Leonard Cheshire Dis**ability**

Cross-cutting Disability Research Programme Summary

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Key messages

- Evidence on the links between disability and poverty are strong, however they are more complex and nuanced than is often assumed.
- As development opportunities increase, persons with disabilities can be left behind if they are not specifically targeted for inclusion, creating an emerging 'disability development gap'.
- 3. There is no "one size fits all" strategy to effectively mainstream disability in international development. Policy and programming must use an evidence base that reflects specific barriers and needs of persons with disabilities if effective intervention is to be made.
- 4. Further research is needed to understand how inequities are manifested at the individual and household level if progress towards genuinely inclusive poverty alleviation is to be achieved.
- There is a need for monitoring tools to be developed and used systematically in order to measure inclusion of person with disabilities within all mainstream international development efforts to turn policy into progress.

Overview

The overarching aim of this research has been to contribute to an increase in the effective and sustained social and economic inclusion of disabled people in international development and global health efforts. In order to achieve this, the programme has:

- Generated a range of evidence-based research in collaboration with other DFID-funded research programmes to incorporate disability in their mainstream development research efforts (see box, page 2);
- 2. Strengthened understanding of disability inclusive research by increasing the ability of persons with disabilities and their organisations to use robust evidence and research findings in core campaigning and advocacy activities, and building the capacity of mainstream development studies scholars to incorporate disability in their teaching and research; and
- Disseminated research findings and recommendations to support utilisation in national and international development policy, practice and research.

Building the Evidence Base

The evidence base linking poverty and disability is small but growing; however, our research shows that the links are more complex and nuanced than initially assumed. A review of the literature demonstrated that the links can be compounded by age, gender, geographical location, and type of impairment (Groce et al 2011).

Our applied research has demonstrated that there is an on-going lack of inclusion of persons with disabilities across mainstream international development and global health efforts. This exclusion remains a significant barrier to addressing poverty, even in countries that have adopted the UN Convention on the Rights of Persons with Disabilities. Improved monitoring of inclusion, for example by the use of indicators (as are already in use for gender), could facilitate improved policy implementation.

However, our research shows that poverty can have a levelling effect, and in some instances, rates of access to services and resources are broadly similar between persons with disability and non-disabled persons - for example, among poor rural women's access to maternal health services in Nepal or around access to agricultural projects for people living in urban slums in Kenya. As development opportunities increase - including those created by new development policies and practices - persons with disabilities can be left behind if they are not specifically targeted and included, thus creating a '*disability development gap*'.

In addition, while many studies have looked at the inclusion or exclusion of persons with disabilities; however persons with disabilities are not a homogenous group and there is considerable variability in how they are affected by specific development issues. For example, in Nepal, women with more severe forms of disability were less likely to follow recommended practices of caring for their new-borns; and in Zambia and Uganda, people with physical disabilities faced far greater difficulties reaching and using water and sanitation resources.

Although the right to inclusion in all development efforts is guaranteed by the UN Convention on the Rights of Persons with Disabilities, our research shows that often there is no "one size fits all" strategy that can be employed to mainstream disability in international development. Programming and policy must build on an evidence base that reflects actual barriers and needs if effective interventions are to be made.

Addressing poverty for persons with disabilities goes beyond policies and programmes. Our research undertaken in Delhi is one of the first to clearly link stigma and poverty using measures of multidimensional poverty. Without addressing stigma, there is potential for a 'negative feedback loop', whereby persons with mental illness are denied opportunities, leading to poverty, which in turn may compound low selfesteem. As a consequence, they may experience worsening mental health status. Development practitioners must be prepared to address stigma as part of on-going development efforts and not view it as an afterthought or as a 'stand-alone' issue that can be tackled independently of more comprehensive development objectives.

Finally, in this programme we have found that undertaking research can be a very effective tool for the empowerment and inclusion of persons with disabilities. Therefore, it is important to recognise research and inclusion of partner organisations, both within and beyond the disability field, is part of the *process* of fostering knowledge and commitment to disability and development. As such, research process in itself is as important as research outputs.

Publications

Groce, N., Kett, M., Lang, R., Trani, J. (2011) 'Disability and poverty: the need for a more nuanced understanding of implications for development policy and practice', Third World Quarterly, 32(8):1493-1513

Groce, N., Bailey, N., Lang, R., Trani, J., Kett, M. (2011) 'Water and sanitation issues for persons with disabilities in low- and middle-income countries: a literature review and discussion of implications for global health and international development', Journal of Water and Health, 9 (4): 617-627

Research projects undertaken

'Disability and urban agriculture: an innovative approach' in partnership with Research into Use (RiU), and their partners in Kenya: Real Impact and the African Centre for Technology Studies (ACTS).

'Maternal and new-born care practices among disabled women, and their attendance in community groups in rural Makwanpur, Nepal' in collaboration with the Institute for Child Health, UCL and Maternal and Infant Research Association, Kathmandu (MIRA)

'The relationship of mental illness, poverty and stigma: a study of multidimensional poverty in India' in collaboration with the Research Department of Mental Health Science, UCL, the Department Of Psychiatry and De-addiction Services and Resource Centre for Tobacco Control, PGIMER, Dr. Ram Manohar Lohia Hospital, New Delhi, building on methodology developed by the Oxford Poverty and Human Development Initiative.

'Undoing inequity: inclusive water, sanitation and hygiene programmes that deliver for all: Uganda and Zambia' in partnership with the SHARE consortium, WaterAid, the Water, Engineering and Development Centre (WEDC) at the University of Loughborough, the Institute of Social and Economic Studies (INESOR), University of Zambia and the Appropriate Technology Centre (ATC), Uganda.



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For more information about the programme, contact ccdrp@ucl.ac.uk