NOTHING WITHOUT US

USAID DISABILITY POLICY

OCTOBER 2024

Cover photo: In Mozambique, women who are blind and low vision participate in a Labor Day parade, holding a sign that reads in Portuguese, "+ Oportunidades - Caridade," or "More Opportunities, Less Charity" in English.

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EXECUTIVE SUMMARY

There are more than 1.3 billion persons with disabilities globally—or approximately 16 percent of the global population—with nearly 80 percent of persons with disabilities living in low- and middle-income countries (LMICs) and 240 million children with disabilities worldwide. In 1997, USAID became one of the first bilateral development agencies in the world to adopt a policy on disability to guide the Agency's efforts toward disability inclusion. Now, USAID has convened stakeholders, development practitioners, and community members around the world to inform an updated policy aimed at further advancing disability-inclusive development. This 2024 "Nothing Without Us: USAID Disability Policy" responds to stakeholder feedback, updates promising practices, places the Agency's work within the current global context, and situates USAID to fulfill its long-standing commitment to nondiscrimination and inclusion of persons with disabilities in society on an equitable basis with others. The policy also positions USAID to partner with persons with disabilities in meeting the myriad challenges and opportunities of the 21st century.

The goal of this policy is to advance empowerment and elevate the lives of persons with disabilities in partner countries by supporting USAID and our partners to recognize, respect, value, meaningfully engage, include, and be intentional in supporting persons with disabilities and their representative organizations to benefit equitably from our work as equal partners. Intentional and meaningful inclusion of persons with disabilities across all areas of USAID's work is key to countries meeting their development goals and potential. Moreover, meaningful and intentional disability inclusion is fundamental to making development and humanitarian assistance effective and cost-effective.

To achieve the objectives of this policy, USAID will uphold the following seven operating principles:

Accessibility   Accountability   Anti-ableism   Do No (More) Harm   Gender Equality   Nondiscrimination   Nothing Without Us

To achieve the vision, goal, and objectives of this policy, USAID has identified the following key approaches and opportunities to promote effective implementation and support a systematic change-management process to furthering USAID's disability-inclusion work.

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Recognizing that all of USAID's programming and interventions are relevant to persons with disabilities, Annex I provides a brief overview of the situation of persons with disabilities, as well as examples of promising approaches for disability-inclusive programming across the broad range of sectors of USAID's work.

INTRODUCTION

In 1997, USAID became one of the first bilateral development agencies in the world to adopt a policy on disability to guide the Agency's efforts toward disability inclusion.
Since then, understanding of the global situation of persons with disabilities has deepened, persons with disabilities have forged a truly international cross-disability advocacy movement, and the policy environment in which USAID operates has expanded to include the first international human rights treaty focused on the rights of persons with disabilities and a global development agenda that explicitly includes persons with disabilities. The 2024 "Nothing Without Us: USAID Disability Policy" places USAID's work within this new global context; situates USAID to fulfill its long-standing commitment to nondiscrimination and inclusion of persons with disabilities in society on an equitable basis with others; informs the development of technical guidance documents specific to USAID's programming and assistance interventions; and positions USAID to partner with persons with disabilities in meeting the challenges and opportunities of the 21st century.

Disability discrimination and stigma can lead to persons with disabilities being denied access to all areas of life—including education, employment and economic empowerment, transportation, housing, health care, sports and recreation, religion, culture, justice, and participation in political and public life—on an equitable basis with others. Lack of support for community living leaves too many persons with disabilities around the world living in institutions and at risk of abuse, neglect, and significant mental and physical harm or worse.[1] Societal exclusion not only disadvantages persons with disabilities and can lead to human rights abuses, it also deprives countries of the unique economic, social, cultural, and interpersonal contributions of persons with disabilities across all areas of life and at all levels of society.

Although there is a continued need for improved data collection with respect to persons with disabilities, the available data paint a vivid picture of the types and impacts of pervasive stigma and discrimination experienced by persons with disabilities. For example, some persons with disabilities die up to 20 years earlier than non-disabled persons due to inequitable access to health care systems and services by persons with disabilities.[2] On average, only one in three persons

with disabilities is employed, and they are two times less likely to be employed than non-disabled persons.[3] Compared to non-disabled children and youth, children and youth with disabilities are 49 percent more likely to have never attended school, 47 percent more likely to be out of primary school, 33 percent more likely to be out of lower-secondary school, and 27 percent more likely to be out of upper-secondary school.[4] Children with disabilities are also two to three times more likely to be malnourished and twice as likely to die from malnutrition as their non-disabled peers.[5] Exposure to violence—including gender-based violence (GBV)—is higher for persons with disabilities than their non-disabled peers.[6] The disproportionately high levels of poverty, exposure to violence, lack of access to services, and underrepresentation in political and public life are particularly acute[7] for the estimated 700 million women and girls with disabilities globally.[8] LGBTQI+ persons with disabilities face multiple, intersecting layers of discrimination and stigma as well as barriers to societal inclusion. They may face a lack of community or family support or receive support that is conditional on not freely expressing their sexuality and/or gender identity. Emerging technologies such as artificial intelligence (AI) have the potential to positively impact persons with disabilities, including by mitigating and counteracting some of the inequities experienced by persons with disabilities. However, the encoding of ableist norms and assumptions into some AI applications, and lack of meaningful engagement of persons with disabilities in the development of these technologies, has generated concerns about discrimination against persons with disabilities in AI and related contexts.[9]

Disparate outcomes for persons with disabilities should not be considered inevitable. Intentional and meaningful inclusion of persons with disabilities across all areas of USAID's work is essential so countries can meet their development goals and individual citizens can reach their full potential. Disability-inclusive development and humanitarian assistance is more effective because it supports peaceful and prosperous societies in which persons with disabilities enjoy the rights, agency, access, influence, and opportunities to pursue their life goals on an equitable basis with others. Disability inclusion is also more cost-effective, especially when incorporated from the outset. For example, when accessibility features are incorporated into new construction, they typically account for less than 1 percent of the overall cost of construction, compared to much higher costs associated with retrofitting.[10]

USAID's approach to disability inclusion is aligned with and informed by the following key legal and policy frameworks.

- **Convention on the Rights of Persons with Disabilities (CRPD):** Adopted in 2006 and establishing definitively that disability rights are human rights, the CRPD situates existing human rights within the disability context, ending what has been referred to as the "invisibility" of persons with disabilities within the international human rights architecture. As the treaty approaches near universal ratification, it is important to note that all but a diminishing handful of countries in which USAID works are parties to the CRPD.[11] Among those state parties, the CRPD is catalyzing adoption of national legislation and policies to respect, protect, and fulfill the human rights of persons with disabilities. It is important the Agency's interventions complement and support

conditions consistent with effective implementation of the CRPD by those countries with whom USAID works that are state parties to the treaty. The CRPD is also a key reference in adopting a rights-based approach to USAID's work that is inclusive of persons with disabilities.

- **2030 Sustainable Development Goals (SDGs):** The 17 goals and 169 associated development targets for eradicating poverty, adopted by all United Nations Member States in 2015, build upon the previous Millennium Development Goals (MDGs). Unlike the MDGs, the SDGs and their indicators explicitly reference persons with disabilities, including with respect to goals 4, 8, 10, 11, 16, and 17, which cover important issues such as education; employment; inequality; inclusive, safe, resilient, and sustainable cities and human settlements; representation in elected positions; and strengthened data, monitoring, and accountability. Implementation of the SDGs are animated by three principles: human rights-based approach; leave no one behind; and gender equality and women's empowerment.

- **U.S. Legislation:** As one of the first countries in the world to adopt legislation comprehensively prohibiting discrimination on the basis of disability through the 1990 Americans with Disabilities Act (ADA, later updated by the Americans with Disabilities Act Amendments Act of 2008), the United States has a robust and extensive framework of federal civil rights laws and regulations that provide equal opportunity protections for persons with disabilities. USAID seeks to comply with its legal obligations pursuant to those laws (e.g., laws addressing equal employment opportunity for persons with disabilities, provision of reasonable accommodations, accessibility of electronic and information technology, etc.) and incorporates as a matter of policy relevant U.S. standards into Agency policies (e.g., prohibiting discrimination consistent with the 1973 Rehabilitation Act, extending the principles of the ADA and the 1968 Architectural Barriers Act to USAID-financed assistance for new or renovation construction). Mindful of the need to respect local contexts and approaches, U.S. laws and regulations protecting the rights of persons with disabilities also offer helpful principles and methods to inform rights-based programmatic approaches to USAID's work with respect to persons with disabilities.

- **USAID Policies and Strategies:** The Disability Policy informs and is informed by the State Department and USAID Joint Strategic Plan and USAID Policy Framework (both of which reference persons with disabilities as among the marginalized groups to include and support in our work to advance equity) and numerous Agency policies and strategies.[12] These policies and strategies address technical, operational, and communication aspects of programming and embody USAID's commitment to nondiscrimination and inclusive development, consistent with the guiding principles of diversity, equity, inclusion, and accessibility. Many of these policies and strategies expressly reference persons with disabilities and the importance of fostering accessibility for and inclusion of persons with disabilities, including in sector-specific contexts.

Disability only becomes a tragedy when society fails to provide the things we need to lead our lives—job opportunities or barrier-free buildings, for example. It is not a tragedy to me that I'm living in a wheelchair.[13]

—JUDITH HEUMANN, AMERICAN DISABILITY RIGHTS ADVOCATE, FORMER U.S. DEPARTMENT OF STATE SPECIAL ADVISOR FOR INTERNATIONAL DISABILITY RIGHTS (2010–2017)

BACKGROUND

Disability and Human Diversity: Framing Disability in USAID's Work

As recognized in the CRPD, "disability is an evolving concept … [that] results from the interaction between persons with impairments[14] and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others."[15] This understanding of disability as a social construct is a departure from traditional framings of disability.

Historically, society has acknowledged that persons with disabilities have experienced problems, but the cause of those problems has often been misattributed to persons with disabilities and has centered on misperceptions of persons with disabilities as deficient.[16] These traditional framings have, through time, come to be captured in what are often referred to by disability rights advocates and academics as the "Medical Model" and "Charity Model" of disability. In the Medical Model of disability, society has often sought to "cure" people, regardless of whether this could be achieved or not, and whether they wanted this or not. Such approaches have often encouraged—or forced—persons with disabilities into institutions or to use medicines, surgery, or other interventions to change their bodies or minds to become closer to the prevalent societal view of what is considered "normal" or "typical," regardless of what persons with disabilities might want or aspire to.

In the Charity Model of disability, often well-intentioned people have tried to offer support, including access to disability-specific goods or services. However, typical delivery models of charity have often adopted unsustainable approaches that disempowered, pitied, or patronized persons with disabilities, deprived them of autonomy and agency, made them dependent upon others, or fostered segregation rather than meaningful and comprehensive community inclusion.

Access to high-quality medical care is as important to persons with disabilities as it is to their non-disabled peers. Charities can have a useful role to play—especially when their work is guided by persons with disabilities. However, by focusing on changing persons with disabilities rather than systems of inequality and discrimination, these two models of disability have frequently subjected persons with disabilities to harm and human rights violations. Furthermore, these approaches have typically failed to successfully address the root causes of persons with disabilities being denied full access and inclusion in society on an equitable basis with others.

The "Social Model" of disability is a reaction to these traditional framings. Instead of pointing to the person to change, the Social Model looks outward, to society. Under the Social Model, disability is the result of the negative interaction that can occur when people with certain functional conditions or "impairments" encounter barriers in society. Barriers can include physical, legislative, technological, and attitudinal and involve communication, information, and policy.[17] The Social Model identifies barriers in society—not persons with disabilities—as the problem.[18]

USAID references the Social Model to frame a foundational understanding of disability as a social construct resulting from the negative interaction between persons with certain functional conditions and barriers in society. This is not intended to negate other important concepts of disability (such as disability as a political or social identity[19]), and it should complement what is often referred to as a "Human Rights Model" of disability. A human rights perspective can advance understanding of the negative impacts of the barriers identified by the Social Model's framing of disability and can inform development approaches that further human rights of persons with disabilities. The Human Rights Model also embraces respect for difference and acceptance of persons with disabilities as part of human diversity and humanity[20] as well as the proactive provision of equitable supports, in addition to removal of societal barriers, to ensure persons with disabilities are fully included in society and enjoy human rights on an equitable basis with others.[21]

MEDICAL / CHARITY MODEL   **SOCIAL MODEL**
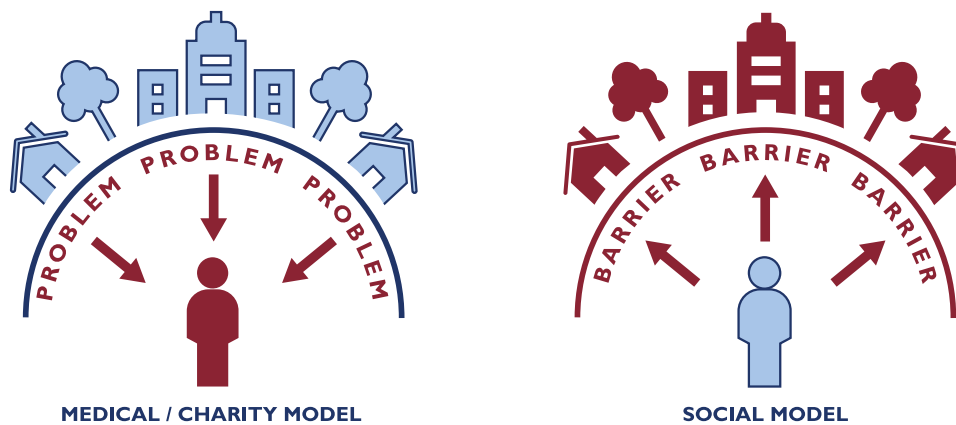
Situating USAID's work within the Social Model of disability compels us to focus development interventions on addressing societal barriers to access, equality, equity, and meaningful inclusion for persons with disabilities. The types of societal barriers typically experienced by persons with disabilities align well with the wide array of substantive areas in which USAID works and provide opportunities for the Agency to contribute to the effective removal of such barriers. At the same time, the Social Model's respect for the individuality, agency, and autonomy of persons with disabilities is consistent with USAID's commitment to an approach anchored in the protection and promotion of human rights to address inequalities and injustices that hinder development and empower individuals to claim their rights.

Persons with disabilities include but are not limited to persons with physical, psychosocial/mental, intellectual, cognitive, sensory, and other disabilities of varying degrees and complexity.[22] People may be born with their disabilities or acquire them later due to accident, illness, age, violence, natural disaster, or other causes. Two people may have the same disability, but that does not mean their experiences, disability-related needs, or accessibility requirements will be the same. It is important that USAID's work encompass persons with disabilities across all disability types; from all backgrounds, sexual orientations, gender identities, gender expressions, and sex characteristics (SOGIESC); and at all ages and stages across the human life course. An individual's disabilities may not be readily apparent, and because of the prevalence of disability-based discrimination and stigma, not all persons with disabilities may choose to self-identify as persons with disabilities. For example, some individuals may view themselves as persons with disabilities but may not feel safe or comfortable self-disclosing this to others. Others may not identify as members of the disability community at all, in some cases because of lack of access to assessment services or supports. For some persons, disability is an important aspect of their identity and a source of pride. USAID respects whether and how persons with disabilities self-identify or disclose. The Agency strives to foster safe and respectful environments in which persons with disabilities can feel comfortable in embracing and disclosing that identity as and when they choose.[23]

Persons with disabilities are not a monolithic group; they are part of every other population and group. Persons with disabilities may also experience the effects of multiple forms of discrimination. This Policy's intersectional approach recognizes that the many elements of identity, in combination with systems of inequality, can create unique power dynamics, effects, and perspectives that affect persons with disabilities' access to, and experiences of, development and humanitarian assistance interventions. These factors can be particularly powerful in contexts of transition to and from various states of local stability and fragility, peace and conflict, disaster and development, and political, economic, or societal transitions.

DISABILITY INCLUSION IN ACTION

USAID's "Global Labor Program – Inclusive Futures" (GLP-IF) activity aims to increase the inclusion and confidence of persons with disabilities, particularly women, so they are able to collectively bargain and improve labor rights at the Kenyan companies of global drinks brands Diageo's East Africa Breweries Ltd. (EABL) and Coca-Cola Beverages Africa (CCBA). Working with EABL, the program facilitates efforts of smallholder farmers who grow sorghum to organize collectively into hubs. Through the hubs, farmers with and without disabilities gain improved access to agricultural advice, farm inputs, and collective bargaining power to secure higher prices from EABL for their produce. GLP-IF works with CCBA to make its retail distribution chain more inclusive. The activity provides skills training and support to female retailers with disabilities to grow their businesses and supports them to organize into groups, giving them a platform to discuss common issues and negotiate better margins from CCBA product sales.

"The Global Labor Program has helped me a lot. I have received training on things like recordkeeping and customer service, which have made me more organized. The weekly coaching sessions have also helped me to know what I need to improve on and enabled me to navigate challenges I experience, which have in turn improved my business."

—Josephine, a CCBA retailer who owns a small retail business in Nairobi and is deaf

Vision, Goal, and Objectives

Vision: USAID envisions peaceful and prosperous societies in which persons with disabilities enjoy human rights, agency, access, influence, and opportunities to pursue their life goals and equitably contribute to and benefit from the Agency's development, humanitarian, and peacebuilding assistance interventions that engage people across societies, communities, and countries.

Goal: This Disability Policy seeks to empower and elevate the lives of persons with disabilities in partner countries by helping USAID and our partners recognize, respect, value, meaningfully engage, include, and be intentional in supporting persons with disabilities and their representative organizations to benefit equitably from our work as equal partners.

Objectives: In support of this goal, USAID will work toward the following six objectives.

1. Foster disability inclusion and respect for disability rights across Agency programming in development, humanitarian, and peacebuilding assistance.

2. Respect, empower, and meaningfully engage persons with disabilities—and their representative organizations—across their life course as drivers of development and peace, agents of change, and essential partners in the generation of solutions.

3. Identify and dismantle discrimination and barriers to foster accessible, equitable, safe, and inclusive societies in which persons with disabilities and their representative organizations can advocate for and exercise their rights without fear of violence or pressure to assimilate.

4. Recognize, respect, and meaningfully engage and partner with the full diversity of persons with disabilities.[24]

5. Advance the knowledge base of effective programming by strengthening disability-inclusive data collection, research, analysis, and learning associated with USAID programming, including with respect to assessing the quality of programming and representation of persons with disabilities.

6. Leverage USAID's leadership and convening power in fostering political will among international, regional, national, and local institutions to implement disability-inclusive principles and practices as well as accountability to persons with disabilities and their representative organizations.

PRINCIPLES

To achieve the six objectives described above, USAID will uphold the following seven operating principles: accessibility, accountability, anti-ableism, do no (more) harm, gender equality, nondiscrimination, and nothing without us. These operating principles are intended to align with and complement the principles in Chapter 201 of USAID's Automated Directives System (ADS): *Program Cycle Operational Policy*. USAID's Operating Units should apply the following principles across sectors and across the Program Cycle at every opportunity. Consideration should also be given to the interrelated and interdependent application of these principles. For example, in addressing how to uphold the principle of accessibility in USAID programs, the principle of nothing without us should be applied so that persons with disabilities are central to informing and guiding what constitutes effective and meaningful access.

Accessibility is the design, construction, development, and maintenance of facilities, information and multimodal communication and technology, programs, and services so that all people, including persons with disabilities, can fully and independently use them. Accessibility includes the provision of accommodations and modifications to ensure equitable access to and participation in activities for persons with disabilities, the reduction or elimination of barriers to equitable opportunities, a commitment to ensuring that persons with disabilities can independently access every outward-facing and internal activity as well as electronic spaces, and the pursuit of best practices such as UD.[25]

Accountability reflects USAID's commitment to disability-inclusive development, humanitarian, and peacebuilding assistance that is effective, responsive, sustainable, transparent, and accountable to persons with disabilities and their representative organizations. Achieving the objectives of the Disability Policy is a shared Agency responsibility and depends on the contributions and collective commitment of all our staff. Generation of data and evidence to facilitate tracking of progress, not merely tracking of inputs or outputs, is essential to ensuring effective outcomes. All USAID staff—including Senior officials; Mission Directors; Bureau leaders; Center, Office, and Hub directors; technical team leaders; and team members—are accountable

(including through employee evaluations as appropriate) for implementing this Policy across their portfolios as well as for defining specific goals within the Agency's strategies and programming that align with the objectives of this Policy.

Anti-ableism is the intentional use of strategies, theories, actions, and practices to challenge and counter pervasive discrimination and exclusion of persons with disabilities based on ableist norms that devalue persons with disabilities relative to non-disabled persons and are rooted in beliefs that ''typical'' abilities are superior and that persons with disabilities need to be changed to fit a social ideal of what is ''normal'' or ''typical'' rather than being respected as a natural part of human diversity.

Do no (more) harm is the undertaking of development, humanitarian, and peacebuilding assistance interventions that do not put participants at greater risk than would be the case without the intervention. Do no more harm acknowledges that harm may have already occurred, and the goal then is to ensure that more harm does not occur beyond the point of intervention and that, to the extent possible, actions are undertaken to mitigate and address past harm that may have occurred.

Gender equality is the equal ability to attain and benefit from human rights, freedoms, socially valued goods, opportunities, and resources by all individuals independent of their sex, gender expression, and gender identity. Gender equality is more than parity in numbers and laws on the books. Achieving gender equality means that all individuals—women and girls, men and boys, and gender-diverse individuals—can meaningfully contribute to and participate in their societies with dignity.

Nondiscrimination is the basic foundation of USAID's inclusive development approach. All Agency programs should ensure nondiscriminatory access for all potential beneficiaries and must comply with the Nondiscrimination for Beneficiaries Policy. USAID staff must not discriminate against any participant or potential participant, including by withholding, adversely impacting, or denying equitable access to benefits or services on the basis of disability. USAID's award terms and conditions place similar nondiscrimination requirements on our implementing partners. Nondiscrimination, a basic requirement for the U.S. government, is not by itself sufficient to ensure inclusion, but rather helps ensure that programs do not cause further exclusion. We encourage all in-country partners to work to end discrimination against persons with disabilities and promote equity for persons with disabilities in their country contexts.

Nothing Without Us is the meaningful engagement of stakeholders in all aspects and stages of the design, decision-making, implementation, and evaluations processes of programming, policies, or actions. Originally coined as "nothing about us without us" by disability rights activists in the 1990s, through time disability rights advocates such as former Special Rapporteur on the Rights of Persons with Disabilities Catalina Devandas Aguilar started shifting usage to "nothing without us." At the 2022 Global Disability Summit, disability advocates called for a change to "nothing without us," in recognition that any issue affecting humanity is necessarily of relevance to persons with disabilities. The principle has become an element of inclusive practices across a variety of fields and applications, is consistent with USAID's commitment to locally led and inclusive development, and is more effectively realized when we engage in development interventions with rather than for persons with disabilities.

DISABILITY INCLUSION IN ACTION

USAID's "Leading for Independent Living: Building Resources and Partnerships for Inclusive Communities in Armenia" activity supported establishment and operation of Independent Living Resource Centers (ILRCs) in two regions of Armenia. ILRCs are community-based, cross-disability organizations run by and for persons with disabilities to support their human right to live independently and be included in the community. Such organizations exist around the world and are part of the larger "independent living" movement founded by disability rights advocates such as Ed Roberts and Judy Heumann in the United States in the 1960s and 1970s. The ILRCs founded through this USAID-supported activity offer peer-led, rights-based services and resources to empower Armenians with disabilities to live independently, advocate for their rights, and participate fully in their communities.

> *"We created an environment where persons with disabilities were able to teach each other, to learn from each other, and to acquire a multitude of skills. So, among the achievements of the [ILRC], we can also highlight the fact that State authorities have started to approach the needs, requirements, and demands of persons with disabilities more seriously, and they're trying to ensure better representation and involvement for persons with disabilities."*
>
> *—Equal Rights, Equal Opportunities Organization's ILRC Advocacy Coordinator with a disability*

Any issue affecting humanity
is necessarily of relevance to
persons with disabilities.

DATA, LEARNING, AND EVIDENCE

Commitment to learning is a core value of USAID. Strengthening disability-inclusive data collection, research, analysis, reporting, and learning is critical to advancing the knowledge base of what works and supporting more effective programming.

- **Pilot the collection and use of disability-disaggregated data.** Disability-inclusive data collection, research, analysis, reporting, and learning are bolstered by disaggregation of data by disability—in addition to other bases for disaggregation that may be required—to better assess and bring visibility to the effective representation of persons with disabilities in and across USAID programming. This is especially important in programs that are not targeted specifically at persons with disabilities but that instead seek to be inclusive of persons with disabilities in mainstream programming contexts. Without disaggregation of people-specific indicator data in such contexts, we will struggle to determine the degree to which our wider programming is reaching and ensuring equitable outcomes for persons with disabilities and to facilitate learning and adaptation in our programming.[26] Consistent with ethical principles and relevant safety, security, data protection, privacy, and age-related considerations in the collection and use of such data, USAID will explore the feasibility to update data-collection requirements and systems to allow for future indicator data to be collected by disability status at a minimum, and disability type and degree where possible. Collection of data related to environmental barriers can also assist in tailoring development interventions. In these efforts, internationally comparable tools and suitable secondary data sources should be leveraged where available, for identifying persons with disabilities in data-collection efforts. In all data-disaggregation efforts, the principle of do no harm must be paramount.[27]

- **Leverage regular reporting mechanisms.** Regular reporting mechanisms such as the annual Operational Plan (OP) and Performance Plan and Report (PPR) offer ideal opportunities to capture and bring visibility to USAID's work to support persons with disabilities. Disability-focused Key Issues (for the OP) and Qualitative Narratives (for the PPR) exist to facilitate such reporting. All Operating Units engaged in activities that are primarily focused on persons with disabilities or intentionally seek to include persons with disabilities in mainstream activities should be reporting

through these established reporting mechanisms, including in instances where such activities might also be reported through other Key Issues or Qualitative Narratives. This reporting should be in line with existing reporting systems and requirements as well as Agency efforts to reduce burdens and streamline efficiencies.

- **Generate research and technical guidance.** Generation of sector-specific, evidence-based research and technical guidance is important in filling data gaps and disseminating knowledge of effective practice. Such guidance documents will be essential in promoting the effective application and implementation of this policy in sector-specific contexts and evaluating the efficacy of those approaches. In generating such guidance and research products, the principles of nothing without us, do no (more) harm, and accessibility are of particular but not exclusive relevance. USAID staff and implementing partners engaged in Agency-funded programs are highly encouraged to consult with and meaningfully involve persons with disabilities and their representative organizations in these initiatives to benefit from the perspectives of those most directly affected by USAID interventions and to seek to ensure that programming has no unintended negative consequences. Furthermore, information about research activities and findings should be made available in formats accessible to persons with disabilities.

It should also be acknowledged that the lack of accurate host-country data on disability is itself a development challenge, though also an opportunity for development diplomacy. Where feasible, USAID Missions should seek to meaningfully engage relevant host-government ministries and government statistics offices in the promotion of accurate and ethical disability data collection, including through censuses, demographic and health surveys, spatial mappings, community mappings, and other appropriate tools.

DISABILITY INCLUSION IN ACTION

USAID has supported the "Reference Group on Inclusion of Persons with Disabilities in Humanitarian Action" through a global program focused on increasing the leadership of disabled persons' organizations/organizations of persons with disabilities (DPOs/OPDs) in humanitarian action. With USAID support, the Group developed a set of core resources for and with DPOs/OPDs to increase the capacity of their members to engage in key humanitarian processes at global, regional, and country levels. This program worked with seven fellows from countries impacted by humanitarian emergencies and trained 120 DPO/OPD staff and members, establishing an active core cadre of disability rights activists with capacity to effectively engage with humanitarian actors to influence policy, programming, and implementation.

POLICY INTO PRACTICE

Operationalizing Disability Inclusion at USAID

"As an organization and as persons with disabilities, we do not want tokenism. We want meaningful engagement as equal partners in the process."

—GANESH SINGH, PROGRAM MANAGER, GUYANA COUNCIL OF ORGANISATIONS FOR PERSONS WITH DISABILITIES

To achieve the vision, goal, and objectives of this policy, USAID has identified the following as key approaches and opportunities to promote effective implementation and to support a systematic change-management approach to furthering USAID's disability-inclusion work. These recommended (unless otherwise indicated as a **requirement**) approaches draw on the collective experiences and learning of USAID staff, implementing partners, bilateral and multilateral development and humanitarian assistance agencies, and—most importantly—persons with disabilities and their representative organizations. These approaches are also consistent with a holistic approach to diversity, equity, inclusion, and accessibility, which embraces work at every level so that our people, partnerships, programs, processes, and policies are inclusive, reflect diversity, advance equity, and enhance accessibility.

Engagement and Communications

A Disability-Inclusive Approach to Locally Led Development: USAID's commitment to locally led and inclusive development fosters diversity in implementing partners and affords a prime opportunity to intentionally engage diverse representation from local DPOs/OPDs as leaders, implementers, and key decision-makers of development, humanitarian, and peacebuilding assistance interventions. Consistent with its Local Capacity Strengthening Policy, USAID is also committed to capacity strengthening that supports DPOs/OPDs' abilities to deliver and sustain development results. Such approaches are strengthened where we include persons with disabilities at all phases of the program life cycle and support

the organizational capacity of DPOs/OPDs to contribute to USAID's strategic planning; participate in project design, including through accessible and inclusive collaboration and co-creation processes; and respond to USAID solicitations, including as first-time recipients of USAID funding.

Partnering for Success: Collaborative partnerships among USAID, persons with disabilities, donors, governments, civil society, and others are necessary for effective implementation of this policy. Clarity of expectations is essential to foster mutually beneficial partnerships. Explicit references to persons with disabilities in all solicitation phases for all activities are important to communicate that Agency-funded programs should equitably include and be responsive to persons with disabilities and that potential implementing partners will be assessed on their understanding, willingness, and capacity to implement programming consistent with this policy.

Communications: USAID's work and how we communicate about this work should be consistent with the vision, goal, objectives, and principles of this policy (including in Agency-funded publications and communications products). This includes promoting empowering and respectful representation of persons with disabilities that challenges societal discrimination and euphemistic or ableist framings of disability. With respect to accessibility of IT procurements and communications products (including social media posts, videos, electronic briefers, factsheets, reports, etc.), compliance with the accessibility requirements of Section 508 of the Rehabilitation Act is an existing legal **requirement** for USAID and considered as part of program design more generally.

Foundations for Operational Success

Twin-Track Approach: USAID is committed to a twin-track approach that recognizes that inclusion of persons with disabilities in mainstream programming across all USAID sectors and portfolios and programming targeted to the specific needs of persons with disabilities are essential. Inclusion of persons with disabilities at all phases of the program life cycle is relevant to both types of programming.

Budgeting for Success: A valuable approach to programming (mainstream and targeted) that equitably includes persons with disabilities is to assume that persons with disabilities can and should be included and to budget accordingly within available resources. Given the global disability prevalence rate of 16 percent, persons with disabilities should be reflected in potential participant pools for USAID-funded activities broadly and not only in activities targeting persons with disabilities. Budgets should proactively and intentionally support principles of UD and the provision of disability reasonable accommodations where UD alone may be insufficient to facilitate the equitable participation of program participants and staff with disabilities.

Leveraging Principles of UD: UD offers an important foundational approach to inform program design and implementation for all people. However, where UD principles alone are insufficient, reasonable accommodations remain an important tool to effect appropriate modifications and adjustments to ensure persons with disabilities are equitably engaged and included. As noted previously, both approaches are most effective when proactively supported by intentional budgeting.

Approaching Our Work Across the Life Course: Persons with disabilities exist at all ages, as disability can be acquired at any age and stage of life. The disability experience can affect individuals' needs throughout their life course. Although programs or interventions may necessarily be targeted to specific ages or stages within the life course (e.g., infancy and childhood, youth, or older adults), it is important that USAID's programming as a whole foster accessible, equitable, safe, and inclusive societies that are responsive to persons with disabilities across the life course, including their transitions between life course stages. Especially for children and youth with disabilities and older persons with disabilities, it is important that the Agency continues to support and promote protective, nurturing, and loving family care as well as home- and community-based support services. Such approaches are critical to supporting the full inclusion of persons with disabilities of all ages in their communities and society and the transition from relying on residential care settings to supporting persons with disabilities living independently and being included in the community. At the same time, USAID programming should avoid approaches that would strengthen or perpetuate institutions and other residential care settings that contribute to the segregation from society of persons with disabilities of all ages.[28]

Systems Strengthening: Achieving and sustaining any development outcome depends on the contributions of multiple and interconnected actors. Focusing on the system as a whole—the actors, their interrelationships, and the incentives that guide them—will typically drive a more positive impact during the long term than more limited approaches. Interventions and programming that encompass whole-of-society engagement, locally driven solutions, and social and behavior change are best positioned to strengthen societal systems with which persons with disabilities interact; combat discrimination and ableist norms that may manifest in those systems; and ensure such systems are responsive to and supportive of persons with disabilities fully enjoying their human rights on an equitable basis with others. A

systems-strengthening approach also has the potential to increase its impact and sustainability through the long term. Effective systems-strengthening work relies on robust engagement with persons with disabilities, raising the importance of USAID interventions and programming that support and empower DPOs/OPDs and networks of persons with disabilities and their allies.

Inclusive Acquisition and Assistance: USAID acquisition and assistance (A&A) processes and procedures afford multiple opportunities to ensure that activities and programming achieve inclusion of, and responsiveness to the needs of, persons with disabilities. In addition to explicit references to persons with disabilities in all solicitation phases for all activities, encouraging proactive budgeting for accessibility and reasonable accommodations promotes the efficacy of disability-inclusive programming in targeted and mainstream programming contexts. Consistent with USAID's New Partnerships Initiative, and while maintaining appropriate safeguards on taxpayer resources, A&A processes and procedures should be reviewed and, where feasible, adapted to lower barriers to DPOs/OPDs as implementation partners of Agency programming. At the same time, assistance standard provision packages in ADS 303maa (Standard Provisions for U.S. Nongovernmental Organizations), ADS 303mab (Standard Provisions for Non-U.S. Nongovernmental Organizations), and ADS 303mat (Standard Provisions for Fixed Amount Awards to Nongovernmental Organizations) contain mandatory references to the USAID Disability Policy and nondiscrimination against beneficiaries provisions that are a requirement in such awards. ADS Chapter 551 Section 508 and Accessibility offers guidance on the building of accessible information and communications technology (ICT), including ICT products and services developed, procured, maintained, or used by USAID; and all USAID electronic content including, but not limited to, electronic files, videos, online training materials, external and internal Agency-funded websites, electronic systems, Agency Notices, blogs, and social media. In the context of any new or renovation construction project funded by USAID, the use of the USAID Policy on Standards for Accessibility is an existing **requirement** in all Agency A&A for construction and alteration.

DISABILITY INCLUSION IN ACTION

USAID's "Advancing Nutrition" activity promoted greater attention to nutritional needs of children with disabilities. Children with disabilities are more likely to experience feeding difficulties, which contribute to higher rates of malnutrition and early mortality among children with disabilities, and daily stress and social exclusion for children and families. Advancing Nutrition has made resources more accessible to better support communities, workers, and programs to respond to these children's needs through the Feeding and Disability Resource Bank. The activity has also increased awareness of the nutritional needs of children with disabilities through research and advocacy under the guidance of an advisory group of persons with disabilities and through a global convening of actors from health, nutrition, and disability to align on priorities moving forward.

Living Our Values

Supported and Representative Staffing: Consistent with USAID's commitment to enhancing diversity, equity, inclusion, and accessibility throughout the Agency, effective implementation of this policy will be strengthened by promoting a diverse and representative workforce at all levels across USAID and implementing partners, as appropriate, that is inclusive of persons with disabilities. This necessitates a commitment to hiring persons with disabilities in a manner consistent with applicable legal protections and hiring targets while leveraging relevant staffing authorities, including Schedule A hiring. It also requires fostering a workplace culture where colleagues with disabilities are welcomed, respected, and supported (including through UD and provision of reasonable accommodations) in their performance, professional development, and advancement on an equitable basis with others. Supported staffing also necessitates promoting the knowledge, capacity, and confidence of USAID staff, and where appropriate implementing partners, to pursue disability-inclusive programming. This can be achieved through provision of training and technical guidance and facilitating direct engagement with persons with disabilities and their representative organizations. USAID Missions and Operating Units are encouraged to designate one "Disability Focal Point" to drive championing and ownership of disability inclusion across the Mission or Operating Unit and provide technical support. Disability Focal Point(s) should have, at a minimum, completed "Disability 101" and "Disability 102" training and training on inclusive development.

Leading Through Development Diplomacy—Advancing Progress Beyond Programs: The convening power of USAID offers a unique opportunity to bring together a wide variety of relevant stakeholders to share knowledge and foster commitment to disability-inclusive principles and practices. Such stakeholders include DPOs/OPDs, wider civil-society groups and community-based organizations and networks, the private sector, other bilateral development agencies, philanthropies, multilateral institutions, regional organizations, international financial institutions, host-country governments, and the wider U.S. interagency. Perhaps most importantly, the Agency has the opportunity in its convenings to ensure that persons with disabilities have the opportunity to participate fully and on an equitable basis with others. Especially in contexts where persons with disabilities are marginalized in society due to stigma on the basis of disability, USAID can exercise its convening power and influence to demonstrate the value of inclusion, push back against ableist norms, and encourage others to do the same.

Commitment to Continued Improvement: As reflected in USAID's systematic and intentional use of "collaborating, learning, and adapting" practices, the Agency is committed to continuously improving the effectiveness of its work across the program cycle. In the context of implementation of this policy, it reflects USAID's commitment to continuing to improve through regular evaluation, solicitation of stakeholder feedback, and periodic review and updating of both policy and practice. It also means recognizing and responding to situations where our systems and approaches may unintentionally hinder the ability of persons with disabilities and their representative organizations to partner with us effectively.

Disparate outcomes for persons with disabilities should not be considered inevitable. Intentional and meaningful inclusion of persons with disabilities across all areas of USAID's work is essential so countries can meet their development goals and individual citizens can reach their full potential.

CONCLUSION

USAID has a long-standing commitment to nondiscrimination and inclusion of persons with disabilities in society on an equitable basis with others. Following two and a half decades of learning, through this 2024 "Nothing Without Us: USAID Disability Policy," USAID seeks to position itself to partner with persons with disabilities across all aspects of its work in meeting the challenges and opportunities of the twenty-first century.

Through a principled and rights-based approach, grounded in the Social Model of disability and key legal and policy frameworks and informed by sector-specific technical guidance, USAID will work toward building peaceful and prosperous societies in which persons with disabilities enjoy the rights, agency, access, influence, and opportunities to pursue their life goals and equitably contribute to and benefit from the Agency's development, humanitarian, and peacebuilding assistance interventions that engage people across societies, communities, and countries. In doing so, USAID will leverage key approaches to operationalizing disability inclusion that draw on the collective experiences and learning of Agency staff, implementing partners, bilateral and multilateral development and humanitarian assistance agencies, DPOs/OPDs, and—most importantly—persons with disabilities.

ANNEX I. PERSONS WITH DISABILITIES IN USAID PROGRAMS

Disability sector snapshots and promising approaches to disability-inclusive programming across USAID portfolios

All of USAID's programming and interventions are relevant to persons with disabilities. Intentional and meaningful inclusion of persons with disabilities across all areas of the Agency's work is key to countries meeting their development goals and potential for the benefit of *everyone*. Across the broad scope of USAID's work, intentional inclusion of persons with disabilities is necessary for high-quality programming that advances equity and benefits persons with disabilities. Conversely, failure to include persons with disabilities in our programming may limit persons with disabilities and other participants who will not have the benefit of their participation. Failure to include persons with disabilities may also violate the principle of do no (more) harm by depriving individuals of opportunities for meaningful engagement or reinforcing societal barriers that adversely affect persons with disabilities long after programming has ceased.

The following snapshots are not intended to be a substitute for more detailed, sector-specific technical guidance documents. However, they provide a brief overview of the situation of persons with disabilities—as well as non-exhaustive examples of promising approaches for disability-inclusive programming—across the following range of sectors of USAID's work:

- » Agriculture and Food Security
- » Climate
- » Democracy, Human Rights, and Governance
- » Digital Access and Technology
- » Economic Growth and Trade
- » Education
- » Environment, Energy, and Infrastructure
- » Gender Equality and Women's Empowerment
- » Global Health
- » Humanitarian Assistance
- » Nutrition
- » Peace and Security
- » Water Security, Sanitation, and Hygiene

Regardless of sector, the following approaches should be undertaken so USAID programming is maximally inclusive of persons with disabilities.

- Meaningfully engage with disabled persons' organizations/organizations of persons with disabilities (DPOs/OPDs) early, often, and throughout the project life cycle—consistent with the principle of "nothing without us"—to ensure project design, implementation, and monitoring and evaluation are undertaken *with* and not *for* persons with disabilities.

- Uphold the interrelated and interdependent application of "nothing without us" and the other operating principles of this policy: accessibility, accountability, anti-ableism, do no (more) harm, gender equality, and nondiscrimination.

- When collecting data and performing research to inform programming, take an approach that considers the complex, cumulative ways in which the effects of multiple forms of discrimination combine, overlap, or intersect.

- Develop project budgets to proactively and transparently plan and account for accessibility and reasonable accommodations to facilitate the equitable participation of persons with disabilities.

- Disaggregate project data by disability status at a minimum, and disability type where feasible, to determine whether project participants are inclusive of persons with disabilities.

- Support strengthening of DPOs/OPDs and work with local DPOs/OPDs to adapt policies and program practices to foster locally sustained change that generates positive outcomes for persons with disabilities.

Agriculture and Food Security

Smallholder farmers' produce accounts for 70 percent of the world population's food source.[29] In some contexts, a majority of households in a region may be involved in agriculture and reliant on agriculture for their livelihoods.[30] However, poor access to services, markets, and assets marginalizes smallholder farmers and small- to medium-enterprise (SME) operators with disabilities, resulting in their inequitable participation in the agriculture sector.[31] Barriers to equitable participation by farmers and SME operators with disabilities can include physical barriers, such as a lack of access to adapted agricultural tools and machinery, and attitudinal barriers, which may cause financial institutions to fail to extend credit or crop buyers to mistakenly believe the produce of farmers with disabilities is of lower quality.[32]

Persons with disabilities are also more likely than non-disabled persons to experience food insecurity. Even outside low- and middle-income countries (LMICs), data indicate the average percentage of persons with disabilities unable to afford a meal with protein every other day is almost double that of non-disabled persons.[33] The gender gap in terms of access to meals with protein is also greater among persons with disabilities, with a larger number of women with disabilities experiencing this situation compared to male peers. In LMICs, data indicate that persons with disabilities and their households are more likely to not have food to eat compared to non-disabled persons and their households.[34]

Promising Approaches

- Promote leadership of persons with disabilities in decision-making, governance, research, and food-systems organizations at all levels as well as in managing and governing land, freshwater, marine, and other natural resources.

- Address disability discrimination in agricultural cooperatives, financial institutions, and agricultural financing schemes so farmers with disabilities may benefit from their support on an equitable basis with others.

- Promote access of farmers with disabilities to affordable, adapted agricultural tools and machinery and digital agricultural technologies.

Climate

Of the world's 1 billion persons with disabilities, 80 percent live in LMICs,[35] countries that are often more exposed to extreme weather events.[36] Persons with disabilities face multidimensional inequalities, including higher rates of poverty, ableist norms, inaccessible environments, discrimination, and other forms of exclusion.[37] This contributes to persons with disabilities being at especially high risk of injury and mortality during climate-related extremes, including natural disasters and extreme weather events.[38] Persons with disabilities may be unable to evacuate in the face of extreme weather events or fully use migration as a climate change-adaptive response due to inaccessibility of the built environment, transportation, information and communication, and emergency shelter facilities as well as poor access to financial and other resources, leading to increased risk of injury, secondary disabilities, or mortality.[39]

Promising Approaches

- Bolster the resilience of persons with disabilities to the effects of climate change, including by promoting disability-inclusive approaches to urban planning, disaster risk management and response, development of accessible early warning systems, and inclusion of persons with disabilities in the design and implementation of financial protection strategies and instruments.

- Promote a "just transition" to a green economy for persons with disabilities on an equitable basis with others,[40] including facilitating the participation of persons with disabilities in current and emerging "green jobs" that seek to de-carbonize the economy, bring down emissions of greenhouse gasses, promote fuel efficiency or the use of renewable energy sources, or otherwise contribute to climate change mitigation.

- Support the contribution of persons with disabilities to climate change response, including climate change mitigation, by fostering collaborative partnerships among DPOs/OPDs, environmental groups, governments, and humanitarian agencies; meaningfully including persons with disabilities in the development of climate change response and mitigation policies, strategies, and activities at regional, national, and subnational levels; and advocating for climate action by governments and other actors that is informed by, and responsive to, the unique ideas and contributions of persons with disabilities.

Democracy, Human Rights, and Governance

Despite widespread adoption of the Convention on the Rights of Persons with Disabilities (CRPD), discriminatory laws and policies still exist in many countries, including laws that limit the right of persons with disabilities to marry, exercise legal capacity, and participate in political and public life. Only 36 percent of countries hold no legal restrictions for persons with disabilities to marry; only 13 percent have no limitations to vote; and only 9 percent have no restrictions on persons with disabilities being elected to public office.[41] In many countries, persons with intellectual or psychosocial disabilities experience denial of their right to exercise legal capacity through guardianship, conservatorship, and legislation depriving them of the ability to have agency and control of their lives.[42]

The evidence from five LMICs suggests that approximately one in five persons with disabilities has been beaten or verbally abused due to their disability.[43] However, access to justice is also limited in many contexts, with more than 30 percent of courts and police stations not accessible in some countries and more than 90 percent of persons with disabilities in need of legal advice unable to receive it.[44] In some countries, more than one in ten persons with disabilities experience discrimination in public services; globally, only two-thirds of countries have access to online government services designed for persons with disabilities.[45]

Promising Approaches

- Address barriers to the full, meaningful, and equitable participation of persons with disabilities in all areas of political and public life, including supporting their representation, leadership, and agency in political organizations, legislatures, and governmental agencies.

- Support the political empowerment of persons with disabilities and DPOs/OPDs, including through participation in accessible elections at all levels of government, access to information needed to understand these processes and make informed political decisions, access to civic education inclusive of disability rights, and removal of legal limitations on participation based on disability.

- Address ableist norms, policies, and inaccessibility that deprives persons with disabilities of equitable access to justice via the police and court systems.

Digital Access and Technology

Despite the transformative impacts of digital technology on people's access to information, communication, goods, and services, and the essential role mobile devices and services play in people's lives, many persons with disabilities remain "unconnected and digitally excluded."[46] Many websites, including government portals, fail to comply with accessibility standards (e.g., the Web Content Accessibility Guidelines) that would facilitate access for persons with a wide variety of disabilities.[47] Affordability of technology also remains a barrier, with some data indicating that in LMICs, "persons with disabilities are half as likely to afford Internet costs and less likely to be able to afford radio, TV, and a mobile phone."[48] Although emerging technologies such as artificial intelligence (AI) hold the potential to benefit persons with disabilities, the encoding of ableist norms and assumptions in some AI applications has raised concerns about AI discrimination against persons with disabilities.[49]

Assistive technology (AT)—including wheelchairs, hearing aids, prostheses, eyeglasses, and digital services—plays a key role in the lives of many persons with disabilities. By supporting access, including to education and employment, it is estimated that providing AT has a 9:1 return on investment.[50] Facilitating access to AT for a child in an LMIC has the potential to make a difference of $100,000 in lifetime income, in addition to health and social benefits.[51] However, it is estimated that in LMICs, only 10 percent of persons have access to the AT they need.[52]

Promising Approaches

- Close the digital gap for persons with disabilities by promoting compliance of products and services with accessibility standards and principles of universal design (UD), affordability of digital products and services for persons with disabilities, and access to information and training to provide persons with disabilities the skills to fully leverage the potential of digital technologies across different areas of life.

- Address disability discrimination in digital ecosystems by avoiding the encoding of ableist norms and assumptions in AI-driven products and services (including through the adoption of standards and regulations and by promoting disability-inclusive hiring of coders and product developers) and supporting laws and regulations to hold technology platforms and individual perpetrators accountable for discrimination against persons with disabilities (including technology-facilitated gender-based violence, or TFGBV).[53]

- Promote lifetime access to appropriate and affordable AT through user-centric innovation; consistent product and service delivery standards; inclusion of AT in insurance and national health schemes; training of personnel; coordination by stakeholders at all phases of the supply chain; and removal of import tariffs that can decrease affordability.

Economic Growth and Trade

In 22 countries, national constitutions explicitly guarantee the right to work for persons with disabilities.[54] More than 60 percent of countries include provisions in their labor laws prohibiting discrimination in employment and guaranteeing equal pay for persons with disabilities.[55] However, the employment-to-population ratio of persons with disabilities aged 15 and older is almost half that of non-disabled persons.[56] Only one in three persons with disabilities is employed, on average, and they are two times less likely to be employed than non-disabled persons.[57] Persons with disabilities who are employed tend to earn lower wages than their non-disabled counterparts.[58] Lack of accessible workplaces and reasonable accommodations, discrimination in hiring, and denial of access to education and skills development all pose obstacles to the equitable employment of persons with disabilities.

At least 168 countries have disability schemes that provide periodic cash benefits to persons with disabilities, while lump-sum benefits are provided in 11 countries.[59] However, many persons with disabilities remain unable to access social protection, and in some countries, more than 80 percent of persons with disabilities cannot access needed welfare services.[60] In half of the countries with periodic benefits, children with disabilities and persons with disabilities may be excluded from benefits as they have not had the opportunity to sufficiently contribute to social insurance.[61]

Promising Approaches

- Promote access of persons with disabilities to skills and training to participate in the economy and engage in decent work in mainstream work environments that do not segregate persons with disabilities, do not reinforce stereotypes of "suitable" jobs for persons with disabilities, and ensure wage parity with non-disabled workers.

- Promote adoption and effective enforcement of nondiscrimination laws in employment and work with employers to understand their obligations, including with respect to provision of workplace adjustments and reasonable accommodations.

- Address social protection systems to account for the added costs many persons with disabilities face due to societal inequities and barriers and ensure persons with disabilities need not fear loss of access to social protection or other supports as a consequence of participation in the labor market.

Education

Globally, school-age children and youth with disabilities face extreme barriers that limit their access to high-quality, equitable, and inclusive education. For the nearly 240 million children and youth with disabilities across the world—or one in ten children and youth aged 0 to 17 years—they are on average more likely than learners without disabilities to be out of school and less likely to complete primary, secondary, or higher education; possess basic literacy and numeracy skills; and receive school-related support.[62] These disparities can be exacerbated by a lack of systems to screen, identify, and link learners with disabilities to appropriate supports. Only 16 out of 195 countries mention inclusive education in their general education laws, effectively removing marginalized children and youth, including those with disabilities, from policymaking and programming decisions affecting their lives.[63] Youth with disabilities are far less likely to be employed than non-disabled youth; and among individuals with disabilities who are employed, youth, women, and individuals with mental and cognitive disabilities receive lower wages.[64] These data reflect that societal stigma and attitudes—including low expectations of the capacity of persons with disabilities to learn or contribute economically—remain major barriers to accessing education and employment for persons with disabilities.

With accessible and appropriate resources, children and youth with disabilities can prosper academically, gain meaningful employment, and exercise self-determination. Principles of UD—which consider the design of policies, allocation of resources, training and support for teachers and employers, availability of support services, and overall accessibility of materials, infrastructure, transportation, and assistive technologies—can improve education and workforce outcomes for all students and employees, including persons without disabilities, and inform a holistic approach for persons with disabilities.

Promising Approaches

- Support partner-country governments to develop and implement education sector and workforce development policies and plans that further inclusive education for persons with disabilities, as articulated in CRPD Articles 24 and 27, and align with the needs and priorities of persons with disabilities and their representative organizations.

- Build capacity to deliver disability-inclusive education among educators by embedding disability-inclusive education pedagogy—including principles of UD for learning (a research-based set of principles to guide the design of learning environments that are accessible and effective for all)—throughout pre-service and in-service teacher training programs. Support the establishment of post-secondary degree and certificate programs in inclusive education to build human resource capacity. Remove access barriers at institutions of higher education and prioritize recruitment of individuals with disabilities as staff and students in teacher training programs.

- Develop inclusive and accessible teaching and learning materials for all learners, not just learners with disabilities, that align with principles of UD for learning. Design and administer inclusive and accessible learning assessments that align with principles of UD for assessment, including materials for workforce development and training efforts.

Environment, Energy, and Infrastructure

Persons with disabilities are harmed by environmental degradation, and environmental hazards are risks for disability. For example, overfishing and climate change have been tied to the acquisition of neurologic injuries and paralysis by Indigenous Miskito divers in Honduras, who risk decompression syndrome by diving to increasingly dangerous depths.[65] When communities migrate to escape environmental pressures, persons with disabilities and other marginalized groups are often left behind to cope with drought, flooding, or other hazardous conditions.[66] Yet persons with disabilities are often excluded from environmental advocacy movements and not consulted in environmental decision-making, leading to policy and infrastructure choices that create significant barriers for persons with disabilities.[67] In some countries, more than 30 percent of persons with disabilities find that transportation and public spaces are not accessible.[68]

In 37 out of 44 LMICs, access to electricity is lower for households with persons with disabilities than households without.[69] In 17 countries, less than half of households with persons with disabilities have access to electricity.[70] Traditional fuels, such as biomass and coal, are still used for cooking in many LMICs, with persons with disabilities at greater exposure to household air pollution due to longer periods at home.[71] Access to clean, affordable, safe, and reliable energy is crucial to the well-being of persons with disabilities, including their abilities to power assistive devices, durable medical equipment such as ventilators, lighting, heating and cooling, cooking, and refrigerated food storage.

Promising Approaches

- Advance programs and policies to protect the rights of environmental human rights defenders with disabilities; promote collaboration between environmental, indigenous, and disability rights communities; and facilitate the meaningful inclusion of persons with disabilities in environmental policymaking, conservation, and natural resource management.

- Engage persons with disabilities in energy sector interventions to promote access to clean, affordable, safe, and reliable energy for persons with disabilities. Advance disability-inclusive economic opportunities for persons with disabilities in the energy sector through recruitment, human resource policies, training, and education.

- Facilitate the meaningful engagement of persons with disabilities in informing and influencing accessible and disability-inclusive infrastructure design and decision-making, encompassing all aspects of infrastructure, such as communications, transportation, housing, and broader urban planning.

Gender Equality and Women's Empowerment

The average disability prevalence rate in the female population of 18 years and older is 19.2 percent (compared to 12 percent for males), representing about one in five women.[72] Women, girls, and gender-diverse individuals with disabilities of all ages and life stages face a double nexus of inequality. This, in turn, places them in doubly vulnerable situations where they do not receive access to services, face compounding safety and security challenges, and enjoy less agency and autonomy.

Women and girls with disabilities are up to ten times more likely to be subjected to gender-based violence (GBV) than their non-disabled peers[73] and experience TFGBV as an evolving form of GBV. Sterilization of women with disabilities without their knowledge or consent is also a widespread form of violence and violation of reproductive rights.[74] Inaccessible justice systems, in turn, hinder the ability of girls and women with disabilities to access justice and seek or obtain redress. Women and gender-diverse individuals with disabilities are often further discriminated against because they are even more likely to be economically poor.[75] GBV affecting women, girls, and gender-diverse individuals with disabilities is further neglected due to researchers too often failing to consider disabilities or gender within their data collection.

Promising Approaches

- Build awareness of and capacity to address gender-based issues within DPOs/OPDs and disability-serving organizations. Advance and support women and girls with disabilities' agency, equitable leadership, representation, and meaningful participation across all development, humanitarian, social, and political sectors of society.

- Identify and address the differential gaps, barriers, needs, and opportunities of women and girls, men and boys, and gender-diverse individuals by conducting and integrating the findings from gender analyses for disability-focused programming and disability-inclusive gender analyses for all USAID programming, strategies, and policies.

- Advance gender-sensitive learning by disaggregating disability-focused data and research by gender identity, accounting for gender-based differentials, and incorporating gender-based learning questions. Disaggregate by disability status and, as feasible, disability type, age, gender identity, sexual orientation, sex characteristics, and other relevant disaggregates.

Global Health

Although life expectancy for those living with disability has increased by 69.4 percent between 1990 and 2019, persons with disabilities remain behind in life expectancy by 10 to 20 years.[76, 77] Mortality rates are 2.4 times higher among persons with disabilities than their non-disabled peers.[78] During the COVID-19 pandemic, persons with disabilities were 2.8 times more likely to die from COVID-19.[79] Persons with disabilities are also three times more likely to be denied health care.[80] According to the World Health Organization (WHO), LGBTQI+ persons are "less likely to access health services and engage with health care workers due to stigma and discrimination, resulting in adverse physical and mental health outcomes."[81] Societal barriers for persons with disabilities can create additional barriers to accessing high-quality care. For example, research indicates that transgender individuals with disabilities who are deaf are likely to be treated by practitioners who have little to no understanding of at least one aspect of their identities.[82] Only 21 percent of adults with disabilities have comprehensive knowledge about HIV prevention and transmission, compared to 28 percent of non-disabled persons.[83] As a result of the gap in comprehensive knowledge, persons with disabilities are two times more likely than their non-disabled counterparts to have HIV/AIDS.[84]

Such disparate health outcomes are not the consequence of persons with disabilities' underlying health conditions, but rather are the consequence of unfair and avoidable societal conditions that disproportionately affect persons with disabilities.[85] Adopting disability-inclusive approaches to health prevention and care has the potential to bring dividends to individuals and communities. It is estimated that for every $1 spent on disability-inclusive noncommunicable disease prevention and care (i.e., ensuring equitable access to these services for persons with disabilities), the return on investment could be $10.[86] For children with disabilities, promoting primary health care systems that are equipped to monitor children's development is a key component to early intervention and provision of appropriate support services to children and families. Providing access to high-quality health care for persons with disabilities contributes to their wider participation in society, is consistent with state parties' obligations under Article 25 of the CRPD, and is critical to achieving universal health coverage and UN Sustainable Development Goal 3 ("good health and well-being").

Promising Approaches

- Promote health care systems that effectively serve all, including persons with disabilities of all ages, by ensuring that such systems "expect, accept, and connect"[87] persons with disabilities with high-quality and inclusive health care. Ensure such approaches respect and respond to the diverse and intersecting identities of persons with disabilities, including identifying and addressing health care access barriers experienced by persons with disabilities.

- Support empowerment and meaningful participation of persons with disabilities and DPOs/OPDs in health sector interventions, including the areas of health sector governance, financing, physical infrastructure, health policy, digital technologies for health, development of the health and care workforce, and systems of monitoring and evaluation.

- Address the provision of rehabilitation services,[88] ATs,[89] and person-centered and rights-based mental health care services—recognizing these services are beneficial to all persons, not only those with disabilities—as part of high-quality, disability-inclusive health care.

Humanitarian Assistance

Humanitarian crises—whether armed conflict or other violence, economic and political collapse, or disasters caused by natural hazards—disproportionately affect persons with disabilities. During crises, the mortality rate of persons with disabilities may be two to four times higher than that of non-disabled persons.[90] Crises also increase the prevalence of disability due to new injuries and disruptions to health and essential service systems.[91] Persons with disabilities are more likely to have unmet basic needs due to significant barriers in accessing humanitarian assistance, such as inaccessible sanitation infrastructure or food assistance that is not responsive to specific nutritional needs.[92] The systems, services, and informal networks that persons with disabilities rely on are more likely to be dysfunctional or inaccessible during crises. Persons with disabilities also face specific protection risks, including targeted violence and abuse, loss of or damage to assistive devices, and increased dependency on others.[93]

Disability intersects with other identity factors to increase marginalization during crises. For example, children with disabilities are more likely to be abandoned or neglected during displacement, and women and girls with disabilities face higher rates of GBV than their non-disabled peers.[94, 95] With older women more likely to be widowed and living alone,[96] this isolation can exacerbate the risks for older women with disabilities. Understanding how the different aspects of a person's identity can expose them to overlapping forms of discrimination and marginalization, enhancing the participation and leadership of persons with disabilities in humanitarian decision-making, and enabling DPOs/OPDs access to funding is critical to disability-inclusive humanitarian assistance.

Promising Approaches

- Promote the leadership of persons with disabilities and their representative organizations in humanitarian coordination and decision-making at the regional, national, subnational, and global levels.

- Implement the Inter-Agency Standing Committee Guidelines on Inclusion of Persons with Disabilities, including the four "must do" actions: promote meaningful participation; remove barriers to accessing humanitarian assistance; empower persons with disabilities to develop their own capacities; and monitor for inclusion.[97]

- In line with the twin-track approach, ensure each humanitarian response sector (e.g., health, nutrition, protection, shelter, etc.) integrates disability inclusion into all programmatic activities and provides interventions to address the specific risks or barriers persons with disabilities face related to that sector.

Nutrition

Persons with disabilities of all ages experience barriers in accessing adequate nutrition. Barriers to education and skills acquisition as well as employment discrimination can harm their standards of living and ability to afford nutritious food. Inaccessible housing and transportation can make even affordable food difficult to obtain, and lack of access to reliable power can jeopardize safe storage and cooking of food. Consequently, persons with disabilities are at higher risk of living in food-insecure households and are less able to afford a meal with protein than non-disabled persons and their households.[98] Lack of access to education also means that children and youth with disabilities are "less likely to benefit from school-based malnutrition reduction efforts" than their non-disabled peers.[99]

Children with disabilities are two to three times more likely to be malnourished and twice as likely to die from malnutrition as their non-disabled peers.[100] In addition to wider societal barriers that limit access to nutritious food, lack of access to nutrition-specific supports can foster malnutrition for persons with disabilities who experience feeding difficulties such as difficulty

chewing or swallowing. Although 25 to 45 percent of typically developing children experience such difficulties, that figure jumps to 33 to 80 percent of children with disabilities.[101] The frequent exclusion of children with disabilities, including those experiencing feeding difficulties, from nutrition programs and services as well as lack of access to supports for their families and other caregivers means these children are at enhanced risk of malnourishment, wasting, and death.

Promising Approaches

- Address societal barriers in education, employment, and elsewhere that hinder the ability of persons with disabilities to achieve and maintain an adequate standard of living and support policies and programs that uphold their ability to live independently and be included in accessible communities where they can access affordable, healthy food and adequate nutrition.

- Promote social protection policies and programs that encompass the nutrition needs of persons with disabilities and their households across the life course.

- Make nutrition supports and services—and malnutrition reduction interventions—accessible to and inclusive of persons with disabilities on an equitable basis with others, including through early identification of and outreach to persons with disabilities who may experience feeding difficulties.

Peace and Security

Persons with disabilities who are living in, or attempting to flee from, conflict zones face numerous threats to their physical and mental health and well-being, further aggravating pre-existing disability or leading to secondary disability.[102] Conflict also increases the prevalence of disability within the population through newly acquired disabilities for combatants and civilians alike. At the same time, persons with disabilities are "among the most excluded groups" in peacebuilding.[103] When peacebuilding programs and initiatives are not disability-inclusive, they deny persons with disabilities "their right to participate and fail to benefit from their expertise, both on conflict-related disability issues and on broader conflict dynamics."[104]

Independent of broader situations of conflict, persons with disabilities are at elevated risk of being victims of crime. Reasons include reliance on in-person assistance,[105] inaccessible transportation, limited access to information and communication, social isolation, and lack of access to justice that reduces the chances of perpetrators being held accountable.[106] In addition to crimes common to non-disabled persons, persons with disabilities may also experience specific forms of crime influenced by their disability context. For example, persons with disabilities who are victims of intimate partner violence may be subject to "denial of care or assistance, destruction of medical equipment, destruction of equipment for communication purposes, or manipulation of medications, in addition to more common controlling and abusive behaviors."[107]

Promising Approaches

- Recognize and support persons with disabilities and their representative organizations as agents of change in transforming conflict, interrupting violence in communities, and participating in inclusive and accessible peacebuilding processes and programming to promote attitudes, structures, and institutions that underpin and sustain peaceful societies.

- Promote the meaningful inclusion of persons with disabilities and their representative organizations into security and governance mechanisms, including disarmament, demobilization, and reintegration processes.

- In addition to addressing ableist norms and inaccessibility of justice systems, develop services intended to support victims of crime that are accessible and responsive to the specific needs of persons with disabilities.

Water Security, Sanitation, and Hygiene

Globally, 2.2 billion people around the world do not have safely managed[108] drinking water services, 4.2 billion people do not have safely managed sanitation services, and 3 billion lack basic[109] handwashing facilities.[110] Access to safe and clean water and sanitation facilities is a basic human right of all people, including persons with disabilities.[111] However, in many LMICs, persons with disabilities are "less likely to live in households with access to improved water and sanitation, and less likely to live in a dwelling with hygiene and sanitation facilities on the premises."[112] In some LMIC contexts, "more than one in seven persons with disabilities finds the toilet at home hindering or not accessible."[113] Even in mostly developed country contexts, crowdsourced data indicates that "only 69 percent of public toilets are accessible for wheelchair users."[114]

The denial of access to safe and clean water and sanitation facilitations has extensive implications for the well-being, dignity, and self-reliance of persons with disabilities. Inaccessibility of water sources and facilities can hinder the ability of persons with disabilities to participate in community activities, education, health services, and employment. For example, inaccessible toilet and water facilities are major contributing factors for school dropout among children with disabilities, especially girls.[115] Inaccessible facilities can also force dependency on others, increasing "the risks of sexual and financial exploitation, as well as deteriorating health and hygiene," especially for women and girls with disabilities.[116]

Promising Approaches

- Strengthen national, municipal, and local system capacity to deliver accessible and equitable water and sanitation services for persons with disabilities, including through governance and financing reforms and utilization of principles of UD and accessibility standards.

- Support the meaningful engagement of persons with disabilities and their representative organizations to develop gender- and disability-sensitive water, sanitation, and hygiene design and location recommendations that increase accessibility, affordability, and safety.

- Advance disability-inclusive economic opportunities for persons with disabilities by improving the ability of water and sanitation service providers to train, hire, retain, and promote persons with disabilities so that they can work in the water and sanitation industry.

ANNEX II. KEY TERMS

- **Ableism:** discriminatory and stigmatizing social norms that devalue persons with disabilities relative to non-disabled persons[117] and are rooted in beliefs that "typical" abilities are superior and that persons with disabilities need to be changed to fit a social ideal of what is "normal" or "typical," rather than being respected as a natural part of human diversity.

- **Agency:**[118] the ability of individuals to be self-motivated and self-directed in their actions, rather than being subject to the constraints, pressures, or influence of others.

- **Assistive technology (AT):** an umbrella term covering the systems and services related to the delivery of assistive products and services—including wheelchairs, eyeglasses, hearing aids, prosthetics, communication products, and more—that enable people to live healthy, productive, independent, and dignified lives and to participate in education, the labor market, and civic life.

- **Disabled persons' organizations/organizations of persons with disabilities (DPOs/OPDs):** civil-society organizations run by and for persons with disabilities. Such representative organizations are distinguishable in their staffing and governance structures from organizations that may focus on disability but may not be majority controlled by persons with disabilities. Both types of organizations, as well as organizations of family members and allies of persons with disabilities, have important roles to play in supporting the full enjoyment of human rights by persons with disabilities on an equitable basis with others, but DPOs/OPDs occupy a unique role in representing the primacy of voice of persons with disabilities. USAID uses the dual "DPOs/OPDs" out of respect for those disability-led organizations that prefer identity-first language and those disability-led organizations that prefer person-first language.

- **Inclusion:** The intentional process in which social, economic, political, and cultural similarities and differences are positive drivers to transforming relationships and structures so that all individuals, including marginalized or underrepresented groups, can contribute to their societies, communities, and workplaces.

- **Intersectionality:** the complex, cumulative way in which the effects of multiple forms of discrimination (such as racism, sexism, classism, ableism, ageism, and heterosexism) combine, overlap, or intersect, especially in the experiences of marginalized or underrepresented individuals or groups. An intersectional approach recognizes that many elements of a person's identity can affect how they experience the world. In combination with systems of inequality, these intersecting identities can lead to varying degrees of power and privilege that, in turn, create unique power dynamics, effects, and perspectives affecting individuals' place in society, experience of, and potentially access to development interventions. Further, an intersectional approach advances efforts to address the specific inequalities faced by women and girls, as they make up approximately half of the population in any given country.

- **Marginalized or underrepresented groups:** groups that are disproportionately excluded from opportunities and systems (e.g., employment, political representation, education, basic services), often due to structural and societal obstacles and historical marginalization. Such groups may include, but are not limited to, women; youth; children in adversity and their families; older persons; persons with disabilities; LGBTQI+[119] people; displaced

persons; migrants; Indigenous Peoples and communities; non-dominant religious, racial, and ethnic groups; people of castes traditionally considered lower; people of lower socioeconomic status; and people with unmet mental health needs.

- **Reasonable accommodations:**[120] 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.

- **Universal design (UD):** the design of products, environments, programs, and services to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. UD does not exclude provision of assistive devices for particular groups of persons with disabilities where this is needed.

Endnotes

1   Numerous organizations, including the U.S. Department of State (through the *Country Reports on Human Rights Practices*) and myriad human rights nongovernmental organizations, report with regularity on the situation of persons with disabilities around the world. See, e.g., Human Rights Watch, " 'They Stay Until They Die': A Lifetime of Isolation and Neglect in Institutions for People with Disabilities in Brazil" (2018), " 'When Will I Get to Go Home?' Abuses and Discrimination Against Children in Institutions and Lack of Access to Quality Inclusive Education in Armenia" (2017), " 'It is My Dream to Leave This Place': Children with Disabilities in Serbian Institutions" (2016), and "Living in Hell: Abuses Against People with Psychosocial Disabilities in Indonesia" (2016).

2   World Health Organization (WHO), "Global Report on Health Equity for Persons with Disabilities" (2022).

3   International Labour Organization (ILO), "International Day of Persons with Disabilities: How Disability Affects Labour Market Outcomes" (2022).

4   UNICEF, "Nearly 240 Million Children with Disabilities Around the World, UNICEF's Most Comprehensive Statistical Analysis Finds" (2021).

5   The Missing Billion Initiative and Clinton Health Access Initiative, "Reimagining Health Systems that Expect, Accept and Connect 1 Billion People with Disabilities" (2022).

6   UN Population Fund (UNFPA), "Young Persons with Disabilities: Global Study on Ending Gender-Based Violence, and Realising Sexual and Reproductive Health and Rights" (2018).

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8   UN Women. " 'They Call Me by My Name': A Synthesis Review of the United Nations Trust Fund to End Violence Against Women's Special Window on Ending Violence Against Women and Girls with Disabilities" (2023).

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10 World Bank, "Education for All: The Cost of Accessibility" (2005).

11 The United States became a signatory to the CRPD in July 2009, committing to upholding the object and purpose of the treaty and consistent with the strong guarantees of nondiscrimination and equality of access and opportunity for persons with disabilities in existing U.S. law. As of the time of adoption of this policy, the United States has not yet ratified the CRPD.

12 For a complete current listing of policies and strategies, please refer to the USAID Policy Registry (www.usaid.gov/policy).

13 Joseph Shapiro, "Activist Judy Heumann Led a Reimagining of What it Means to be Disabled," National Public Radio (2023).

14 USAID acknowledges that although the term "impairment" is used in the CRPD, it is not one all persons with disabilities are comfortable or self-identify with; they may prefer "condition," "functional condition," or other terms.

15 Convention on the Rights of Persons with Disabilities (CRPD), Preamble (e) (2006).

16 Such framings are not universal. At the other end of the spectrum, persons with disabilities have sometimes been viewed as "special," "heroic," and even magical in some cultural contexts. Although ostensibly more positive than framings focused on perceived "deficiency," these approaches can also be inaccurate and inconsistent with how persons with disabilities would prefer to be seen. Such framings can also result in persons with disabilities being kept away from others in society, viewed as dangerous or less worthy, contributing to deprivation of agency and autonomy and further societal segregation of persons with disabilities. In extreme cases, the perception of persons with disabilities as possessing magical characteristics—including but not limited to persons with albinism—has led to persons with disabilities being maimed or killed for their body parts or forced to self-segregate for their safety.

17 Examples of such barriers may be *physical*, such as the absence of a curb cut preventing access by a person with a mobility disability to a pedestrian sidewalk; *legislative*, such as a law prohibiting persons with disabilities from serving in elected office; *technological*, such as a banking mobile app that is inaccessible to blind or low-vision persons; or *attitudinal*, such as an organization that does not even attempt to recruit training participants with disabilities because it assumes they will not gain as much from the training as other participants. Other barriers may involve *communication*, such as the absence of a qualified (as determined by the deaf community) sign language interpreter to facilitate a deaf person discussing a health concern with a medical professional or the absence of captioning for a similarly situated hard-of-hearing person who does not use sign language; *information*, such as the lack of plain language instructions to help a person with a cognitive disability understand how to exercise their right to vote; or *policy*, such as a policy of an employer to hire persons with disabilities to fulfill an employment quota requirement but then have them not work or remain at home to avoid providing reasonable workplace reasonable accommodations.

18 The Social Model has benefits beyond persons with disabilities, as its focus on barriers in society can support universal design approaches that have the potential to benefit all persons, regardless of disability status.

19 Joshua Thorp, "Does Disability Shape Political Identity?" University of Michigan (2023).

20 CRPD, Article 3(d) (General Principles).

21 For example, CRPD, Article 19 ("Living Independently and Being Included in the Community"), and references to persons with disabilities accessing "personal assistance necessary to support living and inclusion in the community."

22 This policy is intended to be relevant to persons with all types and degrees of disabilities. The omission of any specific disability within this document is not intended to exclude individuals with those disabilities from the scope of this policy. USAID also acknowledges that not all persons with disabilities will identify with the broad categories of disability referenced in the CRPD and may prefer different categories or terminology.

23 For more information on respectful representation of persons with disabilities, including respecting people's self-identification preferences—whether for person-first, identity-first, other terms, or no self-identification at all—see USAID's "Disability Communications Tips."

24 Diversity of the community is relevant not only with respect to disability but also in consideration of intersections with race, ethnicity, color, sex, sexual orientation, gender, gender identity, gender expression, sex characteristics, native or Indigenous origin, age, genetic information, generation, culture, religion, belief system, marital status, parental status, socioeconomic status, appearance, language modality and accent, education, geography, nationality, citizenship, migration status, lived experience, job function, personality type, thinking style, and other facets of identity.

25 Universal design (UD) is the design of products, environments, programs, and services to be usable by all people to the greatest extent possible without the need for adaptation or specialized design. UD does not exclude provision of assistive devices for particular groups of persons with disabilities where this is needed.

26 USAID recognizes collecting robust data in humanitarian emergencies can be challenging due to a number of constraints. In cases where it is not possible to responsibly collect disability-disaggregated data from the start of a humanitarian response, programs should still seek to identify, as applicable, specific risks persons with disabilities face in the context, barriers persons with disabilities face in accessing assistance, and factors that enable persons' with disabilities access, inclusion, and meaningful participation in humanitarian decision-making. This information should be used to inform response planning and programming. Programs should incorporate the data available about the number of persons with disabilities. When this data is not available or is an under-estimate of the numbers of persons with disabilities, the recommendation is to use the global prevalence estimate that 16 percent of a population are persons with disabilities and rates of disability are expected to increase in emergencies.

27 Disability disaggregation data constitute prevalence data and are used in aggregated form and never to provide information on or about individuals. Tools intended for medical screening or diagnosis should not typically be used for the purposes of prevalence or disaggregation. Where such screening tools may be used for other reasons in the context of USAID programming, provision should be made for referral of individuals for follow-up support and provision of services as needed, such as referral of children to eye-care services as a consequence of vision screening at school. For tools on collecting and using disability-disaggregated data in USAID education work, see the USAID Education Disability Measurement Toolkit.

28 Research and evidence show that learners who are deaf and hard of hearing benefit greatly from being in sign language-rich learning environments where they can communicate *directly* with teachers, peers, staff, and others. In practice, such environments usually exist effectively only at schools that primarily serve deaf and hard-of-hearing students. Any support for de-institutionalization and care reform efforts should therefore exercise caution to ensure such schools and the populations of deaf and hard-of-hearing learners they serve are not adversely affected by these efforts.

29 Global System for Mobile Communications Association (GSMA), "Inclusive Digital Agriculture: Making Value Chains Work for Farmers with Disabilities" (2021).

30 Precious N. Sango, Mohammed Bello, Roy Deveau, Kevin Gager, Belinda Boateng, Hauwa K. Ahmed, and Mohammed N. Azam, "Exploring the Role and Lived Experiences of People with Disabilities Working in the Agricultural Sector in Northern Nigeria," *African Journal of Disability* Vol. 11 (2022). It is estimated more than "75.0 percent of households in sub-Saharan Africa are involved in agriculture."

31 Ibid.

32 GSMA, "Inclusive Digital Agriculture."

33 UNDESA, "Disability and Development Report."

34 Ibid.

35 UNDESA, "Factsheet on Persons with Disabilities."

36 OHCHR, "Policy Guidelines for Inclusive Sustainable Development Goals: Climate Change and Disaster Risk Reduction" (2020).

37 Sarah L. Bell, Tammy Tabe, and Stephen Bell, "Seeking a Disability Lens within Climate Change Migration Discourses, Policies, and Practices," *Disability & Society* Vol. 35, no. 4 (2020).

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57 ILO, "International Day of Persons with Disabilities."

58 UNDESA, "Disability and Development Report."

59 Ibid.

60 Ibid.

61 Ibid.

62 UNICEF, "Seen, Counted, Included: Using Data to Shed Light on the Well-being of Children with Disabilities" (2022).

63 UNESCO, "Global Education Monitoring Report 2020: Inclusion and Education: All Means All" (2020).

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92 UNDESA, "Disability-Inclusive Humanitarian Action," accessed August 2024.

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103 Elizabeth Murphy, "Disability-Inclusive Peacebuilding: State of the Field and the Way Forward," United States Institute of Peace (2021).

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105 For persons with disabilities who rely on personal assistants or caregivers to, for example, assist them with activities of daily living such as washing, getting dressed, eating, toileting, etc., the necessarily close nature of that assistance— and the high level of access assistants have to an individual's person, home, and possessions—can increase the risks of experiencing violence and other forms of abuse (including through withholding of those services) as well as crimes such as theft, financial crimes, etc.

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115 Gilliet Chigunwe and Deliwe Tembachako, "Public School Toilets: A Curse or Blessing for Girls with Physical Impairment," *African Educational Research Journal* Vol. 5 (2017), 200–206.

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117 Throughout this policy, the term "persons with disabilities" is used, consistent with internationally accepted terminology reflected in the CRPD and other instruments. The term "non-disabled persons" is used herein to refer to those individuals who have not, per the Social Model of disability (discussed in the "Background" section), been disabled by societal barriers including stigma and discrimination on the basis of disability.

118 This definition applies to references in this policy to "agency" of individuals, and not those references to "Agency" that refer to the U.S. Agency for International Development (USAID).

119 LGBTQI+: An acronym that stands for lesbian, gay, bisexual, transgender, queer, and intersex. The "+" represents other sexual orientations, gender identities, and gender expressions that do not fit within the "LGBTQI" identity labels.

120 In light of the international context in which USAID undertakes its programming, this definition of reasonable accommodations is drawn from Article 2 of the CRPD, which is more familiar to the stakeholders with whom we work than comparable definitions from U.S. legislation. However, the use of this definition is not intended to preclude application of U.S. legislative definitions where controlling, e.g., in the context of providing reasonable accommodations to USAID employees with disabilities.

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