

PACIFIC CHILDREN WITH DISABILITIES

Findings from a review for the UNICEF
Mid-term Review



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Definition of disability

- 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.

(CRPD)



Key Guiding frameworks

- Convention on the Rights of the Child
- Convention on the Rights of Persons with Disabilities (CRPD)
- Millenium Development Goals
- Education For All
- Biwako Millenium Framework +5
- Pacific Regional Strategy on Disability



Methodology of study

- Consulted widely in Fiji, Kiribati, Solomon Islands and Vanuatu
- Consulted 82 persons
- Consulted wide range of documentation
- Review takes a rights-based approach to disability vis-a-vis a medical or charity approach



The situation of children with disabilities in the Pacific is one of disadvantage, neglect & discrimination

- Despite cultural attitudes of inclusiveness, stigma & discrimination persist, thus many CWD are hidden, making them invisible
- Neglect and abuse are not uncommon
- Very limited early detection, identification & intervention



- The majority never attend school thus do not develop skills for life → life of poverty
- Health services not focussed on disability issues: general lack of coordination
- Support to families almost non-existent



Data

- Many PICs have done national or provincial surveys
- Some PICs include questions on disability in national census but results not reliable
- Despite lack of accurate data, there is enough to ascertain that there are CWD in every PIC
- Recommend that national statistics offices be encouraged to include disability in regular collection of statistics



EARLY DETECTION, IDENTIFICATION & INTERVENTION

- This is crucial as early intervention can enable CWD to live an improved quality of life
- Can prevent development of secondary disabilities
- A huge gap area and one where interventions would be very cost-effective



Early intervention Kiribati



Early Intervention Centre, Suva



Community Based Rehabilitation can help with early detection, identification & intervention

- **Solomon Is** has quite good Community Based Rehabilitation system, but needs help to upgrade training for CBR workers
- **Vanuatu & Kiribati** need a lot of help in the area of early identification & intervention.
 - Kiribati has nothing at all
 - Vanuatu has under-resourced NGO doing CBR with underpaid, untrained workers
 - Nurses need training in this area

EDUCATION

- Most CWD never go to school at all: excluded on the grounds of their disability or parents keep them at home
- A tiny minority attend specialised centres, eg in Kiribati and Solomon Islands. These are care centres rather than schools: teach children basic self-care skills, develop motor skills, communication, socialisation etc.
- No provision for CWD in rural & remote areas
- Fiji has quite comprehensive system of special schools



Globally there is a move away from segregated special schools towards Inclusive Education (IE)

- This would be ideal for PICs as children could attend their local schools
- Some PICs are practicing IE: Cook Islands, Samoa, Tonga, Fiji & PNG to some extent
- Northern Pacific has special education units in mainstream schools
- Other PICs have the development of IE policies in their education strategic plans



IE is often seen as too hard

- Requires considerable community consultations to raise awareness of issue
- Need to get teachers on side
- Teachers need training: pre-service & in-service
- Schools may have to modify policies & procedures, sometimes building codes

Above all, attitudes need to change



In the 3 UNICEF focus PICs

- **Vanuatu:** has draft IE policy. Working on implementation. Has IE adviser in place. Needs help with teacher training.
- **Solomon Islands & Kiribati:** have development of IE policy in strategic plan. Policy development includes advocacy and awareness raising in community. Both need assistance in this area.



But it can be done

- Benefits far outweigh the costs
- Allows CWD to participate in society, learn skills & eventually earn a livelihood
- Can start gradually with pilot schools
- UNICEF should take a lead role in advocating for IE as it is mandated by CRC, CRPD, EFA etc
- Above all, it allows children to enjoy their right to education



Noella is a 12 year old ni-Vanuatu girl. She speaks five languages. She attended school for four years until she was excluded because of her low vision. She loved school and loved playing with her friends.



When referral systems work: the case of Sisi Coalala

- Born prematurely & lost sight by 5 years of age
- Picked up by CBR workers & referred to Fiji Blind School where she learned Braille, self-care, mobility skills. Did Class 1&2 there.
- Attended mainstream schools for rest of schooling in Suva with support from Fiji Blind School
- Graduated from USP as a secondary school teacher with BEd in 2005
- Now works as integration teacher at Fiji Blind School, assisting children who attend mainstream secondary schools in Suva



Kiribati School for Children with Special Needs – the Ministry of Education has nothing to do with it



Solomon Islands Red Cross Centre: age range 6 months to 20 years, cross-disability



Deaf children Fiji



All children can learn: Kiribati children performing traditional dance



Teenagers with disabilities

- Services virtually non-existent
- Those CWD who attended school have mostly dropped out by teenage years
- Very little in way of sports, leisure or recreational activities
- No specific reproductive health services
- Teenage girls with disabilities disproportionately vulnerable to sexual abuse



Families need support

- Huge impact on families having a CWD
- No systematic support – some ad hoc help from churches
- Role of families critical in advocating for the rights of their children and encouraging them



Access to health

- Not good – lack of coordination of services for CWD between different part of health system
- Lack of referral system
- Difficulty in reaching health services heightened in remote and rural areas



Critical role of disabled persons organisations (DPO)

- Have raised awareness and been advocates for rights of persons with disabilities
- Changes in attitudes towards disability in PICs largely credited to DPOs and champions
- But they do little specifically for children with disabilities



What can UNICEF do?

- A lot – the issue of CWD fits in with all programmes
- MDGs & EFA will not be met without including CWD
- Business as usual is not enough
- Calls for ‘mainstreaming’ not enough on its own – risk of getting lost – need proactive, explicit range of activities



What can UNICEF do?

At the **macro** or **regional** level, UNICEF should consider:

- Appointing a Disability Specialist located in the Suva office.
- Developing an integrated communications strategy on CWD taking into account prevention, access to health services, child protection, education, rights of CWD and the linkages between them.
- Working closely with other partners to coordinate work at the national and regional levels. Effective coordination can help leverage support for work on CWD.
- Ensuring that disability is mainstreamed into all areas including emergency response.



HEALTH: Early detection, identification and intervention is a huge gap area.

- Current prevention eg IMCI, nutrition, safe motherhood etc, should have an explicit & proactive linkage with disability (currently implicit)
- Support for training of CBR / village health workers
- Support for nurses training
- Encourage better referral systems & a focus on disability
- Fund early intervention centre in Vanuatu as training centre



Health, cont'd

- **Prevention in regard to care of sick children:** high fevers caused by cerebral malaria, meningitis, dengue fever and viruses can cause cerebral palsy.
- **HIV:** need to include CWD as a vulnerable group that needs to have access to reproductive services as appropriate.



EDUCATION: focus on advocacy for inclusive education

- **Vanuatu:** assistance with implementation of draft IE policy especially with teacher training
- **Solomons & Kiribati:** assistance with development of IE policy
- **Kiribati:** proposed teacher competency modules to have component on IE
- **Advocacy** for rights of CWD to education



CHILD PROTECTION: reducing vulnerability

- Ensuring that the rights of CWD are included in **policy and legislation** in line with CRC and CRPD
- Ensure that **social welfare systems** address CWD.
- Ensure that future work on **violence, abuse and exploitation** include CWD.
- **Develop materials to support parents** of CWD providing information on care, rights etc.
- **Proactively advocating** for the rights of CWD (behaviour change)



PAPE: advocacy & integration

- Ensure that CWD are included in all UNICEF programming.
- Ensure that all data collected include CWD.
- Work with National Statistics Offices to ensure that questions on disability, especially CWD, are included in regular statistics gathering including Household Income and Expenditure Surveys and National Censuses.
- Ensure that any future Multiple Indicator Cluster Surveys (MIC) in the Pacific includes data collection on disability.

- Ensure that situational analyses on children and youth include CWD.
- Organize staff training to raise the awareness of UNICEF staff of the importance of including CWD in their work.
- Developing a communications strategy that highlights the rights of CWD, especially to education and health services and of social protection, as part of communication for development and social change.



And finally

- The inclusion of children with disabilities is not a charitable act, but a matter of rights to which UNICEF is bound by both the CRC and our mandate.

UNICEF Programming Notes on Disability



Vinaka

