

DEPUTY PRIME MINISTER'S OFFICE
KINGDOM OF ESWATINI

HANDBOOK ON DISABILITY MAINSTREAMING AND DISABILITY- INCLUSIVE BUDGETING

2024





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COMMISSIONED BY THE DEPUTY PRIME MINISTER'S OFFICE, KINGDOM
OF ESWATINI

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Source: United Nations

Foreword

The Government of the Kingdom of Eswatini has recognised the need to develop a handbook manual on disability mainstreaming and disability inclusive budgeting through the support of the United Nations Programme on the Rights of Persons With Disabilities (UNPRPD). This handbook serves as a vital resource for policymakers such as the National Disability Advisory Council for Persons With Disabilities, Government Officials such as the, Disability Secretariat and Planning Officers, Disability Focal Points, National Technical Working Group and the Inter-Ministerial Coordination Committee for Disability Mainstreaming and Coordination of disability issues in Eswatini.

This manual provides practical guidance, best practices and actionable steps to integrate disability perspectives and considerations into policies, programmes and services. By following the principles outlined in this manual, we can make meaningful progress in breaking down barriers, eliminating discrimination and creating an inclusive society, and further to ensure that "No One is Left Behind" in the country's development programmes as enshrined in the United Nations Sustainable Development Goal's Agenda of 2030.

Goals.

It is this based on the above conviction that, with all these instruments in place Persons With Disabilities will be accorded their rightful place in society. Furthermore, they shall be empowered towards the development of the country.



Thulisile Dladla (Senator)
Deputy Prime Minister

Acknowledgements

The Government of the Kingdom of Eswatini extends their gratitude to the United Nations Resident Coordinator's Office, the United Nations Partnerships on the Rights of Persons With Disabilities (UNPRPD) project implementing partners UNFPA (Team Lead) and UNICEF, as well as the UNPRPD Project Coordinator based in the Deputy Prime Minister's Office, Ms Sindisiwe Dube, who played a role in the development of the Disability Mainstreaming Manual, which has emerged as a valuable by-product of the implementation of the Kingdom of Eswatini UNPRPD of 2022–2024, under UNICEF Programme Activities. This achievement is a testament to our collective commitment to fostering inclusivity, empowerment and equal opportunities for Persons With Disabilities in our nation. Their collaboration has been instrumental in providing essential insights, international best practices and resources that have significantly informed the content and structure of the Disability Mainstreaming Handbook.

This handbook serves as a vital resource for policymakers such as the National Disability Advisory for Persons With Disabilities, government officials such as the Disability Secretariat and planning officers, Ministerial Disability Focal Points for Disability Mainstreaming and Coordination, the Interministerial Coordination Committee for Disability Mainstreaming and Coordination Organizations, the Eswatini National Technical Coordination Committee for Disability Issues, organizations of and for Persons With Disabilities, and individuals seeking to promote disability mainstreaming.

It provides practical guidance, best practices and actionable steps to integrate disability perspectives and considerations into policies, programmes and services. By following the principles outlined in this manual, we can make meaningful progress in breaking down barriers, eliminating discrimination and creating an inclusive society, and further to ensure that "No One is Left Behind" in the country's development programmes as enshrined in the United Nations 2030 Sustainable Development Goals.



Melusi Masuku (AMB)

Principal Secretary

Acronyms

CPWA	Child Protection and Welfare Act
CSO	Civil Society Organization
DPO	Disabled People's Organization
ENDPA	Eswatini National Disability Plan of Action
ENSDP	Eswatini National Social Development Policy
ENSSP	Eswatini National Social Security Policy
LDCs	Least Developed Countries
M&E	Monitoring and Evaluation
PWD	Persons With Disabilities
RCO	Resident Coordinator's Office
SIDS	Small Island Developing State
SODVA	Sexual Offences and Domestic Violence Act
UNCRPD	United Nations Convention on the Rights of Persons With Disabilities
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNPRPD	United Nations Partnership on the Rights of Persons With Disabilities

Handbook on Disability Mainstreaming and Disability Inclusive Budgeting



Source: United Nations | Department of Economic and Social Affairs

1. Introduction

1.1 The Kingdom of Eswatini over the years has made tremendous progress in addressing and redressing issues that pertain to Persons With Disabilities in the country. In 2005, Eswatini enacted a Constitution which is the supreme law and provides for the respect, promotion, protection and fulfilment of all human rights and fundamental freedoms under Chapter 3 (Bill of Rights). The Constitution has an express provision on disabilities and lists “disability” as a ground for non-discrimination. In terms of Section 30, Persons With Disabilities have a right to respect and human dignity, and the Government of Eswatini and society shall take appropriate measures to ensure that Persons With Disabilities realize their full mental and physical potential. Further, the Constitution obligates Parliament to make laws which ensure that Persons With Disabilities realize their full mental and physical potential.

2. United Nations Convention on the Rights of Persons With Disabilities

2.1 In 2007, Eswatini signed the United Nations Convention on the Rights of Persons With Disabilities and ratified it in 2012. Its main purpose is to protect the rights of Persons With Disabilities and their inherent dignity. The purpose of the present Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all Persons With Disabilities, and to promote respect for their inherent dignity.

2.2 The United Nations Convention on the Rights of Persons With Disabilities includes those 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.

2.3 Definitions for the purposes of the United Nations Convention on the Rights of Persons With Disabilities (UNCRPD): “Communication”

2.3.1 Communication includes languages, display of text, Braille, tactile communication, large print and accessible multimedia, as well as written, audio, plain-language, human-reader and augmentative and alternative modes, means and formats of communication, including accessible information and communication technology. “Language” includes spoken and signed languages and other forms of non-spoken languages.

2.4 Discrimination on the basis of disability

2.4.1 Discrimination means any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation;

2.5 “Reasonable accommodation”

2.5.1 Reasonable accommodation means necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to Persons With Disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms.

2.6 “Universal design”

2.6.1 Universal design means the design of products, environments, programmes and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. “Universal design” shall not exclude assistive devices for particular groups of Persons With Disabilities where this is needed.

2.7 General principles of the present Convention include the following:

- a. Respect for inherent dignity and individual autonomy, including the freedom to make one’s own choices, and independence of persons;
- b. Non-discrimination;
- c. Full and effective participation and inclusion in society;
- d. Respect for differences and acceptance of Persons With Disabilities as part of human diversity and humanity;
- e. Equality of opportunity;
- f. (f) Accessibility;
- g. Equality between men and women;
- h. Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

2.8 General obligations

2.8.1 2.8.1 States Parties undertake to ensure and promote the full realization of all human rights and fundamental freedoms for all Persons With Disabilities without discrimination of any kind on the basis of disability. To this end, States Parties undertake:

- To adopt all appropriate legislative, administrative and other measures for the implementation of the rights recognized in the present Convention;
- To take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices that constitute discrimination against Persons With Disabilities;
- To take into account the protection and promotion of the human rights of Persons With Disabilities.

2.9 States Parties Reporting

2.9.1 States Parties to the UNCRPD have an obligation to report on measures taken to give effect to their obligations under the Convention. These reports are to be submitted to the Committee on the Rights of Persons With Disabilities (UNCRPD Committee) within two years after the entry into force of the Convention

(first report) and at least every four years thereafter (periodic report).

2.9.2 Apart from UNCRPD Member States' own initiatives to report to the UNCRPD Committee, the UNCRPD Committee may, from time to time, request a Member State to report. To facilitate the reporting process and to ensure that reports are comprehensive and inclusive, the Committee has adopted reporting guidelines prescribing the content of the reports and the manner in which they should be made.

2.9.3 Central to the reporting process is that, when reporting, States Parties are expected to ensure that the reports are diverse and specific, addressing different types of disability, and do not consist of generic reporting. In the reports, States Parties are expected to articulate the measures adopted and the efforts undertaken to ensure the realization of the rights as prescribed in the UNCRPD.

2.9.4 Furthermore, independent reports may also be submitted by Disabled People's Organizations and other interested parties, addressing issues that may have been omitted from the State Report and making suggestions and recommendations for legislative, policy or programmatic changes.

2.9.5 Having received the State Report, the UNCRPD Committee will review the report and make Concluding Observations. The Concluding Observations will contain an assessment of the State's compliance with and implementation of the UNCRPD, and will advise the relevant State as to what further action should be taken to improve its implementation of and compliance with the standards of protection and promotion of the rights of Persons With Disabilities in the relevant country.

3. National Disability Policy of 2013

3.1 Subsequent to ratification of the UNCRPD, a National Disability Policy was developed, adopted and launched in 2013 aimed at mainstreaming disability issues across all development programmes of government. The Disability Policy sought to implement the provisions of the Constitution and ensure the promotion and protection of the full and equal enjoyment of all human rights and fundamental freedoms by all Persons With Disabilities in Eswatini. Further, it is aimed at ensuring the government's commitment to improving the livelihoods of Persons With Disabilities by implementing measures that will warrant equal opportunities in social, economic and political spheres.

4. Persons With Disability Act of 2018

4.1 The National Disability Policy of 2013 was a build-up to the enactment of the Persons With Disability Act of 2018, which sought to provide for the protection of rights and welfare of Persons With Disabilities and to provide for incidental matters.

5. Eswatini National Disability Plan of Action (ENDPA) of 2018-2022

5.1 The development of the National Disability Plan of Action demonstrates the Government of Eswatini's full commitment towards improving the livelihoods of Persons With Disabilities. This plan will complement the implementation of the Persons With Disability Act once fully operationalized and related guidelines to ensure the full compliance with human rights provisions outlined in the Constitution of Eswatini, as well as regional and international instruments.

5.2 The Eswatini National Disability Plan of Action provides a systematic and structured framework for effectively addressing the needs and rights of Persons With Disabilities. It has seven main themes, each targeting the achievement of specified results through the delivery of a range of activities that collectively impact on all line ministries and local government authorities. The seven main themes are:

- **National Coordination and Mainstreaming Mechanism for Disability:** to ensure effective promotion, empowerment, coordination and evaluation of the subsequent programme inputs and mainstreaming of the implementation of the strategic thematic areas of the ENDAP, UNCRPD and national policies and programmes for Persons With Disabilities.
- **Advocacy and Awareness Raising:** to raise awareness at all levels in society, including at the family level, of the rights of Persons With Disabilities and to combat stigma, stereotypes, prejudices and harmful practices related to them, including those based on age and gender, in all areas of life.
- **Social Protection:** to ensure that Persons With Disabilities and families caring for children and/or adults with disabilities, have access to financial and material assistance and a range of quality social services and support programmes, which assist them to access opportunities and choices available to the rest of society and enjoy an adequate standard of living, as documented in article 28 of the United Nations Convention on the Rights of Persons with Disability (UNCRPD);
- **Education and Training:** to ensure that all Persons With Disabilities, irrespective of their gender or the nature or severity of their disability, have equal access to meaningful, age-appropriate early childhood, primary, secondary and higher education and training.
- **Health:** to ensure that Persons With Disabilities have universal access to all public health interventions and the full spectrum of health-care services on an equal basis to other members of society.
- **Skills development and the labour market:** to improve the socioeconomic status of Persons With Disabilities and ensure equal participation in the economic development of Eswatini through skills development and access to the labour market as employees or entrepreneurs.
- **Infrastructure and the environment:** to remove all infrastructural, environmental, physical, social and cultural barriers that restrict the capacity of Persons With Disabilities to participate fully in the life of the community.

6. Eswatini National Social Development Policy (ENSDP) 2010

6.1 The National Social Development Policy recognizes that social welfare services have been provided in Eswatini since the 1950s, but in the absence of a national policy framework. Many of the vulnerable population groups highlighted as needing social support are those also targeted by social assistance programmes, such as children, youth, older persons and Persons With Disabilities. The ENSDP identifies social protection – defined as including social security, social services and developmental social welfare – as a key set of interventions for improving the social wellbeing of all Emaswati.

7. Draft Eswatini National Social Assistance Policy 2022

7.1 The Eswatini National Social Assistance Policy (ENSAP) was drafted in consultation through the Deputy Prime Ministers' Office, government sector ministries including the Prime Minister's Office, the Ministries of Finance, Economic Planning and Development, Public Service, Labour and Social Security, Health, Tinkhundla and Regional Development, Education and Training, and Agriculture. Non-governmental organizations and the Council of Churches also participated. The ENSAP adopts a life-cycle approach to address poverty and vulnerability in Eswatini, building on existing programmes such as old age grants, disability grants, orphan and vulnerable children education grants, and school feeding. Challenges identified include under-funding (inadequate benefits) and under-coverage (gaps in the life cycle). The ENSAP aims to strengthen the social assistance system and fill the life-cycle gaps. Strategic interventions include cash transfers for pregnant and lactating women (maternity benefit), children (child benefit) and youth, and strengthened provision of grants to older persons and Persons With Disabilities. The ENSAP also proposes a number of institutional mechanisms, such as a National Social Protection Council and Regional Social Protection Committees.

8. Draft Eswatini National Social Security Policy of 2022

8.1 The Eswatini National Social Security Policy (ENSSP) complements the National Social Assistance Policy in that it sets out social insurance provisions that, together with social assistance, are the two main branches of all social protection systems. Existing social security schemes in Eswatini cover a limited range of risks, mainly related to old age, disability and death of workers. The National Social Assistance Policy aims to extend social insurance to cover sickness, maternity, employment injury, illness and unemployment. Guiding principles of the ENSSP include providing a “social protection floor” to all and extending coverage to workers in the informal economy.

9. Eswatini Strategic Road Map 2019–2022

9.1 The Eswatini Strategic Road Map (ESRM) sets out a vision that aims to grow the economy and improve the living standards of Eswatini's citizens. “Social Safety

Net” is one of five priority themes identified, with the Deputy Prime Minister’s Office and Health and Education as implementing ministries. One medium-term focus is: “Improve quality of life for underprivileged Emaswati: Streamline social grants through census, improve access through mobile/EFT payments & increase social grants.”

9.2 There are other pieces of legislation in place that promote and safeguard fundamental rights and freedoms for all which cater for Persons With Disabilities on an equal basis with others. These include the Sexual Offences and Domestic Violence Act No. 15 of 2018 (SODVA); Children’s Protection and Welfare Act No. 06 of 2012 (CPWA); Employment Act No. 05 of 1980 (as amended); and Industrial Relations Act No. 01 of 2000 (amended), among others.

10. The African Disability Protocol on Human and People’s Rights for Persons With Disabilities

10.1 Background to the African Disability Protocol in May 2003

10.1.1 Ministers at the African Union Commission Ministerial Conference on Human Rights in Africa, held in Rwanda, called for the development of a “protocol on the protection of the rights of People With Disabilities and the elderly” (Kigali Declaration, para. 19). A decision was later taken to separate the Protocol into two distinct Protocols. A Disability Protocol was released for comments in 2010 by the then combined working group on Older Persons and Persons With Disabilities. The Kingdom of Eswatini has already received Cabinet approval to sign and ratify these two Africa Protocols at the earliest convenient time.

11. The United Nations Sustainable Development Goals (UNSDGs) and Disability

11.1 The 193-member United Nations General Assembly formally adopted the 2030 Agenda for Sustainable Development, along with a set of bold new Global Goals, which Secretary-General Ban Ki-moon hailed as a universal, integrated and transformative vision for a better world.

11.2 “The new agenda is a promise by leaders to all people everywhere. It is an agenda for people, to end poverty in all its forms, the overarching principle is **‘Not to Leave Anyone Behind’** – an agenda for the planet, our common home,” declared Mr Ban as he opened the United Nations Sustainable Development Summit, which took place from 25–27 September 2015 at the United Nations Headquarters in New York.

11.3 Disability is referenced in various parts of the UNSDGs and specifically in parts related to education, growth and employment, inequality, and accessibility of human settlements, as well as data collection and monitoring of the SDGs; for instance:

- **Goal 4**, on inclusive and equitable quality education and promotion of lifelong learning opportunities for all, focuses on eliminating gender disparities in education and ensuring equal access to all levels of education and vocational training for the vulnerable, including Persons With Disabilities. In addition, the

proposal calls for building and upgrading education facilities that are child, disability and gender-sensitive and also provide safe, non-violent, inclusive and effective learning environments for all.

- In **Goal 8** – to promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all – the international community aims to achieve full and productive employment and decent work for all women and men, including for Persons With Disabilities, and equal pay for work of equal value.
- Closely linked is **Goal 10**, which strives to reduce inequality within and among countries by empowering and promoting the social, economic and political inclusion of all, including Persons With Disabilities.
- **Goal 11** works to make cities and human settlements inclusive, safe and sustainable. To realize this goal, Member States are called upon to provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, such as Persons With Disabilities. In addition, the proposal calls for providing universal access to safe, inclusive and accessible green and public spaces, particularly for Persons With Disabilities.
- **Goal 17** stresses that in order to strengthen the means of implementation and revitalize the global partnership for sustainable development, the collection of data and monitoring and accountability of the SDGs are crucial. Member States are called upon to enhance capacity-building support to developing countries, including least-developed countries (LDCs) and small island developing States (SIDS), which would significantly increase the availability of high-quality, timely and reliable data that is also disaggregated by disability.

12. Africa Agenda 2063

12.1 The Africa Agenda 2063 envisions “The Africa we want” and represents a shared strategic framework for inclusive growth and sustainable development. It also presents a global strategy to optimise the use of Africa’s resources for the benefit of all inhabitants of the continent. With regard to disability, the implementation plan (2014–2023) specifically singles out the disabled as part of currently marginalised and vulnerable groups as part of its aspiration.

- This aspiration reads “A prosperous Africa based on inclusive growth and sustainable development”, and the specific target under this aspiration referring specifically to inclusion is: “Every African would see an improvement in his or her standard of living. It will be manifested by increases in real incomes by at least 30 per cent. This will be fuelled by sustainable inclusive economic growth and transformation that expands job opportunities to at least one in four persons looking for work, coupled with State income support to the vulnerable, the marginalised and the disabled in the society.
- “The proportion of the labour force not receiving liveable wages would have declined by at least 25 per cent. Incidences of hunger and malnutrition would have been reduced by at least 80 per cent and hunger by at least 30 per cent,

with accent on women.” This aspiration is also encapsulated in the UNSDG indicators that will specifically measure aspects related to disability and aggregate data on disability status, as discussed in the previous section, and no additional measurement requirements are envisaged.

- Furthermore, in addition to the UNCRPD framework, the 2030 UNSDG and Africa Agenda 2063 provide leverage opportunities for the disability sector to encourage national governments to mainstream not only the implementation of disability-friendly policies, but also the measurement of these. After all, it is generally true that “what gets measured gets improved”.

13. Eswatini Disability Profile, 2017

13.1 The Population and Housing Census 2017 indicates that there are of 146 554 Persons With Disabilities in the Kingdom of Eswatini, representing 13 per cent of the total population. These are categories of Persons With Disabilities who have difficulty or limitations in seeing, hearing, speaking, walking/climbing, remembering/concentrating, and self-care. Three per cent are not able to perform basic functions at all and are completely disabled.

13.2 The Census further indicates that 16 per cent of females have difficulty compared with 11 per cent of males. Rural populations have a high percentage of people with disability at 15.1 per cent compared with 8 per cent from urban populations.

13.3 The age profiling indicates that the highest percentage of difficulties are observed among adults aged above 80 years at 9.1 per cent of the population. The age group between 45–79 has a rate of 7 per cent, the age group of 20–49 has a rate of 5 per cent and the 5–19 age group 6 per cent.

13.4 The prevalence of sight disability is the highest (32.6%) followed by walking disability (26.5%), hearing (15.0%), cognition (12.0%), self-care (9.1%) and lastly communication disability (4.7%). The causes of disability are 15 per cent prenatal, 51 per cent due to injury, 9.6 per cent due to illness, and 1.3 per cent from domestic violence.

14. Understanding, defining and demystifying disability

14.1 Definition of disability: The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) does not explicitly define disability. However, elements in its Preamble and article 1 provide guidance to clarify the application of the Convention:

14.1.1 “Disability” – The Preamble recognises that “disability is an evolving concept and that disability 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.

14.1.2 “Persons With Disabilities”

Article 1 of the UNCRPD states that “Persons With Disabilities include those

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.” Several elements of these provisions are important to highlight.

14.2 First, there is international recognition that “disability” is an evolving concept. This means that the notion of “disability” is not fixed and that it can change, depending on the prevailing environment from society to society.

14.3 Second, disability is not considered a medical condition, but rather a result of the interaction between negative attitudes or an environment that does not accommodate the condition of particular persons. By breaking down and removing attitudinal and environmental barriers – as opposed to treating Persons With Disabilities as problems to be resolved – these persons can participate as active members of society and enjoy the full range of their rights

14.4 Third, the UNCRPD does not restrict coverage to particular persons; rather, it identifies persons with long-term physical, mental, intellectual or sensory disabilities as beneficiaries under the Convention. The reference to “includes” assures that this need not restrict the application of the Convention – in other words, the Convention provides a floor, not a ceiling, for determining who is included and States Parties could also extend the protection to others, for example, persons with short-term disabilities or who are perceived to be a part of these group.

15. Disability as an evolving concept (from Charity to Medical to Social and Human Rights-based Models)

15.1 The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) entrenched disability as a human rights issue, rather than a social welfare issue. It affirms disability as a human diversity issue, not a case of deficit. It advocates and places States Parties under obligation to put measures in place that protect the rights of Persons With Disabilities.

15.2 It is vital that we deepen our understanding and knowledge of disability as a human rights issue and social construct, and how the social model of disability impacts how we find solutions to the challenges that Persons With Disabilities experience. This assists us to understand the marginalisation of Persons With Disabilities from an intersectionality perspective and how these factors intersect in shaping their opportunities and lives. It also provides insights and contexts into how the inclusion of disability in regional and human rights instruments has evolved over the past few decades.

15.3 The Charity Approach

15.3.1 The charity approach treats Persons With Disabilities as passive recipients of kind acts or welfare payments, rather than as empowered individuals with rights to participate in political and cultural life. The mindset that characterises this approach is that Persons With Disabilities are not considered able to provide for themselves because of their impairment. Consequently, society provides for them. From this perspective, Persons With Disabilities are the target of pity and

they depend on the goodwill of society. Under this model, Persons With Disabilities are disempowered, not in control of their lives and have little or no participation. They are considered a burden on society. Because charity comes from goodwill, the quality of “care” is not necessarily consistent or even important. The charity approach increases the distance between Persons With Disabilities and society rather than promoting equality and inclusion.

15.4 The Medical Approach

- In the medical model, individuals can be “fixed” through medicine or rehabilitation to get back to society. To be considered able to provide for themselves, Persons With Disabilities have to be “cured” of the impairment, or at least the impairment has to be reduced as much as possible. This approach considers no environmental conditions and disability is an individual problem. Persons With Disabilities are regarded as sick and have to be fixed to reach normality. This model is often mixed with the charity approach.

15.5 The Social Approach

- The social approach introduces very different thinking: disability is recognised as the consequence of the interaction of the individual with an environment that does not accommodate that individual’s differences. This lack of accommodation impedes the individual’s participation in society. Inequality is not due to the impairment, but to the inability of society to eliminate barriers challenging Persons With Disabilities. This model puts the Person at the centre, not his or her impairment, recognising the values and rights of Persons With Disabilities as part of society.
- With the social model, disability is not a “mistake” within society, but an element of its diversity. Disability is a social construct –the result of the interaction in society between personal factors and environmental factors. Disability is not an individual problem, but the outcome of a wrong structuring of society.
- As a consequence, society should restructure policies, practices, attitudes, environmental accessibility, legal provisions and political organizations and therefore dismantle the social and economic barriers that prevent full participation of Persons With Disabilities. It opposes the charity and medical approach by establishing that all policies and laws should be designed with the involvement of Persons With Disabilities. The model further stresses that Persons With Disabilities must actively participate in transformation processes that impact their lives.

15.6 The human rights approach

- The human rights approach to disability builds on the social approach by acknowledging Persons With Disabilities as subjects of rights, and the State and others as having responsibilities to respect these persons. It treats the barriers in society as discriminatory and provides avenues for Persons With Disabilities to complain when they are faced with such barriers.
- A rights-based approach to disability is not driven by compassion, but by dignity and freedom. It seeks ways to respect, support and celebrate human

diversity by creating the conditions that allow meaningful participation by a wide range of persons, including Persons With Disabilities. Instead of focusing on Persons With Disabilities as passive objects of charitable acts, it seeks to assist people in helping themselves so that they can participate in society, in education, at the workplace, in political and cultural life, and defend their rights through accessing justice.

16. Disability Etiquette

16.1 Conversational Disability Etiquette

- Call a Person With a Disability by his/her name and refer to a person's disability only when it is related to what you are talking about;
- Be eloquent, audible and avoid using lots of non-verbal illustrations;
- Do not assume that a Person With a Disability needs your help. Ask before acting;
- Make eye contact and speak directly to the person, not through their companion;
- Avoid actions and words that suggest the person should be treated differently;
- When greeting a person with a severe loss of vision, always identify yourself and others who may be with you;
- Listen attentively when you are talking to a person who has a speech impairment. Keep your manner encouraging, rather than correcting.

16.2 Recreational Disability Etiquette

- Use a normal tone of voice when extending a verbal welcome. Don't raise your voice unless requested;
- When introduced to a Person With a Disability, it is appropriate to offer to shake hands. People with limited hand use or who wear an artificial limb can usually shake hands;
- Treat adults in a manner befitting adults;
- If an interpreter is present, speak to the person who scheduled the appointment, not to the interpreter. Maintain eye contact;
- Help in a dignified manner with sensitivity and respect. Be prepared to have the offer declined. Don't proceed to assist if your offer is declined. If the offer is accepted, listen to or ask for instructions

17. Disability Terminology Chart

17.1 When referring to Persons With Disabilities, chose words that reflect and support dignity and respect as part of affirmative action. Use language that describes the person's disability, not the person. It is always the person first, before the condition the person finds himself or herself in. The following are some of the terminologies that

reflect dignity and respect, as follows:

Inappropriate	Appropriate
Persons Living With A Disability	Persons With a Disability, Persons With Disabilities
Crippled, suffers from, afflicted with, stricken, victim of, invalid	Has a disability, is a Person With a Disability, Persons With a Physical Disability
Retarded, retard	Person with an intellectual disability or a Person With Cognitive Disability
Deaf and dumb, mute	Person With a Hearing Disability, “Deaf Community”
Spluttered, tongue tied	Person With Speech Impairment, who has speech disability, speech disorders, or communication disorders
Blind person	Person With a Visual Impairment
Normal person, healthy, whole	People without disabilities, able bodied, person who is able to walk, able-bodied person, persons who can see etc.
Albino, albinos	Person With Albinism
Autistic	Person With Autism Spectrum Disorders, Person With Autism
Epileptic	Person With Epilepsy
Dwarf, midget	Short-Statured Person, Little Person
Blind	Visually Impaired Person
Crazy, maniac, lunatic, insane, nuts, deranged, psychotic, demented	People with emotional disorders, mental illness, mental health disability, psychiatric disability
Wheelchair-bound, bound/restricted to a wheelchair, confined to a wheelchair	Person who uses a wheelchair, Wheelchair user
Physically disabled/crippled	Person With a Physical Disability

17.2 Some Do’s and Don’ts in the Deaf Culture

Do’s:

- Tap gentle on the shoulder;
- If beyond reach to tap, wave in the air until eye contact is established;
- Switch light on and off to get attention;
- Establish comfort between you and the person involved in communication;
- Eswatini Sign Language is visual, therefore eye contact is used to progress message;
- Eye contact can be used as a turn-taking technique, especially in group

discussions where everyone is participating

Dont's:

- Hit hard on the shoulder;
- Throw an object directly at the Deaf Person;
- Shout at the Deaf Person in public or in conversation;
- Talk to Deaf Persons in dark spots or busy areas;
- Ignore a Deaf Person when in conversation with you

18. United Nations International Disability Days

18.1 The United Nations observes several days dedicated to raising awareness about disability issues. Here are some of the significant disability-related observance days recognised by the UN:

4th January each year is World Braille Day. It is observed in order to raise awareness on the importance of Braille as a means of communication in the full realisation of the human rights of Blind and Partially Sighted People;

1st March each year is International Wheelchair Day, an annual day of events and activities that take place around the world when wheelchair users celebrate the positive impact a wheelchair has on their lives;

2nd March each year is World Down Syndrome Day. This day is dedicated to promoting the rights, well-being and inclusion of individuals with Down Syndrome. It aims to raise awareness about Down Syndrome and highlight the abilities and accomplishments of people with this condition;

4th March each year is World Hearing Day. It provides an opportunity to raise community awareness on hearing impairments and ways to protect your hearing from damage;

2nd April each year is World Autism Awareness Day. This day focuses on raising awareness about autism spectrum disorders, promoting acceptance and inclusion of individuals with autism, and ensuring that they enjoy full and equal rights;

13th June each year is World Albinism Day, which is dedicated to raising awareness about albinism and promoting the rights and well-being of people with albinism worldwide. The significance of World Albinism Day lies in its goals and the challenges faced by individuals with albinism;

25th June each year is World Vitiligo Day. This is an initiative aimed to build global awareness about vitiligo, a loss of colour in the skin creating a variety of patterns on the skin from loss of pigmentation;

27th June each year is the International Day of Deafblindness. It is aimed at increasing awareness of people with deafblindness in our communities and promoting their rights and wellbeing;

23rd September is the International Day of Sign Language. The day seeks to raise awareness of the importance of sign language and the full realization of human

rights of people with hearing impairments;

2nd October each year is World Sight Day, which is an annual day of awareness held to focus global attention on blindness and vision impairment;

6th October each year is World Cerebral Palsy Day. The Day advocates for people with cerebral palsy and their families, and the organizations that support them, to ensure that children and adults with cerebral palsy have the same rights, access and opportunities as anyone else in our society;

15th October each year is White Cane Day. The Day advocates for the recognition of white canes that enable Visually Impaired Persons to travel safely and independently. The white cane does keep Visually Impaired Persons safe from drivers and other pedestrians, who can easily see it. It is also a tool that Visually Impaired Persons use to explore and navigate the environment;

25th October each year is World Spina Bifida and Hydrocephalus day. The aim of the Day is to raise awareness and understanding about spina bifida and hydrocephalus. On this day, we also advocate for and promote the rights of persons with these conditions;

23rd September each year is the International Day of Sign Languages. This Day recognises and celebrates the importance of sign languages as a means of communication and expression for deaf people. It seeks to raise awareness about the vital role sign languages play in the realisation of the human rights of deaf individuals;

3rd December each year is the International Day of Persons With Disabilities. This Day aims to promote the rights and well-being of Persons With Disabilities and to increase awareness of their situation around the world. It also seeks to mobilise support for the dignity, rights and inclusion of Persons With Disabilities in all aspects of society.

19. Disability Mainstreaming

19.1 Definition and approaches

19.1.1 General definitions: “Mainstreaming” means including/ incorporating into the mainstream. It is a systematic consideration of the differences between the different conditions, situations and needs of disadvantaged groups in all policies and programmes at the point of planning, implementation, monitoring and evaluation. By seeing impairment as an ordinary part of life, and disability as the result of discrimination and exclusion, Albert (2004) points out that the social model has underpinned efforts to extract disability from the medical and special needs ghetto and to push for the mainstreaming of disability concerns in all development policies and practices. Although this is yet to happen, there have been numerous positive statements of intent by both governments and international agencies about the need to mainstream disability in all sectors (Albert, 2004).

19.1.2 Disability mainstreaming is a strategy for making the concerns and experiences of Persons With Disabilities an integral dimension of the design,

implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres so that Persons With Disabilities benefit equally (Handicap International, 2009).

19.1.3 Disability mainstreaming implies that all development interventions are planned and implemented in such a way that Persons With Disabilities, their needs, rights and potential are taken into account on equal terms with those of other population groups (CBM, 2007). To reiterate, disability mainstreaming is a method that promotes inclusion and addresses the barriers that exclude Persons With Disabilities from full and equal participation in society. Mainstreaming disability is not about adding a component of Persons With Disabilities or even adding a component of equality, empowerment or rights into an existing activity. It goes beyond increasing their participation; it means bringing the experience, knowledge and interests of Persons With Disabilities into the development agenda. It may entail identifying the need for changes in this agenda. It may require changes in goals, strategies and actions so that Persons With Disabilities (both women and men) can influence, participate in and benefit from development processes.

20. Disability-Inclusive Development

20.1 Definition of Inclusive Development

20.1.1 “Inclusive development” occurs when the entire community, including Persons With Disabilities, benefits equally from development processes. Inclusive development encourages awareness of and participation by all marginalised groups; it specifically respects the diversity that disability brings and appreciates that it is an everyday part of the human experience. Disability-inclusive development sets out to achieve equality of human rights for Persons With Disabilities as well as full participation in, and access to, all aspects of society.

21. Development of a National Disability Mainstreaming Plan

21.1 Value chain of disability mainstreaming plan. Planning for disability-inclusive development includes:

21.2 Elaboration:

21.2.1 Development of National Disability Mainstreaming Action Plan and how this can be one practical way of putting the African Disability Protocol into practice;

21.2.2 Supporting governments, national federations and members of organizations of Persons With Disabilities, as well as other relevant non-State actors, to develop a National Disability Mainstreaming Plan (NDMP) by using a process of participatory planning;

21.2.3 Contributing to efforts by government, organizations of Persons With Disabilities and other non-governmental organizations to improve the quality of life of Persons With Disabilities. The national disability mainstreaming processes are:

21.2.4 Sector-wide – thus different government ministries are enabled to plan and allocate budgetary resources to disability work that is linked to the core business of each ministry/department and unit;

21.2.5 Used by governments and organizations of Persons With Disabilities to raise resources through multilateral development cooperation;

21.2.6 Based on a common vision shared by organizations of Persons With Disabilities, civil society organizations and governments;

21.2.7 Aimed at uniting the common interests of organizations of Persons With Disabilities, thus reducing unhealthy competition for resources and organizational rivalry;

21.2.8 Usable by and of benefit to different categories of disabilities for the benefit of their constituencies. It should be noted that there are several steps involved before the actual Disability Mainstreaming Plan is developed and there are specific steps that follow to ensure its implementation and monitoring.

21.3 Steps in disability mainstreaming process:

21.3.1 The process of disability mainstreaming may be divided into five steps, namely, initiation, analysis, formulation, implementation, and monitoring and evaluation.

- **Initiation stage:**

This stage involves the identification of stakeholders and resources to engage in the actual mainstreaming process.

- **Analysis stage:**

This stage focuses on carrying out a baseline study and analysing the existing situation of disability.

- **Formulation stage**

21.4 Actual development of the Disability Mainstreaming Plan. This is the area where the actual planning takes place, after several preparatory steps. This part of the unit focuses on the development of the National Disability Mainstreaming Plan (NDMP), which informs other plans such as the National Development Plan and government ministerial plans. It should also be noted that the approaches towards the development of a National Disability Mainstreaming Plan differ from country to country depending on the situation and the opportunities available.

21.5 However, to ensure effective mainstreaming, different government ministries are encouraged to bring their already-existing ministerial plans to the process of developing the National Disability Mainstreaming Plan. Disability issues, therefore, would be fully embedded in different ministerial plans and would not be seen as an extra parallel plan that requires special resources to implement. The following should be taken into account in formulation stages of the Disability Mainstreaming Plan:

- i. Agreement on development of a national disability plan;

- ii. Baseline study;
- iii. Stakeholder meeting – dissemination of the findings;
- iv. Development of a National Disability Mainstreaming Plan with a monitoring and evaluation (M&E) system;
- v. Development of concrete targets;
- vi. Resource mobilisation plan;
- vii. Implementation.

21.6 Who is responsible for the development of a Disability Mainstreaming Plan?

21.6.1 Although various stakeholders participate in the development of a National Disability Mainstreaming Plan, one government ministry will need to take the lead in this process: this is usually the National Focal Point, National Disability Secretariat, National Disability Advisory Council for Persons With Disabilities or another agency tasked with promoting the rights of Persons With Disabilities. Each country will identify their lead ministry. In some countries, there is a dedicated Ministry for Disability; in others this will be the responsibility of the Office of the President or any other ministry that will be given the portfolio responsibility for disability issues.

21.6.2 What is important is that a particular unit or department is expressly identified as being in charge of the task. As disability is a cross-cutting issue, all government ministries will need to be involved in the process.

21.6.3 Ideally, each ministry should identify Disability Focal Points. The National Disability Mainstreaming Plan will provide a precise roadmap indicating the priority actions that need to be taken by each government ministry to mainstream disability in national policies, services and programmes. The final version of the plan should reflect the overall stakeholder's consensus. Different government ministries will need to identify lead persons and departments (Disability Focal Points) to develop an initial draft for their ministries and who will communicate with the overall coordinator of the mainstreaming projects. It will be important that this person (incumbent) has the relevant capacity and seniority to carry out this task. Focus should be given to, among others, the following:

21.6.4 The need for extensive consultations in the process:

- a. Relationships/interaction within government ministries;
- b. Round-table discussions;
- c. Departmental cooperation during the development of draft plans;
- d. The case for interministerial planning and lead ministries;
- e. The building of sustainable partnerships between government and organizations of Persons With Disabilities, civil society and the private sector.

21.6.5 Role of Persons With Disabilities and their representative organizations

21.6.5.1 The disability movement needs to play a pivotal role in the

process; and it will be important to negotiate with the government to locate the entry points for participation of the national Federation of Persons With Disabilities, DPOs and other civil society allies.

21.6.5.2 The movement organizes events such as workshops, road shows and conferences in which organizations of Persons With Disabilities and civil society organizations (CSOs) participate with the aim of offering open discussions and to exchange information. The participation of Persons With Disabilities and their representative organizations is critical to the success of any multi-stakeholder effort to advance the implementation of the African Disability Protocol and other international treaties ratified by each State.

21.6.5.3 Persons With Disabilities and their representative organizations provide a greater understanding of the actual experience of disability and thus create a basis for informed decisions. Moreover, participation and inclusion are empowering and facilitate active agency in decision-making. Including Persons With Disabilities, their organizations and other CSOs in multi-stakeholder partnerships, whether focused on development planning or other aspects of UNCRPD implementation, positions them to become actors in development and social life more generally.

21.6.5.4 In actively consulting with Persons With Disabilities and their representative organizations, it is important that steps are followed to ensure full and effective participation. It is important to take into account accessibility considerations in order to ensure the full participation of all members. Advance planning by relevant government officials is, therefore, necessary and important. It is important for organizations to have a close working relationship with the consultant/ministerial coordinator drafting the document.

21.6.5.5 For organizations of Persons With Disabilities to ensure that the Disability Plan has clear targets and indicators, these organizations should have already developed their lists of priorities in the various sectors. Some federations may decide to form sectorial task groups or identify Disability Focal Points for specific themes, for example, education and training, legal capacity, labour, social security and health. Where necessary, organizations of Persons With Disabilities should seek expert advice on the identified topics.

21.6.5.6 Advisors should have technical knowledge about the current situation and how measurable targets and indicators can be set that build on the existing situation. This will enable organizations of Persons With Disabilities to make clear their priorities to the government and lobby for concrete targets and indicators. Once an initial draft has been developed by the government, opportunities for feedback, both oral and written, should be created. It will be important to agree with the government to host a meeting/workshop/conference where the Draft Disability Plan is presented. At this workshop, everyone will be able to give feedback and this will be the opportunity to lobby for any missing activities, as well as specific targets and indicators.

22. Contrasting government roles with the roles of organizations of Persons With Disabilities.

22.1 Government needs to understand its role vis-à-vis the roles of Disabled People's Organizations (DPOs). Below is a summary displaying the different roles to be played by the two sectors.

22.2 Discussions will explore:

- DPOs' pivotal role of advocacy and leadership with clear tasks;
- Agreement versus consensus;
- Ensuring inclusion of the needs of marginalised DPOs. There is increasing acceptance of the role of Disability Focal Points. There are many arguments for and against this approach. Those in support view focal points as mechanisms that ensure disability mainstreaming. However, some argue that Disability Focal Points are often used as "dumping grounds" for all matters related to Persons With Disabilities (including housing, assistive devices, transport and others). Below are typical roles played by Disability Focal Points.

22.3 Disabled People's Organizations

Demand side: Disabled People's Organization	Supply side: Government and Duty Bearers	Shared roles between governments and Disabled People's Organization
Advocacy and influencing	Policy and legislative framework	Awareness-Raising
Research and evidence	Systems/structures/programmes	Knowledge-building and capacity development
Partnership building	Partnership-building and coordination	Partnership in implementation of programmes
Resource mobilization	Planning and budgeting	Reporting to relevant bodies nationally and internationally
Participation in policy development, planning, implementation and monitoring	Implementation and monitoring and evaluation	

23. Financing disability-inclusive plans

23.1 Budget/fiscal allocation

23.1.1 It is critical for the government to state expressly how it plans to fund the planned activities. Requisite budget lines should be specifically identified. Often, activities are planned without having been budgeted for, a situation that should be avoided at all costs. Budget considerations should include, but not be limited to:

- Activities geared towards implementation;

- Training of stakeholders, especially focal points;
- Awareness-raising and advocacy work;
- Coordination;
- Monitoring and reporting;
- Publication and networking (for instance, establishment of disability information centres, website, conferences, newsletters);
- Research;
- Policy reform/harmonisation.

24. Financing disability

24.1 The “why” question – why finance disability? – needs to be addressed. Budgeting is the term used to indicate the necessary financial means for implementing a specific activity. To ensure the right to equality of Persons With Disabilities, it is imperative to allocate a budget to that effect. This should be done at the level of planning when examining opportunities to improve disability rights; improving institutional capacity to address these rights; assessing the possible impediments to policy reform; and framing feasible policy innovations.

24.2 Each and every step of the process should be allocated adequate resources. In addition, in the monitoring and evaluation phase, it is important to capture which resources were allocated to disability, as this will give a picture of the implementation of disability rights.

24.3 The “how” question – the strategy used to budget for inclusion – should be infused/mainstreamed within the national and provincial budgets. This means that various ministries would have to infuse disability into their budgeting. For example, the Department of Education should budget for inclusive education at all levels of education, including lifelong training, if article 24 of the UNCRPD is to be implemented. Similarly, the Departments of Health, Social Security and other departments should do the same.

24.4 This budgeting should include all reasonable accommodation measures and assistive technologies; the training of different experts; inclusive transport systems; and access needed for the full inclusion of Persons With Disabilities. Resourcing for disability financing may rely on domestic and international financing. At the domestic level, States should meet funding benchmarks, increase the tax base and increase the use of existing resources, as well as other resources at the national level.

24.5 Public–private partnerships and international cooperation: the government may enter into a partnership with the private sector to raise the much-needed resources for disability financing. The UNCRPD under article 32 enables States Parties to reach out to international donors and other States for international cooperation for disability financing. This provides an avenue to international cooperation for financing disability. Development assistance should ensure disability mainstreaming in various projects. In general, good inclusive budgeting education “is the result not just of sufficient financing, but strategic use of existing resources, inclusive legislation, policies and systemic reform programmes, effective partnerships and priorities that lead to results”

(Commonwealth Education Hub, 2015). Practically, mainstreaming disability in the policy reform process entails designing the appropriate tools. This occurs in two steps, namely:

24.6 Defining the objective and identifying expected results:

- a. Defining the objective of the reform: to assign disability inclusion and to include disability-related costs in the budget;
- b. Defining the expected results;
- c. Monitoring and evaluation of disability inclusion in the projects/policies – when activities required for disability inclusion are planned, what are effective ways to:
 - Break barriers to inclusion?
 - Provide proof that disability is really included? Are barriers to inclusion broken?
 - The related (administrative and operational) costs are considered in the budget – how much was budgeted for inclusion? What percentage of the budget was allocated?

24.7 Examples of Disability Budgeting

Budget items for disability inclusion

- Administrative costs;
- Awareness of the staff and managers on disability;
- Workplace adaptations permitting the recruitment of Persons With Disabilities (IT and accessible software, etc.). Budget items for disability inclusion – operational costs:
 - Awareness on disability, to reduce social and institutional barriers;
 - Liaison with different stakeholders involved in the project;
 - Adaptation of buildings and transport policies;
 - Surveys showing the cost impact for including disability;
 - Adaptation of means of communication, including the use of specific services like sign language interpreters;
 - Accessing specific expertise on disability (for disability analysis, or for developing inclusive policies);
 - Specific surveys linking disability and the various sectors.

25. Monitoring and Evaluation of Disability Programmes in Eswatini

25.1 In the context of Eswatini, monitoring and evaluation implementation and outcomes of planned interventions are currently the portfolio responsibility of the Deputy Prime Minister's Office through its National Disability Unit under the Department of Social Welfare. Subsequently, as per one of the key provisions, the

National Disability Advisory Council for Persons With Disabilities has recently been inaugurated and established by the Deputy Prime Minister's Office. The specific mandate and responsibility for the Disability Council is to provide for the overall coordination of the strategic guidance and implementation of the disability policy and the Eswatini National Disability Plan of Action and other related policies.

26. The National Advisory Council for Persons With Disabilities and its establishment

26.1 The Council shall, subject to the provisions of this Act, be independent of the control of any person, including but not limited to any statutory body, advisory council, government or any other entity, in the discharge of its functions.

26.2 Objects of the National Advisory Council

26.2.1 The objects of the Council are to:

- a. Improve the socioeconomic status of men and women, girls and boys with disabilities;
- b. Ensure that all Persons With Disabilities have equal access and opportunities to education, health and other services at all levels;
- c. Ensure that all buildings and infrastructure are accessible to Persons With Disabilities;
- d. Promote inclusiveness and ensure that all institutions provide services to Persons With Disabilities in the same manner as they provide to the non-disabled, except where necessary;
- e. Ensure that policies in general do not have a negative impact on the status of Persons With Disabilities, and in particular vulnerable groups.

26.3 It is envisioned that in the soonest possible time the Government of the Kingdom of Eswatini will establish the Disability Secretariat that will be responsible for the day-to-day running of the activities and programmes of the National Advisory Council for Persons With Disabilities. By extension, the National Disability Unit will be dissolved through a gazette by the Deputy Prime Minister's Office as soon as the Disability Secretariat has been established, to allow for a paradigm shift through progressively addressing issues of disability using the human rights-based approach through the lens of the United Nations Convention on the Rights of Persons With Disabilities.

27. The Disability Secretariat

27.1 Once the Disability Secretariat has been established, it will be responsible for the day-to-day management of the affairs of the Council and for the implementation of the Eswatini Disability Legislative Frameworks, including the provisions for issues of disability in the Kingdom of Eswatini Constitution of 2005; the United Nations Convention on the Rights of Persons With Disabilities, which the country ratified in 2012; Eswatini National Policy of 2013; Eswatini National Plan of Action of 2018–2022

and decisions of the Council; and for the carrying out, on behalf of the Council, of duties that may be assigned to it by the Council.

27.2 Functions of the Secretariat

27.2.1 The Secretariat shall coordinate and facilitate the national multisectoral programmes for the promotion and protection of the rights of Persons With Disabilities and in particular shall:

1. Advise the Council on initiatives and programmes for the promotion and protection of the rights of Persons With Disabilities;
2. On behalf of government be responsible for the planning, promotion, empowerment, mainstreaming, coordination and evaluation of subsequent programme inputs;
3. Recommend a comprehensive disability policy;
4. Coordinate with government agencies and non-governmental organizations for disability programme management and resource programming;
5. Initiate the formulation and development of measures to review, update, validate and disseminate in accessible formats the Eswatini National Disability Plan of Action for disability from time to time and ensure that issues of the new paradigm are incorporated;
6. Monitor and analyse disability and related socioeconomic data for a periodic statement on the country's disability situation;
7. Implement, monitor and evaluate the Eswatini National Disability Plan of Action on disability issues;
8. Develop and implement a comprehensive advocacy, information and education strategy for the Plan of Action; and
9. Provide technical, financial and logistical support to local government ministries, departments, units and agencies for the development and implementation of disability programmes and projects.

27.3 Appointment of Director and other staff of the Disability Secretariat

27.3.1 The Minister shall appoint a Director in consultation with the Disability Council under the terms and conditions of service applicable to the Civil Service Commission.

27.4 The Director of the Disability Secretariat shall be:

1. Head of the Secretariat;
2. Secretary to Council;
3. Responsible for the day-to-day administration and organization of the Council and the Secretariat;
4. Report to the Under Secretary, Principal Secretary of the responsible ministry for issues of Persons With Disability.

27.5 The Disability Secretariat shall, for the purposes of carrying out its functions

under the Persons With Disability Act of 2018, be staffed by civil servants and be housed in the ministry that has the portfolio responsibility in the country.

28. Rationale for the establishment of Disability Mainstreaming Focal Points in the Kingdom of Eswatini

28.1 Context

28.1.1 The Kingdom of Eswatini has a fairly conducive legislative framework that embraces issues of disability in ways that are consistent with the United Nations Convention on the Rights of Persons with Disabilities. These initiatives require the widespread engagement of government ministries, departments and units to achieve effective policy development and implementation. Consequently, there is a need to ensure that all the country's planning is disability-inclusive.

28.1.2 By extension, the Deputy Prime Minister's Office, through the United Nations Programme for Persons with Disabilities (UNPRPD), has embarked on a two-year (2022–2024) Disability Programme in partnership with the relevant United Nations agencies. This Programme seeks to support government, organizations of Persons With Disabilities and civil society organizations in advancing the implementation of the United Nations Convention of the Rights of Persons With Disabilities (UNCRPD), which the country ratified in 2012, by:

- strengthening disability-inclusive accountability and governance;
- advancing equality and non-discrimination;
- ensuring UNCRPD-compliant budgeting and financial management approaches.

28.1.3 Outcomes include the need to ensure that national stakeholders have the knowledge and practical tools to contribute effectively to the development and implementation of disability-inclusive policies and systems. Subsequently, capacity-building for government planners and Disability Focal Points were successfully conducted on disability mainstreaming into policies and national development plans as a result of the implementation of the UNPRPD Programme.

28.1.4 The functions of Disability Mainstreaming Focal Points can include, among others:

1. Advising the Head of State/government, policymakers and programme planners on the development of policies, legislation, programmes, activities, services and projects with respect to their impact on Persons With Disabilities;
2. Coordinating the activities of various government ministries, departments and units on human rights and disability;
3. Coordinating activities on human rights and disability at federal, national, regional, state, provincial and local levels of government;
4. Revising strategies and policies to ensure that the rights of Persons With Disabilities are respected;

5. Drafting, revising or amending relevant legislation;
6. Raising awareness about disability conventions and optional protocols within the government;
7. Ensuring that the disability conventions and optional protocols are translated into local languages and issued in accessible formats;
8. Establishing Disability Action Plans for implementation of the Conventions;
9. Monitoring the implementation of the Disability Action Plans on human rights and disabilities;
10. Raising awareness on disability-related issues and the rights of Persons With Disabilities among the general public;
11. Building capacity within the government on disability-related issues;
12. Ensuring that Persons With Disabilities participate in the development of policies and laws that affect them;
13. Encouraging Persons With Disabilities to participate in organizations and civil society, and promoting the creation of organizations of Persons With Disabilities.

29. Reporting structure

29.1 The Disability Mainstreaming Focal Points will report to the following structures:

- Under-Secretaries in their respective ministries;
- Interministerial Coordination Committee;
- Disability Secretariat and the National Disability Advisory Council For Persons With Disabilities, once a quarter and whenever necessary;
- Department of Social Welfare through its National Disability Unit in the Deputy Prime Minister's Office;
- Regional committees:
 - Part of existing regional structures led by Ministry of Tinkhundla and Regional Development, through its functional and active structures that mainstream disability issues at all levels, including the Regional Development Teams at tinkhundla, community development and chiefdom levels.

29.2 Interministerial Committee for Persons With Disabilities

29.2.1 Purpose

29.2.1.1 The interministerial committee shall develop solutions to improve the situation of people with disabilities in Eswatini.

29.2.1.2 Through its engagement and cooperation with the National Disability Secretariat, organizations of People With Disabilities and civil society, the Committee shall promote inclusion, advocate for the human

rights of all Persons With Disabilities and provide recommendations to support the implementation of the provisions enshrined in the Convention.

29.3 Composition of the Interministerial Committee

29.3.1 The committee is an auxiliary organ of the Disability Secretariat and the Disability Council, chaired by the government ministry responsible for disabled people. It is composed of representatives of all government ministries.

29.3.2 The Committee comprises all of the Ministerial Disability Focal Points and planners drawn from all the relevant government ministries and it shall not exceed twenty-five (25) members. The Chairperson shall also sit at the Secretariat meetings for reporting purposes.

29.3.3 Duties

29.3.3.1 Under the authority of the Disability Secretariat and the Disability Council, the Interministerial Committee (IMC) shall steer the intergovernmental work in the field of disability rights. In particular, the Committee shall:

- a. Promote the visibility and raise awareness of disability rights;
- b. (b) Oversee the implementation of the relevant national and international policies, strategies and conventions such as UNCRPD;
- c. Provide expertise to the government through the Council on the development of legislation, policies, practice, training structures and awareness material to support their efforts towards the achievement of the relevant United Nations sustainable development goals (SDGs) and the implementation of relevant international standards, notably the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD); facilitate the exchange of experience and good practice;
- d. Ensure cooperation with the United Nations family, OPDs, the Coordinating Assembly of NGOs (CANGO), other CSOs and the United Nations Office of the High Commissioner for Human Rights (OHCHR), including through participation in relevant meetings, such as sessions of the Conference of the States Parties to the UNCRPD, the Human Rights Council, events and conferences organised by the United Nations entities responsible for disability issues, with the aim of strengthening disability rights as an integral part of universal human rights;
- e. Conduct needs assessments and provide advice on the development of standards, cooperation and monitoring activities within its field of competence;
- f. Ensure that a disability perspective is introduced and maintained in the activities of all relevant ministries;
- g. Advise the Council and the Secretariat on appropriate action to be taken and likewise provide advice as requested on disability-related questions as may arise;
- h. Engage in coordination and joint planning at interministerial level with the United Nations agencies working on the rights of Persons With Disabilities,

OPDs, CANGO, other intergovernmental organizations and civil society organizations;

- i. Act as a liaison organ between the government and the organizations of Persons With Disabilities.

30. Proposed workplan template for government ministries and United Nations agencies on disability mainstreaming of policies, services, activities and programmes

30.1 The template below is a practical guide for all the government ministries and participating United Nations agencies to populate their respective workplans on how they intend to undertake their disability mainstreaming initiative based on their already existing budget allocations in their ministries. Below is an example for the Deputy Prime Minister's Office:

Overall Objective: To ensure the promotion of the rights and fundamental freedoms of Persons With Disabilities, including empowerment to exercise those rights and enjoy equal participation in the life of the communities in which they live, without discrimination of any kind on the basis of their disabilities

Output 1: National Coordination and Mainstreaming Mechanism for Disability

Objective 1: To facilitate the development of disability policies, services and programmes that will facilitate the promotion, empowerment, mainstreaming, coordination and evaluation of subsequent programme inputs of the implemented activities in Eswatini

Activity	Target population	Indicator	Time frame	Responsible person	Budget	Progress			
						Q1	Q2	Q3	Q4

31. References

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ANNEXES

INTERMINISTERIAL COMMITTEE FOR PERSONS WITH DISABILITIES

1. Purpose

The interministerial committee shall develop solutions to improve the situation of Persons With Disabilities in Eswatini.

Through its engagement and cooperation with the National Disability Secretariat, organizations of Persons With Disabilities and other civil society organizations, the Committee shall promote inclusion, advocate for the human rights of all Persons With Disabilities, and provide recommendations to support the implementation of the provisions enshrined in the Convention.

2. Composition of the International Committee

2.1 The committee is an auxiliary organ of the Council, chaired by the government ministry responsible for disabled people. It is composed of representatives of:

1. The Prime Minister's Office (Correctional Services and Royal Eswatini Police)
2. Deputy Prime Minister's Office (Department of Social Welfare)
3. Ministry of Health
4. Ministry of Education and Training
5. Ministry of Finance
6. Ministry of Public Works and Transport
7. Ministry of Foreign Affairs
8. Ministry of Home Affairs
9. Ministry of Tourism and Environmental Affairs
10. Ministry of Justice
11. Ministry of Housing
12. Ministry of Tinkhundla and Administration
13. Ministry of Sports, Culture and Youth Affairs
14. Ministry of Labour and Social Issues
15. Ministry of Agriculture
16. Ministry of Public Service
17. Ministry of Housing and Urban Development
18. Ministry of Commerce, Industry and Trade
19. Ministry of Economic Development and Planning
20. Ministry of Labour and Social Security
21. Ministry of Information, Communication and Technology

2.2 The Committee shall be composed of focal points and planners drawn from all

the government ministries and it shall not exceed twenty-five (25) members. The Chairperson shall be appointed by the Minister responsible for issues of Persons With Disabilities, which is the Deputy Prime Minister's Office. The Chairperson shall also sit at the Secretariat meetings for reporting purposes.

2.3 The committee shall nominate the Vice Chairperson, who will stand in should the Chairperson be excused, and the Secretary for taking minutes during meetings.

2.4 The Committee will work on a voluntary basis.

2.5 A Member of the Committee:

- i. shall hold office for a term not exceeding three years;
- ii. shall be eligible for reappointment for a term not exceeding two consecutive terms;
- iii. may resign or vacate office, by giving one month written notice to the Minister.

3. Duties

Under the authority of the National Disability Council, the Interministerial Committee (IMC) shall steer the intergovernmental work in the field of disability rights. In particular, the committee shall:

- a. promote the visibility and raise awareness of disability rights;
- b. oversee the implementation of the national and international policies, strategies and conventions such as UNCRPD;
- c. provide expertise to the government through the Council on the development of legislation, policies, practice, training structures and awareness material to support their efforts towards the achievement of the relevant United Nations sustainable development goals (SDGs) and the implementation of relevant international standards, notably the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD); facilitate the exchange of experience and good practice;
- d. ensure cooperation with the United Nations family, OPDs, CANGO, CSOs and OHCHR, including through participation in relevant meetings (e.g. sessions of the Conference of the States Parties to the UNCRPD, the Human Rights Council, events and conferences organised by the relevant United Nations entities responsible for disability issues), with the aim of strengthening disability rights as an integral part of universal human rights;
- e. conduct needs assessments and provide advice on the development of standards, cooperation and monitoring activities within its field of competence;
- f. ensure that a disability perspective is introduced and maintained in the activities of all relevant ministries;
- g. advise the Council and the Secretariat on appropriate action to be taken and likewise provide advice as requested on disability-related questions as may arise;

- h. engage in coordination and joint planning at interministerial level with the United Nations, notably the agencies working on the rights of Persons With Disabilities, OPDs, CANGO, other intergovernmental organizations and civil society organizations
 - act as a liaison organ between the government and the OPDs.

4. Revocation of appointment

The revocation of the appointment of a member shall happen where:

- a. the conduct of that member, whether in connection with the duties of that member as a member of the Committee or otherwise, has been such as to bring discredit on the Committee and the Council;
- b. that member has been convicted of:
 - i. an offence involving fraud, dishonesty or immorality;
 - ii. an offence under a law relating to corruption; or
 - iii. any other offence punishable with imprisonment.
- a. that member, due to any reason, is incapable of discharging duties of the Committee.

5. Cessation of membership

A member of the Committee shall cease to be a member if:

- a. that member is absent from three consecutive meetings of the Council without consent of the Chairperson;
- b. the appointment of that member is revoked;
- c. that member dies; or
- d. that member resigns from office by giving one month's notice in writing to the Chairperson.

6. Meetings of the Committee

- a. The Committee shall meet at least four times a year for the performance of its functions, at a time and place determined by the Chairperson.
- b. The quorum of any meeting of the Committee shall be two thirds of membership, including the Chairperson, Secretary and the Treasurer, and decisions of Committee shall be by majority.
- c. The Chairperson shall preside over all its meetings.
- d. If the Chairperson is unable, for any reason, to preside in any meeting of the Committee, the Vice Chairperson shall preside.
- e. The Committee may invite any person to attend any meeting or deliberation of the Committee for the purpose of advising it on any matter under

- discussion, but that person shall not be entitled to vote at the meeting.
- f. The Secretary of the Committee shall take minutes of the meeting and read them at the next meeting.
 - g. Subject to the provisions of this Terms of Reference, the Committee may determine its own procedures for regulating its meetings and proceedings.

7. Reporting

- a. The Committee shall keep records of its meetings, decisions and recommendations.
- b. The Committee shall report to the Secretariat during its meetings or whenever a report is needed by delivering a written report to the Secretariat.

The National Disability Technical Working Group for the Mainstreaming and Coordination of Disability Issues, Deputy Prime Minister's Office, Kingdom of Eswatini

1. Introduction

1.1 The Kingdom of Eswatini over the years has made tremendous progress in addressing and redressing issues that pertain to Persons With Disabilities in the country. In 2005, Eswatini enacted a Constitution which is the supreme law and provides for the respect, promotion, protection and fulfilment of all human rights and fundamental freedoms under Chapter 3 (Bill of Rights). The Constitution has an express provision on disabilities and lists “disability” as a ground for non-discrimination. In terms of Section 30, Persons With Disabilities have a right to respect and human dignity, and the government and society shall take appropriate measures to ensure that Persons With Disabilities realize their full mental and physical potential. Further, the Constitution obligates Parliament to make laws that ensure Persons With Disabilities realize their full mental and physical potential.

1.2 The Population and Housing Census 2017 indicates that there are of 146,554 Persons With Disabilities in the Kingdom, representing 13 per cent of the population. These are categories of Persons With Disabilities who have difficulty or limitations in seeing, hearing, speaking, walking/climbing, remembering/ concentrating and self-care. Three per cent are not able to perform the basic functions, i.e. are completely disabled. The census further indicates that 16 per cent of females have difficulty compared to 11 per cent of males. Rural populations have a high percentage of people with disabilities at 15.1 per cent, compared to 8 per cent from the urban population. The age profiling indicates that the highest percentage of difficulties is observed among adults aged above 80 years at 9.1 per cent of the population. The age group between 45–79 has a rate of 7 per cent, the age group 20–49 a rate of 5 per cent and the 5–19 age group a rate of 6 per cent. The prevalence of sight disability is the highest (32.6%), followed by walking disability (26.5%), hearing (15%), cognition (12%), self-care (9.1%) and lastly communication disability (4.7%). The causes of disability are 15 per cent prenatal, 51 per cent due to injury, 9.6 per cent illness and 1.3 per cent from domestic violence.

2. United Nations Convention on the Rights of Persons with Disabilities

2.1 2.1 In 2007 Eswatini signed the United Nations Convention on the Rights of Persons With Disabilities and ratified it in 2012. Its main purpose is to protect the rights of Persons With Disabilities and their inherent dignity. Subsequent to ratification of the UNCRPD, a National Disability Policy was developed, adopted and launched in 2013 aimed at mainstreaming disability issues across all development programmes of government. The Disability Policy sought to implement the provision of the Constitution and provide for the promotion, protection and ensuring the full and equal enjoyment of all human rights and fundamental freedoms by all Persons With Disabilities in

Eswatini. Further, it is aimed at ensuring government's commitment to improving the livelihoods of Persons With Disabilities by putting measures that will warrant equal opportunities in social, economic and political spheres. This policy was a build-up to the enactment of the Persons with Disability Act of 2018, which sought to provide for the protection of the rights and welfare of Persons With Disabilities and to provide for incidental matters.

3. Eswatini National Disability Plan of Action of 2018–2022

3.1 The development of the National Disability Plan of Action demonstrates the Government of Eswatini's full commitment towards improving the livelihoods of Persons With Disabilities. This plan will complement the implementation of the Persons with Disability Act once fully operationalized and related guidelines to ensure the full compliance with human rights provisions outlined in the Constitution of Eswatini and regional and international instruments. The plan provided a systematic and structured framework for effectively addressing the needs and rights of Persons With Disabilities and is currently being reviewed.

3.2 Overall Goal

3.2.1 The overall goal of the Technical Working Group (TWG) in the Kingdom of Eswatini is to ensure the effective promotion, implementation, coordination, guidance and monitoring of the country's commitment to the promotion, protection and fulfilment of the rights of Persons With Disabilities. The TWG will also be responsible for the overall coordination and monitoring of the implementation of the disability programmes by government sector ministries, organizations of Persons With Disabilities, the implementing United Nations Agencies and their partners.

3.3 Functions and Responsibilities of the TWG

3.3.1 The TWG will perform the following four functions:

- 1. Facilitate the sharing of information and communication** among the implementing partners and members of the group, the promotion of the programme interventions among the external partners and parties concerned, as well as communication with the media and visibility partners who can increase the awareness of the general public on the disability programme;
- 2. Guide the planning, implementation and possible expansion of the disability programme**, by advising on strategic interventions, advocacy and partnerships, strategic communication, resource mobilisation and disability mainstreaming into other strategic processes, as well as precautions to observe in the different areas of intervention;
- 3. Elaborate and endorse the working documents of the disability programme**, which includes annual workplans, time frame and prioritisation/acceleration strategy, reports and any other relevant documents that inform and contribute to the efficiency and the impact of the disability programme;

4. Coordinate and monitor the implementation of the disability programme's activities to ensure maximum impacts, synergies, collaboration and learning, while avoiding overlaps, competition of priorities and conflicting agendas.

4. Specific Objectives of the Disability TW

4.1 Information Sharing and Communication

4.1.1 Creating a platform and mechanisms for regular sharing of information on the disability plans among the members or optimal synergies and mutual support;

4.1.2 Disseminating disability information to all relevant stakeholders involved in the programme for optimal coordination;

4.1.3 Conducting periodic information-sharing meetings with any other external parties, including the media, to ensure visibility of the programme.

4.2 Strategy Advisory

4.2.1 Identifying the disability programme's needs and resource gaps, and providing advice and guidance to redress or strengthen the programme's activities;

4.2.2 Advocating for policy initiatives that create an enabling environment for improved outcomes in disability programmes, including in relation to international, regional and national commitments to the programme;

4.2.3 Conducting a mapping of disability partners' actions on a quarterly or annual basis in order to find areas of synergies and coordination;

4.2.4 Presenting the disability programme's interventions in other TWGs for disability inclusion and mainstreaming in other sectors;

4.2.5 Engaging potential new networks and partners/donors to expand the disability programme at the national level.

4.3 Elaboration and Endorsement of Working Documents

4.3.1 Reviewing, endorsing and updating annual workplans;

4.3.2 Gathering and generating evidence for the efficient documentation of the disability programme's implementation, and ensuring the use of evidence in activities;

4.3.3 Reviewing and endorsing the midyear and/or annual report of the disability programme.

4.4 Coordination and Monitoring

4.4.1 Strengthening coordination of the disability programme's activities

among stakeholders, using the annual workplans and/or any relevant tools of prioritisation/acceleration;

4.4.2 Supporting coordination among the government's entities and OPDs along the priorities of the disability programme;

4.4.3 Monitoring interventions using the planning documents in order to anticipate delays and bottlenecks, as well as opportunities for the disability programme's smooth implementation.

5. Technical Working Group Composition

5.1 The Technical Working Group shall mainly comprise representation from the Deputy Prime Minister's Office as a ministry responsible for disability in the country. Composition will also include United Nations agencies, organizations of Persons With Disabilities (FODSWA), civil society and the private sector, as per the table below:

No	Position	Ministry/ Institution/Agency	Roles	Numbers
1	Director Department of Social Welfare	DPMO	Chairperson	1
2	President and Executives	FODSWA	Vice Chair	7
3	UNPRPD Project Coordinator	DPMO/UNFPA	Chief of Secretariat	1
4	Chairpersons	National Disability Advisory Council for Persons With Disabilities	Secretariat	1
5	Representative	Gender and Family Issues	Member	1
6	Representative	Wellness Programme - Ministry of Public Service	Member	2
7	Representative	Swaziland Institute of Management and Public Administration (SIMPA) - Ministry of Public Service	Member	1
8	Representative	Vocational Training - Labour and Social Security	Member	1
9	Focal Point	Resident Coordinator's Office (RCO)	Member	1
10	Focal Point	UNFPA	Member	1
11	Focal Point	UNICEF	Member	1
12	Focal Point	UNESCO	Member	1
13	Focal Point	WHO	Member	1

No	Position	Ministry/ Institution/Agency	Roles	Numbers
14	Secretariat	National Mechanism for Reporting and Follow-up (NMRF)	Member	1
15	President	FODSWA	Member	1
16	Secretary General	FODSWA	Member	1
17	Chairperson - Women's Wing	FODSWA	Member	1
18	Representative - Association of Persons With Albinism and the Youth	FODSWA	Member	1
19	Representative	Business Eswatini	Member	1
20	Representative	Business Health Eswatini	Member	1
21	Representative	Federation of Eswatini Business Community (FESBIC)	Member	1
22	Representative	CANGO	Member	1
23	Representative	Eswatini Federation of Employees	Member	1
24	Representative	Bantwana	Members	1
25	Representative	Save the Children	Member	1
26	Representative	World Vision	Member	1
27	Representative	Church Forum	Member	1
28	Representative	Lutsango	Member	1
29	Representative	Parents of Children with Disability	Member	1
30	Representative	Deaf Association	Member	1
31	Representative	Ekululameni Rehabilitation and Training Centre	Member	1
32	Representative	Disabled Women's Wing	Member	1
33	Representative	Network of Women With Disabilities	Executive Member	1
34	Representative	Vukani Bomake Physical Disabilities	Member	1
35	Representative	Imbita	Member	1
36	Representative	Young Heroes	Member	1
37	Representative	Lutsango Laka Ngwane	Member	1
38	Representative	Women Farmer Foundation	Member	1
39	Representative	Cheshire Homes of Eswatini	Member	1

1. Roles and Responsibilities

1.1 Chairperson

The Chairperson is responsible for making sure that each meeting is planned effectively and conducted accordingly in line with the interventions of the disability programme, and that matters are dealt with in an orderly and effective manner.

1. Attends all TWG meetings whenever possible;
2. Facilitates the TWG meetings, leading discussions and inviting inputs from TWG members, technical experts and the public;
3. Organizes or recognises ad hoc task groups per TWG direction;
4. Ensure recognition of consensus or voting on decision items as appropriate;
5. Finalize agenda for the next meeting in good time.

1.2 Vice Chairperson

1. Attends all TWG meetings;
2. Co-facilitates all TWG meetings; ensures that the action items, responsible parties and future agenda items are summarised and reviewed with the group by close of the meeting;
3. Work with the Chairperson.

1.3 Technical Working Group Members

1. Attend and participate in all meetings, including task groups as appropriate;
2. Provide suggested agenda items to the Chairpersons in good time prior to the next meeting;
3. Provide meeting documents for distribution to other TWG members (preferably by email) at least two weeks before the next meeting.

1.4 Secretariat

1. Coordinate and organise TWG meetings (prepare agenda items, scheduling and announce meetings, etc.);
2. Support the work of Chairperson and Vice Chairperson during TWG meetings;
3. Maintain an attendance log of TWG and Coordination Team meetings;
4. Follow-up on Coordination Team members who are not attending meetings;
5. Prepare the logistics of the TWG meetings (venues etc.) and Coordination Team meetings;
6. Write minutes and disseminate to members;

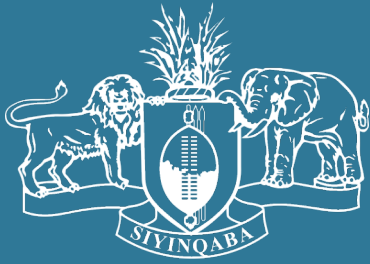
7. Ensure record of all meetings is shared to partners and recommendations and/or actions are reported on in follow-up meetings;
8. Prepare progress reports on behalf of the TWG;
9. Build and maintain relationships with members of the TWG and organizations and facilitate sharing of information and awareness of disability initiatives;
10. Report on progress toward objectives to the Coordination Team.

2. Meetings

2.1 The TWG shall have at least one meeting each month of the year, proceeding to a quarterly and annual basis. However, ad hoc meetings may be convened as needed and requested by the Chairperson. Annual planning meetings will also be conducted.

3. Review of Terms of Reference

3.1 Terms of Reference shall be reviewed and updated on an annual basis, at the first quarterly meeting of each year, or as a pressing need arises.



HANDBOOK ON DISABILITY MAINSTREAMING AND DISABILITY-INCLUSIVE BUDGETING

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