehabilitation, education and other services to people with disabilities in their communities. I was the coordinator for developing a toolkit that would help prevent gender-based violence to women and girls with disabilities. Since 2019 I am the interim director, as the director resigned to continue her studies.

For the development of the toolkit we partnered with UN Women and the UN Human Right Advisory Unit and with their support we have finalized the training using best adult learning techniques and have since trained 10 people, mainly women, and 5 of us are person with disability, to be a facilitator to roll out training. The toolkit is very inclusive to advocate for person with disability because it covers a range of diverse and inclusive topics. It is targeted for organizations and service providers for GBV and helps them to develop an Action Plan to improve service delivery to women and girls with disabilities.

It was a challenging and exciting time for me, learning about GBV and facilitation. Before I attended the training, I was used to speak in front of a crowd, but not as a facilitator, as I felt less confident about my capacities. But now this changed. I co-facilitate the training and share my knowledge about the toolkit and GBV jointly with my co-facilitators. With the confidence has been built in our team, I’m willing to support other friends to apply the knowledge at their workplace. This toolkit will help raise awareness and shift the services providers attitudes. Person with disability will have the same freedoms and opportunities as everyone else.

Last year in the Women’s Network congress, I met my professor who rejected me during the interview and I brought her back a surprise. I proved her what I am capable! Our ability doesn’t always come through physical strength, but from our thought and willingness to challenge the difficulties. My brain was never disabled.

| **Name** | **Sex** | **Designation and Organization** | **Is this a testimony from a person with a disability? If so, what kind of disability do they have?[[6]](#footnote-6)** | **Testimony** | **Photo Shared (Y/N)[[7]](#footnote-7)** | **Consent for Use of Photo obtained (Y/N)** | **Photo Caption** | **Photo Credit** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| Norberta da Cruz | Female | Director, Community Based Rehabilitation Network (CBRN) | Yes, physical disability |  | Y | Y | Norberta da Cruz: ‘My brain was never disabled’. Director of CBRN TL | UN Women/Helio Miguel, 2020. |

# 15. Photos depicting Project related impact and outcomes[[8]](#footnote-8)

*Please share photos depicting project related impact and outcomes in high resolution image files with appropriate consents of subjects having been taken as well as with the associated credits and along with permission for use in UNPRPD publications and communications materials including website. For photos of children due protocols should be followed for ensuring safety and obtaining consent. Kindly list below the following for photos shared.*

| **Photo No.** | **Photo description for use in alternative text for images to enable persons with visual impairments using screen readers to understand and perceive the image.** | **Consent for Use of Photo obtained (Y/N)** | **Photo Caption** | **Photo Credit** |
| --- | --- | --- | --- | --- |
| 1 | Ministry of Education Head of Inclusive Education Unit and a DPO representative served as resource persons for the orientation training on rights of persons with disabilities and inclusive education. The training was organized by UNICEF for Ministry of Education officials and teachers in Dili in 2nd September 018. | N | Ministry of Education Head of Inclusive Education Unit and a DPO representative served as resource persons for the orientation training on rights of persons with disabilities and inclusive education. The training was organized by UNICEF for Ministry of Education officials and teachers in Dili in September 2018. | ©UNICEF Timor-Leste/2018/VLopes |
| 2 | The first batch of participations to the orientation training on rights of persons with disabilities and inclusive education organized by UNICEF for Ministry of Education officials and teachers in Dili in September 2018. | N | The first batch of participations to the orientation training on rights of persons with disabilities and inclusive education organized by UNICEF for Ministry of Education officials and teachers in Dili (September 2018.) | ©UNICEF Timor-Leste/2018/VLopes |
| 3 | The second batch of participations to the orientation training on rights of persons with disabilities and inclusive education organized by UNICEF for Ministry of Education officials and teachers in Dili in September 2018. | N | The second batch of participations to the orientation training on rights of persons with disabilities and inclusive education organized by UNICEF for Ministry of Education officials and teachers in Dili (September 2018.) | ©UNICEF Timor-Leste/2018/VLopes |
| 4 | Steering committee meeting 2018 | N | Members gather to discuss at the 2018 steering committee. | ©Photo: UNFPA/UN/2018 |
| 5 | Partners from Government, the Provedoria, persons with disabilities and civil society discussed how can better integrate disability in laws, policies and plans, 24 September 2018. | N | Partners from Government, the Provedoria, persons with disabilities and civil society discussed how can better integrate disability in laws, policies and plans, 24 September 2018. | ©Photo: UN/2018 |

| **Photo No.** | **Photo description for use in alternative text for images to enable persons with visual impairments using screen readers to understand and perceive the image.** | **Consent for Use of Photo obtained (Y/N)** | **Photo Caption** | **Photo Credit** |
| --- | --- | --- | --- | --- |
| 1 | The photo shows members of DPOs around a table discussing actively. There are 3 men and 5 women. | N | Consultative meeting on GBV and disability held in April 2019 | UNFPA, 2019 |
| 2 | The photo shows 3 women and 3 men, of which one man from the National police, sitting around a table and discussing. | N | Consultative meeting on GBV and disability held in April 2019 | UNFPA, 2019 |
| 3 | The photo shows Veronika Tillman, from ADTL, standing next to the banner of generation equality in Bangkok. | Y | Veronika Tilman from ADTL, participating at the Beijing plus 25 preparatory meeting in November 2019. | UN Women, 2019 |
| 4. | The photo shows the lead trainees of the GBV toolkit sitting in a circle and listening to the trainer. | Y | Trainees on the GBV toolkit during a training session in August 2019 | UN Women, 2019 |
| 5. | The photo shows a woman using sign language during a group discsussion at the Inclusive Budgeting workshop. | Y | Inclusive Budgeting workshop, May 2019. | UN Women, 2019 |
| 6. | The photo shows three men and one woman sitting at a panel, with a banner above them saying, on Achieving Agenda 2030: Leaving No One Behind through Inclusive Planning and Budgeting for Persons with Disabilities, 13 June 2019 | Y | Opening session of the Seminar on Achieving Agenda 2030: Leaving No One Behind through Inclusive Planning and Budgeting for Persons with Disabilities, 13 June 2019. (From right to left: Representative from Oxfam; Anjet Lanting, Head of UN Human Rights Office; Arão Noé de Jesus da Costa Amaral, President of the National Parliament; Cesario da Silva, ADTL Executive Director.) | UN Human Rights Unit, 2019 |

# 16. Risk Reporting

Please describe any risks to the project’s implementation experienced during the project’s implementation and how these were managed. If other risks were identified during the project implementation period, please add them to the table.

| ***Type of risk\****  ***(contextual***  ***programmatic, institutional)*** | ***Risk*** | ***Occurrence***  ***(Y/N)*** | ***Impact on result*** | ***Mitigation strategies*** | ***Risk treatment owners*** |
| --- | --- | --- | --- | --- | --- |
| Contextual | Change of Government. Government with an emergency budget only, stalling activities, including taking of steps necessary before CRPD is ratified | Yes | Yes | Project support offered to the new Government, and in discussions with coordinating Ministry, project team raised how project helps Timor-Leste to implement CRPD provisions. | All UN agencies |
| Institutional | Limited understanding of disability and gender inequality among key Govt institutions | Y | Yes | Project explicitly integrates activities to strengthen capacities on disability and gender inequality throughout project timeframe and activities | All UN Agencies |
| Programmatic | Competing demands on services providers to take part in training programs organized by various players | Y | Not yet | Consider how project’s key training program on GBV for service providers that will start in 2019 can be integrated in existing programs | DPO partners providing training. UN project agencies |

| ***Type of risk\****  ***(contextual***  ***programmatic, institutional)*** | ***Risk*** | ***Occurrence***  ***(Y/N)*** | ***Impact on result*** | ***Mitigation strategies*** | ***Risk treatment owners*** |
| --- | --- | --- | --- | --- | --- |
| Contextual | New Government is not willing to ratify CRPD | Y | Yes | Continued advocacy through different stakeholders (DPOs, Parliament, CSOs, UN) to the new Government and working with other development partners. | All UN agencies |
| Programmatic | Limited understanding of disability and gender inequality among key partners | Y | Yes | Project explicitly integrates activities to strengthen capacities on disability and gender inequality throughout project timeframe and activities and provided additional capacity support. | All UN Agencies |
| Programmatic | Competing demands on service providers to take part in training programs organized by various players | N | Not yet |  | All UN agencies |
| Programmatic | Limited understanding and capacity of DPOs on gender-based violence | Y | Yes | Specific consultant on GBV recruited to support lead facilitators to increase capacity on GBV. Because of the long-term approach to capacity development, the toolkit development was extended by 6 months. | The Project Team/ UN Women/ UNFPA |
| Programmatic | Referral System, managed by MSSI, is not receiving necessary funds to function | Y | Yes | Continue linking DPOs with GBV service providers and strengthening the skills of DPOs on how to refer cases of gender-based violence cases involving women and girls with disability. | The Project Team/ UNFPA |
| Institutional | Challenges in the capacity of DPO partners to adequately carry out activities under grant | Y | Yes | Continuous mentoring and regular discussion to take stock of progress and challenges to see if additional support is required; partnerships with larger DPOs to mentor smaller DPOs | UN Women |

\* 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.

**Annex 1.**

**The UNPRPD MPTF approved in June 2020 it’s New Strategic and Operational Framework 2020-2025. As the Fund has now the obligation to report against the new results framework, we are requesting projects that were approved before June 2020 to reflect on which Fund’s outcome/outputs/indicators their project is contributing.**

|  |  |  |
| --- | --- | --- |
| **REPORTING AGAINST UNPRPD MPTF RESULTS FRAMEWORK** |  |  |
| **Outcome 1: National Stakeholders are equipped with the knowledge and practical tools for disability inclusive policies and systems** | **Yes/No** | **Brief Description** |
| **Outcome indicators** |  |  |
| 1.1 # of stakeholders in UNPRPD supported countries8 with increased knowledge and capacities to design/reform and deliver inclusive policies and systems (disaggregation by stakeholder Gov/ UN/OPDs/other) | Yes- if anything done in 2020 | OPDs through ADTL andmemberpossible that increased knowledge on the legislative guidelines and also gender and disability-inclusive budgeting |
| 1.2 # of stakeholders in UNPRPD supported countries with strengthened evidence-based knowledge and capacities to assess and respond to gaps in relation to preconditions to CRPD implementation and inclusive SDGS achievement | No |  |
| 1.3 # and % of UNPRPD supported countries that have developed and/or strengthened national guidelines, protocols, and/or standards to design and implement policies and systems | Yes | In 2020, the Empower for Change Programme supported the roll-out of guidelines to support drafting of disability inclusive legislation and also to support health sector responses to gender-based violence against persons with disabilities |
| 1.4 # of stakeholders in UNPRPD supported countries used UNPRPD’s situational analysis to inform their future actions around disability inclusion. (disaggregation by stakeholder Gov/ UN/OPDs) | No |  |
| 1.5 # and % of UNPRPD supported countries that undertook multi-stakeholder capacity building initiatives on disability inclusive policies and systems | No |  |
| **Output 1.1 - Capacity of the national stakeholders is enhanced to develop and implement gender responsive and disability inclusive policies and systems for the CRPD and SDGs implementation** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 1.1.1. # of trainings developed and delivered to support national CRPD /inclusive SDG implementation disaggregated by geography (country, regional and global), topic(thematic area, specifics modules on women with disabilities and underrepresented groups needs and rights, and specific modules on instruments for planning and implementation of UN development activities both in development and humanitarian settings). | **Yes** | 6 times of training conducted using the toolkit on GBV prevention for women and with disabilities. |
| 1.1.2. # of participants (disaggregated Gov (type of ministry)/ UN/OPDs/other) (disaggregated by sex/type of disability/rural urban) participating in capacity building activities funded or provided by UNPRPD programmes | **Yes** | **224** of people reached in total In 2020, 224 Participants attend GVB training, Females 146, 37 are Females with disabilities and 87 Males, 16 are Male with disabilities ( Phycical 23, Blain 8 and Hearing 7)  From 224 participants 20 participants from rural area (Aileu)  via trainings conducted using the GBV Toolkit and other trainings |
| 1.1.3. # of OPDs (disaggregated by type umbrella- disability specific- women-other) that benefitted from capacity building activities (type of activities) funded by UNPRPD programmes to strengthen the capacity of organizations of persons with disabilities. | **Yes** | In 2020 5 OPDs involved in trainings in 2020  RHTO, ETBU, AHDMTL, ACCDTL, ADTL, KDTL, AHDMTL |
| 1.1.4. # of OPDs that have been trained to participate in planning and monitoring of national development plans related to UN/government /other | No |  |
| 1.1.5. # of capacity building activities (disaggregated by type of capacity building) funded by UNPRPD programmes, directed at women and girls with disabilities on their rights and requirements and/or directed at underrepresented groups of persons with disabilities on their rights and requirements. (Number of participants, disaggregated by age, disability and geographical location. | **Yes** | 9 numbers of Trainings conducted using the GBV Toolkit and number of people reached in total in 2020 (223 people 137 female and 87 female, disabilities (27 female and 21) |
| **Output 1.2- Knowledge products are developed and piloted, particularly to address gaps on the preconditions to implement CRPD and disability inclusive SDGs** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 1.2.1. #of knowledge products (disaggregated by product: tools, guidelines, protocols, reports) developed, piloted and disseminated to the relevant stakeholders to inform inclusive practices | Yes | 4 knowledge products (2 videos, 1 poster on legislative guidelines, 1 GBV Toolkit) developed in 2020 |
| 1.2.2 # of knowledge products developed that address gaps related to inclusion of women and girls with disabilities and underrepresented groups of persons with disabilities | Yes | In 2020, two videos produced by the project featured stories of women and men who overcame barriers to access employment and stories of individuals with psycho-social disabilities to raise visibility and awareness of cognitive disabilities and mental health. |
| 1.2.3. # of actors involved in developing and testing of knowledge products (disaggregated by product tools, guidelines, protocols, reports) disaggregated by actor (GOV/ OPDs (disaggregated by type of representation)/ NGOs/Other) | Yes | In 2020, 5 females (2 Females with Physical Impairment 3 females with out Disabilities) 5 Males with Disabilities (2 Physical Impairment, 1 with hearing Impairment, 1 with Psychosocial and 1 with Intellectual) involved in ADTL video campaign from PRADET, ALMA Sisters, APDHAM-Aileu, CLH-Hera, KDT-TL, AHISAUN, ADTL, and athletics federation,  7 of organizations involved in video and brochure development disaggregated by actor (3 OPDs and 3 NGO work for disabilities athletics federation) |
| **Output 1.3 - Evidence generation, learning and exchange mechanisms are developed and functional, based on country level experiences, to increase understanding and inform innovative practices.** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 1.3.1. # of learning and evidence generated to inform inclusive policies and systems disaggregated by type e.g. situational analysis, thematic reports, peer reviewed evidence evaluations and assessments, learning reports, case studies etc. | **No** |  |
| 1.3.2. # actors involved in learning and evidence generated to inform inclusive policies and systems disaggregated by actor (GOV/OPDs, NGOs, etc) | **No** |  |
| 1.3.3. # of established mechanisms/ instances promoting learning and exchange across countries (disaggregation by region/ group of countries/ theme and participants (disaggregation by sex, disability, representation of OPDs, UN ,GOV/other) | No |  |
| 1.3.4. # of reports, case studies and/or other sources of evidence addressing the situation of women with disabilities and underrepresented groups of persons with disabilities disaggregated by disability specific or mainstream and women or underrepresented) | **Yes** | **To be update in the final report** |
| **Outcome 2: Gaps in achievement of essential building blocks or preconditions to CPRD Implementation in development and humanitarian (gender equality, data accessibility, support services, etc.) are addressed** | **Yes/No** | **Brief Description** |
| **Outcome indicators** |  |  |
| 1. # and % of UNPRPD supported countries with inclusive and non-discriminatory laws, national policy/plan for persons with disabilities. | **No** |  |
| 1. # and % of UNPRPD supported countries with inclusive service delivery systems and processes across the sectors. | **No** |  |
| 1. # and % of UNPRPD supported countries with enhanced or newly established mechanisms supporting formal participation of OPDs to support CRPD implementation. | **No** |  |
| 1. # and % of UNPRPD supported countries with enhanced and or newly established multi-stakeholder national and/or sub-national coordination and monitoring mechanisms established to monitor CRPD and include multi-sectoral representation and representation of OPDs | **No** |  |
| 1. # and % of UNPRPD supported countries that have mechanisms in place to support quality, disaggregated and globally comparable data on disability in line with international standards to inform laws, policies and programmes | **No** |  |
| **Output 2.1 - Legislative and policy frameworks are newly developed, reviewed, or reformed to promote equality and non-discrimination, based on CRPD standards, and are translated into plans as relevant.** | **Yes/No** |  |
| **Output Indicators** |  |  |
| 2.1.1. # of newly produced, reviewed, or reformed laws and policies disaggregated by type (disability specific /mainstream) disaggregate by review reformed and developed | **Yes** | 1 policy from Ministry of Public Works to make new construction accessible for persons with physical disabilities. |
| 2.1.2. # of developed and or adopted national action plan/strategy to ensure that persons with disabilities, have access to quality and affordable services,(disaggregation by service) | **Yes** | 1 NAP on Persons with Disabilities finalized by the Ministry of Social Solidarity and Inclusion in 2020. That’s NAP on Person with Disabilities approved by council Ministry on October 2021 for the three years, through October 2030 |
| 2.1.3. # of national strategies and plans with measures in place to ensure disability sensitive budgeting and financial management | **No** |  |
| 2.1.4. # laws and policies (mainstream and targeted) changes addressing rights and inclusion of most marginalized groups (disaggregation women and underrepresented by different groups) | **No** |  |
| 2.1.5. # of laws and policies and plans on VAWG and or SRHR that adequately respond to the rights of women and girls with disabilities (disaggregation by plan-laws-policies and VAWG-SRHR) | Yes | The E4C programme supported line ministries to understand their responsibilities and improve services for women and girl survivors of violence with disabilities |
| 2.1.6. # of developed/strengthened multi-stakeholder coordination mechanisms supporting legal, policy and plans changes (disaggregation by stakeholder Gov/ UN/OPDs/other). | Yes | The E4C programme supported OPDs to make connections with the GBV Referral Pathways to increase accessibility of response services for women and girl survivors of violence with disabilities |
| 2.1.7. # of organizations of persons with disabilities taking part in consultation processes related to legislative and policy changes, disaggregated by kind of organization of persons with disability, constituency represented among persons with disabilities and geographical location. | **No** |  |
| **Output 2.2 –Service delivery systems implementation and processes across the sectors are reviewed/reformed/developed to ensure disability inclusion** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 2.2.1. # of reviewed, newly developed or strengthened service delivery systems and processes disaggregated by precondition (add as footnote) type of change (reviewed developed or strengthened) and sector. | **No** |  |
| 2.2.2. # of reviewed, newly developed or strengthened national implementation systems and processes addressing the rights for women with disabilities in particular around Sexual and Gender Based Violence and SRH services. | **No** | The NAP-GBV under revision by the Secretary of State for Equality and Inclusion, and SEII to present to the council of Ministry in this year, 2022 and this will be included at that time |
| 2.2.3. # of reviewed, newly developed or strengthened national implementation systems and processes addressing the rights the most marginalized groups of persons with disabilities (disaggregation by group (women, underrepresented, etc) | Yes | The E4C programme supported line ministries to understand their responsibilities and improve services for women and girl survivors of violence with disabilities |
| 2.2.4. # of supported multi-stakeholder coordination mechanisms supporting targeted services delivery systems and processes changes (disaggregation by stakeholder Gov/ UN/OPDs/other). | **No** |  |
| 2.2.5. #and of organizations of persons with disabilities taking part in consultation processes, disaggregated by kind of organization of persons with disability, constituency represented among persons with disabilities (including Women and underrepresented groups) and geographical representation e.g. national/local. | **No** |  |
| **Output 2.3 National data collection systems, accountability and monitoring mechanisms, and inter-ministerial coordination systems are reviewed/reformed/developed to ensure disability inclusion** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 2.3.1. # of strengthen /developed national and/or sub-national coordination and monitoring mechanisms for CRPD implementation in line with article 33 | **No** |  |
| 2.3.2. # of OPDs involved in government monitoring and accountability mainstream mechanisms (disaggregation by type of OPDs and type of government mechanism) | **No** |  |
| 2.3.3. # of national mechanisms, institutions, services, programmes, collecting disaggregated data on persons with disabilities (disaggregated by mechanism institution service) according to international standards | **No** |  |
| 2.3.4. # of national coordination, accountability and monitoring mechanisms related to GBV and SRH mainstreaming disability. | Yes | Through the E4C Programme, the women’s machinery staff received training on the GBV Toolkit, which will help include disability issues into the NAP-GBV monitoring |
| **Outcome 3: National development and humanitarian plans and monitoring processes include disability mainstreaming** | **Yes/No** | **Brief Description** |
| **Outcome 3 Indicators** |  |  |
| 1. % # of UNPRPD supported countries with instruments for planning, implementation and monitoring of UN development and humanitarian activities inclusive of disability (disaggregation by process planning-implementation and monitoring) | **No** |  |
| 1. % # of UNPRPD supported countries with adopted national SDGs plans and budgets that are inclusive to persons with disabilities including women with disabilities and underrepresented groups | **No** |  |
| 1. % # of UNPRPD supported countries with formal participation of persons including women and underrepresented groups with disabilities in mechanisms for planning implementing and monitoring the SDGs and/or UN development and humanitarian Instruments (disaggregation UN instruments and SDGs national plans) | **No** |  |
| 1. % # of UNPRPD supported countries with inclusive national implementation and monitoring of COVID 19 response and recovery plans | **No** |  |
| **Output 3.1 - Disability inclusion is strengthened in instruments for planning and implementation of UN development activities at the country level including in humanitarian settings** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 3.1.1. # of Common Country Analysis (CCA) including disaggregated data and analysis of the situation of persons with disabilities. Disaggregated by type of analysis e.g. thematic focus versus cross cutting comprehensive inclusive analysis | **No** |  |
| 3.1.2. #UNSDCF where disability inclusion has been mainstreamed and/or targeted | No |  |
| 3.1.3. # of UNSDCF with at least 3 indicators related to disability | No |  |
| 3.1.4. # of UNSDCF related financial tools with explicit allocations for disability inclusion | No |  |
| 3.1.5. # of joint programmes funded through MPTFs funds where the rights of persons with disabilities have been addressed (disaggregation by disability group) through collaboration with UNPRPD programmes | Yes | In 2020, 2 Joint UN Programmes, the EU-UN Spotlight Initiative and the SG’s COVID-19 Fund, integrated support for and engagement with OPDs to advance rights of persons with disabilities. |
| **Output 3.2 - 'Disability Inclusion in National Development and Humanitarian Planning, Implementation and Monitoring mechanisms is strengthened.** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 3.2.1. # of national and subnational SDGs implementation plans integrating targeted and mainstream actions towards persons with disabilities. | **No** |  |
| 3.2.2 # of adopted/ implemented COVID 19 inclusive response and recovery plans and frameworks containing systematic mainstreaming of persons with disabilities including the most marginalised. | **No** |  |
| 3.2.3. % and # Humanitarian Response Plans (HRPs) and Humanitarian Needs Overviews (HNOs) addressing persons with disability needs and rights; | **No** |  |
| 3.2.4. # of SDGs implementation data collection, monitoring and accountability processes assessing progress against specific disability-inclusion targets | **No** |  |
| **Output 3.3 - Systematic engagement of OPDs is strengthened/enhanced in the national development coordination mechanisms and accountability frameworks (government/UN/Independent) around SDGs** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 3.3.1. # of 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 | **No** |  |
| 3.3.2. # of governmental coordination mechanisms with established consultation processes undertaken to ensure the active involvement of persons with disabilities, including through their representative organizations, in the planning, implementation and monitoring of SDGs | **No** |  |
| 3.3.3. # of OPDs formally participating in UN supported development processes and national SDGs coordination, planning and implementation processes. (disaggregation by type of OPD and process) | **No** |  |
| 3.3.4. # of identified persons with disabilities including through their representative organizations participating in the State’s formulation/implementation of COVID-19 policy responses affecting them | **No** |  |

| **REPORTING AGAINST UNPRPD MPTF RESULTS FRAMEWORK** |  |  |
| --- | --- | --- |
| **Outcome 1: National Stakeholders are equipped with the knowledge and practical tools for disability inclusive policies and systems** | **Yes/No** | **Brief Description** |
| **Outcome indicators** |  |  |
| 1.1 # of stakeholders in UNPRPD supported countries[[9]](#footnote-9) with increased knowledge and capacities to design/reform and deliver inclusive policies and systems (disaggregation by stakeholder Gov/ UN/OPDs/other) | Yes | The partnership with Ministry of Education through UNICEF of Timor-Leste; mapping and National Action Plan for Inclusive education for 2020 – 2024! |
| 1.2 # of stakeholders in UNPRPD supported countries with strengthened evidence-based knowledge and capacities to assess and respond to gaps in relation to preconditions to CRPD implementation and inclusive SDGS achievement | yes | The E4CP contribute to increase of public awareness on rights of person with disabilities and response to the SDG’s principles! |
| 1.3 # and % of UNPRPD supported countries that have developed and/or strengthened national guidelines, protocols, and/or standards to design and implement policies and systems | yes | The E4CP has developed inclusive legislation policy and planning, important how to integrate disability to the state planning |
| 1.4 # of stakeholders in UNPRPD supported countries used UNPRPD’s situational analysis to inform their future actions around disability inclusion. (disaggregation by stakeholder Gov/ UN/OPDs) | yes | UN and OPDs organized national seminar with national parliaments to monitor of the state budget planning and analysis of the budge around disability inclusion |
| 1.5 # and % of UNPRPD supported countries that undertook multi stakeholder capacity building initiatives on disability inclusive policies and systems |  |  |
| **Output 1.1 - Capacity of the national stakeholders is enhanced to develop and implement gender responsive and disability inclusive policies and systems for the CRPD and SDGs implementation** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 1.1.1. # of trainings developed and delivered to support national CRPD /inclusive SDG implementation disaggregated by geography (country, regional and global), topic(thematic area, specifics modules on women with disabilities and underrepresented groups needs and rights, and specific modules on instruments for planning and implementation of UN development activities both in development and humanitarian settings). |  |  |
| 1.1.2. # of participants (disaggregated Gov (type of ministry)/ UN/OPDs/other) (disaggregated by sex/type of disability/rural urban) participating in capacity building activities funded or provided by UNPRPD programmes |  |  |
| 1.1.3. # of OPDs (disaggregated by type umbrella- disability specific- women-other) that benefitted from capacity building activities (type of activities) funded by UNPRPD programmes to strengthen the capacity of organizations of persons with disabilities. |  |  |
| 1.1.4. # of OPDs that have been trained to participate in planning and monitoring of national development plans related to UN/government /other |  |  |
| 1.1.5. # of capacity building activities (disaggregated by type of capacity building) funded by UNPRPD programmes, directed at women and girls with disabilities on their rights and requirements and/or directed at underrepresented groups of persons with disabilities on their rights and requirements. (Number of participants, disaggregated by age, disability and geographical location. |  |  |
| **Output 1.2- Knowledge products are developed and piloted, particularly to address gaps on the preconditions to implement CRPD and disability inclusive SDGs** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 1.2.1. #of knowledge products (disaggregated by product: tools, guidelines, protocols, reports) developed, piloted and disseminated to the relevant stakeholders to inform inclusive practices |  |  |
| 1.2.2 # of knowledge products developed that address gaps related to inclusion of women and girls with disabilities and underrepresented groups of persons with disabilities |  |  |
| 1.2.3. # of actors involved in developing and testing of knowledge products (disaggregated by product tools, guidelines, protocols, reports) disaggregated by actor (GOV/ OPDs (disaggregated by type of representation)/ NGOs/Other) |  |  |
| **Output 1.3 - Evidence generation, learning and exchange mechanisms are developed and functional, based on country level experiences, to increase understanding and inform innovative practices.** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 1.3.1. # of learning and evidence generated to inform inclusive policies and systems disaggregated by type e.g. situational analysis, thematic reports, peer reviewed evidence evaluations and assessments, learning reports, case studies etc. |  |  |
| 1.3.2. # actors involved in learning and evidence generated to inform inclusive policies and systems disaggregated by actor (GOV/OPDs, NGOs, etc) |  |  |
| 1.3.3. # of established mechanisms/ instances promoting learning and exchange across countries (disaggregation by region/ group of countries/ theme and participants (disaggregation by sex, disability, representation of OPDs, UN ,GOV/other) |  |  |
| 1.3.4. # of reports, case studies and/or other sources of evidence addressing the situation of women with disabilities and underrepresented groups of persons with disabilities disaggregated by disability specific or mainstream and women or underrepresented) |  |  |
| **Outcome 2: Gaps in achievement of essential building blocks or preconditions to CPRD Implementation in development and humanitarian (gender equality, data accessibility, support services, etc.) are addressed** | **Yes/No** | **Brief Description** |
| **Outcome indicators** |  |  |
| * 1. # and % of UNPRPD supported countries with inclusive and non-discriminatory laws, national policy/plan for persons with disabilities. |  |  |
| * 1. # and % of UNPRPD supported countries with inclusive service delivery systems and processes across the sectors. |  |  |
| * 1. # and % of UNPRPD supported countries with enhanced or newly established mechanisms supporting formal participation of OPDs to support CRPD implementation. |  |  |
| * 1. # and % of UNPRPD supported countries with enhanced and or newly established multi-stakeholder national and/or sub-national coordination and monitoring mechanisms established to monitor CRPD and include multi-sectoral representation and representation of OPDs |  |  |
| * 1. # and % of UNPRPD supported countries that have mechanisms in place to support quality, disaggregated and globally comparable data on disability in line with international standards to inform laws, policies and programmes |  |  |
| **Output 2.1 - Legislative and policy frameworks are newly developed, reviewed, or reformed to promote equality and non-discrimination, based on CRPD standards, and are translated into plans as relevant.** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 2.1.1. # of newly produced, reviewed, or reformed laws and policies disaggregated by type (disability specific /mainstream) disaggregate by review reformed and developed |  |  |
| 2.1.2. # of developed and or adopted national action plan/strategy to ensure that persons with disabilities, have access to quality and affordable services,(disaggregation by service) |  |  |
| 2.1.3. # of national strategies and plans with measures in place to ensure disability sensitive budgeting and financial management |  |  |
| 2.1.4. # laws and policies (mainstream and targeted) changes addressing rights and inclusion of most marginalized groups (disaggregation women and underrepresented by different groups) |  |  |
| 2.1.5. # of laws and policies and plans on VAWG and or SRHR that adequately respond to the rights of women and girls with disabilities (disaggregation by plan-laws-policies and VAWG-SRHR) |  |  |
| 2.1.6. # of developed/strengthened multi-stakeholder coordination mechanisms supporting legal, policy and plans changes (disaggregation by stakeholder Gov/ UN/OPDs/other). |  |  |
| 2.1.7. # of organizations of persons with disabilities taking part in consultation processes related to legislative and policy changes, disaggregated by kind of organization of persons with disability, constituency represented among persons with disabilities and geographical location. |  |  |
| **Output 2.2 –Service delivery systems implementation and processes across the sectors are reviewed/reformed/developed to ensure disability inclusion** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 2.2.1. # of reviewed, newly developed or strengthened service delivery systems and processes disaggregated by precondition (add as footnote) type of change (reviewed developed or strengthened) and sector. |  |  |
| 2.2.2. # of reviewed, newly developed or strengthened national implementation systems and processes addressing the rights for women with disabilities in particular around Sexual and Gender Based Violence and SRH services. |  |  |
| 2.2.3. # of reviewed, newly developed or strengthened national implementation systems and processes addressing the rights the most marginalized groups of persons with disabilities (disaggregation by group (women, underrepresented, etc) |  |  |
| 2.2.4. # of supported multi-stakeholder coordination mechanisms supporting targeted services delivery systems and processes changes (disaggregation by stakeholder Gov/ UN/OPDs/other). |  |  |
| 2.2.5. #and of organizations of persons with disabilities taking part in consultation processes, disaggregated by kind of organization of persons with disability, constituency represented among persons with disabilities (including Women and underrepresented groups) and geographical representation e.g. national/local. |  |  |
| **Output 2.3 National data collection systems, accountability and monitoring mechanisms, and inter-ministerial coordination systems are reviewed/reformed/developed to ensure disability inclusion** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 2.3.1. # of strengthen /developed national and/or sub-national coordination and monitoring mechanisms for CRPD implementation in line with article 33 |  |  |
| 2.3.2. # of OPDs involved in government monitoring and accountability mainstream mechanisms (disaggregation by type of OPDs and type of government mechanism) |  |  |
| 2.3.3. # of national mechanisms, institutions, services, programmes, collecting disaggregated data on persons with disabilities (disaggregated by mechanism institution service) according to international standards |  |  |
| 2.3.4. # of national coordination, accountability and monitoring mechanisms related to GBV and SRH mainstreaming disability. |  |  |
| **Outcome 3: National development and humanitarian plans and monitoring processes include disability mainstreaming** | **Yes/No** | **Brief Description** |
| **Outcome 3 Indicators** |  |  |
| * 1. % # of UNPRPD supported countries with instruments for planning, implementation and monitoring of UN development and humanitarian activities inclusive of disability (disaggregation by process planning-implementation and monitoring) |  |  |
| * 1. % # of UNPRPD supported countries with adopted national SDGs plans and budgets that are inclusive to persons with disabilities including women with disabilities and underrepresented groups |  |  |
| * 1. % # of UNPRPD supported countries with formal participation of persons including women and underrepresented groups with disabilities in mechanisms for planning implementing and monitoring the SDGs and/or UN development and humanitarian Instruments (disaggregation UN instruments and SDGs national plans) |  |  |
| * 1. % # of UNPRPD supported countries with inclusive national implementation and monitoring of COVID 19 response and recovery plans |  |  |
| **Output 3.1 - Disability inclusion is strengthened in instruments for planning and implementation of UN development activities at the country level including in humanitarian settings** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 3.1.1. # of Common Country Analysis (CCA) including disaggregated data and analysis of the situation of persons with disabilities. Disaggregated by type of analysis e.g. thematic focus versus cross cutting comprehensive inclusive analysis |  |  |
| 3.1.2. #UNSDCF where disability inclusion has been mainstreamed and/or targeted |  |  |
| 3.1.3. # of UNSDCF with at least 3 indicators related to disability |  |  |
| 3.1.4. # of UNSDCF related financial tools with explicit allocations for disability inclusion |  |  |
| 3.1.5. # of joint programmes funded through MPTFs funds where the rights of persons with disabilities have been addressed (disaggregation by disability group) through collaboration with UNPRPD programmes |  |  |
| **Output 3.2 - 'Disability Inclusion in National Development and Humanitarian Planning, Implementation and Monitoring mechanisms is strengthened.** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 3.2.1. # of national and subnational SDGs implementation plans integrating targeted and mainstream actions towards persons with disabilities. |  |  |
| 3.2.2 # of adopted/ implemented COVID 19 inclusive response and recovery plans and frameworks containing systematic mainstreaming of persons with disabilities including the most marginalised. |  |  |
| 3.2.3. % and # Humanitarian Response Plans (HRPs) and Humanitarian Needs Overviews (HNOs) addressing persons with disability needs and rights; |  |  |
| 3.2.4. # of SDGs implementation data collection, monitoring and accountability processes assessing progress against specific disability-inclusion targets |  |  |
| **Output 3.3 - Systematic engagement of OPDs is strengthened/enhanced in the national development coordination mechanisms and accountability frameworks (government/UN/Independent) around SDGs** | **Yes/No** | **Brief Description** |
| **Output Indicators** |  |  |
| 3.3.1. # of 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 |  |  |
| 3.3.2. # of governmental coordination mechanisms with established consultation processes undertaken to ensure the active involvement of persons with disabilities, including through their representative organizations, in the planning, implementation and monitoring of SDGs |  |  |
| 3.3.3. # of OPDs formally participating in UN supported development processes and national SDGs coordination, planning and implementation processes. (disaggregation by type of OPD and process) |  |  |
| 3.3.4. # of identified persons with disabilities including through their representative organizations participating in the State’s formulation/implementation of COVID-19 policy responses affecting them |  |  |

1. As relevant and appropriate, kindly please also disaggregate by type of disability, ethnicity, age, rural/urban location. [↑](#footnote-ref-1)
2. MoJ, MoH, MSS and CNR have no specific monitoring system which includes GBV victims with disabilities. They refer to the GBV service providing organizations, like PRADET, FOKUPERS, ALFeLA and Casa Vida for records. CNR had 3 survivors of GBV in their service in 2017. Other GBV victims with disability were identified at LIBERTA (2), FOKUPERS (2), ALOLA (1) and Casa Vida (1). According to “the Nabilan Program, ending violence against women in Timor-Leste progress report 1 January-30 June”, PRADET, Casa Vida, Uma Mahon Salele & ALFeLa reported together, in the first half year of 2017, that 2% of their 536 new GBV clients have a disability, being 11 persons in a half year, and thus totaling 21 in a year. [↑](#footnote-ref-2)
3. <http://jsmp.tl/wp-content/uploads/OJS-2018-report_ENGLISH.pdf> [↑](#footnote-ref-3)
4. Efforts should be made to capture the voices of persons with different types of disabilities including a balance between men and women with disabilities. [↑](#footnote-ref-4)
5. If yes, please share the photo in a high resolution image file given they have shared consent to their photograph being used in UNPRPD publications and communications materials including website. For photos of children due protocols should be followed for ensuring safety and obtaining consent. [↑](#footnote-ref-5)
6. Efforts should be made to capture the voices of persons with different types of disabilities including a balance between men and women with disabilities. [↑](#footnote-ref-6)
7. If yes, please share the photo in a high resolution image file given they have shared consent to their photograph being used in UNPRPD publications and communications materials including website. For photos of children due protocols should be followed for ensuring safety and obtaining consent. [↑](#footnote-ref-7)
8. Please see Annex 5 UNPRPD Quality Assurance Framework photography notes. [↑](#footnote-ref-8)
9. Throughout all the Logframe countries will always have to be disaggregated by *(disaggregation lower- and middle-income countries, fragile and humanitarian contexts, least-developed countries and countries within the bottom 50 of the Human Development Index* [↑](#footnote-ref-9)