

**TEMPLATE FOR PROGRAMME PROPOSALS**

**Executive summary**

While Tajikistan has not yet ratified the CRPD, the country adopted a National Plan for Implementation of the UPR recommendations in 2013, including consideration to join the Convention. This provides a unique opportunity for the UN to partner with state and non-stake actors to support the required steps leading to signing and ratification of the CRPD and to begin to address some of the key barriers to the realisation of the rights of people with disabilities. These barriers include negative attitudes and discrimination towards people with disabilities, especially women and children; gaps in legislation; the absence of an overall Government strategy to progressively realise the rights of people with disabilities; and poorly developed services for people with disabilities. Organisations of Persons with Disabilities (OPD) and associations of parents of children with disabilities have potential to play a stronger role in promoting the rights envisaged in the CRPD, but need capacity strengthening.

Participating UN agencies propose to provide technical and financial support to state and non-stake actors to: (1) conduct a comprehensive analysis of existing legislation and policies in order to develop a comprehensive national disability strategy and advocate for legislation that is in compliance with the CRPD; (2) develop a comprehensive communication for change strategy and initiate a comprehensive awareness campaign to reduce stigma and discrimination against persons with disabilities, focusing initially on decision makers and opinion leaders such as local authorities, religious leaders, education, health and social protection professionals; (3) Demonstrate a community-based rehabilitation principles in one target district.

1. **Background**

Tajikistan remains the poorest country within the Commonwealth of Independent States (ranked 126th out of 187 countries globally)[[1]](#footnote-1) [[2]](#footnote-2). According to official data, the disability prevalence rate is approximately 2 % for adults and 0.8 % for children, significantly lower than global prevalence rate, indicating the probability of significant underestimation. Persons with disabilities face multiple deprivations and cannot realize their full potential due to legal, social, structural, and institutional barriers. Women, girls and children with disabilities face significantly more difficulties - in both public and private spheres.  Tajikistan’s legislation defines disability based on the charity and medical model and is not in line with CRPD. The societal approach towards persons with disabilities is based on charity, with national and local authorities promoting donations to persons with disabilities.

The 2012 Universal Periodic Review (UPR) recommendations for Tajikistan include a plea to ratify the CRPD and its Optional Protocol; to adopt a new set of criteria for the definition of disability in accordance with international standards; and to increase public awareness to overcome stigma and discrimination. In response, Tajikistan adopted a National Plan for Implementation of the UPR recommendations, which includes consideration to join CRPD by 2015. The activities in this proposal will support implementation of the National Plan.

UN Agencies in Tajikistan have a long track record of partnering with Government to promote inclusive policies, systems and services for people with disabilities in accordance with the Convention. Examples include: Piloting a community based rehabilitation (CBR) model for people with disabilities (2010); establishing a multi-agency Steering Committee on Persons with Disabilities (2011); setting up an inter-sectoral Working Group on Children with Disabilities (2013); adopting an Inclusive Education Strategy (2012); publishing a Position Paper on ‘Better Health for People with Disabilities for an Inclusive Society 2014-2019’ (2013); and drafting a State Programme on Social Protection of People with Disabilities 2014-2015 (2013).

The high level Central Asian Child Protection Forum on Children with Disabilities hosted by the Government of Tajikistan in 2013 resulted in participating countries committing to enact the principles of the CRPD. Following this event and in line with the National Plan for Implementation of the UPR recommendations, Tajikistan established a Governmental Working Group for CRPD (GWGCRPD). The action plan of the working Group includes background work needed to inform the decision to ratify; review and revise legislation for compliance with the CRPD; and an awareness raising campaign. However, the GWGCRPD does not have mechanisms for active participation of persons with disabilities in planning and decision-making processes and lacks technical, methodological, financial and material resources for strengthening and implementation of the action plan.

In Tajikistan, numerous organisations of persons with disabilities exist, two of which are members of the International Disability Alliance. In 2013, UN Agencies and partners facilitated the formation of a Coalition among nine organizations to lobby for the ratification of the CRPD. A Coalition of 23 Associations of Parents of Children with Disabilities is supported by UNICEF. They advocate for the rights of their children and provide their children with a voice. The Ombudsman’s Office is supportive of the rights of persons with disabilities and in partnership with the UN, organizes consultation sessions with OPDs. The Governmental Working Group for CRPD also includes some organizations of persons with disabilities. While these developments show the increased role of the OPDs and the willingness of the Government to collaborate with them, additional support would make emerging partnerships much more productive.

The UN in Tajikistan has also been instrumental in knowledge generation regarding persons with disabilities (Annex 1 lists references used in defining this proposal). The proposed programme seeks to address key problems identified through this work:

1) Legislative and policy frameworks:

a. Legislation is not in line with the CRPD principles

b. There is no national disability strategy;

2) Discriminatory cultural norms:

a. Prevailing stigma and discrimination limits the opportunities of full realisation of the rights of persons with disabilities;

b. Paucity of information and understanding on disability, which adversely affects formulation and implementation of appropriate policies;

3) Weak and non-inclusive institutions:

a. Ineffective disability coordination in Government;

b. limited capacity of OPDs;

c. Limited networking between national and local level OPDs;

d. Lack of awareness on the rights of persons with disabilities;

e. Limited linkages between decision makers and OPDs.

1. **Programme approach**

One of the effective ways to break the cycle of discrimination and to move towards the realization of the rights of persons with disabilities is the ratification and the subsequent implementation of the CRPD. However, changes in law and policy alone are not sufficient. Complementary work is needed to enhance awareness on disability to contribute to attitudinal change (Article 8 of the CRPD) among the public. This change cannot happen unless people with disabilities actively take part in the whole process.

The proposed programme builds on the above mentioned issues through three outcomes it aims to achieve. It promotes mainstreaming of issues of persons with disabilities into policies, legislation, and programmes at the national and sub-national level. It targets knowledge, attitude and behavior change of key decision makers and civil society through better awareness of the situation of persons with disabilities in the country. It will also demonstrate inclusive services for people with disabilities by modeling community-based rehabilitation in one target district. Three main enablers will be central to the programme: Enabling legislative and policy frameworks; empowering cultural norms; and capable and inclusive institutions.

UNDP, UNICEF, and WHO already have on-going disability programs and each participating UN Agency addresses disability issues at different levels (national, regional, district and community). The proposed program will build on the respective expertise and ongoing work of each participating UN Agency. UN Women will share their expertise as a member of the Steering Committee.

The enabling legislative policy framework will focus on promoting the ratification of the CRPD; adoption of a national disability strategy for implementation of the CRPD in line with the international standards; and supporting the review and revision of the legislation. Tajikistan’s main concern regarding ratification is related to the cost associated with implementation of the Convention. Therefore, the program will carry out a cost benefit analysis to demonstrate the cost effectiveness (affordability, efficiency gain, scalability) of ratification of the CRPD.

The proposed programme will also promote the inclusion and the rights of persons with disabilities with a focus on women and children with disabilities through a holistic, rights-based approach, in partnership with organizations of persons with disabilities and associations of parents of children with disabilities. Whenever possible, data will be disaggregated by gender and age. Resources of persons with disabilities are rarely tapped, but they must be at the centre of efforts to build inclusive societies. The UN will continue to strengthen the capacities of the organizations of persons with disabilities and Associations of Parents of Children with Disabilities, so that they can more effectively lobby with the Government and the Parliament of the Republic of Tajikistan to sign, ratify and implement the CRPD. Jointly with these organisations, as well as with the involvement of adults and children with disabilities themselves, an awareness-raising campaign will be undertaken targeting decision makers, including from health, education and social protection sectors, at national, provincial and district levels. The objective will be to reverse stigma, prejudices and negative stereotypes, while promoting supportive and empowering attitudes towards persons with disabilities, with a special focus on children and women with disabilities. The partnership with OPDs and Parents’ Associations will focus on the capacity building of their members on their knowledge of the CRPD; correct use of disability related terminology; and their training and advocacy skills. It will also involve supporting the access of the coalition members to decision makers; provision of financial resources for them to be able to carry out awareness raising activities; and their strengthened coordination and documentation of the work amongst the coalition members. The awareness raising activities will aim to form a positive image of people with disabilities, which emphasizes the ability of all persons. This work will aim to remove informational and attitudinal barriers on behalf of the decision and opinion makers, and will challenge the charity/medical model of disability. Positive stories about persons with disabilities (especially women and children) and their families will be documented and disseminated. A baseline knowledge, attitude, and practice survey will be carried out to inform the design of the awareness raising campaign. Partnerships will also be sought with the private sector during the communication for development campaign to raise their interest in disability issues for possible future funding.

All activities proposed are designed to ensure sustainable progress towards the realization of the rights of people with disabilities. The coordination mechanisms, the enhanced capacity of OPDs, the strategy, changes in attitudes on disability are all planned to maximize the sustainability of progress.

Specifically, Participating UN agencies propose to provide technical and financial support to state and non-stake actors to: (1) conduct a comprehensive analysis of existing legislation and policies in order to develop a comprehensive national disability strategy and advocate for legislation that is in compliance with the CRPD; (2) develop a comprehensive communication for change strategy and initiate a comprehensive awareness campaign to reduce stigma and discrimination against persons with disabilities, focusing initially on decision makers and opinion leaders such as local authorities, religious leaders, education, health and social protection professionals; (3) Demonstrate a community-based rehabilitation principles in one target district.

While a UNPRPD contribution is sought for outcomes 1 and 2, UN agencies will contribute own resources to demonstrate a community-based rehabilitation programme in one target district, in close partnership with the GWGCRPD. This CBR program will focus on health, education and empowerment and build on individual agency expertise in the field of health, rehabilitation, education and social protection. CBR program will be used as an advocacy forum to demonstrate the positive effects of inclusion of persons with disabilities as well as the need for and benefits of legislative change on disability issues in Tajikistan. UN agencies will also contribute their own resources to play a convener role to strengthen collaboration among numerous stakeholders, and bring in their expertise in terms of staffing. The Government and OPDs will contribute with their staff time and provision of space for various meetings.

1. **Objectives and expected results**

**Table 1. Expected impact**

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|  **Impact** |
| The rights of persons with disabilities, especially children and women with disabilities, are protected by legal and policy frameworks and decision and opinion makers in Tajikistan have enhanced awareness leading to increased realization of rights of persons with disabilities  |
| **Impact indicators**  |
| **Indicator** | **Baseline** | **Means of verification** |
| The CRPD is signed/ratified | It is not yet signed/ ratified | Official documentation |
| The long term national development strategy (2016-2030) and its action plan will address disability rights in a way that is consistent with the CRPD | The current national development strategy (2007-2015) does not include disability rights  | Official documentationMonitoring report of the national development strategy  |

**Table 2. Expected outcomes**

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|  **Outcome 1** |
| Barriers holding back the Government’s signing/ratification of the CRPD are overcome through evidence based advocacy and practical advice on implementation of the National Plan for Implementation of the UPR recommendations related to CRPD ratification process.  |
| **Outcome indicators** |
| **Indicator** | **Baseline** | **Means of verification** |
| National Disability Action plan of the GWGCRPD for the ratification and subsequent implementation of the CRPD is adopted. | There is a draft plan of action of the GWGCRPD for the ratification process | Official correspondence regarding the adoption of the action plan |
| National Disability Strategy developed in line with CRPD  | There is no comprehensive disability strategy of Tajikistan is not fully addressing the rights of persons with disabilities that are in line with the CRPD and other international instruments.  | Government decree |
| **Outputs**  |
| **Formulation** | **Tentative timeline**  |
| The legislation and other state regulations (Laws, Codes and Policies) are reviewed and analyzed for UNCRPD compliance paying particular attention to gender and childhood issues  | Quarters 1 and 2 |
| Recommendations for revision of existing legislation and state regulations are provided to high level decision makers - parliament, government and OPDs | Quarter 2 |
| Cost benefit analysis for CRPD ratification process is carried out based on the outcomes/recommendations of the legislative review (cost of accessibility to health, education, social protection services, transport and other priority sector based on legislative review) | Quarter 2 and 3 |
| Results of the cost-benefit analysis are presented to the government, coalitions of organisations of persons with disabilities and associations of parents with children with disabilities and private sector (1 national and 4 regional) to gain support for ratification of the CRPD | Quarter 3 |
| Publications and training materials in accessible formats are developed to raise awareness of policy makers and Organisations for Persons with Disabilities and associations of parents with children with disabilities on legislative gaps, outcomes of cost-benefit analysis, and need of a comprehensive national disability strategy dissemination  | Quarter 3 and 4 |
| Forming of an inter-sectoral working group for development of a comprehensive national disability strategy  | Quarter 3 |
| Exposure visit on development and implementation of national disability legislation conducted | Quarter 4 |
| Trainings for development of a National Strategy on Disability for relevant officials on CRPD is implemented: Parliament, Office of the President, Ombudsman Office, Ministry of Justice, Ministry of Health and Social Protection, Ministry of Labour and Migration, civil society organizations, coalitions of organisations of persons with disabilities and associations of parents with children with disabilities | Quarter 5 and 6 |
| Revision/amendment of legislation for CRPD compliance with involvement of ODPS and parents associations | Quarter 6, 7, 8  |

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|  **Outcome 2** |
| National, provincial, district decision and opinion makers’ awareness and positive attitudes about needs, abilities and rights of persons with disabilities have increased with a focus on women and children with disabilities  |
| **Outcome indicators** |
| **Indicator** | **Baseline** | **Means of verification** |
| At least 20 percent of key decision and opinion makers have increased awareness on the abilities and rights of persons with disabilities  | There is no baseline but qualitative studies indicated negative attitudes against persons with disabilities | Baseline and endline KAP survey results |
| **Outputs**  |
| **Formulation** | **Tentative timeline**  |
| Baseline knowledge, attitude, and behaviour survey is carried out to collect information on knowledge, attitudes, practice regarding inclusion of persons with disabilities with a focus on women and children with disabilities (data to be disaggregated by gender and age) | Quarter 2  |
| Need and resource analysis of the organisations of persons with disabilities and associations of parents of children with disabilities is conducted.  | Quarter 2 |
| A multiyear communication for development strategy for an awareness raising campaign developed with elements of a social marketing in partnership with organisations of persons with disabilities and associations of parents of children with disabilities | Quarter 3 |
| Communication for development/Awareness raising material in accessible format (through identified multiple means) developed to document and disseminate positive stories about persons with disabilities (with a focus on children and women with disabilities) and their families. | Quarter 4 |
| Training material on awareness raising sessions for provincial and district level decision, opinion makers and private sector developed  | Quarter 4 |
| Training carried out for mix team of representatives of organisations of persons with disabilities and associations of parents of children with disabilities and government trainers on awareness raising sessions  | Quarter 4 |
| Campaign carried out as per the communication strategy  | Quarter 5, 6,7, |
| Material developed to document the campaign | Quarter 8 |
| Endline KAP Survey | Quarter 8 |

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| Outcome 3 |
| One district implements Community Based Rehabilitation (CBR) principles targeting mainly children and women with disabilities to demonstrate the benefits of implementation of the principles of CRPD and a functional multi-sectoral approach to inclusive development for future scaling up. |
| **Outcome indicators** |
| **Indicator** | **Baseline** | **Means of verification** |
| At least 300 women and children benefit from CBR services in a selected district  | There are very few inclusive services in Tajikistan.  | Reports from monitoring and Evaluations visitsReports from the service providers  |
| **Outputs**  |
| **Formulation** | **Tentative timeline**  |
| An interagency coordination mechanism on persons with disabilities is established | Quarter 2  |
| At least 50 district level decision makers and service providers (health, education and social protection) are trained on issues related to disability and CBR principles | Quarter 3, 4 |
| At least 4 kindergartens and schools are made inclusive and teachers and principals trained to welcome the children with disabilities | Quarter 4 |
| Members of at least 3 OPDs and Associations of Parents of children with disabilities participate in a series of capacity building workshops | Quarter 2, 3, 4, 5, 6 |
| The C4D campaign is launched in the district targeting decision and opinion leaders for attitudinal change | Quarter 5, 6,7, |
| A small scale assessment is carried out to reveal actual numbers of persons with disabilities | Quarter 8 |

1. **Management arrangements**

A steering committee will be established to coordinate the work of the participating UN Agencies. Its membership will consist of assigned representatives from UNICEF, UNDP, WHO, and UNWomen, Ministry of Health and Social Protection, Ombudsman’s Office, two representatives of the OPD Coalition for CRPD, 2 representatives of the Coalition of Association of Parents with Children with Disabilities, a representative from the CBR district, and 2 young persons with disabilities. Special attention will be given to ensure that a range of disabilities is represented in the steering committee. The steering committee will be responsible to ensure that the programme is launched and implemented in line with the national commitments and programme priorities. It will be responsible for the strategic direction and overall coordination arrangements as well as the way in which the programme will ensure a streamlined, efficient flow of communication with national partners. The steering committee will be co-chaired by the Ombudsman’s Office and UNICEF. UNICEF will serve as the secretariat and will ensure dissemination of the meeting minutes within one week of the meeting. The Steering Committee will meet quarterly, or more frequently if requested by more than 2 members. The members of the Steering Committee will carry out monitoring activities, and will sign off on the material developed while making sure that the meetings held and material developed meet accessibility criteria. UNRC and the UNCT will provide overall guidance and oversight of the implementation of the programme. UNDP and WHO will provide their implementation progress reports to UNICEF as per the timeline and UNICEF will compile and submit progress reports to all relevant parties.

The technical support expected from headquarters and /or regional offices of the participating UN Agencies and other UNCT include the following: good examples of National Disability Strategies; piloted, validated KAP surveys; good examples of awareness raising campaigns targeting decision and opinion makers as well as the private sector; and methodology for costing studies. Support that will be requested from the international disability alliance through the local partners is the work on budgeting that they carried out in the past for possible use in terms of the methodology and or lessons learnt.

**Table 3. Implementation arrangements**

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| **Outcome number** | **UNPRPD Focal Point** | **Implementing agencies**  | **Other partners** |
| 1 | UNDPWHO  | * UNDP
* WHO
* UNWOMEN
* UNICEF
 | Government PartnersParliament, Ombudsman’s Office, Ministry of Health and Social Protection, Government Working Group on CRPD, Coalitions of organisations of persons with disabilities and associations of parents of children with disabilities |
| 2 | UNICEF | * UNICEF
* WHO
* UNWOMEN
* UNDP
* Coalitions of organisations of persons with disabilities and associations of parents of children with disabilities
 | Coalitions of organisations of persons with disabilities and associations of parents of children with disabilities; Parliament, Ombudsman’s Office, Ministry of Health and Social Protection, Government Working Group on CRPD, Provincial and District authorities |
| 3 | N/A (no funding requested) | * UNICEF
* WHO
 | Ministry of Health and Social Protection of the Population; International and national NGOs |

1. **National ownership, participation and partnership-building**

This proposal was developed in consultation with the relevant stakeholders and is built on national ownership. In 2013, two special sessions were organized jointly by UN Agencies and the Ombudsperson’s Office for the members of the OPDs to strengthen their lobbying work for the ratification of the CRPD. The Chairperson of the Committee on CRPD also participated in one of these meetings. Also, as part of the post MDG consultations, sessions were held with participation of Government representatives and persons with disabilities where similar recommendations were made; namely ratification of the CRPD, addressing stigma and discrimination, and a better governance system. The National Stakeholders Dialogue on Victim Assistance and Disability Rights organised in March, 2014 was also used as a platform to engage with all concerned regarding the drafting of this proposal.

The programme will support the National Plan for UPR recommendations, to ensure ownership. The steering committee will report to the GWGCRPD on a quarterly basis. It is clear that two years is not enough for attitudinal change throughout all layers of society and all legislation being brought in line with international standards. However, having an action plan on CRPD ratification that is developed in consultation with all relevant stakeholders will set the country on the right track. The multiyear communication for development strategy for awareness raising on disabilities that will be developed and adopted will be in place for continued implementation beyond the lifetime of the UNPRPD-funded activities. During the communication for development campaign efforts will be made to leverage funds from the private sector. The capacity building of stakeholders is a key feature of this project, positively influencing its sustainability and ownership. The partner organisations will have the necessary skills required to implement and support initiatives led by civil society for inclusion of persons with disabilities as well as to undertake advocacy initiatives in the future as per the communication for development strategy and with possible funding from the private sector.

The dynamics established between Coalitions of OPDs and associations of parents of children with disabilities, civil society and authorities (at national, provincial, and district levels) will remain after the end of the project and communication tools developed will continue to be used. In addition, this project will develop the capacity of the partner organisations in developing advocacy and awareness-raising activities in Tajikistan. Persons with disabilities and their representative organizations will have a main say in the design of the awareness raising activities strengthening their legitimacy in this field. Awareness raising campaigners will gain greater recognition from their members, the Government, and potential donors who would have seen the impact of their work.

The piloting of CBR will provide a platform for local ownership and will be used as a showcase to the national level. The participation of a representative from the CBR district in the steering committee will also give a voice for the local level implementers at the national level decision making process. The overall programme, and in specific the CBR implementation at the district level, will contribute towards building positive images of the persons with disabilities and will hence strengthen their advocacy power with the decision and opinion leaders.

1. **Knowledge generation and potential for replication**

The steering committee will have the overall responsibility to monitor the proposed indicators and overall progress of the programme. Each partnering UN Agency will be responsible for the specific work they are undertaking and will report back to the Steering Committee as per the monitoring and evaluation tools. The legislative review, cost analysis, the KAP Survey will provide the baseline against which to monitor progress. Good practices will be documented and shared widely.

This programme will be the first large scale UN joint effort on disability in Tajikistan. It is expected that this programme will be a catalyst for UN delivering as one, in partnership with the organisations for persons with disabilities. International expertise will be sought to review the legislation and carry out an innovative cost benefit analysis for the ratification of CRPD. The results of the analysis will be useful not only for Tajikistan but for other countries in the Region.

An exposure visit will be undertaken to another country for selected members of the disability steering committee and/or the GWGCRPD to show them a working model. In addition, international expertise for developing the communication for development campaign and capacity building will be sought.

There has been no large scale awareness campaign on disability in Tajikistan to date. The strategy to be developed will consist of several layers, the first layer of which are the decision and opinion makers (to be implemented during the course of this programme). This campaign will use the results of a Knowledge-Attitude-Behaviour, Practices (KAP) survey on disability issues. The study will systematically gather experiences on the current situation and the level of knowledge and attitudes towards persons with disabilities of different layers of society: decision makers, opinion leaders, service providers, private sector and population at large. The results will provide all relevant stakeholders (Government and others) valuable insights to address attitudinal change on the issue of disability. This will enable development of innovative, appropriate communication tools, which will be the basis for awareness raising and advocacy work to be used throughout the country and possibly in other countries in the region. Both the comprehensive KAP study and communication for development campaigns are new initiatives for Tajikistan. The end line survey will show the results. The CBR initiative (outcome 3), that will be implemented jointly in one district, will strengthen the existing participatory local development processes for policy change (outcome 1) to demonstrate practical methods for inclusion of persons with disabilities (outcome 2). The local level efforts will be featured to support national level scaling up for policy and attitudinal change towards persons with disabilities. Participating agencies will integrate disability rights into the core business through mainstreaming. For example, in the CBR piloting during promotion of inclusive education, the regular schools will be adjusted to integrate children with disabilities. Especially the small-scale study on the actual disability prevalence will be used for revisiting the disability rates in Tajikistan. Particular attention will be given for supporting women and children with disabilities in claiming their rights.

1. **Budget**

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| **Overall budget** |  |  |  |  |  |  |
| Category | Item | Unit cost | No. units | Total cost | Request from UNPRPD Fund | UNDPRPD POs cost-sharing | Other partners cost-sharing |
| Supplies, commodities, equipment and transport | Publications (for C4D campaign including in accessible formats) (UNICEF) | 20 | 1500 | 30000 | 30000 |   |   |
| Publications (WHO) | 25 | 500 | 12500 | 12500 | - |   |
| Publication (UNDP) | 25 | 500 | 12500 | 10000 | 2500 |   |
| Personnel (staff, consultants, travel and training) | P4 (20% of time for 24 month project) (UNICEF) | 1628 | 24 | 39072 |   | 39072 |   |
| NOB Communication Officer (10% of time for 24 month project) (UNICEF) | 292 | 24 | 7008 |   | 7008 |   |
| GS 6 Supply Assistant(5%of time) (UNICEF) | 114 | 24 | 2736 |   | 2736 |   |
| International consultant to develop the C4D strategy and to train the trainers for its implementation (UNICEF) | 500 | 40 | 20000 | 20000 |   |   |
| Travel of International consultant (UNICEF) | 2000 | 2 | 4000 | 4000 |   |   |
| DSA of International Consultant in Dushanbe (UNICEF) | 190 | 15 | 2850 | 2850 |   |   |
| DSA of International Consultant in Dushanbe (UNICEF) | 70 | 6 | 420 | 420 |   |   |
| P3 (20% of time) (WHO) | 2767 | 24 | 66408 | 0 | 66408 |   |
| Assistant (10% of time) (WHO) | 100 | 24 | 2400 | 0 | 2400 |   |
| Personnel (Disability Support Unit Officer (50%) (UNDP) | 900 | 24 | 21600 | 0 | 21600 |   |
| International Consultant's daily fee (UNDP) | 550 | 120 | 66000 | 43000 | 23000 |   |
| Local Consultants' daily fee (UNDP) | 150 | 150 | 22500 | 18000 | 4500 |   |
| Travel: return tickets to/from TJK (UNDP) | 2500 | 2 | 5000 | 5000 |   |   |
| Travel: local DSA (UNDP) | 190 | 120 | 22800 | 4112 | 18688 |   |
| Training costs (UNICEF) | 1216 | 6 | 7294 | 7294 |   |   |
| Meals (UNICEF) | 25 | 300 | 7500 | 6250 | 1250 |   |
| Rent of hall and equipment (UNICEF) | 700 | 12 | 8400 | 4200 | 4200 |   |
| Per diem and transport (UNICEF) | 90 | 300 | 27000 | 22500 | 4500 |   |
| Establishment of CBR in one district (UNICEF) | 45000 | 1 | 45000 | 0 | 45000 |   |
| Establishment of CBR in one district (UNDP) |   |   | 10000  |   | 10000 |   |
| Establishment of CBR in one district (WHO) | 40000 | 1 | 40000 | - | 40000 |   |
| Training (WHO) | 1114.75 | 12 | 13377 | 13377 | - |   |
| Meals (WHO) | 25 | 480 | 12000 | 12000 | - |   |
| Rent of hall and equipment (WHO) | 1500 | 12 | 18000 | 18000 | - |   |
| Per diem and transport (WHO) | 90 | 480 | 43200 | 43200 | - |   |
| Meals (UNDP) | 15 | 120 | 1800 | 100 | 1700 |   |
| Rent of hall (UNDP) | 500 | 6 | 3000 | 3000 | 0 |   |
| Facilitators' fee (UNDP) | 150 | 6 | 900 | 900 | 0 |   |
| Contracts | Baseline and endline KAP Study (UNICEF) | 19000 | 2 | 38000 | 38000 |   |   |
| Other direct costs | Monitoring and evaluation (UNICEF) | 10000 | 1 | 10000 |   | 10000 |   |
| Travel (WHO) | 500 | 12 | 6000 | 6000 | - |   |
| Translation (WHO) | 200 | 12 | 2400 | 2400 | - |   |
| **Subtotal** |  | **132146** | **4862** | **631665** | **327103** | **304562** |  |
| Indirect costs (7%) | PSC/HQ | 9250 | 340 | 44217 | 22897 | 21319 |   |
| **Total** |  | **141397** | **5202** | **675882** | **350000** | **325881** |  |

ANNEX 1

The list of publications/ documents used as reference

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| # | Name of research | Year | Language | By |
|  | Children with disabilities in Tajikistan. A Situation Analysis Report. | 2006 | EnglishRussian | UNICEF Tajikistan ( carried out by Children Legal Centre, UK) |
|  | Child Protection in TajikistanMapping actors, roles, benefits and costs | 2008 | English and Russian | UNICEF Tajikistan (carried out by Maastricht Graduate School of Governance, Maastricht University) |
|  | Cost-benefit analysis of child protection policies in Tajikistan | 2009 | English and Russian | UNICEF Tajikistan (carried out by Maastricht Graduate School of Governance, Maastricht University) |
|  | World Health Organization and World Bank, World Report on Disability, Geneva | 2011 | English | World Health Organization, 2011 |
|  | Interim Narrative Report of the Mission East on Enabling Civil Society to Promote the Rights of People withDisabilities | 2011 | English | Mission East in Tajikistan |
|  | Impact of Labour Migration on “Children left behind” in Tajikistan  | 2011 | English | UNICEF Tajikistan ( carried out by Oxford Policy Management)  |
|  | The rights of children with disabilities to education: A rights –based approach to inclusive education | 2012 | English | UNICEF |
|  | Situation Analysis of children’s and women’s rights in Tajikistan | 2012 | English | UNICEF Tajikistan ( carried out by Oxford Policy Management) |
|  | Disability Rehabilitation Position Paper | 2013 | English | WHO, Ministry of Health and Social Protection |
|  | Global Initiative on Out- of-school Children. Tajikistan Country Study | 2013 | English Russian | Global Initiative of UNICEF, UNESCO Institute for Statistics |
|  | «Analysis of social assistance for children with disabilities: budgets and bottlenecks in Isfara, Kulyab and Rasht districts», Analytical report | 2013 | English | UNICEF Tajikistan (carried out by M-Vector) |
|  |  The Right of Children with Disabilities to Education: A Right-Based Approach to Inclusive Education, Position Paper,  | 2012  | English | UNICEF RO for CEECIS, |
|  | Creating Inclusive Policies, Systems, and Services for Children with Disabilities in Accordance with the UN Convention on the Rights of Persons with Disabilities (CRPD), The Fourth Child Protection Forum for Central Asia Dushanbe, Tajikistan 1 – 3 August, 2013 (unpublished outcome report) | 2013 | English | UNICEF |
|  | Situational Assessment of Disability Issues in Tajikistan and Development of UNDP Tajikistan’s Agenda Relating to Persons with Disabilities  | 2013 | English | UNDP |
|  | State Programme on Promoting the Rights of Persons with Disabilities for 2014-2015  | 2013 | English | UNDP in close consultations with the Government, ODPs and development partners |
|  | Report on the findings of the child rights situation analysis in Kulob, Isfara and Rasht | 2014 | English | UNICEF Tajikistan (carried out by Cultural and Training Center “Tomiris”) |
|  | TNMAC Conference on Disability (Unpublished outcome report) | 2014 | English | UNDP, TNMAC |
|  | Disability in Tajikistan - Situational Analysis on Disability Issues with focus on Health and Rehabilitation(Draft report) | 2014 | English and Russian | WHO and Ministry of Health and Social Protection, Government of Tajikistan in close collaboration with Government ministries, OPD, disability and development partners |
|  | Situational Analysis on Wheelchairs and Mobility Devices in Tajikistan | 2014 | English and Russian | WHO funded report by Operation Mercy.  |

1. www.medt.tj [↑](#footnote-ref-1)
2. http://hdr.undp.org/sites/default/files/Country-Profiles/TJK.pdf [↑](#footnote-ref-2)