id21 insights

communicating international development research

Breaking barriers

Building access for disabled people

According to the United Nations Development Programme four to six percent of the world's population is disabled. The prevalence of disability in many developing countries is worsened by poor nutrition, disease, conflict and accidents due to poor regulation. Many disabled people also face numerous physical and attitudinal barriers, which contribute to their isolation and impoverishment. If development is the expansion of (and removal of barriers to) the freedoms that people enjoy, a key aspect for disabled people is improving their access to the physical environment.

The United Nations 'Standard Rules on the Equalisation of Opportunities for Persons with Disabilities' (1993) has been adopted by most countries but issues of access are still largely ignored by planners and development practitioners. The UN rules aim to secure government commitment to granting equal rights and opportunities to people with disabilities. Accessibility is a key target area for guaranteeing equal participation: changes in the physical environment would enable people with disabilities to enter public buildings, use public transport and facilities, move about in their homes and communities with ease, have access to information, and know what services are available to them. This issue of id21 insights focuses on these matters, particularly with reference to people with physical (mobility) and visual impairments.

Why access?

Improving access to the physical environment results in greater social equity: it enables disabled people to participate in social, economic and religious activities on the same level as non-disabled people, resulting in a more inclusive society. Dismantling barriers reduces disabled people's vulnerability and dependence on others. In Ethiopia, **Tamru Belay** writes about how computer training has enhanced blind Ethiopians' employability and capacities to pursue further education. The programme's success has also raised the government's awareness of their potential and rights, and is a powerful advocacy tool.

Access for all

A common misconception is that adapting or building accessible environments is a costly exercise. Conventional design is aimed at non-disabled people and accordingly fails to provide for many potential users' needs. Universal design principles, by contrast, aim to accommodate as wide a range of potential users as possible, including, but not exclusively, people with disabilities. North Carolina State University in the USA defines universal design as the design of products, communications and environments which can be used by everyone, to the greatest extent possible, without the need for adaptation or specialised design. Dave Maunder and Jo Sentinella highlight results from their research on disabled access to transportation services, in which they found this principle to be an essential aspect of successful projects.

Similarly, research in Uganda by the Water, Engineering and Development Centre and in Sri Lanka by the Intermediate Technology Development Group (ITDG), on building accessible toilets demonstrates that designs based on universal principles need not be costly and can be adopted and constructed by local communities, with little or no outside assistance. Hazel Jones and Bob Reed, looking at water and sanitation infrastructure for poor people in Cambodia, Uganda and Bangladesh, point out that services designed for disabled users are beneficial for other members of society, including elderly and sick people, and mothers with young children.

Ensuring access

It is important to note, however, that solutions are about more than just design and building codes. Approaches should focus on what disabled people

themselves say they need and how best to achieve it. Enabling environments that encourage the involvement of users and ensure their views are heard are therefore a primary consideration.

ITDG's experience in Sri Lanka emphasises the importance of a community planning process that actively seeks to put disabled people at the centre of development objectives to ensure their needs are met. Handicap International worked with the Youth Disabled Association in Viet Nam on an accessibility campaign, in which disabled young people demonstrated to public building managers and the public that they can, and are, actively involved in promoting measures to help them live independently.

A word of caution

Disability is becoming recognised as a development area with special needs. Numerous disability-focused movements are gaining visibility. However, the way forward needs to be carefully thought out. Considering that most disabled people in developing countries are the very poorest, planners must also ask: access to what and for whom? **Rebecca Yeo** provides a cautionary tale from post-Tsunami Sri Lanka, where, despite the rhetoric of disabled access, the reality might mean that disabled people and poor people in general, may be cut off from their former livelihoods as reconstruction favours business interests.

The term 'disability' masks a wide range of types and experiences: disabled children, women and the elderly are doubly or even triply disadvantaged. The case study on disabled women's experiences based on research by **Hazel Jones** and **Bob Reed** emphasises that any consideration of disabled access must examine the particular needs of different groups.

More than just a medical issue

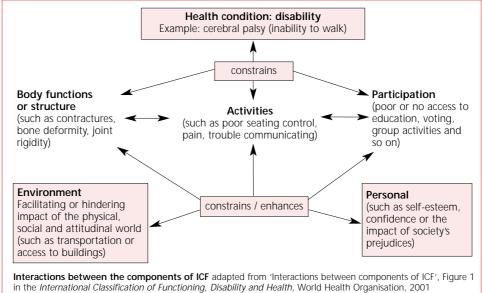
The International Classification of Functioning, Disability and Health (ICF) was developed by the World Health Organisation (WHO) in 2001 in collaboration with International disability organisations and many individuals with disabilities. Intended for use in clinical settings, by health services or for surveys at the individual or wider community or national level, the ICF is an attempt to move away from the view that disability is simply a medical issue. It encourages health professionals and others working with disabled people to look beyond the health condition of an individual and consider other factors that may prevent or hinder them from participating in all aspects of life. The chart on this page shows this, using cerebral palsy as an example.

> As the ICF illustrates, most disabilities are the result of a medical condition which affects 'human functions or structure' as well as a person's ability to carry out 'activities'; it follows that doing less will lead to reduced 'participation'. Someone with severe rheumatoid arthritis, for example, is likely to have reduced mobility and be less able to participate in their chosen activities. Planning good access to buildings and public

transport may help but unless 'participation' is also addressed, solving access to the activity is only part of the solution.

The ICF also recognises that 'environmental' factors such as having to live with the stigma of disability, limited educational opportunities or not being able to get on a bus – will affect people's 'activities' and degree of 'participation'. The ICF also includes 'personal factors' such as self confidence and security which will influence a disabled person's coping strategies.

Using the ICF in planning access to facilities or services for people with disabilities will require professionals to take risks and move away from areas where they feel confident and safe; instead they need to consider the lifestyle of their clients and how rehabilitation (if appropriate and if requested by the client) can improve that person's lifestyle. As this issue of



id21insights discusses, architects, planners and builders will need to consider how disabled people can enter buildings and use transport or water and sanitation facilities, but they will also need to consider how they can also take part in activities of their choice.

Building accessible environments

The opportunities for and constraints to improving access to both new and existing infrastructure will depend on the context in which improvements are undertaken, including availability of resources (human, physical, financial), culture, attitudes and laws regarding disabled people's rights. There are likely to be significant differences in needs and therefore approaches among and within countries, between rural and urban areas, and between formal and informal developments. Anybody working

with disabled people to achieve barrier-free environments should also remember that:

- Professionals should be ready to hand over decision-making to disabled people, who are in the best position to identify their own needs and concerns.
- Physical and technical interventions are only one part of a bigger picture

that also requires paying attention to human rights and equal opportunities.

- Systematic reviews of the performance of projects, programmes and policies are necessary to ensure that good and bad practices are identified. It is important to learn from mistakes as well as from successes and to share learning.
- International frameworks such as ICF and universal standards can be useful tools for implementation and research

Sheila Wirz

Centre for International Child Health, University College London Medical School, 30 Guilford Street, London, WCTN 1EH, UK

T +44 (0)207 242 9789 S.Wirz@ich.ucl.ac.uk

Sheilah Meikle

Development Planning Unit, University College London, 9, Endsleigh Gardens, London WC1H OED, UK ucfushe@ucl.ac.uk

Training Ethiopia's blind people in ICTs

Blindness in Ethiopia results from a wide range of natural and man-made factors, and is also linked to underdevelopment and armed conflict. Neglect, discrimination and lack of awareness means blind people have little access to education, employment, information and other forms of social participation. Information and communication technologies are, however, beginning to overcome these barriers.

The Adaptive Technology Centre for the Blind (ATCB) in Addis Ababa, Ethiopia, was established in 2000, introducing access to information for the blind community. The ATCB has two main activities – computer

training supported with electronically generated voice, and computerised Braille production. Over the past five years the United Nations Educational, Scientific and Cultural Organisation (UNESCO) and the International Telecommunications Union (ITU) have been working with the ATCB, providing funding, equipment and institutional support for its programme.

The computer training includes:

developing skills in word processing and
Outlook Express email programmes

- using software that reads information from the screen aloud, troubleshooting, and introducing features of different applications
- training for teachers of blind children in basic computer skills and advising them on how to assist their pupils.

The ATCB also produces electronically processed Braille transcriptions, enabling Braille readers across the country to obtain a supply of locally embossed textbooks, references and other documents.

The main achievement for the more than 150 graduates from the ATCB is that they are able to use computers with complete independence. Participants have included sight-impaired students enrolled in Bachelors and Masters Degrees at Addis Ababa University, and civil servants who have undergone training to facilitate their use of computers at work and for research.

Advocacy forms a part of the centre's activities and as a result of this and its training activities, public and government awareness of the potential, rights and merits of sight-impaired people has been raised such that:

- The provision of equipment for computerised Braille production has encouraged the government to look at the possibility of producing national textbooks in Braille.
- The Ethiopian government has introduced a policy to supply all schools with computers and the ATCB example has shown that blind schools should not be left out of this initiative, particularly as teachers of blind students can receive training from the centre

Tamru Belay

Adaptive Technology Centre for the Blind, PO Box 80046, Addis Ababa, Ethiopia $\bf T$ +251 (0)9 223327

atcb@ethionet.et

See also

The ATCB website: www3.sympatico.ca/tamru

id21 insights #55

Taps and toilets

Accessible water supply and sanitation

Disabled people have the least access to water and sanitation services, which adds to their isolation, poor health and poverty. It also contravenes a basic human right to safe water. Service providers are starting to recognise that the Millennium Development Goals of access to safe water and sanitation, health and poverty reduction will not be met unless disabled people are included.

Recent research by the Water, Engineering Development Centre (WEDC) at Loughborough University in the UK focuses on documenting examples of improvements in practice – what helps disabled people in rural and poor urban areas to access and use water and sanitation facilities. Information was collected from a range of countries, and fieldwork carried out in Bangladesh, Cambodia and Uganda.

Key findings included:

- Few service providers have thought about disabled people in relation to their work.
 They lack training, skills and information about making services and facilities more accessible and inclusive.
- Demand-responsive approaches rarely consult disabled people and fail to deliver accessible services. Project design and consultation processes do not consider disabled people.
- Providers assume that there is no demand, but in fact most disabled people do not know that accessible facilities are even possible, let alone how to express demand for them.
- Simple low-cost solutions can make a great difference to the lives of disabled

- people and their families. Yet these initiatives remain small-scale and isolated, and information about them is not widely shared.
- Some of the greatest obstacles faced by disabled people in accessing sanitation and water supply are to do with the physical environment (such as steps, slippery areas around hand-pumps, rough access paths).
 Improving disabled people's access to and use of water in the home can benefit individuals by restoring their dignity, improving their self-reliance and social

integration. It also benefits the whole family, reducing their workload and releasing valuable time for other activities.

Some major water and sanitation providers are starting to consider how to include disability issues at policy



Angela Martin

and strategy level. Wateraid Bangladesh for example, is supporting local partner organisations to consider how their projects will address the needs of disabled people. WEDC's research will be produced and shared in the form of a resource book, aimed at WATSAN planners and service providers, disabled people's organisations, and disability service providers. It contains a range of ideas to help implementers make their services and facilities more accessible and inclusive.

Finding ways to improve access for disabled people will require:

- building on the knowledge and skills of service providers
- making facilities more inclusive to ensure equal access: services must be designed to take into account different needs, which often involve only minor adjustments, and little extra cost, especially if planned from the outset
- piloting approaches and technologies, to demonstrate and learn what works and can be applied in different contexts
 - building the capacity of disabled people's organisations to lobby service providers for access and inclusion
 - collaborating with disabled people, who understand their own needs best

Designing facilities to be inclusive also benefits other community members. All kinds of people, including frail elderly people, pregnant women, parents with

small children, injured or sick people and those who may have difficulty with balance or co-ordination, with weak grip, limited flexibility, difficulties squatting or lifting, will benefit from better access to appropriate water and sanitation facilities

Hazel Jones

Water Engineering Development Centre, Loughborough University, Leicestershire, LE11 3TU, UK

H.E.Jones2@lboro.ac.uk

T +44 (0)150 922 8303 F +44(0)150 921 1079

See also

Water and Sanitation for Disabled People and other Vulnerable Groups: designing services to improve accessibility, a resource book by Hazel Jones & Bob Reed, WEDC, Loughborough University, UK (forthcoming July 2005)

Why should the water and sanitation sector consider disabled people, WELL Briefing Note 12, 2005, www.lboro.ac.uk/well/

Women are disabled too

The World Bank estimates that there are 300 million disabled women and girls worldwide. Disabled women in developing countries can face triple discrimination – for being poor, female and disabled. They are often the least educated, weakest and most vulnerable members of any society, especially susceptible to neglect, isolation and abuse. They are often the least educated with few opportunities to speak out.

The impact of inadequate water and sanitation is greatest on women and girls. If the concerns of disabled women and girls are not considered, it can result in the introduction of measures that are unsuitable to their needs and detrimental to their welfare. For instance, the embarrassment that disabled people face when bathing publicly and using communal toilets is compounded by disabled women's vulnerability because of their disability and gender. Improving access should not only consider how to make using such facilities easier but also how to ensure that women can attend to personal hygiene privately and safely. Similarly, many disabled women continue to be responsible for household duties such as fetching water, cooking and caring for children. Practitioners and service providers must be careful not to overlook the capacities of these women and should endeavour to make their work lighter. Development and disability practitioners also need to realise that:

 Disabled people's organisations do not speak for all disabled people: if participation is a real goal, providers will have to actively seek out the views of

disabled women and girls.
 Priorities and concerns for particular

- Priorities and concerns for particular groups within the general umbrella of 'disability' will differ. For instance, many disabled girls (and boys) are unable to attend school, simply because toilets are not accessible to them.
- Where interventions increase the independence of a disabled person, it often releases the person supporting them, often a female child, who might have been taken out of school to care for them.
- Gender components of any programmes, including training on gender issues should include specific strategies to include disabled women.

See also

Delivering WATSAN services to disabled people, by H.E. Jones, R.A. Reed & J.E. Bevan, WEDC, October 2003

http://wedc.lboro.ac.uk/projects/new_projects3.p hp?id=60

Subscribe to id21 insights

To subscribe to id21 insights for free please send your full postal address to:

id2

Institute of Development Studies
University of Sussex
Brighton BN1 9RE, UK
email id21@ids.ac.uk

id21 insights #55 May 2005

Building bridges

Creating disabled-friendly environments in Sri Lanka

n Sri Lanka, a common approach to disability is the welfare or charity model, which considers people with disabilities to be passive recipients of benefits. Community-based approaches, on the other hand, facilitate disabled people's independence and their ability to contribute to their families and communities. Yet, how feasible is the community-based approach given that most disabled people live in remote areas, where building and maintaining community infrastructure is considered costly and difficult?

The Intermediate Technology Development Group in Sri Lanka is working on inclusive planning that includes disabled people in development initiatives. A pilot project in a rural village in the Kandaketiya-Badulle district explored the needs of disabled people to find solutions to improve their lives.

ITDG identified 62 people with disabilities from 537 families, of which 29 had mobility difficulties. The planning process, which involved disabled people and other community members working together, resulted in the decision to construct appropriate physical infrastructures that would help disabled people to be more involved in community life.

Going to the toilet

Adapting infrastructure to suit disabled people need not be an expensive exercise. Often, it only requires minor adjustments, using locally-available materials.

In terms of water and sanitation for instance, measures could be as simple as introducing markers for blind people to indicate the way to a water source or toilet, and making the paths to these facilities smooth and clear of any obstacles. Or, when installing a water pump, contractors should ensure that the taps and handles are long enough, so that a disabled person can pump water from the edge of the apron (the area of concrete around the pump) and avoid the slippery surface (see diagram on previous page).

Even with more complicated construction, simple guidelines may be followed that would ensure that they are accessible for all to use. A good example is accessible toilets. Some typical concerns and features to address these are outlined in the box below:

Concern	Accessible feature
Access to the latrine	 a concrete or earth ramp that finishes level to the latrine floor, with a maximum gradient of 1:12. Steps should have a handrail for support. a door with a clear opening of at least 0.8 metres, that swings outwards to maximise the space within (with a doorstop to prevent it opening more than 90 degrees and a rope or rail on the inside)
Manoeuvrability	 clear floor space (minimum 1.75 x 1.55 metres) to allow moving about with wheelchairs or helpers rough cement flooring, that does not become slippery when wet, especially for people using crutches
Support whilst using the facility	 handrails including: horizontal or diagonal rails attached to the wall on either side of the toilet, or fixed to the floor (if iron, should be painted to avoid corrosion) to avoid squatting, either a fixed seat or moveable seat placed over the toilet hole made of concrete, wood, bamboo or plastic etc. Wood and concrete should be painted for improved moisture resistance and hygiene.
Private hygiene	• source of water inside the latrine cubicle

Janaka Hemathilake, ITDG – South Asia Hazel Jones, WFDC

One such intervention was the construction of three footbridges by community members (including disabled people) over the river between the village and the main road. They replaced temporary wooden crossings which would get washed away during heavy rains.

The new bridges can support wheelchairs, are accessed by ramps and have handrails on both sides to increase safety for all users. They provide access to daily and basic services, including the school, community health centre, religious places and markets. The bridges have assisted not only disabled people but others as well, including elderly people and those carrying heavy loads on a daily basis.

The community also identified the need to improve conditions in and around the homes of disabled people. New ramps now enable those with physical impairments to more easily get to and from the main roads from their homes. A local non-governmental organisation, GAMANA, also trained local masons and community volunteers to build disabled friendly toilets (see box above).

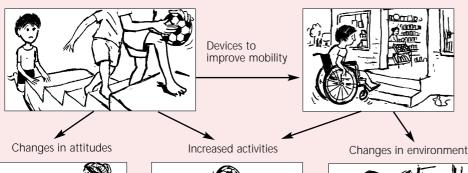
ITDG's experience in Sri Lanka shows

- Active participation by disabled people in development projects, from the initial consultation stages onwards, is crucial to ensuring that solutions are practical, usable and effective.
- Designs and technologies should be adaptable to local circumstances and the needs of disabled people and their families.
- Designs should be simple and easily replicable by local contractors and technicians at little cost

Janaka Hemathilake

ITDG – South Asia, No. 5, Lionel Edirisinghe Mawatha, Kirulapone, Colombo 5, Sri Lanka **T** +94 11 2829412 **F** +94 11 2856188 JanakaH@itdg.slt.lk

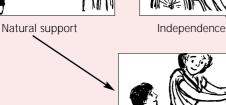
Including disabled people in society: an integrated approach

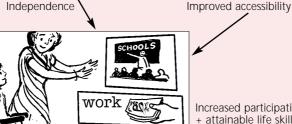












Increased participation + attainable life skills

id21 insights #55 May 2005

Get moving

Better access to public transport

Encouraging greater access to transport, including public transport, can transform the lives of disabled people. Improved mobility is crucial to alleviating poverty throughout the developing world as it allows people with disabilities to play an active role in society both economically and socially.

Transport Research Laboratories (TRL) Limited in the UK, along with partners in India, Malawi, Mozambique and South Africa undertook a three-year research project aimed at improving access to transport thus reducing mobility barriers for disabled people in developing and transition countries. Although basic problems faced by disabled travellers are similar worldwide, solutions cannot be transplanted from developed to developing countries, as priorities, resources and operating conditions are vastly different.

Enhancing the mobility of disabled people: Guidelines for Practitioners was published as a result of the research. It provides an introduction to disability and transport issues, advice on how to set up a programme for improving access and guidelines for good access practice. Projects that informed the Guidelines represented a range of options appropriate to local constraints and were implemented by local partners. Examples include:

- widening entrances, increasing the height of benches, providing large print route information signs and removing barriers in or near bus shelters in Pune
- installing traffic signals to give pedestrians absolute priority, including a push button-activated signal with a beeping sound installed to maximise use to vision-impaired pedestrians in Blantyre
- clear pavement markings and warning signs to motorists in Maputo
- the installation of pavement ramps for wheelchair users at formal road crossings
- paving heavily used footpaths, installing guidance markings along paths, and painting pathways to mark out spaces used exclusively by pedestrians.

Improving footpaths and pavements should be a priority as walking is the major mode of transport for many poor people. Some of the more expensive interventions, such as improving buses, are meaningless unless people can get to the bus. Simple improvements can be extremely effective:

- In Maputo, after safety and access at formal crossings were improved with clearer markings and kerb ramps, the percentage of disabled and older pedestrians using them rather than crossing just anywhere increased from 13 to 73 percent.
- Passenger surveys showed a higher usage of bus shelters and higher levels of comfort after changes were made in Pune.
- In terms of information adequacy and clarity, 50 percent of users surveyed found the information provided at bus stands after the demonstration project had been implemented to be 'very clear' compared to just 4 percent before.

 Information boards were particularly helpful to hearing impaired passengers who valued the independence it gave them.

The Guidelines for Practitioners are a practical, useful resource for policy makers, transport planners, operators, engineers, disabled people themselves and groups representing the interests of disabled people. The publication recommends:

- Infrastructure ought to be constructed according to universal or inclusive design principles, so that they are easy to use and accessible to everyone, whether disabled or not.
- Projects should meet the four elements of SARA namely:
 - Safety, Accessibility, Reliability, Affordability.
- All aspects of an entire trip should be considered, from pre-journey planning to arrival at destination. Disabled people need to know that they will be able to complete their entire journey with confidence
- Disability awareness training can help overcome the lack of awareness among people working in the transport sector, including bus crews and inspectors, managers and policy makers

Jo Sentinella and Dave Maunder

TRL Limited, Crowthorne House, Nine Mile Ride, Wokingham, Berkshire, RG40 3GA, UK T+44 (0) 1344 773131 F+44 (0) 1344 770880 dmaunder@trl.co.uk

See also

Enhancing the mobility of disabled people: guidelines for practitioners by CJ Venter, J Sentinella, T Rickert, D Maunder and A Venkatesh, Overseas Road Note 21, TRL Limited, 2004

www.transport-links.org/transport_links/filearea/ publications/1_831_ORN%2021.pdf

Campaigning for access in Viet Nam

andicap International reports that between 4.5 and 7 million (6 to 9 percent) of Viet Nam's population is disabled, of which up to 42 percent have motor impairments (difficulty with movement). The Youth Disabled Association (YDA) and Handicap International used the occasion of World Disability Day on 3 December 2004 to launch a campaign in Hô Chi Minh to raise public awareness on accessibility issues.

The campaign formed part of ongoing efforts to transform laws on accessibility into concrete changes. It chose to emphasise efforts already made to enhance accessibility. YDA members identified criteria and issued stars to public buildings in recognition of the level of accessibility achieved:

Three stars for full accessibility for

- wheelchair users, with no external assistance required.
- users, with external assistance required.
 One star for accessibility for someone with a disability and able to walk, but no

Two stars for accessibility for wheelchair

with a disability and able to walk, but not for wheelchair users.

YDA and student volunteers undertook

door-to-door screening of 106 public places, including administration offices, shops, places of worship, hotels, and health and education centres. They discussed accessibility issues with managers and provided advice on simple ways to improve access.

Fifty-three percent of the managers were co-operative, immediately displaying the sticker at their front entrance, which included the message, 'Friends with disabilities are welcome' in Vietnamese. One group, however, felt that disabled people did not represent significant potential as clients. A few managers feared being denounced by the authorities for agreeing to changes without permission. Others did not want to display the sticker because they thought it would attract people with disabilities begging for discounts.

Despite these concerns and the small scale of the campaign it was considered successful because it:

- provided the public with a positive image of disabled people, actively involved in overcoming obstacles to their mobility
- demonstrated to managers that small adjustments to their buildings could significantly improve accessibility
- showed that disability issues can be of interest to the public: the campaign was reported on television, in popular newspapers and on the radio.

Campaigns such as these are important because:

- Even if official laws change, efforts must also be made to change people's attitudes and practices, otherwise there will be no discernible benefit for disabled people.
- They demonstrate that disabled people can and should be involved in lobbying for issues that concern them.
- They show that improving accessibility to existing buildings does not always require drastic changes. Many buildings are already at least partially accessible

Patrick Le Folcalvez

Handicap International (Belgium), 133/5 Hoa Hung, Q.10, TP Ho Chi Minh, Viet Nam
T/F +84 8 864 39 31
handicap@hcm.vnn.vn

See also

Accessibility Campaign, Ho Chi Minh City, 28/11-03/12/04, Handicap International, 2004

May 2005

id21 insights #55

After the Tsunami

Are disabled people being ignored?

When the tsunami hit Sri Lanka in December 2004, it killed almost 40,000 people, injured 15,000 and made one million homeless. With the unprecedented levels of donations there is an opportunity to build a fully accessible environment for disabled people; indeed, several organisations, including the Access for All campaign, are lobbying for this. But will the reconstruction serve the needs of the affected people, including those who are disabled?

The International Disability and Development Consortium is researching how disabled people are included in emergency relief work, focussing on response to the Asian tsunami. Despite high levels of resources and numerous references to disability access in humanitarian relief documents:

- There are reports of disabled people being turned away from relief camps and of emergency water and sanitation systems being inaccessible.
- A local government representative asserted that when funding reaches aid workers it is tightly allocated to budget lines with no consideration of disability access.
- Several local relief workers questioned why resources should be spent on disabled people whom, they claimed, they rarely see.
 Yet the United Nations estimates that there are approximately two million disabled people in Sri Lanka – ten percent of the population.
- Numerous reconstruction needs assessments have been completed with no mention of disabled people. If such large numbers of people are being systematically ignored, it calls into question the validity of assessment methods.
- There is widespread belief that inclusion of disabled people requires specialist help, which mainstream relief agencies claim not to have. However, the experts are in fact disabled people themselves.

The Sri Lankan reconstruction work is co-ordinated by the government's Taskforce for Rebuilding the Nation (TAFREN). This includes representatives from the finance, tourism and other business sectors but no one from the affected areas. Different regulations apply to the reconstruction of hotels and ordinary houses in the coastal zone: all but the most severely damaged hotels can be rebuilt in their original locations, whereas reconstruction of houses is prohibited. Fishing communities and their supporters have been demonstrating against the priority



id21 insights is published four times a year and is online at www.id21.org/insights. The id21 site also offers free access to hundreds of short easy-to-read highlights on current international development topics such as health, natural resources, education and social policy issues. To subscribe to our monthly email newsletter email us at id21@ids.ac.uk with the words 'subscribe id21news'. For further information or to subscribe to id21 insights see www.id21.org or contact us at the address below.

Institute of Development Studies University of Sussex Brighton BN1 9RE, UK T +44 (0)1273 678787 F +44 (0)1273 877335 Email id21@ids.ac.uk

id21 is hosted by IDS and supported by the UK Department for International Development. Views expressed in id21 insights do not necessarily reflect those of DFID, IDS or any other contributing institution. Unless rights are reserved in specific cases any article may be copied or quoted without restriction, providing the source (id21 insights) and author are properly acknowledged and informed.
© Institute of Development Studies 2005: ISSN 1460-4205 IDS is a Charitable Company no.877338 limited by guarantee and registered





Infrastructure Editor: Freida M'Cormack Senior Editor: Louise Daniel Editorial & technical support: id21 team Academic adviser: Rubina Lal Design: Robert Wheeler Printed by: Colorscope Printers Ltd Printed on paper produced from sustainable forests

Keywords: Access, accessibility, blind, disability, disabled, impairment, mobility, participation, physical environment, rights, transport, universal access, water and sanitation, wheelchair

Useful web links

Independent Living Institute, Sweden

www.independentliving.org

Enabling Education Network

www.eenet.org.uk

Disability World

www.disabilityworld.org

Disabled People International

www.dpi.org/en/resources/topics/topics-

public_awareness.htm

Asia-Pacific Development Center on Disability

www.apcdproject.org

Associazione Italiana Amici di Raoul Follereau

www.aifo.it/english/resources

World Health Organization Disability and Rehabilitation Programme

www.who.int/ncd/disability/publications.htm

United Nations Enable

www.un.org/esa/socdev/enable

International Disability and Development consortium

www.iddc.org.uk

Dutch Coalition on Disability and Development

www.dcdd.nl

International Foundation for Election Systems

www.electionaccess.org

Action on disability and development

www.add.org.uk

Disability Knowledge and Research

www.disabilitykar.net

Access for All

www.accessforall.lk

Access to water and sanitation for disabled people

www.lboro.ac.uk/wedc/projects/auwsfpdp

Katharina Sprick k.sprick@ich.ucl.ac.uk

being given to tourism development at the expense of their livelihoods. Meanwhile, representatives of NGOs in the disability sector have been lobbying TAFREN's tourist sector for full physical access to reconstructed hotels.

If the new tourist infrastructure in Sri Lanka becomes totally physically accessible, would these places be socially and financially accessible to disabled people, given that over 90 percent of disabled Sri Lankans live on less than US\$2 a day? With or without access, the majority of Sri Lankans, disabled or not, would not be able to use these hotels.

The reconstruction of Sri Lanka is a great opportunity to build a fully accessible environment. The research suggests that:

- Continued pressure is needed on relief agencies if the reconstruction is to be accessible – including agencies that that do not mention disabled people and those that talk about inclusion but do little to put it into practice.
- Care needs to be taken to avoid the rhetoric of inclusion being used to give credibility to policies that are in fact deeply destructive to communities, including disabled people.
- Alliances need to be built between disabled people and others affected by the tsunami, to ensure that reconstruction is really based on everyone's needs

Reherra Ven

Assistant coordinator of Emergency and Conflict research International Disability and Development Consortium rebeccay@blueyonder.co.uk

For copies of the final research report please contact Rebecca or Sue Stubbs c/o administrator@iddc.org.uk after July 2005.

See also

Looking with a disability lens at the disaster caused by the Tsunami in South-East Asia, by Barbara Oosters, Christoffel Blinden Mission (Christian Blind Mission) 2005 www.accessforall.lk/disability_and_emergency_response_tsunami.pdf

id21 insights #55 May 2005