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**UN Partnership to Promote the Rights of Persons with Disabilities**

ILO | OHCHR| UNDESA | UNDP | UNESCO | UNFPA | UNICEF | WHO

**TEMPLATE FOR PROGRAMME PROPOSALS**

**Executive summary**

Max 250 words

*Please provide a short summary of the proposed intervention.*

There is general agreement that more efforts need to be made by the UN system to promote the collection of statistics on persons with disabilities and for this to be done in a coordinated way, ensuring that data are comparable and in line with the UN Convention on the Rights of Persons with Disabilities. The proposal takes into account the views expressed by UN Member States during the March session of the UN Statistical Commission.

The project proposal addresses this objective and does so by building on work currently being developed by WHO, UNICEF and the Washington City Group on Disability Statistics. The proposal will also trigger the work to be led by the ILO in the area of employment.

The UNPRPD support will contribute to a process of mutual learning among UN agencies on these different initiatives and produce a joint narrative which will ensure a One UN approach in the area of disability statistics, which will be a strategic contribution to the post-2015 development framework, which shall include more attention to persons with disabilities, also through having more disability disaggregated data.

1. **Background** Max 750 words

Article 31 of the United Nations Convention on the Rights of Persons with Disabilities (CRPD) mandates that ratifying States Parties “collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the present Convention”. The post-2015 framework negotiations are signaling both the need for more attention to persons with disabilities and more attention to statistics.

Valid, reliable and relevant disability data are essential for a variety of purposes including:

* to understand the situation of people with disabilities ( for example disability prevalence, environmental barriers to undertaking everyday activities and to participating in different areas of society, such as education, work, civic society as well as unmet needs for support).
* to inform disability policy , programme development and service delivery
* to report against national, regional and international conventions and strategies
* to advocate for the rights of people with disabilities.
* to support national monitoring mechanism envisaged by Article 33 of the CRPD

**Challenges**:

Disability is a complex and multidimensional experience and poses several challenges for measurement. Approaches to measuring disability vary across countries and influence the results and are the main reason why reported disability prevalence rates vary so widely. Operational measures of disability vary according to the purpose and application of the data, the conception of disability, the aspects of disability examined, the definitions, question design, reporting sources, data collection methods, and expectations of functioning.

Data on all aspects of disability – impairments, activity limitations, participation restrictions, related health conditions, environmental factors - are seldom collected and yet are important for constructing a complete picture of disability and functioning. Data on environmental factors is particularly weak across the world. Tracking these data in the country’s population over time, which is not done in the majority of countries, is necessary to support monitoring of disability related policies and programs and to understand trends.

While there has been considerable progress in developing standard instruments that focus on specific aspects of disability, further development is needed to:

(i) promote the collection of comprehensive, comparable and relevant information that helps countries construct a complete picture of disability – including environmental factors - with particular relevance to disability policy and

(ii) support national and global monitoring of the implementation of all aspects of the CRPD.

Furthermore, one important aspect of quality improvement is the involvement of people with disabilities and their representative organizations in disability data collection. This is important because people with disabilities are both subjects and users of data. As subjects it is important that surveys are conducted in ways that promote the maximum participation of individuals with disabilities – note often proxies are used. Furthermore, data collected and analyzed on disability needs to be made available in ways that are easily understood and can be used by persons with disabilities.

Despite progress in developing standard questionnaires, there is a lack of disability data that will help member states and other stakeholders mainstream disability in all policies and monitor their impact. There is an urgent need to improve the collection, analysis, synthesis and dissemination of data on disability in a manner that is accurate and comparable across different settings, countries and populations and that also enables countries to fulfill their commitments under the CRPD as well as to inform and support the monitoring of future international development goals. All of these actions should consider how people with disabilities are included.

**Opportunities**:

There are considerable and commendable efforts to improve disability data being made in many countries and by major international agencies. All current efforts indicate that they use the International Classification of Functioning: Disability and Health (ICF) as a framework. A common framework is important to ensure that data is relevant at the national level but also comparable at the global level.

This project builds on and creates stronger linkages between existing efforts and will contribute to addressing the following gaps such as:

* no comprehensive data collection tools that capture all aspects of disability ; that provide for cross-nationally comparable data; and incorporate internationally developed question sets
* an absence of well tested questions on environmental factors
* limited capacity in data collection on child disability and the lack of guidance on how best to collect data on children with disabilities

**2. Programme approach** Max 1000 words; ref. UNPRPD SOF Sections 2.1-2.5, Annexes 1 and 2

The proposed approach focuses on improving population level disability data which is relevant to the development of national policies and programs.

The statistical tools that the project will be the basis of the programme proposal are the following:

* The **Washington Group on Disability Statistics** has developed a **short set of six questions** on functioning for the adult population for use in censuses and surveys (see Annex). The questions collect information on activity limitations (seeing, hearing, mobility, cognition, self-care, communication). The questions were developed with the intended purpose to provide information on equalization of opportunities, for example in areas of education, employment, and social life by combining these questions with other available census or survey data. The WG has also developed an extended set of questions on functioning more suitable for surveys that expands upon the short set by adding additional domains of functioning and more information per domain - for example, functioning with and without assistance. Finally, an extended set of questions on the environment is under development.
* **UNICEF and the Washington Group on Disability Statistics** have developed a survey module on child functioning and disability. UNICEF has supported the collection of data on child disability in more than 50 low- and middle-income countries through the Multiple Indicator Cluster Surveys (MICS), a survey programme that was developed by UNICEF in the mid-nineties to collect data on the situation of children and their families. In 2011, UNICEF decided to undertake a review of the MICS questionnaire on disability and has partnered with the Washington Group on Disability Statistics (WG) in the development of a new survey module on child functioning and disability. Several expert consultations were carried out on the module between 2011 and 2014. The module has undergone extensive cognitive testing (Belize, India, Oman, USA, and Montenegro) and field testing (Italy, Cameroun, Haiti, and India).[[1]](#footnote-2) Additionally field testing is planned in two more countries. A manual and training material are currently being prepared to support the implementation of the module.
* **UNICEF and the Washington Group** **on Disability Statistics** are also working on the development of guidelines for the production of statistics on children with disabilities. The manual is currently being drafted with inputs from more than 40 international experts. The purpose of this document is to provide guidance for those considering collecting data on children with disabilities. The manual discusses conceptual and theoretical issues related to data collection, data analyses, data dissemination and data use for advocacy and programming. Several expert consultations were carried out on the manual, between 2012 and 2014.
* **UNICEF and the Washington Group** **on Disability Statistics** are also working on the development of an extended set of questions on child disability that will focus on environmental factors and participation, within the context of school. The purpose of this set of questions is to provide information that can inform policy, to provide a statistical summary of environmental influences on participation in school, and to identify areas with key bottlenecks that can be followed-up on.
* The **Model Disability Survey (MDS)** is being developed by WHO and the World Bank with the involvement of a broad range of stakeholders[[2]](#footnote-3). The aim is to provide data on all aspects of disability - impairments, activity limitations, participation restrictions, related health conditions and environmental factors. The questionnaire has been developed drawing on the best questions from all national disability surveys (n= 179) carried out since 2000 and then strengthened after a review of relevant micro data (n= 17 surveys). As such it builds on existing work on disability data. An expert consultation was carried out on the draft Questionnaire in December 2012. A revised draft was produced and reviewed by a subset of this expert group in April 2013. The questionnaire underwent four rounds of cognitive testing. The questionnaire is being revised in light of the findings from the cognitive tests and will be further cognitively tested and then piloted in 2014.
* The ILO produced a working paper on "**Statistics on the employment situation of people with disabilities: A Compendium of national methodologies**”. This Compendium, published in 2004, describes the methodologies currently in use in 95 countries to compile statistics on the employment situation of people with disabilities. This data in addition to other surveys and micro data (WHO will make available those that they have collected) will be used as a basis for developing a disability module on work and employment that can be used in National Surveys.

This project will contribute to:

* support the development, testing and use of data collection tools on all aspects of disability, including on the environmental barriers faced by persons with disabilities in education, health, work and employment;
* testing the different approaches to measuring disability developed by the Washington Group, UNICEF and WHO/ World Bank, assessing the relationship between the questions and revising the Model disability survey in response to the findings;
* define the complementarities and synergies between the different statistical tools and provide clear guidance on their use, including in connection with mainstream population based surveys through a joint narrative agreed among all involved UN agencies and taking into account the views of other stakeholders, including DPOs.

The approach will focus on:

* partnership building between different UN agencies and the Washington Group
* joint learning, exchange and knowledge creation
* leveraging existing resources within UN agencies working specifically on disability data

**3. Objectives and expected results** Max 1000 words

**Table 1. Expected impact** *(there will be* *only one such table in the programme proposal)*

|  |  |  |
| --- | --- | --- |
| **Impact** | | |
| Countries use disability data collection tools that have been tested and can help them meet their commitments under Article 31 of the CRPD specifically collection of statistical data that is relevant for policy and practice. | | |
| **Impact indicators** | | |
| **Indicator** | **Baseline** | **Means of verification** |
| Availability of rigorously tested data collection tools on disability, including questions on environmental factors  Availability of guidelines on how to collect, analyze and use data on children with disability  Availability of the Model Disability Survey instrument and related operational manual  Joint guidance document explaining the synergies and complementarities of the different statistical tools and how these can be used | 0 | Finalized data collection tools, including the UNICEF/WG manual for the production of statistics on children with disabilities, UNICEF/WG module on school environment and participation, the MDS instrument and related operational manual and a draft ILO employment module |
|  |  |  |

**Table 2. Expected outcomes** *(there will be as many such tables as the outcomes envisaged by the programme)*

|  |  |  |
| --- | --- | --- |
| **Outcome 1** | | |
| Countries have access to a range of statistical tools which they can use to collect information on adults and children with disabilities in order to promote their rights in compliance with the UN CRPD | | |
| **Outcome indicators** | | |
| **Indicator** | **Baseline** | **Means of verification** |
| 1. Results of cognitive and field tests of different formulations of the Model Disability Survey 2. Results of the cognitive and field tests of the WG/UNICEF module on child functioning and disability 3. Results of the cognitive testing of the UNICEF/WG school environment module 4. UNICEF/WG guidelines for the production of statistics on children with disability 5. WHO/ World Bank Manual on the Model Disability Survey 6. Draft ILO employment (environment) module prepared for subsequent cognitive and pilot testing 7. Draft UNFPA module on sexual and reproductive health and rights prepared for cognitive and pilot testing | No information is currently available on all aspects of disability | Questionnaires finalized; reports of the cognitive and field testing are made available; manuals drafted, draft employment module finalized, draft SRHR module finalized |
| **Outputs** | | |
| **Formulation** | | **Tentative timeline** |
| 1.1.a Cognitive testing of two versions of the MDS specifically the functioning and environment modules in conjunction with the WG/ National Center for Health Statistics and the Survey research Center of the Institute for Social Research, University of Washington. | | Second quarter 2014 |
| 1.1.b The results of the cognitive testing in English are analyzed, a report written and disseminated in conjunction with all stakeholders | | Second quarter 2014 |
| 1.1.c The Model Disability Survey is revised in light of the results and feedback received from expert meeting | | Third quarter 2014 |
| 1.1.d The Model Disability Survey is piloted in two countries | | Second half in 2014 |
| 1.1.e The instrument, manual and training instructions for the implementation of the MDS are finalized in light of the testing | | Second half in 2014 |
| 1.2.a The module on child functioning is piloted in two countries | | Second half of 2014 |
| 1.2.b Implementation manual of the child functioning module is finalised | | Second half of 2014 |
| 1.3.a The UNICEF/WG school environment module is cognitively tested in two countries | | Second half of 2014 |
| 1.3.b The results are analyzed and the UNICEF/ WG school environment module is revised in light of the results and feedback received from expert meeting | | Second half 2014 |
| 1.3.c The manual and training instructions for the implementation of the module are finalized | | Second half 2014 |
| 1.4 UNICEF/WG guidelines for the production of statistics on children with disabilities and related training material are finalized | | First half of 2015 |
| 1.5. Based on experience of other UN agencies, the ILO employment (environmental) module is produced with inputs obtained at ad hoc expert meeting | | First half of 2015 |
| 1.6. Based on experience of other UN agencies, and the practice by UNFPA country offices in developing and rolling-out disability surveys and monographs, the UNFPA SRHR module is produced | | First half of 2015 |

|  |  |  |
| --- | --- | --- |
| **Outcome 2** | | |
| Countries are provided with a narrative agreed among UN agencies on the purpose of the different statistical tools, their synergies and complementarities. | | |
| **Outcome indicators** | | |
| **Indicator** | **Baseline** | **Means of verification** |
| Jointly agreed narrative on the complementarities and synergies of the different statistical tools and their use in connection with mainstream population based surveys | 0 | The actual document and the number of agencies and other stakeholders that endorse it |
| **Outputs** | | |
| **Formulation** | | **Tentative timeline** |
| 2.1. An expert meeting is held at which the results of the cognitive testing of the MDS and of the UNICEF/WG environmental module are presented and discussed in order to draw lessons and explore synergies. UNICEF will also share lessons from field testing of child functioning module. The expert meeting, coordinated and hosted by the ILO, will be attended by the involved UN agencies, the Washington Group, IDA/IDDC and other project partners involved in the different elements of the project. | | Second half of 2014 |
| 2.2. Taking into account the conclusions of the expert meeting, a joint narrative is being developed among all participating UN agencies (and the WG) to explain to countries and other stakeholders, including DPOs, the complementarities of the different tools and in particular on how to ensure the comparability of data. To help with this, an independent consultant will be selected by a panel composed of the involved UN agencies. The consultant will have participated at the expert meeting. The work of the consultant will be supervised by a team of experts from all involved UN agencies, WHO and UNICEF playina a leading role in this. | | First half of 2015 |

**4. Management arrangements** Max 500 words; Ref. UNPRPD SOF Section 3.1.2

* WHO will lead on the pilot testing of the WHO/ World Bank Model Disability Survey (Output 1.1)
* UNICEF will lead on the development and testing of the UNICEF/WG module on child functioning and disability and related manuals (Output 1.2)
* UNICEF will lead on the development and testing of the UNICEF/WG module on school participation and related manuals (Output 1.3)
* UNICEF will lead on the development of the guidelines for the production of statistics on children with disabilities (Output 1.4)
* ILO will lead on the development of a module on work and employment (Output 1.5)
* UNPFA will lead on the development of a module on sexual and reproductive health and rights (Output 1.6)
* ILO will lead in the coordination of the expert meeting (Output 2.1)
* UNICEF and WHO for developing the joint narrative (Output 2.2)
* ILO will coordinate inputs and consolidate reports from all the partners to the UNPRPD and the MDTF.

**Table 3. Implementation arrangements**

|  |  |  |  |
| --- | --- | --- | --- |
| **Outcome number** | **UNPRPD Focal Point** | **Implementing agencies** | **Other partners** |
| 1 | WHO for MDS  UNICEF for the child functioning disability module  UNICEF for the school environment module  UNICEF for guidelines on the production of statistics on children with disabilities  ILO for the (environmental) employment module  UNFPA for the SRHR module | * WHO * UNICEF * ILO * UNFPA | * Washington Group * IDA/IDDC * UN DESA * National Statistics Offices * World Bank * Academic institutions * GIZ * Statistics Norway |
| 2 | ILO for expert meeting  UNICEF and WHO for joint narrative | * UNICEF * WHO * ILO * DESA * UNFPA | * WG * IDA/IDDC * UN DESA * National Statistics Offices * World Bank * Academic institutions * GIZ |
|  |  |  |  |

**5. National ownership, participation and partnership-building** Max 500 words; ref. UNPRPD SOF Section 3.1.3

The key feature of the proposal is the partnership approach which should seek to ensure that the different initiatives currently in process (or planned) not only learn from each other, but also produce comparable data. In other words, a one-UN approach in terms of disability statistics, as a major contribution to the “data revolution” which is being promoted as part of the post-2015 development framework and in response to the UN CRPD and in particular its article 31.

This coordination among the different UN agencies , the Washington Group and other key stakeholders work to avoid confusion and improve comparability of disability data as requested by the UN Statistical Commission.in March 2014.

The participation of representative DPOs in the different stages of the process will also ensure a better understanding of the functioning of each of the tools, the role that DPOs can play in their implementation and in the dissemination of results and their use for effective UN CRPD compliant policy design.

**6. Knowledge generation and potential for replication** Max 500 words ref. UNPRPD SOF Section 3.1.4

Knowledge generation and dissemination is an integral part of the project ensuring a high potential for replication. Outcomes 1 and 2 will contribute to the development of tools that can be used across countries to collect comprehensive information on disability and for the first time comparable information on environmental factors.

**Budget** *Please use the template below, based on the format approved by the UNDG Financial Policy Working Group, to provide overall budget information. Please also utilize the attached Excel spreadsheet to provide a budget breakdown by fund recipient (Sheet 1) and by outcome (Sheet 2).*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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 | Travel costs to countries for international consultant (Output 1.1) | 8000 | 4 | 32000 | 12,000 | 20,000 (WHO) |  |
| Local travel for enumerators (Output 1.1) | 4000 | 2 | 8000 | 5,000 | 3,000 (WHO) |  |
| Travel cost for Output 1.2 | 4,000 | 2 | 8,000 |  | 8,000  (UNICEF) |  |
| Travel costs for Output 1.3 | 6,000 | 3 | 18,000 |  | 18,000  (UNICEF) |  |
| Personnel (staff, consultants, travel and training) | Personnel costs (statistician, manual developer etc)Output 1.1) | 40000 |  | 120000 | 50,000 | 70,000 (WHO) |  |
| Personnel cost for output 1.2 | 20,000 |  | 20,000 | 10,000 | 10,000  (UNICEF) |  |
| Personnel cost for output 1.3 | 90,000 |  | 90,000 | 30,000 | 60,000  (UNICEF) |  |
| Personnel cost for output 1.4 | 70,000 |  | 70,000 | 30,000 | 40,000  (UNICEF) |  |
| Training of counterparts | Training cost for output 1.1 | 5,000 | 2 | 10,000 | 5,000 | 5,000  (WHO) |  |
| Training cost for output 1.2 | 5,000 | 2 | 10,000 | 5,000 | 5,000  (UNICEF) |  |
| Training cost for output 1.3 | 5,000 | 3 | 15,000 | 5,000 | 10,000  (UNICEF) |  |
|  |  |  |  |  |  |  |
| Contracts | Commission research on survey questions for work and employment (Output 1.5) | 30000 | 1 | 30000 | 20000 | 10,000 (ILO) |  |
| Commission research on survey questions for sexual and reproductive health and rights (Output 1.6) | 25,000 | 1 | 25,000 | 20,000 | 5,000  (UNFPA) |  |
| National personnel from statistical offices to carry out pilot tests of the MDS (Output 1.1) | 40000 | 2 countries | 80000 | 38,000 | 42000 (WHO) |  |
| Production of manual and training material (Output 1.2) | 10,000 | 1 | 10,000 | 5,000 | 5,000  (UNICEF) |  |
| Production of manual and training material (Output 1.3) | 10,000 | 1 | 10,000 | 5,000 | 5,000  (UNICEF) |  |
| Production of manual and training material (Output 1.4) | 30,000 | 1 | 30,000 | 20,000 | 10,000  (UNICEF) |  |
| Commission work on joint narrative (Output 2.2) | 20000 | 1 | 20000 | 20000 |  |  |
| Other direct costs | Expert meeting for module on employment (Output 1.5) | 30000 | 1 | 30000 | 30000 |  |  |
| Expert meeting to discuss results of MDS and of child and environmental module (Output 2.1) | 37000 | 1 | 37000 | 37000 |  |  |
|  |  |  |  |  |  |  |
| **Subtotal** |  |  |  | **673000** | **347000** | **326000** |  |
| Indirect costs (7%) |  |  |  | 24290 | 24290 |  |  |
| **Total** |  |  |  | **697290** | **371290** | **326000** |  |

**ANNEX 1: ENVIRONMENTAL FACTORS**

The UNICEF **School participation Module** on disability covers:

**1. Attitudes**: This barrier includes parent’s perceptions of disability, their perceptions of other’s attitudes towards disability, societal and cultural norms, other children’s attitudes towards disability, and school staff perceptions of disability.

**2. Getting to school:** This barrier includes transportation - including the characteristics of all aspects of the system and the need for assistance-, environmental and social safety, and weather/seasonality.

**3. Accessibility within the school:** This barrier includes physical accessibility (entryway, corridors, bathrooms, lunch room, classroom, common areas etc.), information accessibility, communication accessibility, programmatic accessibility/adaptability, and teacher and school attitudes towards disability.

**4. Affordability:** This barrier includes fees, costs, and competition for resources associated with attendance, the availability of types of assistance (financial, assistive devices, rehabilitation), and non-educational.

The **Model Disability Survey** looks at the following environmental factors:

1. **Personal assistance**;
2. **Assistive devices** as they relate to mobility and self-care, seeing, hearing and communication, work, education, home, in the community;
3. **Environmental factors** - that facilitate or hinder people with disabilities from doing what they want or need to do as related to school, work, health care services, shops, banks, transportation, places of worship, natural environment, lighting etc.;
4. **Information access**;
5. **Relationships**;
6. **Attitudes**

1. The tests were conducted in each country by research teams composed by different stakeholders, including representatives of national statistical officers, government institutions, organizations of persons with disabilities and academic institutions. Training on cognitive testing techniques was provided by the Questionnaire Design Research Laboratory (QDRL) at the National Center for Health Statistics (NCHS). See video available here <http://youtu.be/sMcI3jEJaZU>. [↑](#footnote-ref-2)
2. Stakeholders include representatives of: national statistical offices (i.e. producers of data); ministries and other agencies ( i.e. users of data); organizations of persons with disabilities (i.e. subjects of data collection and beneficiaries or not of decisions taken on the basis of data); United Nations organizations, the Washington Group on Disability Statistics; disability and development organizations; academic and research organizations; and donors for whom disability data is perceived as a priority. [↑](#footnote-ref-3)