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ECONOMIC AND SOCIAL COMMISSION FOR ASIA AND THE PACIFIC

High-level Intergovernmental Meeting to Conclude the Asian and Pacific  
Decade of Disabled Persons, 1993-2002

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**CONSIDERATION OF A REGIONAL FRAMEWORK FOR ACTION TOWARDS AN  
INCLUSIVE, BARRIER-FREE AND RIGHTS-BASED SOCIETY FOR PERSONS  
WITH DISABILITIES IN ASIA AND THE PACIFIC**

(Item 6 of the provisional agenda)

**BIWAKO MILLENNIUM FRAMEWORK FOR ACTION TOWARDS AN INCLUSIVE,  
BARRIER-FREE AND RIGHTS-BASED SOCIETY FOR  
PERSONS WITH DISABILITIES IN ASIA AND THE PACIFIC**

*Note by the secretariat*

**SUMMARY**

The Commission, at its fifty-eighth session, adopted resolution 58/4 of 22 May 2002 on promoting an inclusive, barrier-free and rights-based society for people with disabilities in the Asian and Pacific region in the twenty-first century, by which it proclaimed the extension of the Asian and Pacific Decade of Disabled Persons, 1993-2002, for another decade, 2003-2012.

The present document sets out a draft regional framework for action that provides regional policy recommendations for action by Governments in the region and concerned stakeholders to achieve an inclusive, barrier-free and rights-based society for persons with disabilities in the new decade, 2003-2012. The regional framework for action identifies seven areas for priority action in the new decade. Each priority area contains critical issues, targets and the action required.

The regional framework for action explicitly incorporates the millennium development goals and their relevant targets to ensure that concerns relating to persons with disabilities become an integral part of efforts to achieve the goals.

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## I. PREAMBLE

We, the members and associate members of ESCAP represented at the High-level Intergovernmental Meeting to Conclude the Asian and Pacific Decade of Disabled Persons,

1. Recognize that while an estimated 400 million persons with disabilities have the capacity to contribute to national development in the Asian and Pacific region and have increasingly become agents of change in their communities through their collective action, the majority of persons with disabilities are still excluded from education, employment and other economic and social opportunities and constitute some 20 per cent of the poorest people,

2. Recall that following the International Year of Disabled Persons in 1981, the United Nations General Assembly, in its resolution 37/52 of 3 December 1982, adopted the World Programme of Action concerning Disabled Persons, aimed at achieving full participation and equality and protection of rights of persons with disabilities,

3. Also recall the continuing commitment of Governments in the Asian and Pacific region to the promotion of full participation and equality of persons with disabilities in the Asian and Pacific region and to the improvement of their lives through the proclamation of the Asian and Pacific Decade of Disabled Persons, 1993-2002, at the end of the United Nations Decade of Disabled Persons (1983-1992) and through the adoption of the Proclamation on the Full Participation and Equality of People with Disabilities in the Asian and Pacific Region and the Agenda for Action for the Asian and Pacific Decade of Disabled Persons, 1993-2002, at the launch of the Decade at Beijing in 1992,

4. Affirm the policy guidelines set out in the Agenda for Action for achieving the goals of the Asian and Pacific Decade of Disabled Persons within the 12 policy areas (national coordination, legislation, information, public awareness, accessibility and communication, education, training and employment, prevention of causes of disability, rehabilitation services, assistive devices, self-help organizations and regional cooperation) and the 107 specific targets adopted at a regional review meeting in 1995, further strengthened in 1999 and endorsed by the Commission at its fifty-sixth session in 2000,

5. Recognize that in the 1990s, United Nations initiatives concerning global policies and programmes in areas such as education, environment, human rights, population and development, social development, advancement of women, children, and shelter and habitat incorporated disability issues as substantive concerns in their declarations, frameworks and strategic action programmes. In particular, the World Summit for Social Development, held at Copenhagen in March 1995, in its Copenhagen Declaration on Social Development noted that people with disabilities, as one of the world's largest minorities, are often forced into poverty, unemployment and social isolation. It recommended the promotion of the Standard Rules on the Equalization of Opportunities for Persons with Disabilities and the development of strategies for implementation of the Rules,

6. Note that the world community has expressed its commitment to economic and social development in the face of rapid globalization in adopting General Assembly resolution 55/2 of 8 September 2000 entitled “United Nations Millennium Declaration”, embodying a large number of specific commitments aimed at improving the lot of humanity in the twenty-first century,

7. Appreciate that under such a favourable policy milieu at the global and regional levels, ESCAP members and associate members adopted resolution 58/4 of 22 May 2002 on promoting an inclusive, barrier-free and rights-based society for people with disabilities in the Asian and Pacific region in the twenty-first century, by which it proclaimed the extension of the Asian and Pacific Decade of Disabled Persons, 1993-2002, for another decade, 2003-2012. The resolution will give further impetus to the implementation of the World Programme of Action concerning Disabled Persons and the Agenda for Action for the Asian and Pacific Decade of Disabled Persons in the region beyond 2002,

8. Agree that overall improvement has been achieved in all 12 policy areas under the Agenda for Action, but that progress has been uneven, particularly in the continuing and alarmingly low rate of access to education for children and youth with disabilities, and has been marked by significant subregional disparities,

9. Encourage Governments to actively implement the paradigm shift from a charity-based approach to a rights-based approach to the development of persons with disabilities and to move towards the human rights perspective, especially the perspective of the right to development for persons with disabilities, bearing in mind General Assembly resolution 56/168 of 19 December 2001 on a comprehensive and integral international convention to promote and protect the rights and dignity of persons with disabilities,

10. Urge Governments in the region which have not done so to join the signatories to the Proclamation on the Full Participation and Equality of People with Disabilities in the Asian and Pacific Region and to strive to achieve the 107 targets for the implementation of the Agenda for Action for the Asian and Pacific Decade of Disabled Persons,

11. Adopt the Biwako Millennium Framework for Action to promote an inclusive, barrier-free and rights-based society for persons with disabilities in the region. An “inclusive” society means a society for all and a “barrier-free” society means a society free from physical and attitudinal barriers, as well as social, economic and cultural barriers. A “rights-based” society means a society based on the concept of human rights, including the right to development,

12. Confirm that the Biwako Millennium Framework for Action is set in the context of relevant disability-specific United Nations international instruments, mandates and recommendations, including General Assembly resolutions 2856 (XXVI) of 20 December 1971 on the Declaration on

the Rights of Mentally Retarded Persons, 3447 (XXX) of 9 December 1975 on the Declaration on the Rights of Disabled Persons, 37/52 of 3 December 1982 on the World Programme of Action concerning Disabled Persons, the Rehabilitation and Employment (Disabled Persons) Convention (No. 159), 1983, adopted by the International Labour Organization on 20 June 1983, and its recommendation on that Convention, General Assembly resolution 48/96 of 20 December 1993 on Standard Rules on the Equalization of Opportunities for Persons with Disabilities and the Salamanca Statement and Framework for Action on Special Needs Education,

13. Anticipate that the Biwako Millennium Framework for Action will contribute to attaining the millennium development goals and targets as issues relating to persons with disabilities are vital concerns to be addressed in realizing the relevant millennium development goals and targets.

## **II. PRINCIPLES AND POLICY DIRECTIONS OF THE BIWAKO MILLENNIUM FRAMEWORK FOR ACTION**

14. To promote the goals of an inclusive, barrier-free and rights-based society for persons with disabilities in the Asian and Pacific region, the Biwako Millennium Framework for Action, is guided by the following principles and policy directions:

- (1) Enact and/or enforce legislation and policies related to equal opportunities and treatment of persons with disabilities and their rights to equity in education, health, information and communications, training and employment, social services and other areas. Such legislation and policies should include persons with all types of disabilities, women and men, and people in urban and remote and rural areas. They should be rights-based and promote inclusive and multisectoral approaches.
- (2) Include disability dimensions in all new and existing laws, policies plans, programmes and schemes.
- (3) Establish or strengthen national coordination committees on disability which will develop and coordinate the implementation and monitoring of the policies concerning disability, with effective participation from organizations of and for persons with disabilities.
- (4) Support the development of persons with disabilities and their organizations and include them in the national policy decision-making process on disability, with special focus on the development of women with disabilities and their participation in self-help organizations of persons with disabilities as well as in mainstream gender initiatives.

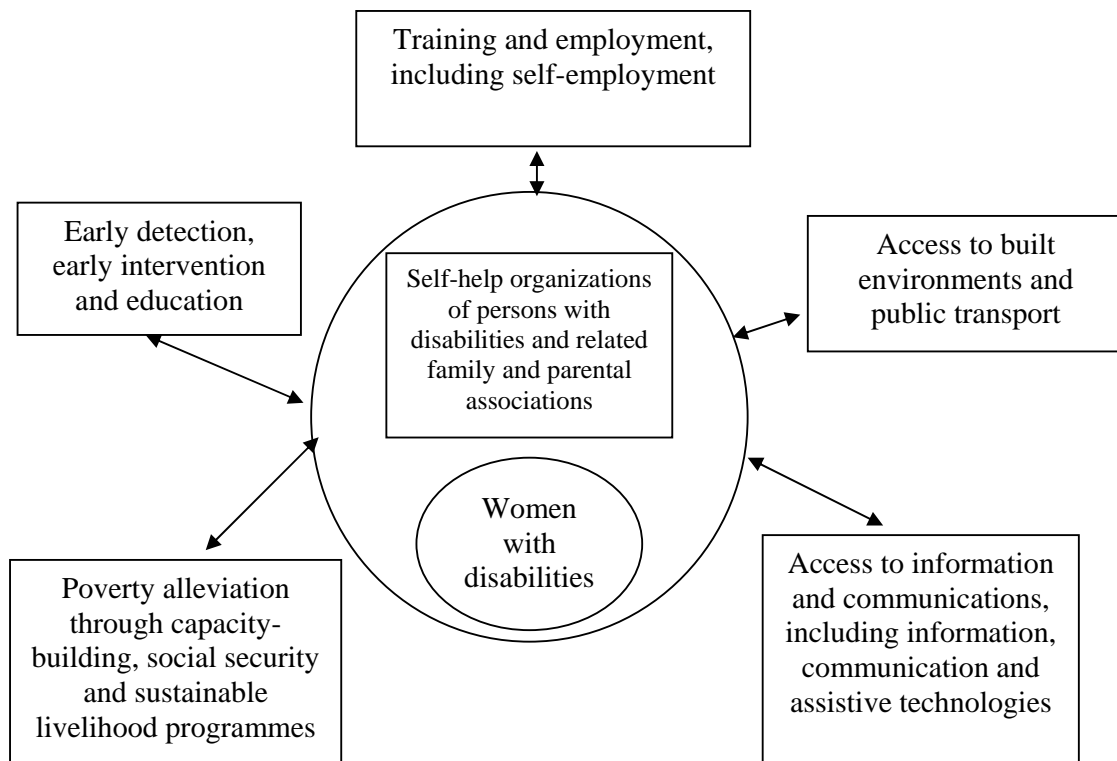
- (5) Ensure that disabled persons be an integral part of efforts to achieve the millennium development goals, particularly in the areas of poverty alleviation, primary education, gender and youth employment.
- (6) Strengthen national capacity in data collection and analysis concerning disability statistics to support policy formulation and programme implementation.
- (7) Adopt a policy of early intervention in all multisectoral areas, including education, health and rehabilitation, and social services for children with disabilities from birth to four years.
- (8) Strengthen community-based approaches in the prevention of causes of disability, rehabilitation and equalization of opportunities for persons with disabilities.
- (9) Adopt the concept of universal and inclusive design for all citizens, which is cost-effective, in the development of infrastructure and services in the areas of, inter alia, rural and urban development, housing, transport and telecommunication.

### **III. PRIORITY AREAS FOR ACTION**

15. Further efforts need to focus on priority areas where progress was found inadequate and action was lagging during the implementation of the Asian and Pacific Decade of Disabled Persons, 1993-2002. By resolution 58/4, Governments in the region defined the priority policy areas as:

- (a) Self-help organizations of persons with disabilities and related family and parent associations;
- (b) Women with disabilities;
- (c) Early detection, early intervention and education;
- (d) Training and employment, including self-employment;
- (e) Access to built environments and public transport;
- (f) Access to information and communications, including information, communications and assistive technologies;
- (g) Poverty alleviation through capacity-building, social security and sustainable livelihood programmes.

### Graphic presentation of the priority areas



For each priority area, the following have been identified: (a) critical issues, (b) millennium development goals, where applicable, (c) targets of the Biwako Framework and (d) action required to achieve those targets.

## IV. TARGETS AND ACTION IN THE PRIORITY AREAS

### A. Self-help organizations of persons with disabilities and related family and parent associations

#### 1. Critical issues

16. Persons with disabilities are the most qualified and best equipped to support, inform and advocate for themselves and other persons with disabilities. Evidence suggests that the quality of life of persons with disabilities, and of the broader community, improves when disabled persons themselves actively voice their concerns and participate in decision-making. Self-help organizations are the most qualified, best informed and most motivated to speak on their own behalf concerning the proper design and implementation of policy, legislation and strategies which will ensure their full participation in social, economic, cultural and political life and enable them to contribute to the development of their communities.

17. It is imperative to recognize the right of persons with disabilities to self-representation and to strengthen their capacity to participate in the decision-making process. Persons with disabilities must articulate their own issues and advocate for reforms that will bring about their development and

independent living in their communities and society at large. However, when children and others are not able to represent themselves, their parents, family members and other supporters should be encouraged and enabled to help advocate their rights and needs until such support is no longer necessary.

18. The development of a democratic, representative disability movement is one way to help ensure that government provision is appropriate to the needs and rights of persons with disabilities. Self-help organizations of persons with disabilities should include groups and organizations from rural areas as well as those of particularly marginalized disabled persons such as women and girls with disabilities, persons with intellectual disabilities and persons with psychiatric disabilities.

## *2. Targets*

*Target 1.* Governments, international funding agencies and non-governmental organizations (NGOs) should, by 2004, establish policies with the requisite resource allocations to support the development and formation of self-help organizations of persons with disabilities in all areas, and with a specific focus on slum and rural dwellers. Governments should take steps to ensure the formation of parents associations at local levels by the year 2005 and federate them at the national level by year 2010.

*Target 2.* Governments and civil society organizations should, by 2005, fully include organizations of persons with disabilities in their decision-making processes involving planning and programme implementation which directly and indirectly affect their lives.

## *3. Action required to achieve targets*

1. Governments should implement measures under the direction of the national coordination committee on disability to increase the level of consultations between self-help organizations of persons with disabilities and diverse sectoral ministries, as well as with civil society and the private sector. These measures should include training of persons with disabilities, including women with disabilities, on how to participate effectively in the various decision-making processes. Governments should establish guidelines for the conduct of consultations and the process should be periodically reviewed and evaluated by representatives of self-help organizations of persons with diverse disabilities.

2. Governments should establish a policy review panel within the national coordination committee on disability consisting of representatives of persons with diverse disabilities. The panel should review all policies and their implementation which directly or indirectly affect persons with disabilities.

3. Governments should take action to increase the representation of persons with disabilities in all areas of public life, including government, at all levels from national to local, as well



as the legislature and judicial bodies. This should be promoted by means of affirmative action and anti-discrimination legislation.

4. Self-help organizations should develop programmes for capacity-building to empower their members, including youth and women with disabilities, to take consultative and leadership roles in the community at large as well as in their own organizations and enable them to serve as trainers in the development of leadership and management skills of members of self-help organizations.

5. National self-help organizations of diverse disability groups should develop mechanisms to engage rural persons with disabilities in self-help organizations for mutual support, advocacy and referral to programmes and services, and to collaborate actively with rural and urban development NGOs and Government in rural development initiatives.

6. International funding agencies and NGOs should give high priority in their development policies to providing funding and technical assistance to promote and strengthen self-help organizations of persons with disabilities.

## **B. Women with disabilities**

### *1. Critical issues*

19. Women with disabilities are one of the most marginalized groups in society, as they are multiply disadvantaged through their status as women, as persons with disabilities, and are over-represented among persons living in poverty. Women and girls with disabilities, to a greater extent than boys and men with disabilities, face discrimination within the family, are denied access to health care, education, vocational training, employment and income generation opportunities, and are excluded from social and community activities.

20. Women and girls with disabilities encounter further discrimination as they are exposed to greater risk of physical and sexual abuse, denial of their reproductive rights, and reduced opportunity to enter marriage and family life. In rural areas girls and women are more disadvantaged, with higher rates of illiteracy, and lack of access to information and services. Stigmatized and rejected from earliest childhood and denied opportunities for development, girls with disabilities grow up lacking a sense of self-worth and self-esteem and are denied access to the roles of women in their communities.

21. Within some self-help organizations of persons with disabilities in some countries in the region, women with disabilities have faced further discrimination. Women with disabilities are under-represented in membership of such organizations and scarcely visible in leadership and executive roles. Their concerns are not addressed in the advocacy agenda of self-help organizations and young women with disabilities have not been targeted for leadership training.

22. The mainstream gender movement, which has had a significant effect on improving the equality of lives of non-disabled women, has had minimal effect on the lives of women with

disabilities. Women with disabilities have not been included in membership of mainstream gender organizations, their issues have not been addressed other than to note that they are of special concern and they have lacked the advocacy skills to change this situation.

23. Governments have a special responsibility in rectifying the imbalances, providing the needed support services and promoting the full participation of women with disabilities in mainstream development.

## *2. Targets*

*Target 3.* Governments should, by 2005, ensure anti-discrimination measures, where appropriate, which safeguard the rights of women with disabilities.

*Target 4.* National self-help organizations of persons with disabilities should, by 2005, adopt policies to promote the full participation and equal representation of women with disabilities in their activities, including in management, organizational training and advocacy programmes.

*Target 5.* Women with disabilities should, by 2005, be included in the membership of national mainstream women's associations.

## *3. Action required to achieve targets*

1. Governments should implement measures to uphold the rights of women with disabilities and to protect them from discrimination. In particular, measures should be implemented to ensure equal access to health services, education, training and employment, and protection from sexual and other forms of abuse and violence.

2. Governments, NGOs and self-help organizations should implement programmes to raise the public's awareness of the situation of women with disabilities and to promote positive attitudes, role models and opportunities for their development.

3. Governments may facilitate the establishment of a mechanism at the regional, national and subnational levels to disseminate relevant gender-related information among women with disabilities. The information should include, but not be limited to, international documents and information on national legislation.

4. Self-help organizations of persons with disabilities should ensure that women with disabilities are represented at the local, national and regional levels of the organizations.

5. Self-help organizations should ensure that women with disabilities constitute at least half of their delegations at meetings, workshops and seminars.

6. Women with disabilities should be encouraged to take part in and be given priority in receiving training opportunities in managerial and general subjects provided by self-help organizations.

7. Governments, NGOs, self-help organizations and donors should provide leadership training for women with disabilities to raise their awareness of gender issues and to increase their capacity to participate in policy and decision-making processes at all levels of self-help organizations of persons with disabilities and in advocacy and consultative roles with Government and in civil society.

8. Women with disabilities should form self-help groups within self-help organizations and form national and regional networks as a means of support and of disseminating and sharing information.

9. Groups and networks of women with disabilities should promote the development of girls with disabilities, with particular emphasis on access to education, health information, training and social development.

10. National and regional groups and networks of women with disabilities should advocate to mainstream women's groups for the inclusion of women with disabilities, their self-help groups and concerns into the organizations and networks of mainstream women's groups, for information dissemination and support.

11. Mainstream women's organizations should specifically include women with disabilities in their training programmes through providing accessible venues, arrangements and support as well as training materials in accessible formats.

12. All agencies, including Governments, NGOs, self-help organizations, donors and civil society must promote and uphold at all times the rights of women with disabilities to choice and self-determination.

### **C. Early detection, early intervention and education**

#### *1. Critical issues*

24. Available evidence suggests that less than 10 per cent of children and youth with disabilities have access to any form of education. This compares with an enrolment rate of over 70 per cent for non-disabled children and youth in primary education in the Asian and Pacific region. This situation exists despite international mandates declaring that education is a basic right for all children and calling for the inclusion of all children in primary education by 2015. Governments should ensure the provision of appropriate education which responds to the needs of children with all types of disabilities in the next decade. It is recognized that there is wide variation in the response which Governments in the Asian and Pacific region have made in providing education for children with disabilities, and that children are currently educated in a variety of formal and informal educational settings, and in separate and inclusive schools.

25. The exclusion of children and youth with disabilities from education results in their exclusion from opportunities for further development, particularly diminishing their access to vocational training, employment, income generation and business development. Failure to access education and

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training prevents the achievement of economic and social independence and increases vulnerability to poverty in what can become a self-perpetuating, inter-generational cycle.

26. Infants and young children with disabilities require access to early intervention services, including early detection and identification (birth to four years old), with support and training to parents and families to facilitate the maximum development of the full potential of their disabled children. Failure to provide early detection, identification and intervention to infants and young children with disabilities and support to their parents and caretakers results in secondary disabling conditions which further limit their capacity to benefit from educational opportunities. Provision of early intervention should be a combined effort of Education, Health and/or Social Services.

27. Currently education for children and youth with disabilities is predominantly provided in special schools in urban centres and is available to limited numbers of children in many countries of the Asian and Pacific region. The Salamanca Statement and Framework for Action on Special Needs Education recommended that inclusive education, with access to education in the regular local neighbourhood or community school, provides the best opportunity for the majority of children and youth with disabilities to receive an education, including those in rural areas. Exceptions to this rule should be considered on a case-by-case basis where only education in a special school or establishment can be shown to meet the needs of the individual child. It is acknowledged that in some instances special education may be considered to be the most appropriate form of education for some children with disabilities.<sup>1</sup> The education of all children, including children with disabilities, in local or community schools assists in breaking down barriers and negative attitudes and facilitates social integration and cohesion within communities. The involvement of parents and the local community in community schools further strengthens this process.

28. Major barriers to the provision of quality education for children with disabilities in all educational contexts include the lack of early identification and intervention services, negative attitudes, exclusionary policies and practices, inadequate teacher training, particularly training of all regular teachers to teach children with diverse abilities, inflexible curriculum and assessment procedures, inadequate specialist support staff to assist teachers of special and regular classes, lack of appropriate teaching equipment and devices, and failure to make modifications to the school environment to make it fully accessible. These barriers can be overcome through policy, planning, implementation of strategies and allocation of resources to include children and youth with disabilities in all national health and education development initiatives available to non-disabled children and youth.

29. Governments, in collaboration with other stakeholders, need to provide sport, leisure and recreational activities and facilities for persons with disabilities, as the fulfillment of their basic rights to the improvement of life.

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<sup>1</sup> See General Assembly resolution 48/96 of 20 December 1993 on Standard Rules on the Equalization of Opportunities for Persons with Disabilities, annex, rule 6. Education, para. 8.

## 2. Millennium development goal

30. In this priority area the millennium development goal is to ensure that by the year 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling and that girls and boys will have equal access to all levels of education.

## 3. Targets

*Target 6.* Children and youth with disabilities will be an integral part of the population targeted by the millennium development goal of ensuring that by 2015 all boys and girls will complete a full course of primary schooling.

*Target 7.* At least 75 per cent of children and youth with disabilities of school age will, by 2010, be able to complete a full course of primary schooling.

*Target 8.* By 2012, all infants and young children (birth to four years old) will have access to and receive community-based early intervention services, which ensure survival, with support and training for their families.

*Target 9.* Governments should ensure detection of disabilities at as early an age as possible.

## 4. Action required to achieve targets

1. Governments should enact legislation, with enforcement mechanisms, to mandate education for all children, including children with disabilities, to meet the goals of the Dakar Framework for Action and the millennium development goal of primary education for all children by 2015. Children with disabilities need to be explicitly included in all national plans for education, including national plans on education for all of the Dakar Framework for Action.

2. Ministries of Education should formulate educational policy and planning in consultation with families and organizations of persons with disabilities and develop programmes of education which enable children with disabilities to attend their local primary schools. Policy implementation needs to prepare the school system for inclusive education, where appropriate, with the clear understanding that all children have the right to attend school and that it is the responsibility of the school to accommodate differences in learners.

3. A range of educational options should be available to allow the selection of a school that will best cater for individual learning needs.

4. Adequate public budgetary allocation specifically for the education of children with disabilities should be provided within the education budget.

5. Governments, in collaboration with others, should collect comprehensive data on children with disabilities, from birth to 16 years old, which should be used for planning appropriate

early intervention and educational provision, resources and support services, from birth through school age.

6. Five year targets should be set for the enrolment of children with disabilities in early intervention, pre-school, primary, secondary and tertiary (post-school) education. Progress towards meeting these targets should be closely monitored with a view to achieving the goal of 75 per cent of children with disabilities in school by 2012.

7. Ministries of Health and other concerned ministries should establish adequate early detection and identification services in hospitals, primary health care, centre and community-based health care services, with referral systems to early intervention services for all disabled infants and children (birth to four years old). Governments should routinely screen high-risk pregnancies and high-risk newborn babies for early detection of disabilities at birth or soon thereafter.

8. Ministries of Health and Education should establish early intervention services, in collaboration with other concerned ministries, self-help organizations, NGO and community-based agencies, to provide early intervention, support and training to all disabled infants and children with disabilities (birth to four years old) and their families.

9. Governments, including Ministries of Education, should work in partnership with NGOs at the national and local level to conduct public awareness campaigns to inform families of children with disabilities, schools and local communities, of the right of children and youth with disabilities to participate in education at all levels, in urban and rural areas, and with particular emphasis on the inclusion of girls with disabilities where there is a gender imbalance in school attendance.

10. The following measures should be taken, where appropriate, by Governments in the region to improve the quality of education in all schools, for all children, including children with disabilities, in special and inclusive educational contexts: (a) conduct education and training for raising the awareness of public officials, including educational and school administrators and teachers, to promote positive attitudes to the education of children with disabilities, increase sensitivity to the rights of children with disabilities to be educated in local schools and on practical strategies for including children and youth with disabilities in regular schools; (b) provide comprehensive pre- and in-service teacher training for all teachers, with methodology and techniques for teaching children with diverse abilities, the development of flexible curriculum, teaching and assessment strategies; (c) encourage suitable candidates with disabilities to enter the teaching profession; (d) establish procedures for child screening, identification and placement, child-centred and individualized teaching strategies and full systems of learning and teaching support, including resource centres and specialist teachers, in rural and urban areas; (e) ensure the availability of appropriate and accessible teaching materials, equipment and devices, unencumbered by copyright restriction; (f) ensure flexible and adaptable curriculum, appropriate to the abilities of individual

children and relevant in the local context; (g) ensure assessment and monitoring procedures are appropriate for the diverse needs of learners.

11. Governments should implement a progressive programme towards achieving barrier-free and accessible schools and accessible school transport by 2012.

12. Governments should encourage programmes of research at tertiary institutions to develop further effective methodologies for teaching children and youth with diverse abilities.

13. Organizations of and for disabled persons should place advocacy for the education of children with disabilities as a high priority item on their agenda.

14. Regional cooperation needs to be strengthened to facilitate the sharing of experiences and good practices and to support the development of inclusive education initiatives.

#### **D. Training and employment, including self-employment**

##### *1. Critical issues*

31. The challenge of integrating and including persons with disabilities in the economic mainstream has not been met. Despite international standards and the implementation of exemplary training and employment legislation, policies and practices in some countries, persons with disabilities, and especially women, youth and those in rural areas, remain disproportionately undereducated, untrained, unemployed, underemployed and poor.

32. Persons with disabilities have a right to decent work. Decent work is productive work in conditions of freedom, equity, security and human dignity. Persons with disabilities have unique differences and abilities and they should have the right to choose what they want to do based on their abilities, not on their disabilities. They require the same educational, vocational training, employment and business development opportunities available to all. Some may require specialized support services, assistive devices or job modifications, but these are small investments compared to lifetimes of productivity and contribution. Furthermore, a lifetime of exclusion often results in psychosocial barriers, which must be addressed if persons with disabilities are to succeed in training and employment situations.

33. Vocational training and employment issues must be considered within the context of the full participation of persons with disabilities in community life and within the macro context of changing demographics and workplaces. Responses to issues such as globalization, job security, poverty reduction and unemployment among youth and older workers must also consider how these issues and responses affect persons with disabilities.

34. Generally, there is a lack of trained and competent staff working with persons with disabilities, especially with regard to training and employment. Other capacity issues that relate to developing, implementing, evaluating and disseminating effective policies and programmes on national and regional levels must continue to be addressed. Persons with disabilities must also be

regularly and actively involved in initiatives related to employment and training, not just as consumers but also as advocates, designers and providers of services.

## 2. *Targets*

*Target 10.* At least 30 per cent of the signatories (member States) will ratify the International Labour Organization Vocational Rehabilitation and Employment (Disabled Persons) Convention (No. 159), 1983, by 2012.

*Target 11.* By 2012, at least 30 per cent of all vocational training programmes in signatory countries will be inclusive of persons with disabilities and provide appropriate support and job placement or business development services for them.

*Target 12.* By 2010, reliable data that measure the employment and self-employment rates of persons with disabilities will exist in all countries.

## 3. *Action required to achieve targets*

1. Governments should examine, ratify and implement the Vocational Rehabilitation and Employment (Disabled Persons) Convention (No. 159), 1983.

2. Governments should have policies, a written plan, a coordinating body and some mechanism to evaluate the success of including persons with disabilities in training, employment, self-employment and poverty alleviation programmes. These activities should include consultations with organizations of and for persons with disabilities as well as employers' and workers' organizations.

3. Governments should develop and implement employer incentives and strategies to move persons with disabilities into open employment and recognize that government, as a major employer in most countries, should be a model employer with regard to the hiring, retention and advancement of workers with disabilities.

4. Governments should examine and/or enact anti-discrimination legislation, where appropriate, that protects the rights of workers with disabilities to equal treatment and opportunity in the workplace and in the marketplace. Governments should encourage and promote employment of persons with disabilities in the private sector and should provide a mechanism for the protection of rights of those persons with disabilities affected by layoffs and downsizing exercises.

5. Governments, international organizations, NGOs, training institutions and other social partners should collaborate to increase the availability and upgrade the competencies of staff providing training, employment and vocational rehabilitation services to ensure that trained and competent staff are available. Persons with disabilities should be actively recruited and included in such training programmes and hired as staff.



6. Governments, with the assistance of NGOs, should ensure that persons with disabilities have the support services they require to participate in mainstream vocational training and employment, and allocate the additional funds required to remove barriers to inclusion, with the full recognition that the price tag related to exclusion is higher.

7. Governments, NGOs and disabled persons' organizations should collaborate more with employers, trade unions and other social partners to develop partnerships, policies, mutual understanding and more effective vocational training and employment services that benefit persons with disabilities working in formal, informal or self-employment settings.

8. Governments, in collaboration with employers' organizations, workers' organizations, organizations of and for persons with disabilities and other social partners should review current policies, practices and outcomes related to the vocational training of persons with disabilities to identify gaps and needs and develop a plan to meet these needs in the light of workplace changes related to globalization, ICT and the needs of persons with disabilities living in remote and rural communities.

9. Funds must be allocated to meet the needs of those with the most extensive disabilities to provide training and employment services in dignified and inclusive settings to the extent possible, by using strategies such as transitional and production workshops and community-based and supported employment.

10. Recognizing the lack of formal job opportunities in many countries, Governments, international agencies, donors, NGOs and others in civil society must ensure that persons with disabilities and organizations of and for persons with disabilities have equitable access and are included in programmes related to business development, entrepreneurship and credit distribution.

11. Regional organizations, including those of persons with disabilities, in collaboration with national governments and international agencies, should develop mechanisms for the collection and dissemination of information related to good practices in all aspects of training and employment, especially those that reflect regional and cultural needs.

## **E. Access to built environments and public transport**

### *1. Critical issues*

35. Inaccessibility to the built environment, including the public transport system, is still the major barrier which prevents persons with disabilities from actively participating in social and economic activities in the countries of the region. Some Governments recognize disabled persons' basic right to equal access to built environments. Creating inaccessible built environments, streets and transport systems discriminates against persons with disabilities and other members of society. The concept of universal/inclusive design has emerged as a result of the struggle of persons with disabilities for accessible physical environments. Universal/inclusive design approaches have proven

to benefit not only persons with disabilities but also many other sectors within the society, such as older persons, pregnant women and parents with young children.

36. Most of the world's population of older persons resides in the Asian and Pacific region. The numbers are expected to increase dramatically given current demographic trends. The proportion of older women is also steadily growing given that women outlive men in nearly all countries, both rich and poor. As more people - men and women - survive to older age, the numbers of older people with disabilities are rising. Additionally, the onset of physical disability in old age will only exacerbate the social stigma older persons face as they are often viewed as burdens and liabilities. All persons with disabilities, however, whether young or old, have issues in common which affect them equally. These include the barriers in our environment, such as the lack of access to built environments and public transport.

37. The universal/inclusive design approaches provide safer environments for all by reducing the rate of accidents. Physical barriers are known to prevent full participation and reduce the economic and social output of persons with disabilities. Investments in the removal and prevention of architectural and design barriers are increasingly being justified on economic grounds, particularly in areas most critical to social and economic participation (e.g., transport, housing, education, employment, health care, government, public discourse, cultural and religious activities, leisure and recreation). It is important to note that not only facilities but also services should be accessible in their entirety. In this connection dealing with persons with disabilities should be an important part of a staff training curriculum.

## 2. *Targets*

*Target 13.* Governments should adopt and enforce accessibility standards for planning of public facilities, infrastructure and transport, including those in rural/agricultural contexts.

*Target 14.* All new and renovated public transport systems, including road, water, light and heavy mass railway and air transport systems, should be made fully accessible by persons with disabilities and older persons; existing land, water and air public transport systems (vehicles, stops and terminals) should be made accessible and usable as soon as practicable.

*Target 15.* All international and regional funding agencies for infrastructure development should include universal and inclusive design concepts in their loan/grant award criteria.

## 3. *Action required to achieve targets*

1. Governments, in collaboration with disabled persons' organizations, civil society groups such as professional architecture and engineering associations and others in the corporate sector, should support the establishment of national and/or regional mechanisms to exchange information on means to realize accessible environments, with display, library and research facilities,

and information centres and should network with research and/or educational architectural and engineering establishments.

2. Ensure that professional education and academic courses in architecture, planning and landscape and building and engineering contain inclusive design principles; “teaching the teachers” courses in effective teaching of practical accessible design are established for all design schools in the region, including travelling workshops which involve the active participation of persons with disabilities; and support continuing education professional development courses on best practices in inclusive design techniques for experienced practitioners, including those professionals who work closely with the end-users, such as community-based rehabilitation personnel.

3. Encourage innovative techniques, such as through design competitions, architectural and other awards and various other forms of support, to identify particular applications that enhance accessibility and apply local knowledge and materials. Local materials to make built environments accessible, e.g., tactile blocks and non-slip floor tiles, should be developed and made available. Networks to disseminate innovative techniques should be developed.

4. Support the establishment of appraisal mechanisms on how codes and standards have been developed, applied and enforced and how they have increased accessibility in various countries. Feedback and case studies on areas (rather than on a single new or upgraded building) are important, with publicity and dissemination of the findings, and show how improvements could be made.

5. Ensure that the accessibility needs of persons with disabilities be included in all rural/agricultural development programmes, including but not limited to access and use of sanitation facilities and water supply through a process of consultation that includes disabled user-groups.

6. Create access officers or posts which include the function of access officers at local, provincial and national levels whose functions include providing architects/designers/developers with technical advice and information on access codes and application of inclusive design, and appropriate technology in the natural and built environments in rural, peri-urban and urban contexts.

7. Disabled persons’ organizations should implement confidence-building and advocacy measures to present their needs collectively and effectively in the built environment in one voice representing the needs of different disability groups, including not only persons with physical, visual and hearing disabilities but also persons with intellectual disabilities.

## **F. Access to information and communications, including information, communication and assistive technologies**

### *1. Critical issues*

38. ICT has been the engine of economic growth and continues to spur the globalization process. However, the benefits of ICT development have spread unevenly between the haves and the have-nots and between developed and developing countries.

39. The effects of ICT upon persons with disabilities have been both positive and negative. Many disabled persons benefit from ICT development, as the technologies are opening up opportunities for employment at all skill levels and opportunities to live independently in the community. Deaf-blind persons, with proper training, are using a refreshable Braille screen reader and persons with severe cerebral palsy are taking part in information exchange through the Internet. However, benefits are still largely limited to persons with disabilities in more developed countries. The rapid development of ICT has given rise to unanticipated problems for persons with certain disabilities. For example, online processes for registration, banking or shopping transactions may not be accessible to persons with cognitive/intellectual, physical or visual and/or auditory disabilities.

40. The majority of disabled persons in the developing countries in the Asian and Pacific region are poor and have been excluded from ICT use, although there is a great potential benefit for the use of ICT in rural areas in developing countries.

41. The Tokyo Declaration on Asia-Pacific Renaissance through ICT in the Twenty-first Century, adopted by the Asia-Pacific Summit on the Information Society, organized by the Asia-Pacific Telecommunity and held at Tokyo in November 2000, declared that people in the Asian and Pacific region should have access to the Internet by the year 2005 to the extent possible. It also recognized disability as one of the causes of the digital divide, along with income, age and gender. The World Summit on the Information Society will be held at Geneva in 2003 and at Tunis in 2005. At the Summit, issues concerning persons with disabilities and other disadvantaged groups should be considered.

42. In the information society, access to information and communications is a basic human right. Copyright owners should bear responsibility for ensuring that content is accessible to all, including persons with disabilities. Any anti-piracy or digital rights management technology should not prevent persons with disabilities from access to information and communications.<sup>2</sup> Information and

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<sup>2</sup> The right to information and communications should include, but not be limited to, disabled persons' access to:

- Computer hardware/software and related accessory devices purchased and used by state agencies or purchased and owned by private agencies for public use;
- Public communication facilities;
- Broadcasting systems, including community radio, video content and digital television;
- Telecommunication systems, including telephone service;
- The Internet, including web, multimedia content, internet telephony and software used to create web content;
- Other consumer electronic/communication devices, including mobile communication devices;
- Interactive transaction machines, including kiosk machines;
- Services provided through electronic information systems;
- Instructional materials, including textbooks, teachers' edition and electronic learning environments;
- Spoken language through sign language interpretation and vice versa;
- Information and communication in the individuals' mother tongue, including indigenous languages which may not have their own written scripts;
- Any print materials, through all means, such as computer screen readers, Braille, other augmentative and alternative methods;
- Any future ICT intended for public use.

When, for whatever reasons, direct access by persons with disabilities to the items listed above cannot be readily achieved, ICT developers should ensure effective interoperability of their products and services with assistive technology used by persons with disabilities.

communication technology should break down the barriers in telecommunication and broadcasting systems. Developing countries need greater support in the area of ICT.

43. In many countries in Asia and the Pacific, Sign Language, Braille, finger Braille and tactile sign language have not yet been standardized. These and other forms of communication need to be developed and disseminated. Without access to such forms of communication, persons with visual and/or hearing impairments cannot benefit from ICT developments. More importantly, they maybe deprived of the basic human right to language and communication in their everyday lives.

## 2. *Targets*

*Target 16.* By 2005, persons with disabilities should have at least the same rate of access to the Internet and related services as the rest of citizens in a country of the region.

*Target 17.* International organizations (e.g., International Telecommunication Union, International Organization for Standardization, World Trade Organization, World Wide Web Consortium, Motion Picture Engineering Group) responsible for international ICT standards should, by 2004, incorporate accessibility standards for persons with disabilities in their international ICT standards.

*Target 18.* Governments should adopt, by 2005, ICT accessibility guidelines for persons with disabilities in their national ICT policies and specifically include persons with disabilities as their target beneficiary group with appropriate measures.

*Target 19.* Governments should develop and coordinate a standardized sign language, finger Braille, tactile sign language, in each country and to disseminate and teach the results through all means, i.e. publications, CD-ROMs, etc.

*Target 20.* Governments should establish a system in each country to train and dispatch sign language interpreters, Braille transcribers, finger Braille interpreters, and human readers and to encourage their employment.

## 3. *Action required to achieve targets*

1. Governments should promulgate and enforce laws, policies and programmes to monitor and protect the right of persons with disabilities to information and communication; for instance, legislation providing copyright exemptions to organizations which make information content accessible to persons with disabilities, under certain conditions.

Governments, in collaboration with other concerned agencies and civil society organizations, should:

2. Set up an ICT accessibility unit within the ICT ministry/regulatory agency, and encourage private companies to establish an equivalent unit to coordinate activities within and outside agencies/companies.

3. Conduct and encourage awareness-raising training for ICT policy makers, regulatory agencies, representatives as well as technical personnel of private ICT companies to raise understanding of disability issues, including disabled persons' ICT accessibility needs, their capability and aspiration to be productive members of society.

4. Support computer literacy training and capacity-building for persons with disabilities, through training on how to communicate with software and hardware developers and standards organizations to address their needs.

5. Provide various forms of incentives, including exemption of duties for ICT devices used by persons with disabilities and subsidize the cost of assistive technology equipment to ensure that they are affordable for persons with disabilities in need.

6. Support the creation and strengthening of networks, including cooperatives, of consumers with disabilities at the national, regional and international levels in order to increase the bargaining and buying power for ICT products and services, which are generally expensive to buy individually.

7. Take all necessary steps to ensure, in the development of measures and standards relating to ICT accessibility, that organizations of persons with disabilities are involved in all stages of the process.

8. Adopt and support ICT development based on international standards which are universal/open/non-proprietary to ensure the long-term commitment to ICT accessibility for persons with disabilities among all sectors, with special attention to standards that have accessibility components and features with a proven record of effectiveness. Examples of these are the Web Accessibility Initiative of the World Wide Web Consortium and the Digital Accessible Information System Consortium.

9. Require that local language applications and content use national/international standard character encoding and modelling, such as the Unified Modeling Language, and encourage dialogue on accessibility requirements of character encoding and modelling.

10. Support participation of civil society organizations representing and reflecting the requirements of persons with disabilities in discussions on regional and international standards towards a goal of increased harmonization of international standards supporting the requirements of persons with disabilities. Where such international standards are lacking, Governments should support alternative initiatives to address those needs, with attention to compatibility and interoperability with international standards.

11. Bilateral and multilateral donor agencies and international funding agencies should adopt award criteria based on the social responsibility of the receiving agencies/organizations, including their obligation to promote ICT accessibility for persons with disabilities.

12. Support and establish a regional working group to develop standards in ICT, telecommunication and broadcasting to ensure that new and existing technologies are based on disability inclusive standards and are developed on a universal design concept. In addition to ICT, measures to ensure communication of persons with disabilities, including development of standardized Sign Language and Braille, need to be established.

### **G. Poverty alleviation through capacity-building, social security and sustainable livelihood programmes**

#### *1. Critical issues*

44. In the Asian and Pacific region, it is estimated that of 400 million persons with disabilities, over 40 per cent are living in poverty. Those persons with disabilities have been prevented from accessing entitlements available to other members of society, including health, food, education, employment and other basic social services, and from participating in community decision-making processes.

45. Poverty is both a cause and consequence of disability. Poverty and disability reinforce one another, contributing to increased vulnerability and exclusion. Poor nutrition, dangerous working and living conditions, limited access to vaccination programmes and health and maternity care, poor hygiene, bad sanitation, inadequate information about the causes of impairments, war and conflict and natural disasters are factors responsible for disability. Many of these causes are preventable. Disability in turn exacerbates poverty, by diminishing access to means of livelihood, increasing isolation from the marketplace and economic strain. This affects not just the individual but often the entire family.

46. The increasing numbers and proportions of older people living to advanced old age has meant that the number of persons with disabilities will increase and this may be a contributing factor to human poverty. The issues of concern for older persons have to do with disabilities related to ageing and the provision of appropriate health care and social security. In ageing societies, especially, these issues will have a profound impact on national health and long-term care systems and on whether social security schemes are sufficient as currently constituted.

47. The main factors that account for the low level of social services for poor persons with disabilities are household-based and community-based. However, there is little knowledge about the determining factors for the low welfare level of persons with disabilities in the developing countries of the region. Social and economic survey data at the household and community levels, which are necessary for an analysis of the factors, are lacking. It is important to examine to what extent the

development of community-level infrastructure affects the provision of services for poor persons with disabilities.

48. An integrated approach is required, linking prevention and rehabilitation with empowerment strategies and changes in attitudes. The significance of disability should be assessed as a key development issue and its importance should be recognized in relation to poverty, human rights and the achievement of internationally agreed development targets. Eliminating world poverty is unlikely to be achieved unless the rights and needs of persons with disabilities are taken into account.

49. One of the millennium development goals has a specific target of poverty eradication. This is a positive approach. However, there is a danger that this strategy may omit the important vulnerable group of persons with disabilities as efforts to achieve the targets could focus on those who can be brought out of poverty most easily and not those in extreme poverty, among whom persons with disabilities are disproportionately represented. The root causes of poverty of persons with disabilities are far more complicated and multifaceted. Hence, conscious efforts should be made to include persons with disabilities in the target groups given priority in the poverty reduction strategy to achieve the millennium development goals.

## *2. Millennium development goals*

50. The relevant millennium development goal in this priority area is to halve, by the year 2015, the proportion of the world's people whose income is less than one dollar a day and the proportion of people who suffer from hunger, and by the same date, to halve the proportion of people who are unable to reach or to afford safe drinking water.

## *3. Targets*

*Target 21.* Governments should halve, between 1990 and 2015, the proportion of persons with disabilities whose income/consumption is less than one dollar a day.

## *4. Action required to achieve targets*

1. Governments should immediately include, as a major target group, persons with disabilities in their national poverty alleviation programmes in order to achieve the millennium development goal target to eradicate extreme poverty and hunger.

2. Governments should allocate adequate rural development and poverty alleviation funds towards services for the benefit of persons with disabilities.

3. Government should include disability dimensions and poverty mapping and disability into the collection and analysis of millennium development goal baseline data on income poverty, education, health, etc., so as to ensure baseline data for poor persons with disabilities.

4. Government should mainstream disability issues into pro-poor development strategies through:



- (a) Increased resource allocation for poor persons with disabilities and the introduction of social budgeting for disability;
- (b) Participatory evaluation of existing social and economic policies through more effective methodologies, including the use of citizen's report card method;
- (c) Establishment of appropriate social protection schemes, such as schooling subsidy and/or health insurance for poor families with disabled children and older persons with physical and mental disabilities;
- (d) Comprehensive development policies targeting persons with disabilities and families with disabled persons.

5. Governments should document and disseminate good field-based practices in poverty alleviation for persons with disabilities that can be used as models for capacity-building in government sectoral ministries, civil society organizations and the private sector.

6. Governments should encourage the building of strategic alliances among and advocating the importance of disability issues to policy makers. organizations of persons with disabilities and community development organizations, with assistance from the United Nations system, with a view to incorporating disability issues into development policies

7. Preventive measures aimed at minimizing the causes of disability and the provision of rehabilitation services should be an integral part of the normal business of Governments, the private sector and NGOs. Programmes aimed at disability prevention and rehabilitation should be included in national plans, policies and budgets.

8. Governments should design and adopt a national strategy on prevention of causes of disabilities and rehabilitation for persons with disabilities.

9. The national strategy should acknowledge the role of all three approaches, institutional, outreach and community-based, in the rehabilitation of persons with disabilities. Community-based approaches, in particular, should be emphasized to achieve maximum coverage and outreach of services as well as to maximize their cost-effectiveness.

10. The health service delivery structures, both governmental and non-governmental, should include rehabilitation services such as physiotherapy and occupational therapy as well as the provision of essential assistive device services. Little is known about gender-specific measures and health care approaches for mental health and physical disabilities among older women and men. Service provision for mental illness in older people needs attention. Special emphasis should be placed on ensuring that such services are available at the local level, including rural and urban poor areas.

11. Governments should support the formation of self-help groups of persons with disabilities in rural and urban poor areas and their federations, with a view to developing their capacity in mutual support, advocacy and participation in the decision-making process.

## **V. STRATEGIES TO ACHIEVE THE TARGETS OF THE BIWAKO MILLENNIUM FRAMEWORK FOR ACTION**

51. The following strategies should support Governments, in collaboration with civil society organizations, in the achievement of targets cited in chapter IV.

### **A. National plan of action (five years) on disability**

52. A national plan of action concerning disability is vital to implement the Biwako Millennium Framework for Action, 2003-2012, at the national and subnational levels.

*Strategy 1.* Governments should develop, in collaboration with organizations of persons with disabilities and other civil society organizations, and adopt by 2004, a five-year comprehensive national plan of action to implement the targets and strategies of the Biwako Millennium Framework for Action, 2003-2012. The national plan should have inclusive policies and programmes for integrating persons with disabilities into mainstream development plans and programmes.

### **B. Promotion of a rights-based approach to disability issues**

53. A rights-based approach should be taken to advance disability issues. The civil, cultural, economic, political and social rights of persons with disabilities should be addressed and protected. Disability issues should be integrated into national plans relating to development and into a human rights agenda. Globally, more than 40 countries have adopted non-discrimination laws on disability, but only 9 countries in the Asian and Pacific region have done so.

*Strategy 2.* Governments should examine the adoption of laws and policies and review of existing laws to protect the rights of persons with disabilities, especially to ensure non-discrimination. They should include a clear and specific definition of what constitutes discrimination against persons with disabilities. Such laws and policies should comply with United Nations standards on human rights and disabilities. Persons with disabilities should have equal access to effective remedies to enforce their rights under such laws.

*Strategy 3.* National human rights institutions should draw special attention to the rights of persons with disabilities and integrate them into the full range of their functions. Governments should consider, according to the concrete circumstances of their countries and areas, establishing an independent disability rights institution to protect the rights of persons with disabilities.

*Strategy 4.* Governments should ensure that persons with disabilities, including disability groups in civil society, fully participate from an early stage in helping to shape the laws and policies that will affect their lives and in monitoring and evaluating the implementation of these laws and policies and in recommending improvements.

*Strategy 5.* States should consider ratifying the core international human rights treaties.<sup>3</sup> After consultation with disability groups, Governments should include specific information about the rights of persons with disabilities in reports submitted to treaty monitoring bodies under the treaties they have ratified.

*Strategy 6.* Governments should consider support for and contribute to the work of the Ad Hoc Committee established by General Assembly resolution 56/168 of 19 December 2001 to consider proposals for a “comprehensive and integral international convention to promote and protect the rights of persons with disabilities” in the elaboration of the comprehensive and integral international convention to promote and protect the rights and dignity of persons with disabilities and should encourage and facilitate the full participation of a wide range of disability groups from all regions of the world in contributing to the Committee’s work.

*Strategy 7.* Governments should include persons with disabilities and their organizations, in their procedures at the national, regional and international levels, concerning the drafting and adoption of the proposed human rights convention on disability, (as decided by General Assembly resolution 56/168 of 19 December 2001) which by passing, will ensure a strong consumer-influenced monitoring mechanism on the rights and responsibilities of persons with disabilities.

### **C. Disability statistics/common definition of disabilities for planning**

54. Lack of adequate data has been one of the most significant factors leading to the neglect of disability issues, including the development of policy and measures to monitor and evaluate its implementation, in the region. In many developing countries, the data collected do not reflect the full extent of disability prevalence. This limitation results in part from the conceptual framework adopted, the scope and coverage of the surveys undertaken, as well as the definitions, classifications and the methodology used for the collection of data on disability. It is also recognized that a common system of defining and classifying disability is not uniformly applied in the region. In this connection, a wider usage of the International Classification of Functioning, Disability and Health in countries of the region will be expected to provide a base for the development of such a common system of defining and classifying disability.

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<sup>3</sup> Six core human rights treaties are: the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, the Convention against Torture and Other Cruel, Inhuman and Degrading Treatment or Punishment, the Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination against Women, and the International Convention on the Elimination of All Forms of Racial Discrimination.

*Strategy 8.* Governments are encouraged to develop, by 2005, their system for disability-related data collection and analysis and to produce relevant statistics disaggregated by disability to support policy-making and programme planning.

*Strategy 9.* Governments are encouraged to adopt, by 2005, definitions on disability based on the *Guidelines and Principles for the Development of Disability Statistics*,<sup>4</sup> which will allow intercountry comparison in the region.

#### **D. Strengthened community-based approaches to the prevention of causes of disability, rehabilitation and empowerment of persons with disabilities**

55. Many developing countries in the region are now beginning to augment and replace traditional institutional and centralized rehabilitation programmes and projects with approaches better suited to their social and economic environments of poverty, high unemployment and limited resources for social services. Community-based rehabilitation programmes form the hub of such strategies. The community-based approach is particularly appropriate for the prevention of causes of disability, early identification and intervention of children with disabilities, reaching out to persons with disabilities in rural areas, raising awareness and advocacy for the inclusion of persons with disabilities in all activities in the community, including social, cultural and religious activities. Education, training and employment needs could also be met by this approach. It is essential that persons with disabilities exercise choice and control over initiatives for community-based rehabilitation.

*Strategy 10.* Governments, in collaboration with organizations of persons with disabilities and civil society organizations, should immediately develop national policies, if that has not yet been done, to promote community-based approaches for the prevention of causes of disability, for rehabilitation and for the empowerment of persons with disabilities. Community based rehabilitation (CBR) perspectives should reflect a human rights approach and be modelled on the independent living concept, which includes peer counselling.

## **VI. COOPERATION AND SUPPORT IN PURSUANCE OF THE BIWAKO MILLENNIUM FRAMEWORK FOR ACTION**

### **A. Subregional cooperation and collaboration**

56. One of the important focuses of the new regional framework is to strengthen cooperation and collaboration among Governments at the subregional level. Countries in the same subregion share common concerns, aspirations and constraints and are in the best position to provide mutual support and collaboration. In this regard, Governments in each subregion are requested to formulate their own subregional priorities and a plan of action to seek mutual support in the implementation of the Biwako Millennium Framework for Action.

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<sup>4</sup> United Nations publication, Sales No. E.01.XVII.15.

*Strategy 11.* Governments, in cooperation with relevant NGOs, such as the Asian and Pacific Disability Forum, and self-help organizations of persons with disabilities in each subregion of Asia and the Pacific, should establish, by 2004, subregional mechanisms to support governments to achieve targets and strategies contained in the Biwako Millennium Framework for Action.

*Strategy 12.* Governments in each subregion should collaborate with relevant NGOs in establishing focal points within appropriate subregional organizations with a view to coordinating subregional activities on disability.

## **B. Regional collaboration**

### **1. Collaboration with the Asian and Pacific Development Center on Disability**

57. The Asia-Pacific Development Center on Disability will be established towards 2004 at Bangkok, as a legacy of the Asian and Pacific Decade of Disabled Persons, to promote the empowerment of persons with disabilities and a barrier-free society in the Asian and Pacific region. The Center will serve persons with disabilities and persons working with them in training and information support in the Asian and Pacific region.

*Strategy 13.* Governments, the United Nations system, civil society organizations and the private sector should collaborate, support and take advantage of the training and communication capability of the Center in the field of disability in the region. Capacity-building of persons with disabilities in the Pacific should be also clearly addressed by the Center.

### **2. Networking among centres of excellence in focused areas**

58. There are government institutes and agencies, as well as civil society and private organizations involved in research and development, implementing new approaches in the field of disabilities in the Asian and Pacific region. It would be useful to identify those institutes/agencies/organizations as centres of excellence and to facilitate the exchange among them of information, experiences and personnel to promote networking, with a view to maximizing cooperation and collaboration. The Asia-Pacific Development Center on Disability could play a supporting role in establishing and maintaining such a network.

*Strategy 14.* Governments, civil society organizations and the private sector should establish a network of centres of excellence in focused areas to maximize cooperation and collaboration.

*Strategy 15.* ESCAP and other United Nations agencies should assist in the establishment of a network of centres of excellence in focused areas through the identification and promotion of such centres.

*Strategy 16.* Governments of the region should enter into a suitable agreement on trade, technology transfer and human resource development for fast and efficient sharing of resources.

Governments should also promote regional cooperation, share information and document good practices on the achievements of the Biwako Millennium Framework targets.

### **C. Interregional collaboration**

59. The Asian and Pacific Decade of Disabled Persons, 1993-2002, has influenced developments at the international level, in particular in countries in Africa. The African Decade of Disabled Persons, 2000-2009, was declared in 1999. It is also expected that the Arab Decade of Disabled Persons, 2003-2012, will be declared, which will coincide with the newly extended regional framework on disability in the Asian and Pacific region. In order to strengthen regional programmes, learn from other regional experiences and create synergy among the regional frameworks on disability, interregional exchange activities are important.

*Strategy 17.* The Asian and Pacific region, the African region and the Western Asian region should strengthen their cooperation and collaboration to create synergy in implementing regional decades through interregional exchange of information, experiences and expertise, which will mutually benefit all the regions.

## **VII. MONITORING AND REVIEW**

### **A. Organization of regional and subregional meetings**

60. The Commission, by its resolution 58/4 of 22 May 2002 on promoting an inclusive, barrier-free and rights-based society for people with disabilities in the Asian and Pacific region in the twenty-first century, requested the Executive Secretary of ESCAP to report to the Commission biennially until the end of the Decade on the progress made in implementation of that resolution. ESCAP should convene biennial meetings to review achievements and to identify action that may be required to implement the Biwako Millennium Framework for Action. At those meetings, the representatives of national coordination committees on disability matters comprising government ministries/agencies, NGOs, self-help organizations and the media will be invited to present reports to review progress in the implementation of the Biwako Millennium Framework for Action at the national and subnational levels. Self-help organizations of persons with disabilities should be encouraged to participate actively in the review process. Regional meetings should focus one at a time on the targets adopted in the following thematic areas:

- (a) Self-help organizations of persons with disabilities, women with disabilities, education, training and employment;
- (b) Access to built environments and access to information and communications;
- (c) Poverty alleviation through social security and sustainable livelihoods.

61. Governments in each subregion should organize subregional meetings to review achievements and to identify action that may be required to implement the Biwako Millennium

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Framework for Action based on their subregional priorities and action plan in a similar manner as at the regional level described in the above paragraph.

**B. Regional working group to coordinate and monitor the  
Biwako Millennium Framework for Action**

62. A regional working group comprising the United Nations system, Governments and civil society organizations, including organizations of persons with disabilities in the region should meet regularly to coordinate and monitor implementation of the Biwako Millennium Framework for Action.

**C. Mid-point review of the Biwako Millennium Framework for Action**

63. A mid-point review of the Biwako Millennium Framework for Action should be conducted. Based on the review, the targets and strategic plans for the second half of the Decade may be modified and new targets and strategic plans formulated.

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