



GUIDANCE DOCUMENT ON DISABILITY INCLUSION

FOR EDMUND RICE DEVELOPMENT PROJECTS

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SECTION 1:

INTRODUCTION

Background:

Edmund Rice Development's (ERD) vision is a world where people access opportunities and live free of poverty and injustice. In order to ensure that we are reaching the furthest behind, ERD embarked on a capacity development project on Disability Inclusion and mainstreaming in 2025. The first step in building capacity around disability inclusion was an assessment of ERD-funded projects. The assessment provided findings on the level of disability inclusion in ED development projects, strengthened ERD's commitment to disability inclusion and clarified what ERD would like to see reflected in funded projects.

Following the assessment, this Disability Inclusion Guidance Note was developed. This document builds on the disability inclusion efforts of ERD partners, many of which have already made progress on integrating disability inclusion into their projects. This Guidance Document aims to promote the systemic application of a disability lens across all ERD-funded projects.

Purpose:

This Guidance Document provides practical directions on how to strengthen disability inclusion across ERD-funded projects. It is intended to support project partners in developing, designing and implementing projects that are disability inclusive. While not country- or culture-specific, the Guidance is grounded in the Convention on the Rights of Persons with Disabilities (CRPD), which serves as the overarching international framework.

Scope:

This guidance supports:

- ERD staff,
- Partner/member organisations and projects supported by ERD.

It is primarily focused on programming, but could also inform related areas such as advocacy, fundraising and organisational learning.

SECTION 2:

WHAT IS DISABILITY

The United Nations *Convention on the Rights of Persons with Disabilities (CRPD)* reflects a significant shift in global understanding and responses towards disability. ERD adopts the definition from Article 1 of the CRPD, which describes persons with disabilities as:

“ [persons] who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.¹”

The CRPD also recognises disability as:

“ ... an evolving concept that results from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others.”

Evolving approaches to disability

- **MEDICAL MODEL**

Historically, disability was viewed from a medical or charity lens, focusing on the individual's impairments. This model views disability as an individual problem to be fixed, often leading to segregation (e.g., special school) and reinforcing stereotypes.

- **SOCIAL MODEL**

The social model shifts the focus from the individual to society. It views disability as the result of systemic barriers imposed by society. According to this model, society disables people through inaccessible environments, negative attitudes and institutional practices. The solution lies in social change, such as inclusive education, inclusive health programmes and inclusive humanitarian action. Removing barriers in society - physical, social, and communicational - is an essential precondition for enabling persons with disabilities to participate. Disability is seen as part of human diversity, and the responsibility for removing barriers lies with the governments, institutions and society.

- **HUMAN RIGHTS-BASED APPROACH**

The human rights approach to disability builds on the social model. It recognises persons with disabilities as subjects of rights and the states as duty bearers, responsible for upholding these rights.

¹ · <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities/article-1-purpose.html>

It views the barriers that exclude people with disabilities as forms of discrimination and provides avenues for persons with disabilities to report and demand change when they face such barriers.

Under the rights-based model, persons with disabilities are entitled to equal opportunities and participation in society. States have the responsibility to enact and enforce laws that ensure full inclusion in all aspects of life – school, family, community, and work – and to regulate the private sector to promote non-discrimination and create enabling environments. Notably, persons with disabilities are recognised as having the capacity to claim their rights and make decisions for their lives.

Ultimately, the way people perceive, and experience disability varies across countries and contexts. In some cultures, disability may be viewed as a curse or the influence of an evil spirit, leading to stigma and exclusion at the family, community, and societal levels. Misconceptions and fear, especially among people with little exposure to disability, can reinforce discrimination.

SECTION 3:

HOW TO APPLY A DISABILITY LENS TO ALL PHASES OF THE PROJECT CYCLE

This section provides guidance on how to include persons with disabilities and their perspectives in project cycle management. Including a disability inclusion dimension in project design means considering how interventions impact all persons with disabilities, including women, men, girls and boys with disabilities.

➔ 1. NEEDS ASSESSMENT

Disability inclusive context analysis

A. INTERSECTIONALITY

People with disabilities are not homogeneous and, depending on their gender, age, ethnicity and other individual characteristics, they may be affected by multiple and compounding forms of discrimination such as sexism, ageism, racism, and ableism. Together, these factors create intersectional inequalities and intensify barriers to inclusion.

Therefore, context analysis should include an intersectional analysis of inequality and barriers. This helps identify strategies and solutions that respond to the realities of diverse populations and ensures that interventions do not unintentionally reinforce exclusion.

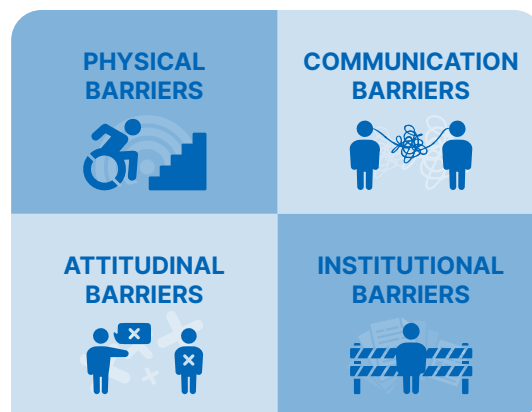
A helpful resource is the UN Women and PRPD toolkit on intersectionality, which includes a tool for intersectional context analysis.²

² · <https://www.unwomen.org/sites/default/files/2022-01/Intersectionality-resource-guide-and-toolkit-en.pdf>

B. BARRIERS TO INCLUSION

A key element of a disability-inclusive context and needs analysis is the identification of barriers that prevent people with disabilities from fully participating in society and accessing services. These barriers are often interconnected and must be examined across multiple dimensions:

- **Attitudinal barriers:** Stereotypes, stigma and beliefs that devalue people with disabilities.
- **Physical barriers:** Inaccessible infrastructure, including buildings, roads and transport systems.
- **Institutional barriers:** Laws, policies and practices that exclude or fail to accommodate people with disabilities.
- **Communication barriers:** Information not available in accessible formats, such as sign language, Braille, or plain language formats.



Identifying and addressing these barriers enables the design of more inclusive projects that respond to diverse needs.

For further practical guidance, see the UNPRPD Guidance for conducting disability-inclusive context analysis³.



C. COLLECTING AND USING DISABILITY DATA

Integrating disability data early in the design phase is essential to ensure that interventions are equitable and responsive.

What to consider:

- Combine secondary data (census, NGO and UN reports) with primary data from surveys, assessments, and consultations with Organisations of Persons with Disabilities (OPDs).
- Ensure data is disaggregated by disability, and where possible, also by gender, age and other intersecting factors.
- Add Washington Group Questions (WGQs) – a set of internationally recognised questions – into assessment tools to identify people with disabilities.
- Ask questions on disability-related risks, costs and barriers to understand the needs.
- Ensure data collectors and analysts are trained on disability inclusion, WGQ and accessible communication.
- Engage OPDs and persons with disabilities in the design and implementation of data collection.

³ · https://globaldisabilityfund.org/new/wp-content/uploads/2024/12/20241127_development.pdf

Who are the Organisations of Persons with Disabilities (OPDs) / Disabled Persons' Organisations (DPOs)

Organisations of Persons with Disabilities (OPDs) - also referred to as Disabled Persons' Organisations (DPOs) - are representative organisations that are led, directed and governed by persons with disabilities themselves. Their primary purpose is to promote and protect the human rights, inclusion and full participation of persons with disabilities in society.

Key elements:

- **Leadership and Membership:** Persons with disabilities hold decision-making roles and constitute the majority of members.
- **Rights-Based Approach:** OPDs advocate for equality, accessibility and empowerment, guided by frameworks such as the UN Convention on the Rights of Persons with Disabilities (UNCRPD).
- **Representation and Voice:** They ensure that policies and programmes reflect the lived experiences and priorities of persons with disabilities.
- **Diversity:** OPDs may be cross-disability or impairment-specific and can represent intersectional identities (e.g., women, youth, indigenous persons with disabilities).

➔ 2. DESIGN/PLANNING PHASE:

The design and planning phase is a critical opportunity to embed disability inclusion into the project. This section offers practical questions and ideas to help teams design projects that are inclusive and responsive to the needs of persons with disabilities.

Key questions to consider:

Clarifying the project objective:

- Will disability inclusion be the principal objective of the project (i.e. to transform situations and systems of inequality affecting people with disabilities) or will it be mainstreamed, ensuring that people with disabilities benefit equally from the project and are not excluded or discriminated against?
- What changes is the project seeking to achieve?
- Are there specific objectives that address inequalities or barriers faced by people with disabilities?
- What will positive change look like for persons with disabilities?

A. DESIGNING THE PROJECT INTERVENTION STRATEGY

Projects should integrate key elements of disability inclusion as a primary objective or through mainstreaming. These include participation and empowerment, disability data, accessibility, reasonable accommodation and awareness raising.

Key questions to consider: *What approaches will be used to support change towards disability inclusion?*

Disability inclusive approaches:

- Is the project aiming to address exclusion, address its root causes and promote empowerment and inclusion of persons with disabilities?
- Are activities designed to challenge disabling barriers?

Holistic Approach:

- Has the project assessed the levels of change it can contribute to (individual, family/household, community, national and international level)?
- Are persons with disabilities involved as leaders, advocates, and decision-makers, not just (passive) participants?

Intersectional Approach:

- Has the project identified the factors that contribute to deepening vulnerability and discrimination of persons with disabilities, such as gender, ethnicity or age?
- How are these addressed in the project design?

B. RISK ANALYSIS

It is essential to consider: *What are the heightened risks faced by persons with disabilities?*

For example:

- Disability may intersect with gender norms, increasing the risks of discrimination/abuse of women and girls with disabilities.
- Community expectations relating to age may interact with disability to exacerbate exclusion.
- Cultural perceptions and beliefs associated with disability may lead to heightened risk of exclusion or abuse.

C. INCLUSIVE BUDGETING

Inclusive budgeting ensures that disability inclusion is not just a commitment but a practical reality. It involves allocating resources to remove barriers, promote participation and support targeted activities for persons with disabilities. This can include costs for accessibility and reasonable accommodations (e.g., sign language interpretation, personal assistance, transportation costs), assistive devices, remuneration to OPDs for their time and expertise, etc. (*IASC Guideline 2019*)

Budgeting for inclusion is essential. While inclusion requires dedicated resources, exclusion is costlier as it exacerbates the marginalisation of people with disabilities, increases dependency on families and reduces programme impact.

➔ 3. IMPLEMENTATION AND MONITORING

Disability inclusion should be maintained throughout project implementation and monitoring – not only to ensure that persons with disabilities are not excluded, but also to support their active participation and leadership.

Project teams should plan for both disability-targeted monitoring activities (e.g., accessibility audits and targeted consultations) and ensure that routine implementation and monitoring are inclusive and accessible to people with disabilities. This includes using accessible formats, inclusive language and ensuring that persons with disabilities—especially those facing multiple forms of discrimination—can participate meaningfully.

OPDs play a key role in supporting inclusive implementation and monitoring. For example, they can conduct community consultations, accessibility audits and contribute to monitoring and evaluation. It is vital to ensure that OPDs are fairly remunerated for their time and expertise.

A. IMPLEMENTATION

Key questions to consider:

- Are persons with disabilities and their organisations (OPDs) involved in implementation? How?
- Are there disability-specific barriers to project participation or success that need to be considered?
- Are project activities designed to enable effective inclusion?

B. MONITORING

Key questions to consider:

- Are persons with disabilities and OPDs included in monitoring processes?
- Is the project being internally monitored by someone capable of identifying and addressing disability concerns?
- Are staff responsible for monitoring trained on disability inclusion?
- Are disability indicators being monitored throughout the life cycle of the project?
- Are monitoring tools and communication materials accessible?

C. INDICATORS FOR DISABILITY INCLUSION

Indicators are essential for tracking progress on disability inclusion. They should be specific, measurable and, where possible, disaggregated by disability, gender, age and other relevant factors.

In the next page, there are some practical indicators for disability inclusion that can be used for monitoring and evaluation in programs, policies, or projects.

Policy and Governance Indicators

- Existence of a Disability Inclusion Policy within the organisation or programme.
- Alignment with UNCRPD principles in project design and implementation.
- Representation of persons with disabilities and OPDs in decision-making bodies (e.g., boards, committees).

Participation and Representation

- Percentage of persons with disabilities actively participating in consultations, planning and governance processes.
- Number of OPDs engaged in programme design and implementation.
- Accessibility of participation platforms (physical, digital, communication).

Accessibility Indicators

- Proportion of facilities and services meeting universal design standards.
- Availability of reasonable accommodations (sign language interpretation, assistive devices, personal assistance, accessible transport).
- Accessibility of information and communication (documents in Braille, easy-to-read formats, captioning).

Capacity Strengthening and Empowerment

- Number of persons with disabilities trained in leadership, advocacy, or technical skills.
- Number of OPDs supported through funding or capacity-building initiatives.
- OPDs invited to share their capacity and insights with project staff

Gender and Intersectionality

- Percentage of women and girls with disabilities included in programmes.
- Disaggregated data by disability, gender, age, and other identities.

Rights and Non-Discrimination

- Existence of grievance mechanisms accessible to persons with disabilities.
- Reported cases of discrimination addressed and resolved.

Outcome Indicators

- Improvement in access to education, health, employment and social protection for persons with disabilities.
- Increase in disability-inclusive language in policy documents and budgets.
- Dedicated budget allocation for disability inclusion.

➔ 4. REPORTING AND EVALUATION

Reporting and evaluation offer opportunities to reflect on how the project contributed to disability inclusion, the drivers of change, the challenges encountered and the lessons learned.

A. REPORTING

To ensure reporting captures disability inclusion meaningfully, consider the following:

- Is data on project participants and staff disaggregated by sex, age and disability?
- Does the report describe how persons with disabilities benefited equally or differently?
- Does the report show how persons with disabilities were involved in the project intervention (e.g. as participants, service providers, or partners)?
- Does the report comment on challenges for disability inclusion, offer an analysis of what worked, what did not, and what the key learnings are?
- Does the report comment on how it supported persons with disabilities to have greater agency in decisions affecting their lives.

B. EVALUATION

Any assessment, whether mid-term or final, should examine how the project performed against disability inclusion objectives and indicators. This includes assessing progress at different levels (individual, community, institutional), identifying drivers of change and understanding the impact of inclusion efforts.⁴

To ensure disability inclusion is meaningfully integrated into the review and evaluation process, consider the following:

- Do the Terms of Reference for the evaluation include disability-related impacts?
- Did the evaluators' selection criteria include experience with disability inclusion?
- Is there a person with disabilities on the evaluation team with relevant expertise and cultural understanding?
- Are evaluation activities (meetings, interviews, focus group discussions) designed to ensure that the voices of persons with disabilities are heard and included?
- Are there findings and recommendations which are specifically related to disability inclusion?

⁴ For further guidance refer to from the UNDIS guidance on integrating disability inclusion in evaluations: https://www.un.org/sites/un2.un.org/files/2022/06/uneg_guidance_on_integrating_disability_inclusion_in_evaluation_0.pdf

SECTION 4:

INTEGRATING DI ACROSS THEMATIC AREAS

The following sections provide examples of how a disability perspective can be integrated into thematic areas, including education, health, livelihoods and humanitarian response. In each area, a twin-track approach should be applied: mainstreaming to ensure all services and programmes are inclusive, with targeted actions to address the specific needs and barriers faced by persons with disabilities.

It is essential to keep in mind that tokenistic measures do not necessarily benefit people or empower people with disabilities. Disability inclusion requires meaningful participation of people with disabilities and their representative organisations from the start of the project design to evaluation. Considering the broader context and both the barriers that hinder participation and the enablers that can facilitate it, is crucial to achieve sustainable inclusion.

➔ EDUCATION⁵

Inclusive education is an education system that welcomes and supports all learners, regardless of their abilities or needs. It involves systemic reform, including changes in content, teaching methods, approaches, structures and strategies to overcome barriers and create learning environments that best reflect the diverse needs and preferences of all students.⁶

ERD supports projects that address barriers to education faced by vulnerable or marginalised people and groups, including persons/children with disabilities. ERD supports inclusive, community-based approaches, which enable persons with disability to access education⁷. Making mainstream schools inclusive may involve improving the physical accessibility of buildings, adapting training for teachers and ensuring access to support services.

Key considerations for inclusive education projects: Project staff are encouraged to examine to what extent their projects address the following principles:

- Non-discrimination
- Best interests of the child
- Right of the child to be heard
- Protection from violence and abuse
- Right to live in the community
- Support for mobility
- Access to health care
- Habilitation⁸ and rehabilitation services

⁵ · UNICEF, *Including Children with disabilities in quality learning*, September 2017

⁶ · United Nations, Committee on the Rights of Persons with Disabilities. General comment No.4 (2016) Article 24: Right to Inclusive Education. 2 September 2016. CRPD/C/GC/4, para. 11

⁷ · Education is a fundamental human rights for all persons. Needs are diverse rather 'special', however, rights are universal. Identification of diverse needs as 'special' and therefore recommending 'special education' facilitates exclusion.

⁸ · Habilitation: effective and appropriate measures, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life

Inclusive education requires:

- Promotion of diversity and inclusive learning: actions to challenge negative attitudes and prejudice against children with disabilities.
- Support for teachers and learners: teachers need training and guidance, and learners need services to overcome barriers to learning.
- Government commitment and investments: it takes time and resources to change systems.
- High expectations of all learners: teachers need to invest in and support all children.
- Safe and inclusive environments: children must feel safe from bullying or abuse.
- Partnerships between parents, OPDs and schools: collaboration enhances inclusive education.
- Systems to monitor progress: it is essential to measure whether the situation is improving and identify areas for improvement.

➔ HEALTH⁹

The inclusion of persons with disabilities in health interventions depends on service delivery and access, available financing, information and data collection, and the use of appropriate technologies. Governance being disability-inclusive is also essential to ensure that health systems are responsive to the needs of people with disabilities.¹⁰

Note:

Health and disability are not synonymous. While some people with disabilities may have general and specific health conditions, not all disabilities are health-related. It is crucial to avoid medicalising disability or assuming that all persons with disabilities require specialised health services.

In many low - and middle - income countries, health services are not inclusive. People with disabilities often face physical, attitudinal and financial barriers to accessing healthcare. The right to health is a fundamental human right, and people with disabilities must be able to access the full range of health services on an equal basis with others. Inclusive health should include, but not be limited to, the provision of specialised services such as rehabilitation, which only address the needs of a subset of people with disabilities.

Guiding questions for disability inclusion in the health sector:

- Are project delivery sites accessible for women, children and men with different types of impairments? Can they reach, enter, move around and use the facilities on an equal basis as others?
- Have persons with disabilities and OPDs been involved in the design and planning of the health project?
- Does the project include activities and budget lines to address barriers people with disabilities face to access healthcare (for example, improving physical accessibility, sensitising staff, providing reasonable accommodations)?
- Has an OPD been identified as a partner to support disability inclusion throughout the project, including awareness raising, training and evaluation?
- Is data collected during the project disaggregated by disability, age, gender and location?

⁹ - Source: World Health Organization, R., Convention on the rights of persons with disabilities, role and responsibilities of the health sector, information for policy makers, WHO Regional Office for South-East Asia. Retrieved from <https://policycommons.net/artifacts/508430/convention-on-the-rights-of-persons-with-disabilities-role-and-responsibilities-of-the-health-sector-information-for-policy-makers/1484253/> on 06 May 2022. CID: 20.500.12592/x0n85v

¹⁰ - Inclusive Governance refers to how health systems are planned, managed, and overseen in ways that actively include persons with disabilities and their representative organisations (OPDs) in decision-making processes. This ensures that policies, budgets, and accountability mechanisms reflect their needs and rights.

- Are there systems and indicators in place to follow up on the implementation of disability inclusion commitment?
- Does the project team have adequate capacity and experience in disability inclusion to apply inclusive practices in project implementation and communication?

➔ LIVELIHOODS

Poverty and disability are interlinked. Poverty increases the likelihood of disability through exclusion from health care and heightened exposure to risk factors such as trauma, infectious diseases, unsafe environments, poor sanitation and malnutrition. Conversely, disability can lead to or exacerbate poverty through participation restrictions, including exclusion from education, and barriers to accessing decent work. Exclusion from livelihood opportunities also negatively affects psychosocial well-being, identity and social inclusion.

Inclusive employment projects aim to support people with disabilities and other groups living in poverty whose access to livelihood is restricted due to disability-related barriers. These projects promote access to decent paid employment and self-employment, ensuring freedom, equality, security and dignity for persons with disabilities. They may include skills development, job placements, entrepreneurship support, microfinance, savings and loans groups and other evidence-based economic development approaches adapted to local contexts.

Partnerships with microfinance institutions can play a key role in promoting inclusive employment by supporting self-employment and increasing access to waged work.

Low educational attainment and discrimination are the most significant barriers to both formal and informal work for persons with disabilities. Strategies to promote greater participation of persons with disabilities in livelihoods include improving access to social protection systems, healthcare, rehabilitation, and assistive devices, as well as education and vocational training.

➔ DISABILITY RIGHTS AND GENDER EQUALITY

Intersectional discrimination based on gender and disabilities compounds barriers to access and participation, leading to increased inequalities and heightened risk of violence, abuse and exploitation for women and girls with disabilities.

Considering the interests and needs of women and girls with disabilities means:

- Designing targeted projects that address inequality based on both gender and disability (e.g. inclusive health, education or livelihoods interventions targeting women and girls with disabilities).
- Ensuring that women and girls with disabilities can participate and benefit from the project.
- Considering and addressing the needs of families and caregivers, who are often women.
- Ensuring that service providers are trained in safeguarding, especially for children.
- Partnering with OPDs led by women and other underrepresented groups of people with disabilities, including those facing intersectional discrimination due to minority status, sexual orientation or gender identity.

SECTION 5:

DISABILITY INCLUSION IN HUMANITARIAN RESPONSE

Humanitarian situations disproportionately affect persons with disabilities whose needs and priorities are often overlooked. In the context of forced displacement, it is vital to identify persons with disabilities¹¹ and consult with families, caregivers, communities, and most importantly, OPDs and organisations working on disability, to understand and address their specific needs.

The initial assessment should include identifying persons with disabilities and understanding their specific needs and risks to design appropriate responses. Monitoring should then track how their situation and needs evolve, with particular attention to access to assistance and factors that heighten risk. A key outcome should be the strengthened inclusion of persons with disabilities in humanitarian response.

In a humanitarian context, project teams should pay particular attention to the following:

- Persons with disabilities may face barriers to accessing health services, including physical obstacles or inaccessible information. Specialised health services, such as rehabilitation and assistive technology, may not be available in emergencies.
- Heightened risk of violence or abuse, mainly targeted violence towards persons with disabilities. Women and girls with disabilities are particularly affected.
- Social exclusion and marginalisation due to disability-related discrimination.
- Obstacles to accessing humanitarian assistance, including inaccessible infrastructure and information.
- Physical barriers to fleeing conflict or natural hazards.
- Prevailing perceptions of persons with disabilities that promote violence, abuse, exploitation or exclusion.
- Disruptions or shortages of services that specifically affect persons with disabilities.

IASC Guidelines on Inclusion of Persons with Disabilities in Humanitarian Action

The IASC Guideline on Inclusion of Persons with Disabilities in Humanitarian Action¹² highlights the following four essential actions:

1. REMOVE BARRIERS TO ACCESS

This means taking deliberate actions to ensure persons with disabilities can access assistance, protection or decision-making on an equal basis as others.

¹¹ · The Washington Group short question set is a tool that can be quickly and inexpensively added to censuses and surveys to generate disaggregated data. It has also been the most widely used and tested in humanitarian contexts.

¹² · IASC Guidelines, Inclusion of Persons with Disabilities in Humanitarian Action, 2019 | IASC (interagencystandingcommittee.org)

2. ENSURE MEANINGFUL PARTICIPATION

This means enabling persons with disabilities to participate in all phases of humanitarian programming: assessment, planning, design, implementation, monitoring and evaluation.

3. EMPOWER PERSONS WITH DISABILITIES

This means equipping persons with disabilities and their representative organisations with the knowledge and skills to contribute to and benefit from humanitarian assistance. This also requires building the capacity of humanitarian actors to understand disability rights and inclusion.

4. COLLECT, ANALYSE, AND USE DISABILITY DATA

This means collecting, sharing, analysing, and using disability-related data on needs, risks, barriers, and outcomes to inform planning, implementation, monitoring and evaluation, including through complaints and feedback mechanisms.



Illustration: IASC Must-do actions



SECTION 6:

DEVELOPING INTERNAL CAPACITY AND PARTNERING WITH OPDS

BUILDING INTERNAL CAPACITY

To improve disability inclusion, project teams need to build awareness and capacity among project staff and stakeholders on disability inclusion.

Many organisations face challenges due to limited knowledge, resources and capacity. Often, there are few or no staff dedicated to disability inclusion, and where such roles exist, they are often focused on broader equality and diversity issues. These capacity constraints contribute to other challenges, including those related to data collection, organisational commitment and prioritisation.

Partners are welcome to provide their own training to their project teams to introduce them to ERD's Disability Guidance and its relevance to all phases of the project cycle. ERD is available to support partners and can provide guidance if required. As part of the rollout of the Disability Guidance, ERD staff will discuss its practical implications with partners and project teams. ERD staff will also support partners in reviewing and refining their project proposals to align with best practices in disability inclusion.

Partnerships with OPDs are also a valuable way to build internal capacity and strengthen disability inclusion. In many contexts, working together with disability-focused organisations, particularly OPDs, can help develop expertise and pool resources.

PARTNERING WITH OPDS

Partnerships with OPDs are essential to achieving meaningful disability inclusion. OPDs bring lived experience, technical expertise and a deep understanding of the barriers faced by persons with disabilities. They play a critical role in shaping inclusive programming and ensuring that interventions reflect the priorities of the disability community.

ERD encourages all partners to engage OPDs throughout the project cycle – from assessment and design to implementation, monitoring and evaluation. OPDs can support disability awareness training, outreach to underrepresented groups, safeguarding and inclusive service delivery.

Partners should prioritise collaboration with OPDs led by women and other groups facing intersectional discrimination, including persons with diverse sexual orientations, gender identities and minority backgrounds.

SECTION 7:

PROPOSALS REVIEW AND FUNDING DECISIONS

REVIEWING PROPOSALS THROUGH A DISABILITY LENS

Not all projects implemented by ERD project partners have an explicit focus on disability. In other words, disability may not be a principal or significant objective of the project. However, it is still important to consider disability during proposal review and to check if it was taken into account during project design. At a minimum, projects should aim to ensure that persons with disabilities are not excluded from activities.

CONSIDERING DISABILITY IN FUNDING DECISIONS

During proposal assessment, monitoring and evaluation, ERD will utilise appropriate tools to evaluate a project's disability sensitivity, awareness and inclusivity, as well as its potential to enhance disability inclusion.

OECD DAC DISABILITY POLICY MARKER

ERD will support projects where disability is a principal or significant objective, in line with the OECD DAC marker:

- **PRINCIPAL:** where disability is a primary objective of the project, central to its design and impact.
- **SIGNIFICANT:** where disability is an essential and deliberate objective, although not the main reason for undertaking the project.

ERD will continue to support projects where disability is not a principal or significant objective and will offer guidance to help partners integrate disability-sensitive measures.

SECTION 8:

OPERATIONALISING DISABILITY INCLUSION

TWIN-TRACK APPROACH

ERD promotes the twin-track approach to disability inclusion, widely used by UN agencies, bilateral development agencies and NGOs. This approach includes:

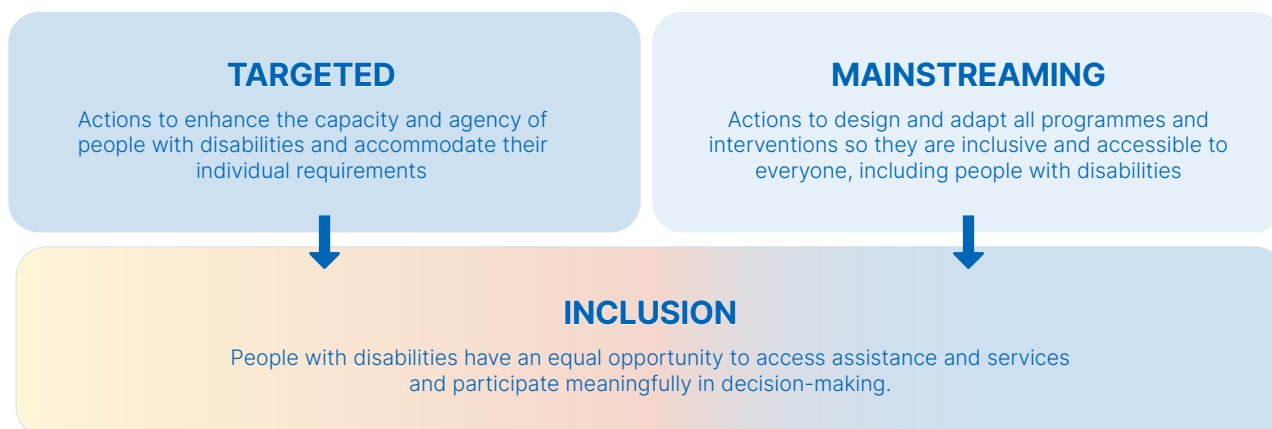
- **TARGETED ACTIONS:** Disability-specific initiatives to support the empowerment of persons with disabilities and
- **MAINSTREAMING:** integrating disability-sensitive measures into the design, implementation, monitoring and evaluation of all policies and projects.

Successful inclusion requires working on both tracks, as they complement each other.

REASONABLE ACCOMMODATION

Reasonable accommodation is an obligation under the CRPD and a key component of disability inclusive programming. All projects must offer reasonable accommodations to enable participation by people with disabilities (e.g., transportation, personal assistance, sign language, accessible venue, including toilets, common areas, and dining areas when organising a meeting). These may be construed as disability-specific measures in the context of the twin-track approach.

For guidance on providing reasonable accommodations, see the IASC guidelines as discussed above.



APPLYING A DISABILITY LENS IN PRACTICE

ERD recognises that, in general, its partners implement two categories of projects in relation to disability:

- **DISABILITY-TARGETED PROJECTS:** The entire project, or a significant component, explicitly targets persons with disabilities. These projects usually involve staff with experience working with persons with disabilities, and expertise in promoting inclusion of under-represented groups, such as women and girls with disabilities, Deafblind people, people with intellectual disabilities, psychosocial disabilities, etc.
- **GENERAL POPULATION PROJECTS:** Projects targeting the general population or a subset of it (e.g., women or children) and thus may include persons with disabilities. Project staff may not have specialist skills or expertise in engaging with persons with disabilities. Without basic knowledge and awareness of inclusion, they may unintentionally exclude people with disabilities from the project.

SECTION 9: CONCLUSION

Designing or adapting all projects to be inclusive of persons with disabilities is not just a matter of compliance; it is a commitment to equity, rights and sustainability. Persons with disabilities represent a significant minority in every population, and their participation enriches outcomes for entire communities. Inclusive approaches ensure that no one is left behind, strengthen resilience and align with global frameworks such as the UNCRPD and the Sustainable Development Goals. By embedding disability inclusion into every stage of project planning and implementation, we create systems and solutions that work for everyone.

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