Public Disclosure Authorized

Including Women and Girls with Disabilities in World Bank Operations



Toolkit | March 2023



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Key Messages

- ✤ One in every 5 women—20 percent of the female population—has a disability.
- Women with disabilities experience the same barriers as nondisabled women: discriminatory social norms and practices; legal restrictions; exposure to violence and harassment; lack of access to health services, education, assets, and employment; and severe underrepresentation in public and private sector leadership. However, the two overlapping grounds of disability and gender aggravate their experience of discrimination and exclusion.
- Women with disabilities face more severe obstacles to socioeconomic participation, compared with other women and men with and without disabilities, because of multiple discrimination and environmental barriers. Women with disabilities are more likely to have unmet health care needs and be excluded from education, and they are less likely to be employed and work in leadership positions than men with disabilities. Gaps are even larger compared with nondisabled persons. Women with disabilities experience gender-based violence at much higher rates than nondisabled women.
- The World Bank Group (WBG) has corporate commitments to gender equality and commitments to inclusion of persons with disabilities.
- Key WBG instruments address both gender and disability inclusion. These include but are not limited to:
 - ⊕ Environmental and Social Framework (ESF)
 - ⊕ ESF Good Practice Notes on nondiscrimination and disability and on gender, and ESF Guidance Note 10, ESS10: Stakeholder Engagement and Information Disclosure
 - Bank Directive: Addressing Risks and Impacts on Disadvantaged or Vulnerable Individuals or Groups
 - ⊕ The WBG Gender Strategy for fiscal years 2016–23, World Bank Group Gender Equality, Poverty Reduction, and Inclusive Growth (currently being updated for fiscal year 2024)
 - ① Disability and Inclusion Accountability Framework (as updated in 2022)
 - ⊕ WBG's 10 commitments on disability-inclusive development
 - ⊕ IDA19 and IDA20 funding commitments
- This toolkit is born of the need for a specific guide on the intersectionality of gender and disability to guide WBG operations how to increase the socioeconomic inclusion of women with disabilities. Good practices are drawn from successful WBG operations across a variety of sectors and from international standards and other external organizations that address the issue of intersectionality.

Toolkit Purpose & Scope

The toolkit is intended for a World Bank internal audience, especially to inform task team leaders (TTLs) how to design disability and gender-inclusive operations.

The toolkit highlights World Bank Group (WBG) commitments relevant to women and girls with disabilities, examples of law and policy reform, and key barriers and solutions across several World Bank sectors, and it includes a checklist for TTLs to use throughout the project cycle. TTLs will benefit from the toolkit's key questions (focused on data collection, policy frameworks, and program development) and suggested indicators aimed to increase inclusion of women and girls with disabilities across WBG projects and a set of resources for additional support.

The toolkit is a collaborative effort of the World Bank's Social Sustainability and Inclusion Global Practice and the *Women, Business and the Law* project team in the Development Economics Department. It is based on primary legal data collection, desk research, and literature review, along with in-person interviews with WBG TTLs across various sectors and other experts in disability inclusion. The authors designed this publication's content based on what they identified as critical to addressing the main gaps in the socioeconomic participation of women with disabilities. This is not an exhaustive how-to guide, but it showcases many good practices that were derived through interviews with TTLs who were successful in promoting gender and disability inclusion in a specific context. Often, personal initiative drove efforts toward the inclusion of women with disabilities.

The World Bank Group in 2018 made 10 commitments on disability-inclusive development. Under commitment 4, the World Bank committed to exploring opportunities to focus more deliberately on the economic empowerment of women and girls with disabilities. Women with disabilities

are among the world's most marginalized groups, facing barriers to their socioeconomic participation based on their gender and disability status. Supporting the inclusion of women with disabilities is a key aspect of the WBG's twin goals, and such support is required for the development of resilient, cohesive societies that can thrive in the long term.

Reliable cross-country comparable data are largely missing. But emerging evidence suggests that women with disabilities face higher rates of violence and harassment and lower rates of access to health care services, education, assets, and employment, compared with nondisabled women and compared with men with and without disabilities. This requires operationalizing gender-aware disability inclusion into mainstream development work.

Legal recognition of and support for the human rights of women with disabilities is a vital first step to address and ultimately enforce protection from discriminatory practices. In 2022, the WBG's Women, Business and the Law project published a new data set on the legal barriers that women with disabilities face when accessing economic opportunities in 190 economies. The new data suggest that only one-quarter of economies worldwide explicitly protect and promote the right to nondiscrimination of women with disabilities. Similar gaps are highlighted in legal protections of the respect for family life, labor market inclusion, and a life free from violence, emphasizing the need for good practices to guide regulatory reform. Research recognizes that although laws are an important aspect of achieving the full inclusion of women with disabilities, they need to be implemented effectively to achieve results.

The Social Sustainability and Inclusion Global Practice is working to strengthen the WBG's focus on excluded groups and increase investment in inclusive growth. It aims to foster inclusive and resilient societies in which citizens have voice and governments respond. This includes supporting people in overcoming obstacles that prevent them from fully participating in society—regardless of their gender, race, religion, ethnicity, age, sexual orientation, or disability—through operations and analytics. This toolkit aims to provide knowledge to regional and country-level task teams beyond the Social Sustainability and Inclusion Global Practice and truly highlight the need to address gender and disability across the World Bank's investment and operational portfolio.

This toolkit is intended as a practical tool for WBG task teams, summarizing the main issues to consider and easy identification of entry points, highlighting good practices under international human rights law, providing examples of law and policy reform, and compiling best practices from WBG operations that have successfully advanced the inclusion of women with disabilities. It recognizes the importance of additional resources and invites teams to delve deeper through its resource list, which attempts to provide solutions for various situations in the development context and lists many relevant documents. It addresses measures to promote the socioeconomic inclusion of women with disabilities across several critical sectors for World Bank operations: education; employment and entrepreneurship; social protection; genderbased violence; health; digital development; water and sanitation; transportation and urban planning; fragility, conflict, violence; and disaster risk management. It seeks to support WBG task teams in inclusive approaches to the design, implementation, and evaluation of all projects to better support women and girls with disabilities and address their intersectional needs.

Acronyms

CEDAW	United Nations Convention on the Elimination of Discrimination Against Women
СМИ	World Bank Country Management Unit
CRPD	United Nations Convention on the Rights of Persons with Disabilities
CRC	United Nations Convention on the Rights of the Child
DPL	Development policy lending
GBV	Gender-based violence
ESF	Environmental and Social Framework
ESS	Environmental and Social Standard
IDA	International Development Association
IPF	Investment project financing
OPD	Organization of persons with disabilities
TTL	Task team leader
WBG	World Bank Group
WG - SS	Washington Group on Disability Statistics Short Set of Questions on Functioning
WHO	World Health Organization
WHS	World Health Survey (World Health Organization)

CHAPTER

Why and How to Strengthen the Inclusion of Women and Girls with Disabilities

What is gender?

Gender interacts with but is different from sex, which refers to biological and physiological characteristics. Gender refers to socially constructed norms, behaviors, and roles of male, female, and nonbinary and their relationships with each other. Gender is hierarchical and produces inequalities that intersect with other social and economic inequalities (<u>WHO 2022</u>).

Who are persons with disabilities?

Persons with disabilities include those who have long-term physical, mental, intellectual, or sensory impairments that in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others (<u>CRPD, Art. 1</u>).

What is intersectionality?

"Intersectionality is a lens through which you can see where power comes and collides, where it interlocks and intersects" (Crenshaw 2017).

Understanding Multiple Discrimination of Women with Disabilities

Who are Women and Girls with Disabilities?

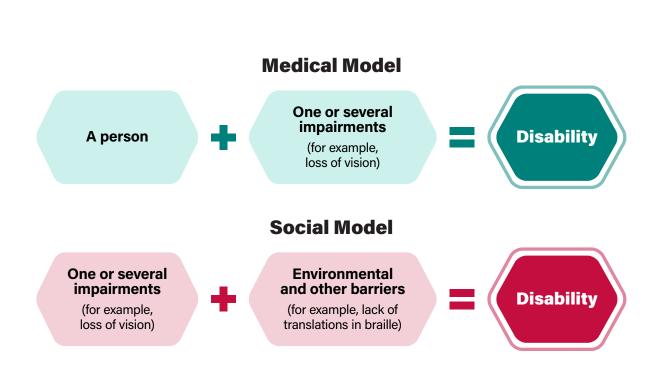
According to the United Nations Convention on the Rights of Persons with Disabilities (<u>CRPD</u>), women and girls with disabilities are not a homogenous group.

They include women, girls, and adolescents with all types of impairments that may or may not come with functional limitations, multiple disabilities, and varying levels of supports. They can be Indigenous women; refugee, migrant, asylum-seeker, and internally displaced women; women in detention and women living in poverty; and women of different ethnicity, religion, race, class, sexual orientation, and gender identity and expression (<u>CRPD Committee 2016</u>).

Under *the social model* of disability, disability is construed as the interaction between a person's impairment or impairments and environmental, social, and attitudinal barriers. This model challenges *the medical model* of disability, in which disability is regarded as an individual condition that requires treatment and medicalized solutions. Instead, the social model emphasizes systemic barriers that effectively exclude persons with impairments from society. It recognizes that barriers can be physical, legal, or social and may include technological, communication, programmatic, policy, and transportation barriers. Barriers can also be discriminatory attitudes and social settings. The social model focuses on minimizing and removing these barriers to enable all persons with disabilities equal access to and participation in society. Disability and human functioning are assessed against a person's individual capacities and level of participation, as affected by environmental barriers, whereas the medical model adopts a clinical approach instead. Ableism is a prevalent system of thought that supports these systemic barriers. Like many other isms, such as racism and sexism, ableism is based on beliefs that pathologize nondominant characteristics. Ableism views persons with disabilities as inferior.

The CRPD was informed by the social model and a human rights-based approach that acknowledges that disability, like other dimensions of identity, is part of human diversity and as such must not be used as a basis for denial or restriction of fundamental rights (figure 1.1). This is perhaps best articulated in article 12 of the CRPD, which underscores that all persons with disabilities enjoy legal capacity on an equal basis with others in all aspects of life, and that the existence of a disability is not a rationale for removal of legal personhood.

Figure 1.1. The Medical and Social Models of Disability

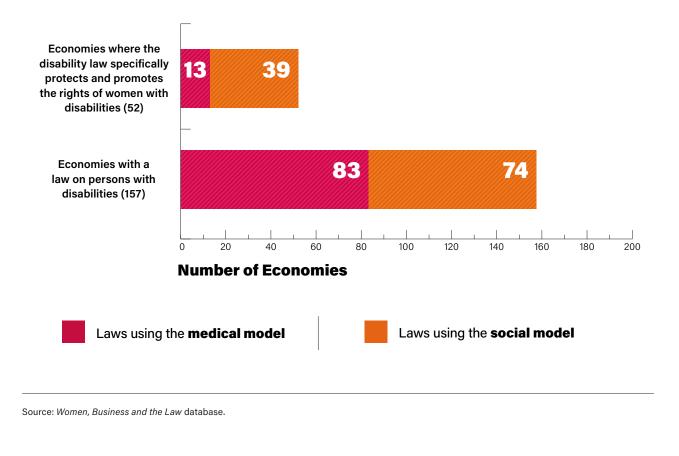


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New data collected by the World Bank's <u>Women, Business and the Law</u> project show that about half of the world's economies that have a disability rights law (74 out of 157) use the social model of disability, as articulated by the CRPD¹. Of the 52 economies where the disability law specifically protects and promotes the rights of women with disabilities, 39 use the social model (figure 1.2).

Figure 1.2. Use of the Social Model of Disability in Line with International Standards Across the Laws in 190 Economies



1 Data are from the *Women, Business and the Law* dataset on the rights of women with disabilities, World Bank Group, Washington, DC (accessed December 16, 2022), <u>https://wbl.worldbank.org/en/disability</u>.

The Relationship between Disability and Gender

Prevalence rates of disability are higher among women than among men.

A 2021 study on disability incidence rates in 23 countries showed that gender inequality is significantly associated with the probability of disability onset for women (Lee et al. 2021). This prevalence gap varies greatly across countries—a 2021 study conducted by the World Bank Group in Latin America and the Caribbean showed that the gap varied between 1.7 percent to 8.7 percent (Mora, Schwartz Orellana, and Freire 2021). Rates are also higher among women in lower-income countries: 22.1 percent of women in lower-income countries have a disability, compared with 14.4 percent in higher-income countries (WHO 2002–2004).

This prevalence gap is largely due to gender-based discrimination. For example:

- Households with limited financial resources may choose to invest in boys' earning potential and prioritize their education and health care needs, leaving girls' needs poorly attended or not at all. For these girls, any potential difficulty in seeing or hearing, for example, can eventually lead to disability, if not properly treated or cared for.
- Difficult access to maternal health care in developing economies can lead to disability and death during and after pregnancy.
- Gender-based violence is a contributing factor to disabilities among women, and intimate partner violence has been linked to disability status (Montes and Swindle 2021).

A History of Invisible Multiple and Intersectional Discrimination

The intersection of disability and gender has mainly been ignored. Yet policies that focus on *either* gender *or* disability fail to account for the experience of women with disabilities.

"International and national laws and policies on disability have historically neglected aspects related to women and girls with disabilities. In turn, laws and policies addressing women have traditionally ignored disability. This invisibility has perpetuated the situation of multiple and intersecting forms of discrimination against women and girls with disabilities"

(CRPD Committee 2016, para. 3).



For example, a policy on access to sexual and reproductive health services for women that does not address women with disabilities fails to abolish environmental barriers, such as inadequate height of examination tables, wheelchair-inaccessible bathrooms, and the lack of sign language interpreters and assistants during medical checkups and procedures (Salian 2022). The aggregation of policies focusing only on disability or only on gender neglects the ways in which disability and gender interact and produce unique situations and experiences for women with disabilities. Studies show how gender sets the experiences of women with disabilities apart from those of men with disabilities and from nondisabled women. In Bangladesh, for example, multiple and complex barriers deprive women with disabilities of access to education, employment, health, and family life (Quinn et al. 2016). Negative bias and misconceptions about the capability of women with disabilities exacerbate their exclusion.

As a result of intersectional and multiple discrimination, data show that employment rates of women with disabilities are lowest compared with men with disabilities and nondisabled men and women.² Additionally, women with disabilities face higher rates of gender-based violence and harassment, including at the hands of their caregivers, according to a World Bank brief which looks into the causes, types, and consequences of violence and the context-specific violence across age groups; provides recommendations for inclusive interventions and a situational analysis; and examines key areas to respond to this issue in international development (World Bank 2019a). The limited data available suggest that women with disabilities are up to 10 times more likely to experience violence than nondisabled women (Chirwa et al. 2020: Dunkle et al. 2018: Ozemela, Ortiz, and Urban 2019). Studies on attitudes show that a higher percentage of women with functional difficulties-a measurement of disability under the standards elaborated by the Washington Group on Disability Statistics Short Set on Functioning-thinks that a husband is justified in hitting his wife (Mitra and Yap 2022).

Specific focus on the intersection of gender and disability is needed to effectively combat these negative effects of the intersectional and multiple discrimination that women with disabilities face. The interaction of gender and disability creates unique barriers for women with disabilities, barriers that cannot be completely understood by the aggregation of gender-focused and disability-focused analyses.

2 Data are from the International Labour Organization ILOSTAT data catalogue, International Labour Organization, Geneva (accessed December 16, 2022), https://ilostat.ilo.org/data.

Environmental and social factors lead to multiple discrimination against girls and women with disabilities. Some examples include the following:

- Negative bias against and misconception of the capacities and abilities of women with disabilities exist worldwide.
- Perception of women with disabilities as unable to make choices limits their independent living and can lead to institutionalization, forced sterilization, and other invasive and overprotective measures (box 1.1).
- Reliance on others for long-term care and daily support services may increase the exposure of women with disabilities to sexual violence and other forms of violence.
- Scarcity of data on women with disabilities and measures for their inclusion often results in their exclusion from development efforts, including from efforts focused on gender equality.
- Lack of support to access equal opportunities in education and employment exacerbates gender gaps in socioeconomic outcomes that also exist between nondisabled women and men.



BOX 1.1

A Focus on Agency to Empower Women with Disabilities

The inclusion of women with disabilities in World Bank projects should go beyond considering them as beneficiaries. The focus should also be on empowering women with disabilities to express their voice and agency. Agency is the ability to make decisions about one's own life and act on them to achieve desired outcomes (World Bank 2016b). The World Bank Group Gender Strategy notes progress in lifting restrictions on women's agency, such as enacting laws against intimate partner violence and child marriage. But agency includes an external aspect (the absence of unsurpassable exogenous constraints) and an internal aspect (the motivation to make a choice and act upon one's desires; Perova and Vakis 2013). Expanding individual agency is a powerful catalyst for improving welfare and cost-effectiveness. To enhance the agency of women with disabilities, interventions should aim to eliminate environmental barriers and equally ensure access to opportunities and empowerment.



How Does Inclusion of Women with Disabilities Relate to the World Bank Group's Work?

The World Bank Group's (WBG) twin goals will not be met without involving persons with disabilities.

The development process needs to include all people in order to be sustainable and ensure that societies can truly thrive. Working toward social cohesion, resilient communities, and the inclusion of all persons regardless of their gender, race, religion, ethnicity, age, sexual orientation, or disability, while ensuring process legitimacy, lies at the heart of the Social Sustainability and Inclusion (SSI) global practice. Advancing the socioeconomic inclusion of women with disabilities is also part of the Green, Resilient, and Inclusive Development (GRID) approach.

Poverty and disability work in a cycle.

Poverty may increase the risk of disability through limited access to health care, education, safe employment, nutrition, and sanitation. This limited access exposes those living in poverty to illnesses, malnutrition, absence of care, and injuries that may cause disability (Lankinen et al. 1994). Disability may also increase the risk of poverty through exclusion from the workforce; inadequate education; lower wages; and the cost of care, technologies, and devices needed to reduce environmental barriers to access (Banks, Kuper, and Polack 2017; Turmusani 2019). One in five households living in extreme poverty in the Latin America and the Caribbean Region has a member with a disability. This suggests that the WBG must actively seek to target greater inclusion for persons with disabilities if it is to achieve ending extreme poverty (Mora, Orellana, and Freire 2021).

Focusing on the socioeconomic inclusion of disadvantaged groups is part of the World Bank's GRID approach, which recognizes that rising inequality and the exclusion of social groups from services, markets, and opportunities impedes their participation in society and the economy and may foment discord (World Bank Group <u>2021</u>). Thus, promoting economic growth must be inclusive and consistent with environmental and social sustainability. The GRID approach also includes climate change aspects, recognizing that poverty, inequality, and climate change are interrelated, and that those who are poorest (often women and girls with disabilities) need specific attention to adaptation and resilience. Climate change affects women disproportionately because of their higher dependence on natural resources to fulfill disproportionate responsibilities of securing food, water, and fuel (UN Women 2022). Because climate change multiplies threats, women have more vulnerability in climate disasters and are less likely to survive or access support. Without deliberate, inclusive policies, preexisting inequities may cause women to benefit less from the growth in green jobs as economies decarbonize (World Bank 2022a). Women's empowerment

and leadership are central to effective climate action because greater gender diversity is associated with better environmental performance of firms (<u>Altunbas et al. 2021</u>). The GRID approach also recognizes that discrimination and disadvantages are higher where identities such as gender, race, and sexual orientation intersect.

Social sustainability and inclusion of women with disabilities are central to achieving the World Bank's twin goals of reduced poverty and shared prosperity.

Poverty reduction measures alone are insufficient to achieve sustainable growth when they are not accompanied by a focus on groups that are vulnerable to exclusion based on their identity, among other factors (<u>Cuesta,</u> López-Noval, and Niño-Zarazúa 2022).

Fostering inclusive and resilient societies in which citizens have a voice and governments respond requires supporting people in overcoming obstacles that prevent their full and equal socioeconomic participationregardless of their gender, race, religion, ethnicity, age, sexual orientation, or disability. As the world is becoming more divided and unequal, exclusion and vulnerability are compounded by persistent shocks, including the COVID-19 pandemic, conflict, and climate change, which is expected to push millions of people into poverty. These threats need to be countered with socially sustainable responses. Empirical analysis confirms that social sustainability is positively associated with per capita income and negatively associated with poverty and income inequality (Cuesta, Madrigal, and Pecorari 2022). Studies also show that societies that exclude persons with disabilities lose substantial individual and household earnings and suffer from increased government spending on social protection programs, lost tax revenues, and lost productivity for businesses (Banks, Kuper, and Polack 2017; Houtenville and Kalargyrou 2012; Muntz and Meier 2013). Estimates calculated based on 10 economies found losses of 3 percent to 7 percent of 2006 or 2007 national gross domestic product (Buckup 2010), and in Spain, 4 percent of 2020 gross domestic product (Cámara, Martínez, and Santero-Sánchez 2020). Thus, fostering the socioeconomic inclusion of persons with disabilities is a vital element of poverty reduction, and sustainable growth can be achieved only with their meaningful participation in the development process.



"Social sustainability is when all people feel part of the development process and believe that they and their descendants will benefit from it. Socially sustainable communities and societies are willing and able to work together to overcome challenges, deliver public goods, and allocate scarce resources in ways that are perceived as legitimate and fair by all so that all people may thrive over time" (Barron et al. 2023 forthcoming).

International Treaties and Goals

The United Nations Convention on the Rights of Persons with Disabilities (CRPD), which entered into force in 2008 and has been ratified by 185 countries, recognizes in Article 6 the experience of multiple discrimination among women and girls with disabilities and requires states to take the appropriate measures to ensure women's and girls' full enjoyment of human rights and freedoms.

The CRPD also mentions gender in its preamble and in articles referring to general principles; awareness raising; freedom from exploitation, violence, and abuse; health; and adequate standard of living and social protection. In 2016, the CRPD Committee adopted **General Comment No. 3** on women and girls with disabilities.

The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), which entered into force in 1981 and has been ratified by 189 countries, does not explicitly mention women and girls with disabilities. However, in 1991, the Committee on the Elimination of Discrimination against Women adopted **General Recommendation No. 18**, which asks state parties to report on measures taken for the greater inclusion of women and girls with disabilities.

The **Convention on the Rights of the Child** (**CRC**), which entered into force in 1990 and has been ratified by 190 countries, calls for respecting the rights of all children, regardless of their gender and disability (Article 2, among others). Article 23 explicitly addresses state obligations to ensure "the fullest possible social integration and individual development" of children with disabilities and their families.

Some regional treaties also address the rights of women and girls with disabilities. The **African Charter on Human and Peoples' Rights**, in its Protocol on the Rights of Persons with Disabilities in Africa, has a specific article on women and girls with disabilities (Article 27).

Five of the **Sustainable Development Goals**—on education, employment, reducing inequality, inclusive cities, and data as a means of implementation—explicitly mention persons with disabilities.

Source: Disability Rights Fund / Disability Rights Advocacy Fund (DRF/DRAF).



2 What are the World Bank Group Commitments to Women with Disabilities?

The lack of attention to the intersection of gender and disability in the international policy dialogue has resulted in the exclusion of women with disabilities from development efforts.

Statistics show that women with disabilities are at least one in every five women, the majority of whom live in the Global South. Thus, including this population in development is critical to reaching goals that are important to the WBG. In recent years, the WBG has recognized both the imperative of a gender inclusive and a disability-inclusive approach and has made commitments setting out goals at every level of the institution.

WBG frameworks ensure that operations avoid discrimination and enhance development opportunities for "disadvantaged and vulnerable groups."



The World Bank Environmental and Social Framework (ESF), which became operational in October 2018, sets out standards to protect people and the environment in WBG investment project financing. It lays the groundwork for required social assessments to ensure that projects emphasize inclusion through promotion of equality and nondiscrimination and pay attention to barriers, risks, and impacts that could disproportionately affect "disadvantaged and vulnerable" groups or exclude them from development benefits (World Bank 2017).



<u>Good Practice Notes on Nondiscrimination and Disability</u> (2018) and on <u>Gender</u> (2019) explain how to use ESF standards in relation to these disadvantaged and vulnerable groups. Among other things, engagement of stakeholders – including women with disabilities – in all project efforts is recognized as crucial. <u>ESF Guidance Note for Borrowers 10 on Stakeholder</u> <u>Engagement and Information Disclosure</u> outlines these principles, such as accessibility of documentation.



The Disability Inclusion and Accountability Framework (updated in 2022, following the framework of 2018) elaborates a set of guiding principles to support implementation of the ESF and other efforts toward disability inclusion. Gender is included as a cross-cutting theme. The World Bank Group Gender Strategy for 2016–23 (currently undergoing review to be updated for fiscal year 2024), guides commitments on gender equality and aligns them with the 2030 Agenda for Sustainable Development.

Intersectionality in WBG Frameworks

Several of these WBG frameworks outline intersections of identity that make it more likely for women with disabilities to face discrimination or greater barriers in accessing benefits from client projects supported by the WBG.

- The Bank Directive on Addressing Risks and Impacts on Disadvantaged or Vulnerable Individuals or Groups defines "disadvantaged or vulnerable" as "those individuals or groups who, by virtue of, for example, their age, gender, race, ethnicity, religion, physical, mental or other disability, social, civic or health status, sexual orientation, gender identity, economic disadvantages or indigenous status, and/or dependence on unique natural resources, may be more likely to be adversely affected by the project impacts and/or more limited than others in their ability to take advantage of a project's benefits."
- The ESF Good Practice Note on Nondiscrimination and Disability underscores that "the relationship of disability with other and multiple factors that can increase vulnerability, such as poverty, gender, age, and disability (intersectionality), should also be addressed to the extent possible."
- The Good Practice Note on Gender notes, "Males and females are not homogeneous groups, but are stratified by race, ethnicity, and disability, which together with income level, geographic location, and migratory status, can lead to multiple overlapping layers of vulnerability and discrimination."

WBG 10 Commitments on Disability Inclusion

The first <u>Global Disability Summit</u>, held in London in 2018, was a game-changing event that brought together world leaders, government officials, civil society, the private sector, the donor community, and Organizations of Persons with Disabilities (OPDs) to share experiences and aspirations for development and humanitarian work to be more disability inclusive.

People with disabilities were at the center of the design and delivery of the Summit. On this occasion, the WBG, alongside other participating donor organizations, made <u>10 commitments on</u> <u>disability inclusion</u> to better address risks and increase benefits for persons with disabilities. The ten commitments intend to accelerate global action for disability-inclusive development in critical areas, like education, digital development, data collection, gender, post-disaster reconstruction, transport, private sector investments, and social protection. Under Commitment No. 4, the WBG pledged to explore opportunities for the economic empowerment of women and girls with disabilities.

The 10 commitments have also influenced the 19th Replenishment of the International Development Association (<u>IDA19</u>) and the 20th Replenishment of the International Development Association (<u>IDA20</u>) with policy commitments on gender and disability.

Commitment No. 4

Women and Girls with Disabilities



"The Women Entrepreneurs Finance Initiative (We-Fi), housed at the World Bank, creates a unique opportunity to comprehensively tackle the full range of barriers facing women entrepreneurs across developing countries. Future rounds of We-Fi funding provide opportunities to focus more deliberately on the economic empowerment of women and girls with disabilities by addressing the policy and regulatory frameworks; designing projects, for example, in the transport and information and communication technology sectors, with a gender disability lens; and developing and rolling out new products, for example, disability insurance. The next round of the *Women, Business and Law* survey, feeding into a data set on the laws and regulations that restrict women's economic opportunities, will include questions on legislation and protections for women with disabilities" (World Bank Group 2018).

IDA19 Introduces Disability as a Cross-Cutting Issue

Concrete actions for women and persons with disabilities are expressed in the <u>IDA19</u> <u>Replenishment</u> policy commitments and results measurement system, with guidance by sector to advance implementation (figure 1.3).

Figure 1.3. Commitments to Gender and Disability Inclusion in IDA19

JOBS AND ECONOMIC TRANSFORMATION	Policy Commitment 7: "Fifty percent of entrepreneurship and micro, small, and medium enterprise projects will incorporate digital financial services and/or digital entrepreneurship elements and address particular constraints facing women and people with disabilities " (IDA 2020, vii, para. ii.7).
	Policy Commitment 8: "IDA [will] support at least 15 IDA countries, including at least 12with lowest Human Capital Index, with programs or policies to improve skills and employabilityconsidering the differential constraints facing young women and men, and people with disabilities " (IDA 2020, vii, para. ii.8).
	Policy Commitment 12: "IDA [will] conduct 20 pilots in 'economic transformation IDA projects' to estimate indirect and/or induced jobsWhere feasible, jobs reporting will be disaggregated by the poorest quintile, gender , FCS [fragile and conflict-affected situation], disability , and youth" (IDA 2020, vii, para. ii.12).
FRAGILITY, CONFLICT AND VIOLENCE	Policy Commitment 3: "At least 20 IDA FCS country portfolios [will] support improvements in social sector service deliverywith a focus on addressing the differential constraints faced by men and women , boys and girls, and by people with disabilities " (IDA 2020, ix, para. v.1).
GOVERNANCE AND	Policy Commitment 6: "IDA [will] support at least 12 IDA countries to adopt universally accessible GovTech solutions" (IDA 2020, x, para. vi.6).
GOVERNANCE AND INSTITUTIONS	
	 universally accessible GovTech solutions" (IDA 2020, x, para. vi.6). Policy Commitment 10: "IDA [will] support at least 50 percent of IDA countries to establish and strengthen platforms for engaging with multiple stakeholders, including women as well as vulnerable groups, in policy making and implementation to enhance

Source: IDA 2020.

IDA20 Focuses on Inclusion

Based on IDA19 progress and COVID-19 realities, the <u>IDA20 Replenishment</u> maintains key themes of climate change; fragility, conflict, and violence; gender; and jobs and economic transformation and introduces a human capital theme covering vaccines, health and nutrition, education, and safety nets, with a focus on disability inclusion. "Participants supported IDA20's focus on inclusion, and its efforts to tailor support to the most vulnerable, including persons with disabilities and those discriminated based on their sexual orientation and gender identity. Within the overall goals of universal access to core human capital services, this focus on inclusion means that IDA20 will pay heightened attention to the barriers that prevent the poor, persons with disabilities, refugees, internally displaced populations, and other marginalized individuals, including those discriminated based on their sexual orientativ, from achieving their full potential" (IDA 2022). Concrete actions for persons with disabilities in IDA20 commitments are spelled out under the Human Capital and Jobs and Economic Transformation themes as well as in a specific Results Measurement System (RMS) indicator (figure 1.4).

Figure 1.4. Commitments to Gender and Disability Inclusion in IDA20

HUMAN CAPITAL	Policy Commitment 6 : "Expanding access to core services for persons with disabilities: To promote inclusive societies, support at least 18 IDA countries to meet the needs of persons with disabilities by implementing the principles of non-discrimination, inclusion, and universal access as per the Environmental and Social Framework, through projects in education, health, social protection, water, urban, digital development and/or transport" (IDA 2022, 48, para. 93).
JOBS AND ECONOMIC TRANSFORMATION SPECIAL THEME	Policy Commitment 8 : "Boosting institutional capacity to improve data for policy decision-making: Support 34 IDA countries including those with ongoing statistical operations (i) to strengthen institutions and build capacity to reduce gaps in the availability of core data for evidence-based policy making, including disaggregation by sex and disability where appropriate; and (ii) to increase resilience of statistical systems, including through investments in digital technology and high-frequency monitoring capabilities" (IDA 2022, 71, para. 134).
RESULTS MEASUREMENT SYSTEM INDICATOR	"On disability inclusion, IDA20 will track the share of operations using the concept of universal access and the number of countries collecting disability data with IDA support. IDA remains committed to use the question sets from the Washington Group on Disability Statistics [Countries collecting disability data with IDA support (number)]" (IDA 2022, 97, para. 12).

Source: IDA 2022.

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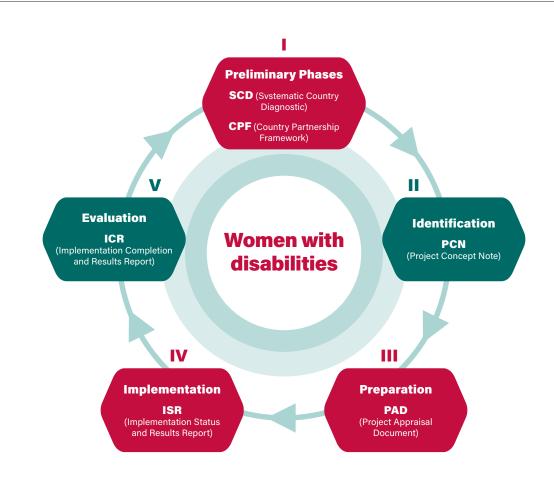
Taking the Next Steps to Achieve Socioeconomic Inclusion of Women and Girls with Disabilities

A Checklist for Task Team Leaders

Source: DRF/DRAF and RULIP (Rwandan Union of Little People)

Every stage in the lifecycle of a World Bank Group (WBG) project presents an opportunity to consider inclusion of women and girls with disabilities (figure 2.1).

This checklist is informed by the <u>Technical Note on Accessibility</u>, Part 2: <u>Project Cycle Guidance</u>. It can be used (together with the sector-specific sections that follow in chapter 3) as a support for task teams to promote project alignment with the World Bank's operational policies and guidelines. The aim is to help ensure that both the World Bank and the borrower are intentionally considering and addressing barriers to inclusion. Similarly, project teams can consult the four criteria listed in the <u>World Bank's Disability-Inclusive Investment Project Financing in Education Guidance Note</u> (stakeholder engagement, analysis, inclusive project design, and monitoring and reporting) as they can guide teams beyond the Education global practice on making projects disability-inclusive and preparing the relevant information for Investment Project Financing (IPF) documentation.





Source: World Bank 2022.

Stakeholder engagement (also emphasized in the <u>Environmental and Social Framework</u> (ESF) and <u>ESS10 Guidance Note on Stakeholder Engagement and Information Disclosure</u>) is the most important step.

This checklist starts each project stage with the question, "Who is at the table?"

Inclusive project design that takes accessibility and reasonable accommodation into **account** is a baseline requirement, so that persons with disabilities can participate.

Data analysis is equally critical in guiding project design and evaluation and safeguarding against risk.



This checklist ensures that task teams analyze relevant data and other information, including lived experience of women with disabilities.

Monitoring and reporting are necessary to ensure accountability to women with disabilities and transparency about lessons learned, so that teams can scale up and repeat successes.

Preliminary Phases (Systematic Country Diagnostic and Country Partnership Framework)

a. Who is at the table?

- WBG staff with gender or social inclusion skills or both; for example, a social development or gender/GBV specialist from the Social Sustainability and Inclusion (SSI) Global Practice (box 2.1)
- Government officials tasked with implementing international treaty obligations to women and persons with disabilities, such as reporting under the Convention on the Elimination of All

Forms of Discrimination Against Women (CEDAW), Convention on the Rights of Persons with Disabilities (CRPD), Convention on the Rights of the Child (CRC); for example, representatives from the National Council on Disability, the Ministry of Gender, or the Ministry of Social Affairs; Equal Opportunities Commission; or National Human Rights Institution

 Representatives from organizations of persons with disabilities, especially organizations of women with disabilities

b. What data are being reviewed?

- Gender and disability disaggregated data from national household surveys and international programs, such as the <u>Demographic and Health Survey (DHS)</u>, <u>Multiple Indicator</u> <u>Cluster Surveys (MICS)</u>, or censuses or ministry-specific surveys; <u>WBG Living Standards</u> <u>Measurement Survey (LSMS)</u>, data available in the <u>Disability Data Initiative</u>
- If available, any information derived from WBG country disability assessment, country gender assessment, SSI Disability-Inclusive Country Briefs (box 2.2), and <u>Women, Business and the</u> <u>Law data set on the rights of women with disabilities</u>

By including perspectives and data on women and girls with disabilities, a significant population of people who are often left behind in development efforts can be considered key actors *and* beneficiaries in the next phase of project design.

Box 2.1

Using World Bank Analytics to Bring Women with Disabilities to the Forefront

Too often, and without specific analysis, the situation of women and girls with disabilities is invisible because of stigma and a culture of shame. World Bank staff with long experience in disability inclusion report that superstition and lack of understanding of causal factors about disability and fears about violence and exploitation make parents keep children with disabilities behind closed doors, especially girls with disabilities. This is particularly acute in the case of women and girls with intellectual and psychosocial disabilities. Poverty analyses may miss these populations if they review only material position rather than vulnerabilities. When a disability lens is applied, it can help open conversations about what disability is and how systemic barriers interact with negative bias to marginalize women and girls with disabilities. World Bank task teams have used data, for example, on the disproportionally low numbers of women and girls with disabilities in communities and from gender-based violence assessments to advance the inclusion of women with disabilities.

In Tanzania, for example, task team leaders recently initiated a disability assessment based on knowledge gained from previous gender and gender-based violence assessments that uncovered

the high incidence of violence against women and girls with disabilities and highlighted the importance of intersectional issues. Analyses showed that women and girls with a disability have a significantly higher risk of being sexually assaulted or harassed (including in public places such as hospitals and schools), which prevents them from integrating into society, leading fulfilling lives, and having access to basic services. This was echoed in focus group discussions with people with disabilities and advocacy groups in different parts of the country. With support from the Country Management Unit, the gender platform was expanded into a joint disability and gender platform.

The team then partnered with Tanzanian organizations of persons with disabilities to draft a disability assessment. Learnings from this assessment will support World Bank Group projects to better address the intersections between gender and disability. A portfolio review of more than 20 active projects found that the majority of them missed opportunities to address the inclusion of people with disabilities. Good practices are identified when the project (i) makes a concerted effort to identify people with disabilities as a distinct target group, (ii) addresses the inclusion of people with disabilities and their unique needs through concrete actions outlined in project documents; and (iii) strongly endorses a disability inclusion lens through project components. The review also highlights gaps and opportunities for a more disability-inclusive lens during project implementation and lessons that can be applied in future operations. These include the importance of the Environmental and Social Framework as an entry point to address people with disabilities and engage with them, and a holistic understanding of accessibility (focusing on those with learning disabilities and with physical disabilities, with limited or lack of sight or hearing). The World Bank in Tanzania has also engaged with various civil society groups run by and working with people with disabilities. Project teams are encouraged to connect with the Tanzania Gender and Disability-Inclusion Platform and the Tanzania Citizen Engagement Platform to facilitate stronger engagement with organizations of people with disabilities.

Box 2.2

SSI Country Profiles on Disability Inclusion

The Social Sustainability and Inclusion (SSI) Global Practice's Country Profiles on Disability Inclusion provide important information on the rights of persons with disabilities and on the development gaps at the country level. The briefs include information on national data, key international and national human rights norms, policies, ministries in charge of disability issues, basic actors in the field, and ongoing projects supported by the World Bank. The information is collected from organizations of persons with disabilities, governments, other international organizations, and the Convention on the Rights of Persons with Disabilities' concluding observations and General Comments. Briefs can be used in the preparation of Systematic Country Diagnostics and Country Partnership Frameworks and generally support project development and the implementation of the World Bank Group commitments on disability inclusion. The briefs can be downloaded from the WBG Disability-Inclusive Development internal website.

2 Identification Phase (Project Concept Note)

a. Are data relevant to girls and women with disabilities part of project scoping and analysis?

- National laws and/or policies implementing the CRPD, such as national disability laws and their regulations and policies (for example, national action plans), especially clauses aimed at implementing Article 6 of the CRPD on women with disabilities and Article of the 7 CRPD on children with disabilities; national laws and/or policies implementing CEDAW, such as gender policies or gender-based violence (GBV) laws
- If available, information from <u>WBG Country Gender Assessments</u> to learn how countries are doing in terms of gender equality; note that gaps are likely to be even more pronounced for women with disabilities (see <u>World Bank Gender Data Portal</u>, <u>Women</u>, <u>Business and the Law</u> <u>data</u>, and specifically the <u>data set on the rights of women with disabilities</u>)
- Education acts and regulations and inclusive education policies
- Employment and labor laws that may refer to persons with disabilities and women, or information on the rights of persons with disabilities regarding nondiscrimination, education, and employment (see data available at <u>the UCLA World Policy Analysis Center</u>)
- National building control acts and regulations that may refer to accessibility standards; see <u>WBG Technical Note on Accessibility</u> to consider accessibility gaps at every stage of the project cycle
- Health acts and regulations, especially regarding access to sexual and reproductive health rights, maternal care and services, and violence prevention
- Social protection policies and their target groups; for an overview of country social protection systems and budgets, with data disaggregated by gender and disability, see the International Labour Organization <u>World Social Protection Data Dashboards</u>
- National (or local) budgets for inclusion of girls and women with disabilities, such as:
 - Financial implications analysis from the Ministry of Finance about enactment of a national disability law
 - Inclusive education budget disaggregated by gender
 - Health budget, which may specifically address girls and women with disabilities in areas such as rehabilitation, inclusive sexual and reproductive health and maternity services, inclusive GBV services, and mental health services

- Employment budget, which may specifically address women with disabilities in areas such as occupational services, skills training, reasonable accommodation, or employment quota and other incentives
- Social protection budget disaggregated by disability and gender

b. Are relevant World Bank commitments and other standards being considered?

- Is the project considering the potential risks and benefits for women with disabilities under the <u>ESF</u> review (box 2.3)?
 - Use the <u>ESF Good Practice Notes on Nondiscrimination and Disability</u> and on <u>Gender</u>, the <u>ESS10 Guidance Note on Stakeholder Engagement and Information Disclosure</u>, and the <u>Disability Inclusion and Accountability Framework</u> as guidelines
 - Raise questions on disability inclusion when working with country gender programs and task teams and during the gender tagging process (box 2.4)
 - Contact the <u>Global Disability Inclusion Team</u>, headed by the World Bank's Global Disability Advisor, for expertise and referrals
- Does the Project Concept Note discuss the risks and benefits for women with disabilities across different project phases (assessment, implementation, and evaluation), including in targets, results, and indicators (see indicator suggestions in chapter 3 of this toolkit)?
- Does the Project Concept Note outline the details of stakeholder engagement by describing how women with disabilities will be included in as many roles as relevant (implementers, vendors, beneficiaries, evaluators, and more)?

Box 2.3

The Environmental and Social Framework (ESF) as Entry Point for Disability Inclusion in WBG Operations

The <u>ESF</u> applies to all investment project financing (IPF) operations initiated on or after October 1, 2018. It strengthens the World Bank's commitment to identify vulnerable or disadvantaged individuals and groups, including persons with disabilities, and assessing and preventing potential risks and negative impacts that could affect them disproportionately and present barriers to accessing project benefits.

All the ESF standards apply to persons with disabilities and contain the principle of nondiscrimination, but there are three fundamental entry points:

- Environmental and Social Standard (ESS) 2: Labor and Working Conditions. Under ESS 2, the borrower is obliged to provide appropriate measures of protection and assistance to address vulnerabilities of project workers, including women and people with disabilities. This includes providing reasonable accommodation in the workplace.
- ESS 4: Community Health and Safety. Under ESS 4, the borrower must apply the concept of universal access to the design and construction of new buildings and structures and the provision of services to communities.
- ESS 10: Stakeholder Engagement and Information Disclosure. ESS 10 requires inclusion of persons with disabilities in stakeholder engagement and that project information be disclosed in an accessible format.

The <u>ESS10 Guidance Note on Stakeholder Engagement and Information Disclosure</u> sets out some entry points for inclusive engagement. Task team leaders can implement this requirement in the following ways:

- Consider whether women and girls with disabilities are project-affected and analyze any
 vulnerabilities or disadvantages they may face as a result of the project, or to equitably access
 project benefits.
- Consult with women and girls with disabilities in a disability-inclusive and culturally appropriate manner (separately, if necessary).
- Ensure that any barriers to communication and participation or engagement are mitigated, such as accessibility or safety of venue or meeting time or information.
- Work with independent third parties, such as the larger disability community and OPDs (especially OPDs focusing on women and girls with disabilities), to reach women and girls with disabilities.
- Develop and implement a stakeholder engagement plan that clarifies how women and girls with disabilities will be included throughout the project cycle.

"An inclusive engagement process should empower all relevant stakeholders to participate. This participation includes systematic engagement with, for example, women, children, youth, the elderly, people with disabilities, and other vulnerable or disadvantaged groups. [...] Documentation should also be accessible for stakeholders with sensory disabilities, for instance, through providing documents in Braille or engaging a sign language interpreter at a consultation meeting, as appropriate."

(ESS10 Guidance Note on Stakeholder Engagement and Information Disclosure)

Leveraging the World Bank Gender Tag to Achieve Greater Inclusion of Women with Disabilities

The gender tag, introduced through the WBG Gender Strategy 2016–23, is an internal tool that helps task teams identify strategic opportunities to narrow gender gaps within the scope of their projects. It applies only to International Bank for Reconstruction and Development (IBRD) and International **Development Association (IDA) lending** operations. The tag identifies operations that (i) address one or more of the gender strategy's four pillars; and (ii) have a Project Appraisal Document that articulates a logical chain from analysis, to actions, to indicators in the results framework. The gender tag encourages projects to consider specific actions to improve development outcomes for women and men in ways that are sustainable beyond the project. Addressing gender gaps can also relate to a gap among men or boys, for example, by considering the needs of at-risk boys in areas with high dropout rates from school or promoting positive gender norms in areas with high incidence of gang violence fueled by rigid notions of masculinity. The gender tag also recognizes that women are not a homogeneous group and notes the importance of considering intersectionality of gender norms with other factors such as climate change, conflict, disability, ethnic and religious identity, and so on.

Task team leaders can leverage the gender tag to promote the inclusion of women with disabilities. The following project examples explain how gender-tagged operations address the nexus between gender and disability in Djibouti and Tuvalu.

The objective of the <u>Djibouti Skills</u> <u>Development for Employment Project</u> is to improve employability and employment outcomes of technical and vocational training programs graduates, focusing on women,

persons with disabilities, and refugees. Economic growth in Djibouti has not succeeded in reducing inequalities in labor force participation, especially for women. The project establishes targets for women, particularly those who are refugees or have a disability, as part of the technical vocational training programs. Activities include learning modules and tools for online entrepreneurship to increase employability and employment outcomes in both the informal and formal sectors. The project's key results indicators track the share of persons enrolled in the technical and vocational trainings and their employment after completion, all disaggregated by gender, disability, and refugee status.

The Tuvalu Second Resilience Development Policy Operation with a Catastrophe-Deferred Drawdown Option aims to increase access to inclusive quality education for Tuvaluan children living with disabilities. The project identified the prevalence of GBV and violence against children as significantly higher than the global average. Evidence from Tuvalu and the Pacific indicates that girls and women with disabilities are particularly at risk of harassment and violence. At the same time, the majority of the country's survivors of GBV and violence against children do not seek help, and children with disabilities have extremely limited opportunities to do so. The education system is often the first point of contact for child survivors of violence, but no systemic training on GBV and violence against children exists. The project supports the approval of the Disability-Inclusive Education Policy and Action Plan, which will train teachers on GBV, violence against children, and referral mechanisms, among others. The project results framework includes the percentage of teachers who attend the training and demonstrate improved understanding of inclusive education, GBV, violence against children, and referral mechanisms. It also requires the Ministry of Education to collect regular data on students with disabilities, disaggregated by sex.

3 Preparation Phase (Project Appraisal Document)

a. Who is at the table?

- Do mainstream stakeholder engagement consultations include OPD representatives (box 2.5)?
- Is the national council or commission on disability or any national umbrella OPD included? See for example:
 - <u>UN Partnership on the Rights of Persons with Disabilities</u> for OPDs working with UN country teams
 - International Disability Alliance member organizations for national OPDs
- Is there room for specific consultation with organizations of women with disabilities? See for example:
 - Disability Rights Fund's grants directory by country and CRPD Article 6
 - Women Enabled International's Global Map of Advocates

b. Does the project consider relevant World Bank commitments and other standards?

- Do evaluation metrics include indicators that will show the project's impact on women with disabilities? (See the sector-specific sections in chapter 3 of this toolkit for suggested indicators.)
- Do private companies involved have leadership commitments to disability inclusion and gender equality? See, for example, <u>the Valuable 500</u> and <u>ILO Global Business and Disability Network</u>
- Does the project apply WBG procurement standards for diversity, including in hiring, regarding project management with any vendors?

Is the conversation accessible to persons with disabilities? Are reasonable accommodations provided to enable meaningful participation?

The Australian Human Rights Commission provides a <u>Guide for Hosting accessible and</u> inclusive in-person meetings and events.

WBG procurement policies aim to increase diversity and provide opportunities for businesses owned by women and persons with disabilities (<u>World Bank</u><u>Group 2022a</u>).

The Importance of Meaningful Participation of Women with Disabilities

The global disability movement's motto, "Nothing about us without us," amplifies the importance of full and effective participation, and the participation of persons with disabilities in decision-making is at the heart of the CRPD. Meaningful participation must also be viewed with a gender lens. Like many other spaces in society, the disability movement reflects patriarchal norms and lacks the leadership of women and women's organizations. To ensure meaningful participation of women with disabilities, gender power relations must be considered.

For effective protection of the rights of persons with disabilities, it is crucial for persons with disabilities to participate in developing, negotiating, and drafting policies. The elaboration of the Convention on the **Rights of Persons with Disabilities is a** good example of how to include persons with disabilities, including women with disabilities, in law-making processes. A range of persons with disabilities from around the world participated in the negotiating and drafting of the Convention, and thus the Convention is an innovative human rights instrument that underscores the dignity and fundamental rights of persons with disabilities (CRPD Committee 2018). Furthermore, the Convention dedicated Article 6 to women with disabilities, which recognizes the multiple discrimination to which they are subjected. During the CRPD negotiations, the delegation of the Republic of Korea had proposed a separate article to recognize the rights of women with disabilities in the Convention. Although every government recognized the importance of safeguarding the rights

of women with disabilities, the proposal to include a specific article triggered heated debates among delegations on whether to adopt a mainstreaming or twin-track approach. The mainstreaming approach called for addressing the needs of men and women simultaneously, and the twin-track approach called for including a specific article on the rights of women with disabilities and specific mention of women in additional articles. Proponents of the mainstreaming approach emphasized the likelihood of missing other vulnerable groups; proponents of the twin-track approach argued that only a specific article would enable countries to actively address the issues that women with disabilities face. Representatives of OPDs supported the twin-track approach, which ultimately prevailed in the form of Article 6 (Kim 2013; <u>UNDESA 2005</u>).

The first UN Special Rapporteur on the rights of persons with disabilities affirmed that states should prioritize the participation of organizations led by persons with disabilities and support their establishment and functioning (UN 2016). She also raised concerns about the precarious situation of women and girls with disabilities, pointing out that it is still unsafe in many places for them to take part in open consultations, but their active and informed participation is a requisite of a human rights-based approach. Enabling meaningful consultation and participation of women with disabilities requires an intersectional approach to the barriers that prevent them from participating. Leadership structures in the disability movement often reflect hierarchical and patriarchal norms that are present across many social strata and present similar gender gaps in representation.

Some good practices to circumvent these barriers include creating safe spaces for women with disabilities, allowing flexible times for meetings, and having women facilitators.

4 Implementation Phase (Implementation Status and Results Report)

a. Who are the actors involved in the project, and what are they doing?

- Has the project included women with disabilities and/or their representative organizations in as many relevant roles and phases of the project as possible (and not just as beneficiaries) (box 2.6)?
- Has the project evaluated the role of any private company vendor in relation to provision of opportunities to women with disabilities, with measurable indicators? WBG procurement policies aim to increase diversity and provide opportunities for businesses owned by women and persons with disabilities (World Bank Group 2022a). If private company vendors need support with inclusion, they can become members of communities of practice, such as the Valuable 500 (a global business collective innovating for disability inclusion) and International Labour Organization Global Business and Disability Network, to learn from and share best practices.
- Has the project reviewed any government stakeholder regarding their obligations to women with disabilities? Review engagement in government and civil society reports to UN treaty bodies, including reports to the CRPD Committee, the CEDAW Committee, and the UN Universal Periodic Review. Search <u>Voluntary National Reviews</u> submitted to the High-Level Political Forum on Sustainable Development for disability-related information.

b. Does the project enhance data analysis on women with disabilities?

- Is the project using the Washington Group Short Set Questions on Functioning (WG-SS) to understand disability prevalence and its interaction with gender among beneficiaries?
- Are there any intersectional data at the national level?
- Are there any lessons learned from this process to share during evaluation?

WBG Vendors Code of Conduct: "Vendors will provide opportunities for access and growth of entities owned and controlled by minorities, women, LGBTQ individuals, and disabled persons with an emphasis on measurable results and continuous improvement" (World Bank Group 2022b, 4, para. 6).



Box 2.6

Intersectional Perspectives in Action: Vietnam's Country Gender Program

A task team member of the Vietnam Country Gender Program (led by the Social Sustainability and Inclusion (SSI) Global Practice) explained their view of intersectional risks and potential project benefits for women and girls with disabilities. The <u>Vietnam Quality Improvement of Primary</u> <u>Education for Deaf Children Project (QIPEDC)</u> developed special learning materials that have been used in more than 180 special and inclusive schools for nearly 2,000 deaf children (including those from ethnic minorities and poor populations) across 20 provinces. The team's research uncovered data reported in the state media about the large number of girls with disabilities who had been victims of sexual harassment and violence over several years. They used this critical information to encourage the client to address gender gaps in the proposed project. "Once the Ministry of Education and Training understood the data on sexual violence against girls with disabilities, they were supportive about including measures in the project to address it," a social development specialist explained.

Major outputs included developing, with the deaf community, new signs in Vietnamese Sign Language to talk about sexual violence in the education curriculum. The project also produced an age-appropriate sign language video to help deaf children recognize and report sexual harassment and abuse, which was then integrated into the Ministry of Education and Training's curriculum and shared with nearly 5,000 people, including teachers, teaching assistants, deaf mentors, leaders in the deaf community, parents, and children.

The team noted that the SSI-led country gender program, provides a unique opportunity for social staff to streamline gender targets with the social assessment, coordinate community consultations, and look into intersectionality. The country gender program helped the task team to increase their understanding of the intersectional barriers that women with disabilities face and how people with disabilities can enhance and benefit from projects once barriers are addressed.

In addition to addressing sexual harassment for girls with disabilities under the QIPEDC project, the SSI team is working with the General Statistics Office (GSO) to integrate a disability-focused module in the Labor Force Survey. The team is collaborating with the National Committee for Disability on the survey design and future dissemination of the findings, in the hope to inform upcoming revisions of the Law on Disabilities and the Law on Employment.

Source: Shutterstock.

5

Evaluation Phase (Implementation Completion and Results Report)

a. On whom does the project monitoring, reporting, and assessment focus?

- Are outcomes, challenges, and lessons learned reported in terms of including and reaching women with disabilities in different project stakeholder roles?
- Are women with disabilities and their organizations and the broader OPD community benefiting from project learnings?

b. How is the project sharing any data collected and lessons learned about the intersection of gender and disability?

- Are project lessons learned and key stories shared with other WBG task teams focused on social inclusion, gender, and disability?
- Is the project collecting any data in accordance with the WG-SS and gender indicators?
- Is the project sharing data and lessons learned with sectoral or government actors who could use it in other work or to broaden the project work?

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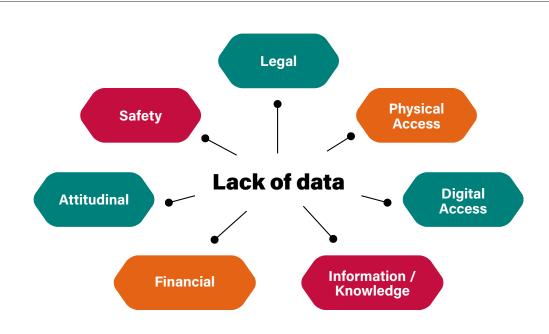
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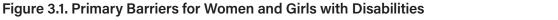
CHAPTER 03

What are the Key Barriers for Women and Girls with Disabilities, and How is the World Bank Group Addressing Them? Key Barriers and Solutions across World Bank Group Sectors

Numerous World Bank Group (WBG) projects focus on the socioeconomic inclusion of women or persons with disabilities. However, only a few address the intersection of gender and disability by targeting women and girls with disabilities.

Worldwide, women and girls with disabilities encounter multiple barriers to their full and equal socioeconomic participation. Some affect all persons with disabilities, and others affect all women. Women and girls with disabilities are often affected disproportionately because their intersecting identities put them in a disadvantageous position. Frequently, more than one barrier is present at the same time. The lack of reliable data makes it difficult to assess the exact scope and impact of each barrier. And legal and policy frameworks that promote the rights of women with disabilities are often missing, making it hard to address barriers when they are identified. Figure 3.1 shows some of the most common barriers that women and girls with disabilities face. Figure 3.2. lists these barriers as seven key issues for World Bank task to examined through the lens of both disability and gender when designing and implementing projects. Examples from the WBG illustrate throughout this chapter how intersectionality can be incorporated into operations across different sectors and provide practical ideas how women and girls with disabilities can be empowered.





Barriers can be overcome through targeted interventions that incorporate both disability- and gender-inclusive actions and standards (figure 3.2).

The WBG projects referenced in this toolkit have applied an intersectional approach to support a wide range of innovative solutions, such as constructing gender- and disabilityinclusive toilet facilities in schools, digitalizing identity documents and government services in an accessible manner, supporting employment through vocational training and public awareness activities, constructing accessible and safe bus terminals, and enabling women with disabilities to assume leadership roles in an emergency by constructing disability- and gender-inclusive command centers. In order to achieve impact that is socially inclusive and sustainable, it is important to collaborate across sectors and share knowledge. Increasing disability inclusion in one sector, such as transportation, can have implications for other sectors, such as education or health, or require certain prerequisites that can be achieved only by working together. When more girls with disabilities are able to travel safely, parents may increase their school enrollment, and more girls and women with disabilities may be able to access health services. Conversely, if disability inclusion is considered too narrowly, for example, only in education, lack of disability- and gender-inclusive transportation or lack of access to health care may mean that few girls with disabilities will actually attend. Women and girls with disabilities are a diverse group, and the type of interventions needed to promote their socioeconomic inclusion also depends greatly on country context.

Figure 3.2. Seven Key Issues for WBG Task Teams to Examine through the Lens of Gender and Disability



Key Barriers	Explanation	Solutions
Lack of Data	National or sectoral data may not be disaggregated by gender and/ or disability or show intersectional data for gender and disability.	Support National Statistics Offices and sectoral data experts to use the Washington Group Short Set on Functioning (WG-SS) questions on disability and to ensure that data are disaggregated by gender and disability.
Enabling laws and policies	National laws and policies may discriminate against or even exclude women and girls with disabilities, especially those with intellectual or psychosocial disabilities who may have restricted legal capacity. National laws may fail to protect women from violence and harmful and exploitative practices. Employment strategies may not be inclusive of girls and women with disabilities.	 Amend any legal or policy restrictions based on gender and/or disability identity. Support the development of harmonized national technical standards, such as accessibility standards, inclusive gender policies, and disability policies focused on gender equality. Explicitly guarantee the rights of all girls and women with disabilities in national law, especially for essential services (education, health care, justice, social protection, transportation, and banking). Include protections of the labor rights of women and girls with disabilities in formal and informal employment, including the right to reasonable accommodation. Depending on context, affirmative action may be needed to close the gap for girls and women with disabilities. Ensure that girls and women with disabilities who are affected by violence or harmful practices are entitled to tailored and accessible support measures.
Physical accessibility (buildings, transportation facilities, equipment)	Buildings (including schools; health facilities; workplaces; justice systems; shelters; and water supply, sanitation, and hygiene facilities) may not be appropriately equipped for girls and women with disabilities. Transportation systems may not consider the unique needs of girls and women with disabilities, which can prevent them from accessing services and community life.	 Adapt infrastructure to consider both disability (for example, ramps, signs) and gender (for example, personal safety). Apply universal design principles for infrastructure, schools, and transportation systems, and support girls and women with disabilities with assistive technologies. Ensure that girls and women with disabilities have accessible and safe water supply, sanitation, and hygiene facilities; shelters; and means of transportation. Give technical and financial support to officials in both the public and private sectors for provision of reasonable accommodations. Consider providing coverage for disability-related costs in social protection programs, including

Table 3.1. Sample Solutions to Overcome Key Structural Barriers for Women with Disabilities

assistive technology.

Key Barriers	Explanation	Solutions
Digital accessibility	Girls and women with disabilities run a high risk of digital illiteracy and of falling behind because	Integrate digital skills into education curricula, particularly for girls with disabilities.
(assistive of lack of digital skills and technology, digital services)	Ensure that public services and data are digitalized as much as possible and accessible to all persons with disabilities (for example, access to digital devices and assistive technologies).	
Awareness (information, knowledge)	Curricula and other public service information may not be available in disability-friendly formats (braille, large print, or multimedia). Materials may be underresponsive to gender needs or overresponsive	 Equitably allocate funds to support accessibility of information for women with disabilities. For example: Adapt material, including online educational material, for girls and women with diverse impairments, and make it widely accessible.
	to stereotypes about gender and disability. They may not depict or mention girls and women with disabilities.	• Develop inclusive and gender-sensitive curricula and information materials, ensuring that girls and women with disabilities are depicted in an empowered manner.
Affordability (costs, financial support,	Social protection systems may not be accessible, reach women, or address the extra costs of assistive or other services needed for inclusion.	Ensure that social protection systems are gender- and disability-sensitive, and target recipients directly (rather than households) to empower women with disabilities.
banking services)	Eligibility criteria may be too strict or narrow, such as:	Make eligibility gender and disability sensitive, aligned with the social model of disability.
	 Requiring "severe disability" as assessed under the medical model and excluding other forms 	Develop holistic social protection programs, combining cash and in-kind support, considering both disability and gender dimensions, and covering especially:
	of disability Imposing conditions that women with disabilities have difficulty fulfilling (for example, prior employment or minimum 	 Disability-specific expenses (for example, assistive technologies, adaptive devices, mobility aids, house adaptation, personal assistance, and service animals). General support measures to promote deinstitutionalization and independent living (for example, tax reliefs, wage subsidies, care credits, maternity and childcare services, income support for those both in and out of work, and subsidized or free access to public transportation).
	contribution periods) Banking and finance services may be inaccessible for women with disabilities.	
Acceptability (social norms, perceptions)	Social and cultural norms about gender roles and disability stereotypes can interfere with the rights of girls and women with disabilities, particularly their sexual and reproductive health (for example, belief that women and girls with disabilities are asexual or "cursed").	Conduct awareness-raising activities to emphasize the skills and potential of girls and women with disabilities, and target all relevant stakeholders: family, teachers, peers, policy makers, employers, justice officials, and service providers.

Key Barriers Explanation Solutions Safety Girls and women with disabilities Equip enforcement mechanisms and support have a high risk of being subjected accessible services to respond to the needs of

(violence, abuse, exploitation) to bullying; sexual, physical, and verbal abuse; and other forms of violence both at home and in the community. The risk is even higher for girls and women with intellectual and psychosocial disabilities and those in institutionalized settings.

Women and girls with disabilities may lack the necessary knowledge or information to escape an abusive situation.

women and girls with disabilities, especially:

- Shelters
- Complaint mechanisms
- Reproductive health care services.

Educate women and girls with disabilities on the various forms of exploitation and abuse and the services available to them.

Train social and health care service providers and legal and law enforcement professionals about the specific needs of women and girls with disabilities and how to assist them.



2

The Importance of Disaggregated Data to Inform Policies and Projects

Women and girls with disabilities are largely absent from official statistics and surveys.

Data on persons with disabilities are often not disaggregated by gender, and data on gender may not be disaggregated by disability.

Even when disability data are being collected, there can be significant differences and inconsistencies in measurements and indicators, making comparability difficult because of the following:

- The definition of disability for different purposes—such as to collect population data; or identify who can benefit from social protection, educational, or health services or employment accommodations—can vary significantly among agencies and between countries.
- The social stigma attached to disability and fears about safety can deter people with disabilities from self-reporting and registering, especially women with disabilities and their families.
- Data collection procedures are often inaccessible, complex, or bureaucratic, with inadequately digitalized records, poor information, and lack of trained human resources.

The United Nations Children's Fund's <u>Multiple Indicator Cluster Survey (MICS)</u> is one exception. It now incorporates a <u>Child Functioning Module</u> (developed in consultation with organizations of persons with disabilities) and has led to the first crossnationally comparable data on children with disabilities. As of November 2021, data are available from about 50 countries, and data from an additional 20 will be available in the near future.

The collection of timely, reliable, and highquality data disaggregated by disability (among other characteristics) is one of the main targets of the 2030 Sustainable Development Goals (Goal 17, Target 17.18). However, as noted in the UN's Sustainable Development Goal Report 2022, the COVID-19 pandemic has delayed the development and implementation of new national statistics plans in line with this objective. "Out of 10 SDG [Sustainable Development Goal] indicators that require disaggregation by disability status, data are available for only 2 of them" (UN 2022, 4). Such data are vital for the development of evidence-based policies to improve the socioeconomic inclusion and empowerment of women and girls with disabilities.

Collecting disability disaggregated data is a WBG commitment

Most important, improving disability data collection is one of the World Bank Group's <u>10 commitments on disability-inclusive</u> <u>development</u>. Policy commitments to strengthen the collection and use of disaggregated data are also part of both the 19th and 20th Replenishments of IDA (IDA19 and IDA20). IDA20 requires using and promoting the question sets from the <u>Washington Group Short Set on Functioning</u> (WG-SS).

The <u>Washington Group on Disability Statistics Short Set on Functioning</u> (WG-SS) is the international standard for collecting data on disability. Intended for use in censuses and household surveys, the questions obtain information on functional difficulties any person may have in undertaking basic activities, including seeing, hearing, walking or climbing stairs, remembering or concentrating, self-care, and communication. Each question is answered on a spectrum from *no difficulty* to *cannot do at all*.

In June 2022, the World Bank announced a partnership with Microsoft and the <u>Disability</u> <u>Data Initiative (DDI)</u> at Fordham University to expand access to and use of demographics and statistics data on disability, particularly in low- and middle-income countries. "The goal of this effort is to develop a publicfacing, online 'disability data hub' to offer information on persons with disabilities across populations, geographies, and development indicators" (<u>McClain-Nhlapo and Lay-Flurrie</u> 2022)._

The <u>Disability Data Initiative's 2022 report</u> reviews disability questions in national censuses and household surveys and disaggregates well-being indicators between women with and without functional difficulties in 35 countries.

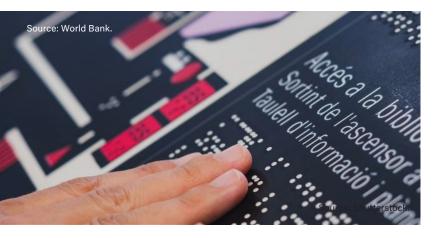


Source: Inclusive Education Initiative, World Bank.

How is the WBG Using the Washington Group Short Set on Functioning to Identify Persons with Disabilities?

The World Bank report <u>Who is Disabled in</u> <u>Sub-Saharan Africa</u> is a good example of disaggregating data based on the WG-SS questions, but gender is not included in the report's charts. The <u>World Bank Global</u> <u>Database of Shared Prosperity</u> demography survey also uses the Washington Group questions. The World Bank publication <u>Disability Inclusion in Latin America and the</u> <u>Caribbean</u> gathers data on both disability and gender, in addition to other identities. "Gender, ethnoracial identity and living in rural settings can further intensify the exclusionary effects of a disability and can also increase the probability of developing an impairment in the first place. Being indigenous or Afro-descendant has a dramatic impact on education outcomes and magnifies wage disparities. These imbalances multiply out of gender disparities" (Garcia Mora, Orellana, and Freire 2021, xiv).

• Take the WBG online course <u>Collecting Data on Disability Inclusion</u> to understand why collecting disability data is important and learn to identify persons with disabilities by using survey data.



Accounting for the Diversity of Women with Disabilities

Persons with disabilities are not a homogenous group. They share significant barriers and restrictions to socioeconomic inclusion, but they have different skills, different needs, different backgrounds, and divergent views and perspectives. Surveys and data collection systems that treat persons with disabilities as a homogenous group, for example, by limiting choices for self-reporting (such as one check box on disability requiring a yes or no answer) risk leaving out persons whose experiences may differ significantly, including women with disabilities. Reliable data collection requires acknowledging the diversity of disability and the intersection of disability with other identities. Data on disability should be informed by the subjective experience of disability and its socioeconomic dimensions.

Stakeholder engagement is one important way to include women with disabilities in conversations during the project cycle and decide how to approach data collection for *or* in a specific project.

Dos and Don'ts of Data Collection

- Include women with a range of disabilities in the design of data collection efforts and their implementation (for example, sensory, physical, intellectual, and psychosocial disabilities).
- Use international standardized questions (for example, the <u>Washington Group Short</u> <u>Set on Functioning</u>).
- Consider requirements for the WBG gender tag when addressing persons with disabilities.
- Make all data collection efforts accessible for a diversity of women with different impairments, educational levels, and languages. (For example, provide accommodations and flexibility when administering questionnaires where relevant, and provide materials in an accessible format and in easy-to read or plain language.)
- Obtain feedback on project implementation from women with disabilities.
- Do No Harm by guaranteeing the safety and security of women with disabilities and ensuring confidentiality during data collection and anonymity of sensitive data.
- Don't allow for elite capture, but reach out to the broader disability community, both urban and rural.
- Don't forget the diversity of disability.



3

The Critical Role of Disability-Inclusive Laws and Policies

Laws and policies can act as legal barriers or aids to the socioeconomic inclusion of women with disabilities.

Laws and policies can exclude women with disabilities from opportunities by restricting access and exacerbating discriminatory practices. For example, a 2016 global study of disability and labor legislation illustrated how national labor laws can pose structural barriers to the participation of persons with mental disabilities in competitive employment. This includes direct and indirect discrimination in recruitment procedures and the absence of provisions related to equal remuneration, equal opportunities for career advancements, protection from harassment, and access to reasonable accommodation (Nardodkar et al. 2016). Laws and policies can also foster inclusion by shaping access to basic services and enabling participation in decision-making.

National laws are more likely to meet principles stipulated under international law, when they recognize the fundamental rights of women with disabilities.

 Download the data set on the rights of women with disabilities

The Women, Business and the Law Data Set on the Rights of Women with **Disabilities**

The Women, Business and the Law project, under one of the 10 WBG commitments on disability-inclusive development, has collected and analyzed data related to the rights of women with disabilities. The research covers 11 data points based on laws, regulations, and policies across 190 economies and includes lessons learned regarding the four areas studied: nondiscrimination, parental rights and responsibilities, labor market inclusion, and protection from GBV (box 3.1). Two policy briefs accompany the data set:

- The Importance of Designing Gender and Disability Inclusive Laws: A Survey of Legislation in 190 Economies
- with Disabilities: Family Life, Work, and Protection from Gender-Based Violence



Box 3.1

Women, Business and the Law 2022 Research Questions on the Rights of Women with Disabilities

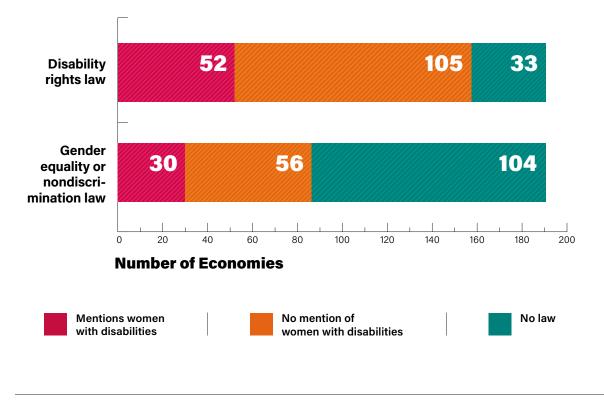
- **1.** Is there a gender equality or nondiscrimination law that specifically recognizes and protects the rights of women with disabilities?
- **2.** Is there a law on persons with disabilities that specifically protects and promotes the rights of women with disabilities?
- 3. Does the disability rights law follow the social model?
- **4.** Does the law provide support to women with disabilities in the exercise of their parental rights and responsibilities (for example, extension of maternity leave, financial aid, legal protection to keep custody for children, and others)?
- **5.** Is there a law or policy that mandates reasonable accommodation for workers with disabilities?
- **6.** If the answer is "Yes," does the reasonable accommodation law or policy mention women with disabilities?
- **7.** Are there incentives in law or policy for businesses to employ persons with disabilities (for example, quotas, tax breaks, wage replacement)?
- **8.** If the answer is "Yes," does the employment incentive law or policy mention women with disabilities?
- 9. Does the domestic violence law explicitly address women with disabilities?
- **10.** Does the domestic violence law establish accessibility to services for women with disabilities survivors of violence?
- 11. Is there legislation on sexual harassment against women with disabilities?

1. The Rights of Women with Disabilities to Equality and Nondiscrimination

Laws and policies worldwide largely fail to account for both gender and disability. Only one-quarter of economies worldwide explicitly recognize the rights of women with disabilities (figure 3.3):

- 86 economies have a gender equality or nondiscrimination law. Only **30** of them explicitly mention women with disabilities. This is only 16 percent of the 190 examined economies.
- 157 economies have a disability rights law. Only **52** of them, or 27 percent of all economies, mention women with disabilities.
- Only 10 economies mention women with disabilities in both their gender equality or nondiscrimination law and their disability rights law.

Figure 3.3. Economies that Recognize Multiple Discrimination of Women with Disabilities in Their Gender and Disability Rights Laws



Source: Women, Business and the Law database.

2. Parental Rights and Responsibilities of Women with Disabilities

Laws around the world overwhelmingly do *not* provide support to women with disabilities in the exercise of their parental rights and responsibilities (for example, financial aid or personal assistance, legal protection to keep custody of children, specific attention to maternal health care, or extended maternity benefits). Of 190 economies studied, only 27 legally stipulate support to parents with disabilities (table 3.2).

Table 3.2. Examples of Laws Protecting the Parental Rights of Women with Disabilities

Measure	Example
Financial aid or personal assistance	France has widened access to disability compensation benefits for parents with disabilities, recognizing the need for human assistance (Decree No. 2020-1826 of December 31, 2020). The Republic of Korea provides a woman with a disability "with a helper who is to visit her home for pre and postnatal care" (Act on Welfare of Persons with Disabilities, box 3.2). In Cameroon, the law provides that the state will contribute to school expenses and professional development of children whose parents have disabilities (Law No. 2010/002 of April 13, 2010).
Nondiscrimination clause for custody rights	In Benin, the law states that "no child shall be separated from his or her parents without just cause because of his or her disability or the disability of his or her parents" (Law No. 2017-06 Protecting and Promoting the Rights of Persons with Disabilities in the Republic of Benin). In Fiji, the law protects the right of persons with disabilities to be free from discrimination in all matters relating to parenthood (Fiji, Rights of Persons with Disabilities Act of 2018).
Specific attention to maternal health care	In Togo, the law provides that the personnel of health structures will pay special attention to a woman with a disability during pregnancy and shortly after childbirth (Law of April 23, 2004, on the social protection of persons with disabilities).
Extended maternity benefits	In Kuwait, mothers with disabilities employed in the public sector are granted special fully paid leave (Law No. 8 of 2010 Concerning the Rights of People with Disabilities). In Spain, the birth allowance is paid for an additional 14 days (General Social Security Law as amended in 2015).

Source: Women, Business and the Law database.



Box 3.2

Laws in the Republic of Korea Offer Support to Mothers with Disabilities

In the Republic of Korea, 89 percent of women with disabilities who gave birth to children in the past three years received support for childbirth expenses under the 1989 Act on Welfare of Persons with Disabilities, which stipulates specific attention in maternal health care. Disability rights advocates explain that the best support practices for mothers with disabilities are financial assistance for birth related costs and provision of homecare services for childcare. Article 14 of the 2015 Act on Guarantee of Right to Health and Access to Medical Services for Persons with Disabilities states that local governments can provide a helper service for women with disabilities.

In Seoul, the Home Helper Service for Women with Disabilities has been available since 2003, through which eligible women with disabilities may receive care services related to pregnancy management, postpartum care, child rearing, and household chores for up to 70 hours per month. The service was first established upon advocacy of a staff member of the Seoul Northern Welfare Center for the Disabled – herself a working mother with a disability when she recognized that there was no specialized social welfare service for mothers with disabilities in Korea. Many women have benefited from the service. For example, Park, a 36-year-old woman with a visual impairment, is a beneficiary of this program. She has two children: the oldest goes to a daycare center while the youngest stays at home with her. She wants to participate in educational and social activities for her children but faces environmental barriers to doing so. After learning about the Home Helper Service, she applied for the program. With the support provided, she has started attending a local welfare center to receive braille training, which has helped alleviate some of the barriers she faces as a parent.

However, OPDs raise concerns that care support for raising children is insufficient. For example, parents with disabilities have difficulties accessing the National Child Care Project and there is no gender component in the 2011 Personal Assistant Law for Persons with Disabilities. A draft law on support for women with disabilities is currently under discussion in the national assembly with the goal of establishing a single, systematic, and integrated framework for the rights of women with disabilities.

Source: National Assembly Legislative Research Service 2020; Seoul Metropolitan Government 2018; Women, Business and the Law database.

3. Labor Inclusion for Women with Disabilities

Across 190 economies studied, very few laws related to the inclusion of persons with disabilities in the labor force consider the effect of gender:

- 111 economies have reasonable accommodation mandates in their law or policy. Only 6 explicitly mention women with disabilities (box. 3.3).
- 120 economies have employment incentives in law or policy such as quotas, tax breaks, wage replacement, and others. Only 5 mention women with disabilities.

Box 3.3

Inclusion of Women with Disabilities Under Ethiopia's Labor Law

In Ethiopia, only 53.5 percent of persons with disabilities participated in the labor market in 2013, while the general labor force participation rate was 80.7 percent. Women with disabilities were even less likely than men with disabilities to be employed (43.7 per cent compared to 63 per cent), being predominantly involved in unpaid family work. The Right to Employment of Persons with Disability Proclamation No. 568/2008 aims to better include women with disabilities in the labor market and is unique in recognizing intersectional discrimination. Article 6(1)(b) states that it is the responsibility of employers to "take all reasonable accommodations and measures of affirmative action for women with disability taking into account their multiple burden that arise from their sex and disability." Overall, the law significantly advances the rights of persons with disabilities by placing the burden of proof on the employer, meaning that a person with a disability who takes their case to court does not need to provide all the evidence to support their case.

The passage of this law was the result of long-term lobbying by organizations of persons with disabilities (OPDs), including the National Association of the Blind and the Ethiopian Women with Disabilities National Association, demanding an implementing regulation to the previous law, Proclamation No. 101 of 1994. The Civil Service Commission had originally drafted the law, under the leadership of the legal director, who was a blind person. A committee formed by the Ministry of Labor and Social Affairs that included representatives of the Civil Service Commission and OPDs eventually concluded that a comprehensive instrument needed to replace the 1994 law and adopted Proclamation No. 568/2008. However, OPDs have criticized the enforcement mechanisms of the new law – including a fine of only 2,000 to 5,000 birr (the equivalent of US\$40 to US\$100) – as insufficient to effectively increase the hiring of persons with disabilities. The recently adopted Labour Proclamation No. 1156/2019 further advances women's economic empowerment by prohibiting sexual harassment in employment for the first time. While the law protects women with disabilities from nondiscrimination, the sexual harassment provisions do not explicitly protect persons with disabilities.

Source: Central Statistics Agency-Ethiopia 2013; Women, Business and the Law database.

4. Protection against GBV for Women with Disabilities

Women, Business and the Law's analysis of 190 economies found the following:

- Only 51 of 160 economies globally with a law prohibiting domestic violence explicitly protect women with disabilities. Only 17 establish accessibility to services for women with disabilities survivors (table 3.3).
- A total of 144 economies legally prohibit sexual harassment in employment. Only **30** explicitly mention women with disabilities.

Table 3.3. Good Practice Examples in Law to Preventand Reduce Violence against Women with Disabilities

Economy	Legislation	Provision
Peru	Law No. 30364 to Prevent, Punish, and Eradicate Violence against Women and Family Members	The law states that disability sets individuals in positions of vulnerability to violence and mandates that measures related to domestic violence should take on an intersectional approach, considering identities such as marital status, sexual orientation, HIV-positive status, immigrant or refugee status, age, or disability, to name a few.
Mozambique	Law No. 29/2009 on Domestic Violence Perpetrated against Women	The law provides that the disability status of a survivor of domestic violence is considered an aggravating circumstance, which increases the sentences ordered by courts.
Republic of Korea	Act on Special Cases Concerning the Punishment, etc. of Crimes of Domestic Violence (Act No. 17499) Act on Special Cases Concerning the Punishment of Sexual Crimes (2012)	The act stipulates that centers and shelters may specialize in welcoming a target group, such as persons with disabilities, and if a shelter operates for persons with disabilities, it must provide appropriate assistance that considers all disabilities to ensure full accessibility to the services. Provides communication assistance to persons with disabilities during the investigative processes and legal proceedings.
Oman	Penal Code	Provides for aggravated penalties for sexual harassment committed against a person with a disability.

Source: Women, Business and the Law database.

4 Sector-Specific Barriers and Solutions

a. Education

Access to education is a universal right, and education contributes to building human capital and reducing poverty. Globally, about 240 million children have a disability.

Children with disabilities are more likely to never attend school because of multiple barriers, including stigma, lack of trained teachers, inadequate learning materials and inaccessible facilities (<u>UNICEF 2021b</u>). Those who are in school are less likely to complete education at any level, compared with children without disabilities. Girls with disabilities are among the most excluded from education. "Nine out of ten children with disabilities in developing countries are excluded from formal education, and the majority of them are girls" (<u>UNGEI 2021</u>). They run a high risk of being left out of school because of prevailing social norms that prioritize the education of their nondisabled peers and in some instances, boys with disabilities. Initiatives to address these barriers and the relevant considerations for World Bank operations are described in the <u>guidance</u> note on criteria for disability-inclusive investment project financing (IPF) in education (box 3.4).

Emerging Practices in Education

- **Digital education:** Digital learning can greatly benefit students with disabilities, especially because e-learning and remote education are becoming increasingly important in global crises. Digital skills are also vital to all other aspects of socioeconomic empowerment, such as access to employment and basic services. Compared with their peers, girls with disabilities are less likely to possess digital literacy (<u>Tyers-Chowdhury and Binder 2021</u>).
- Inclusive education: Education systems should be inclusive, meaning that all children are taught together in the same classroom and not in segregated or special schools. Inclusive schools lay an early foundation for lifelong inclusion in society. Disability and gender are two main causes of segregation in education. Girls with disabilities are at the highest risk of being segregated because of their intersecting identities (World Bank 2022e).



Box 3.4

WBG Initiatives Promoting Disability-Inclusive Education in Sub-Saharan Africa

The WBG's aim is to make all its education programs and projects disability inclusive by 2025. Among other initiatives, the World Bank has set up the Disability-Inclusive Education in Africa Program, with the United States Agency for International Development, a \$3 million trust fund to increase access for children to primary school and to design and implement inclusive education programs across Africa. The program provides advisory and analytical support, strengthening the evidence base on the economic, social, and system-level structures that impact inclusion for children with disabilities and showing "what works" to overcome these barriers. The recent study, "Understanding Multidimensional Determinants of Disability-Inclusive Education: Lessons from Rwanda, Sierra Leone, and Zambia," finds that the most significant barriers are not familial but societal and institutional and need government intervention and investment. Recommendations include the development of assistive technology service delivery systems and rehabilitation services, provision of accessible public transportation and barrier-free environments, improving access to learning-related accommodations and personal care assistance, assessment and coverage of out-of-pocket costs of families through social protection, and delivery of awarenessraising programs. The Inclusive Education Initiative (IEI), is a multi-donor trust fund overseen by the World Bank, supported by the British and Norwegian governments. The paper Pivoting to Inclusion: Leveraging Lessons from the COVID-19 Crisis for Learners with Disabilities examines how the COVID-19 pandemic furthered the risk of marginalization for children with disabilities and reiterates the importance of accessible information for every child in multiple languages and multiple formats and the training and sensibilization of teachers.

An important resource document is the World Bank's <u>Criteria</u> for Disability-Inclusive IPF in Education Guidance Note. It supports task team leaders in applying four main criteria to projects under implementation and includes a project worksheet for easy application: stakeholder engagement, analysis, inclusive project design, and monitoring and reporting.

Addressing Discrimination Based on Gender and Disability in Tanzania by Promoting Changes in Education Policies and Providing Accessible, Safe Toilets

In Tanzania, girls who became pregnant were banned from school (CEDAW Committee 2016; CRC Committee 2015). Girls with disabilities, who experience high exposure to sexual violence, ran an increased risk of having to drop out of school because of pregnancy, although precise data were not available. A new educational circular has lifted this barrier and recognizes that pregnant girls and adolescent mothers can remain at or return to school (World Bank 2021b). The World Bank's Tanzania Secondary Education Quality Improvement Project aims to support girls, including girls with disabilities, to complete secondary education by developing safe learning environments, accessible schools, and alternative education pathways for pregnant students and adolescent mothers. The project is committed to supporting the implementation of the new education policy.

Inaccessible and unsafe toilets are a major reason why girls with disabilities drop out of

school, especially once menstruation starts (World Bank 2017). In a primary school in rural Tanzania, 16 student toilets were constructed in the framework of the World Bank-financed Tanzania Sustainable Rural Water Supply and Sanitation Program (SRWSSP). The toilets were split evenly among girls and boys. One accessible toilet was included on each side. According to the headmaster, the impact of the new toilet facilities on student attendance was "phenomenal." Accessible and gender-sensitive toilets in schools are beneficial not only for girls with disabilities, but also for female teachers or administrators with disabilities. To date, the program has provided 637 public primary schools in the 17 regions with lowest water, sanitation, and hygiene services with access to adequate and improved facilities. They meet the required criteria of providing an adequate number of toilets and handwashing facilities for girls and boys, including one accessible toilet for both boys and girls, and access to menstrual hygiene rooms and disposal incinerators. The program has also helped to ensure that the design and construction of school sanitation and hygiene facilities is standardized countrywide through the Ministry of Education Science and Technology.

Three Key Questions to Ask on Education and Women with Disabilities during the Project Cycle

- **1.** Data: Does the country collect educational data disaggregated by gender and disability, and what are the gaps in educational attainment for girls and women with disabilities?
- **2.** Frameworks: What policy measures have schools taken to accommodate girls with disabilities, especially in relation to gender-based violence and bullying?
- **3.** Program: Does the curriculum in all levels of education respond to the gender and disabilityspecific needs of girls and women with disabilities? Are measures in place to raise awareness and promote the education of girls and women with disabilities across relevant stakeholders (family, peers, teachers, policy makers, and the community)?

Sample Project Indicators to Measure Inclusion of Women with Disabilities in Education

- National laws or policies enacted that recognize the right to inclusive education for girls and women with disabilities
- Educational data disaggregated by both gender and disability, using the Washington Group Short Set on Functioning
- ① Percentage of girls enrolled in segregated versus mainstream schools and/or out of education
- Percentage of girls and women with disabilities who have completed primary, secondary, and higher education
- ⊕ Percentage of schools that are accessible and inclusive of girls with disabilities
- ⊕ Number of teachers trained under inclusive education curriculum
- ⊕ Percentage of girls with disabilities benefiting from assistive technology or other accessible communication, such as sign language or braille, in education
- ① Number of reported incidents of bullying and school violence against girls with disabilities
- Number and reach of government-led, awareness-raising campaigns addressing the right to education of girls and women with disabilities

b. Employment and Entrepreneurship

Most of the world's 1 billion people with disabilities are of working age, yet their labor force participation is particularly low.

According to the International Labour Organization, seven of 10 persons with disabilities are not active in the labor force, compared with four of 10 persons without disabilities (<u>ILOSTAT 2022</u>). Women with disabilities worldwide are employed at lower rates than men with disabilities and women without disabilities (ILO and OECD 2018). In countries where gender-disaggregated data are available, the labor force participation rate for women with disabilities is significantly lower than that of other groups. In 60 countries with available data, the inactivity rate of women with disabilities was higher than that of women without disabilities and higher than the rates of men with and without disabilities (ILOSTAT 2022).

In northern Africa and western Asia, women with disabilities are five times less likely to be employed as men without disabilities, and in Europe, two times less (<u>UNDESA 2018</u>). Even when employed, women with disabilities commonly earn less than women without disabilities and men with disabilities, and they are more likely to be employed in the informal sector, where they experience limited labor protection and work instability (<u>WHO and</u> <u>WBG 2011</u>). Young women with disabilities are in a particularly disadvantageous position they are the least likely to be in employment, training, or education, compared with their peers (<u>ILOSTAT 2022</u>).

Lack of Assets and Credit Impedes Female Entrepreneurship

Because of barriers to formal employment, many people with disabilities work in the informal labor market, including as entrepreneurs. But starting a business requires assets or the ability to get a loan. Globally, there are significant gender gaps in entrepreneurship and financial inclusion. According to recent data by the World Bank's Women Entrepreneurs Finance Initiative (WeFi) Entrepreneurship Database, women represent only one-quarter of new business owners and directors. According to the 2021 Global Findex Database, 74 percent of men in developing countries have a bank account, compared with only 68 percent of women. Lack of credit is one of the most significant hurdles for women to become successful entrepreneurs. Data show that women are left with an estimated \$1.7 trillion of unmet credit demand (IFC 2017). Because of patriarchal gender norms and legal barriers, women are less likely to own property that might generate credit, including land. A study across 10 countries in Africa found that only 12 percent of women reported owning land individually, compared with 31 percent of men (World Bank 2022b). It is assumed that these gaps are greater for women with disabilities, despite the lack of data.

The Care Economy is Predominantly Female

The gendered responsibility for care work weighs heavy on women with disabilities who often perform care and other home duties. Having a person with disability in the household also affects employment of other household members, particularly women. In the Latin America and the Caribbean Region, for example, between five and seven out of ten female household heads in families with disabilities are unemployed (Garcia Mora, Orellana, and Freire 2021). Women report being unavailable to work because of unpaid domestic obligations nine times more often than men (43 percent versus 5.2 percent), including providing care to persons with disabilities. This exacerbates gender gaps in employment, including an overrepresentation of women working in informal and care work. In Latin America and the Caribbean, for example, women perform 80 percent of all domestic tasks, which includes caretaking for family members with disabilities. In Chile, 80 percent of all adults with disabilities who receive personal assistance get it from a household member; 74 percent of the caretakers are daughters, wives, or partners; and 94 percent of the care work is unpaid (Garcia Mora, Orellana, and Freire 2021). This situation can shift if more attention is given to the economic benefits of supporting human capabilities and recognizing the value of care work (Folbre 2006). This includes the notion that people are the real worth of nations, and that public investment in care can pay off by increasing productivity not only for persons with disabilities but also for other family members. Because women are often the caretakers and those being cared for, it is critical to use both a gender and disability lens when thinking through policies and financing of care.

Emerging Practices in Employment and Entrepreneurship

- Effective affirmative action to promote employment: This can include entrepreneurship support programs; inclusive or targeted public procurement measures; financial incentives for employers (for example, wage subsidies, reduction in social charges); quotas; and supported employment (CRPD Committee 2021; ILO and OECD 2018). However, these measures should not lead to isolation of workers with disabilities (box 3.5). In addition, information gathered from guota systems across 18 countries in Latin America and the Caribbean showed that to be effective, quotas need to be paired with human capital strengthening such as inclusive education, skills matching, and awareness campaigns to dispel negative stereotypes (Garcia Mora, Orellana, and Freire 2021).
- Reasonable accommodations: Appropriate accommodations that support people with disabilities to work, such as adjustable desks and accessible toilets in the workplace, when also considered from a gender perspective can contribute to employment sustainability among women with disabilities (<u>UN Women 2021</u>).
- Digital technologies to ensure that social protection and labor market systems are accessible: These should include measures to increase digital skill building among women with disabilities, especially in developing countries, because women with disabilities are less likely to be digitally literate and are less likely to be employable without these skills (Tyers-Chowdhury and Binder 2021).

Box 3.5

Isolation of Workers with Disabilities through Sheltered Workshops

The merits of employment incentives to include persons with disabilities in the workforce are heavily debated. Arguments in favor of sheltered workshops, where persons with disabilities work in separated environments outside the "regular" labor force, stress their ability to provide work adapted to different types of disability and levels of severity. However, these workshops can leave workers with disabilities isolated and at risk of financial exploitation, and they do not foster the ability to transition to formal employment. A study that surveyed more than 200 workers with intellectual disabilities showed that a majority would prefer working outside of sheltered workshops and would feel comfortable doing so with adequate assistance. Efforts should thus be made to significantly improve the number of persons with disabilities who participate in the mainstream labor market.

Sources: Braunmiller and Dry 2022b; Hoffman 2013; Migliore et al. 2007; UNDESA 2018.

World Bank Operations in St. Lucia: Integrating Women with Disabilities into the Labor Market

Children with disabilities are often enrolled in special schools, which do not provide them with skills that would help them enter the workforce. The <u>Saint Lucia: Human Capital Resilience Project</u> seeks to improve the labor market relevance of skills of vulnerable groups by strengthening vocational education (rationalizing existing courses, adding new offerings, providing financial assistance to low-income students, and supporting internships and job placements). It also aims to create an enabling environment, especially for women and persons with disabilities, through training instructors and wider awareness-raising activities to increase inclusion and counteract gender and disability stereotypes.

Three Key Questions to Ask on Employment and Entrepreneurship of Women with Disabilities during the Project Cycle

- 1. Data: Are labor force data disaggregated by both gender and disability?
- 2. Frameworks: Do labor laws and policies expressly promote the inclusion of women with disabilities, and if so, how (quota system, wage subsidies, financial incentives)? Do national laws ban discrimination in the workplace based on both gender and disability? Are female employees with disabilities entitled to reasonable accommodations in both the private and public sectors? Do women with disabilities have access to finance and banking services?
- **3.** Program: To what kinds of training and vocational programs do women with disabilities have access? Are there programs specifically for digital skills training?



Sample Project Indicators to Measure the Inclusion of Women with Disabilities in Employment and Entrepreneurship

- National laws or policies adopted to promote nondiscrimination and access to work based on disability and gender
- \oplus Percentage of women with disabilities active in the formal and informal labor force
- ⊕ Labor force characteristics for women with disabilities, including age and distribution across public and private sectors, occupational sectors, and leadership roles
- Percentage of women with disabilities attending and completing training and vocational programs
- ⊕ Share of women with disabilities benefiting from employment promotion programs (quota, wage subsidies)
- Average earnings of (different impairment groups of) women with disabilities compared with other women and with men with disabilities
- ⊕ Share of women with disabilities benefiting from accessibility and/or reasonable accommodation measures in the workplace
- ⊕ Share of women with disabilities with access to finance and banking services

c. Social Protection

Poverty is higher among persons with disabilities than persons without disabilities.

Persons with disabilities are more likely to encounter greater daily living costs, including health-related expenses and expenses for assistive devices, interpreters and personal assistants, service animals, or transportation. Yet only 33.5 percent of persons with severe disabilities worldwide receive disability benefits, and in low-income countries, coverage can be as low as 8.6 percent (ILO 2021). Almost all countries offer disability-specific social protection programs, but disability benefits may not be enough to guarantee income security if the increased costs of living associated with a disability are not taken into account (UNDESA 2018b). Furthermore, many programs are based on contributions and thus do not reach persons with disabilities in the informal sector or outside the labor market. Because many social protection programs rely on public awareness campaigns (which may not be accessible) and medical assessments (which are often available only in centralized places), the majority of people with disabilities have little access, especially those who are more marginalized, such as women. For example, a study carried out in rural areas in India in late 2005 revealed that 94 percent of households

with persons with disabilities had not heard of the Persons with Disabilities Act of 1995 and its associated entitlements, and that 60 percent of persons with disabilities in rural areas had not heard of the country's disability pension (<u>UNDESA 2018b</u>).

The risk of poverty is even higher for women with disabilities because they are more likely to be out of the labor force, or when employed, they tend to be in informal or part-time employment. Additionally, they tend to receive lower wages because of gender and disabilityrelated barriers in education and employment (Special Rapporteur on the rights of persons with disabilities 2015; ILO 2015). Designing and implementing social protection programs in an inclusive manner can ensure that women with disabilities are able to cover basic needs critical for their inclusion in society and the workforce.

Emerging Practices in Inclusive Social Protection

- Independent living and deinstitutionalization: Social protection systems should empower all women with disabilities to live independently and be included in the community. This should include choice of their place of residence and access to community services and facilities and to individualized personal assistance and assistive technologies. Institutionalization in all forms should be avoided (CRPD Committee 2016).
- Universal social protection coverage: Social protection should specifically include women with disabilities to ensure effective access and outreach and improve coverage, considering social factors that

may disadvantage women with disabilities beyond their impairment (<u>UNDESA 2018b;</u> <u>ILO and International Disability Alliance</u> <u>2019</u>).

• **Digitalized systems:** These have the potential of ensuring better access to social protection and coverage if accompanied with measures to ensure digital inclusion of women with disabilities, especially in developing countries.

Increasing Access to Social Protection for Women with Disabilities through Universal ID Coverage and Unconditional Cash Transfers

A study in Nigeria by the Identification for **Development** initiative revealed that women and other marginalized groups were often deprived of national ID cards and access to government services and were more vulnerable to poverty and exclusion (World Bank 2021a). The risk was particularly high for women with disabilities. The Nigeria Digital Identification for Development Project seeks to increase the number of persons holding a national ID card to facilitate access to health and social protection services, especially among women. Both gender and disability dimensions were considered in creating an inclusive and accessible ID system-for example, ensuring universal coverage through an enabling legal and regulatory framework, using mobile equipment to reach populations instead of requiring beneficiaries to travel to enrollment centers, and developing flexible exception handling mechanisms for those unable to produce birth certificates and biometrics.

The <u>Tanzania Productive Social Safety Net</u> <u>Project II</u> aims to improve access to incomeearning opportunities and socioeconomic services for targeted poor households while enhancing and protecting the human capital of their children. Three factors make it a good practice example on disability and gender inclusion:

- Persons with disabilities are included in the project components, notably the provision of unconditional cash transfers to households with persons with disabilities.
- The project identifies persons with disabilities as potentially subjected to discrimination. It carried out an assessment to determine whether persons with disabilities had been subjected to discrimination, highlighting this population as vulnerable from the beginning of project preparations.
- Persons with disabilities are highlighted in the policies and procedures of the project's labor management procedures report. Gender is mainstreamed throughout the project. It focuses on women as the main recipient and includes an action plan for addressing gender issues.

Three Key Questions to Ask on Social Protection and Women with Disabilities during the Project Cycle

- Data: Are social protection data available and disaggregated by both gender and disability?
- 2. Frameworks: Do social protection policies contain specific measures to support independent living and income security, such as coverage of extra costs related to disability, and access to employment for women with disabilities?
- **3.** Program: Are social protection services physically, informationally, and digitally accessible to women with disabilities? How flexible and user-friendly are the procedures?

Sample Project Indicators to Measure Inclusion of Women with Disabilities in Social Protection

- Inclusion of women with disabilities as target population for social protection measures
- Number of women with disabilities receiving social security payments or cash transfers
- Percentage of women with disabilities receiving disability benefits and other types of social assistance
- Percentage of extra costs for women with disabilities covered by social protection measures
- Social protection buildings and services, including digital services, that are accessible to women with all types of disabilities
- Social protection providers trained on gender and disability inclusion

Source: Tim Mossholder, Unsplash.

d. Gender-Based Violence

Girls and women with disabilities are at heightened risk of sexual abuse, exploitation, and violence that goes undetected (<u>World Bank 2019a</u>).

The risk is even higher for girls with intellectual or psychosocial disabilities. Often, their dependence on financial and personal support-coupled with social isolation or limited physical mobility or means of communication—places them in a particularly vulnerable position. Poverty, conflict, and social stigma are additional aggravating factors (World Bank 2019a). Sexual violence, abuse, and exploitation can take various forms and include intimate and nonintimate partner violence, and online and in-person exploitation and abuse. Global data on GBV against women and disabilities is limited, which indicates a largely invisible crisis (UNFPA 2018). The limited data available suggest that women with disabilities are up to 10 times more likely to experience violence than nondisabled women (ACPF 2010; Dunkle et al. 2018; Ozemela, Ortiz, and Urban 2019). Between 40 percent and 68 percent of young women with disabilities experience sexual violence before age 18 (OHCHR 2020). Another study based on evidence from Sub-Saharan Africa and South Asia showed that women with disabilities are nearly twice as likely to have experienced domestic violence in the past year compared with women without disabilities, and that the likelihood of recent domestic violence increases with the severity of the disability (Chirwa et al. 2020). Stigma and attitudes exacerbate the issue. Data across 35 countries show that although 30.7 percent of women with no functional difficulties think that a husband is justified in hitting his wife, this figure increases to 38.3 percent for women with "at least a lot of difficulty" (Mitra and Yap 2022).

Yet women and girls with disabilities, especially those with intellectual or psychosocial disabilities, often lack access to GBV support services and legal mechanisms. The COVID-19 pandemic has exacerbated GBV worldwide and has further limited or disrupted access to support services for the survivors (<u>UN Women 2021</u>). In addition, in many places around the world, the families of girls and women with disabilities force these women and girls into marriages because they cannot care for them or are trying to ensure their long-term security. In some countries, marriage is thought to remove the stigma of a disability or "cure" it (<u>World Bank 2019a</u>).

GBV causes trauma and injury but also has long-term consequences on the survivors' physical and mental health. It can negatively affect their ability to sustain employment or attend school and can lead to personal, social, and economic isolation and poverty. GBV also has enormous costs on society and reduces economic growth. Ensuring that women and girls with disabilities have a life free of violence and empowering survivors to overcome trauma and stigma requires a holistic and multisectoral approach.

Emerging Inclusive Practices to Address GBV

- Network-oriented interventions, which recognize the need to build connections between survivors with disabilities and other survivors and activists, practitioners, and organizations working on GBV prevention, are an effective way to integrate women with disabilities into efforts to address GBV. This can be done, for example, by including women with disabilities in gender- and age-appropriate focus groups assessing GBV approaches (World Bank 2019a).
- Multisectoral strategies, which aim to coordinate the actions and programs of various institutions (police, justice system, and health and social services) and develop a common approach based on interinstitutional partnership and cooperation, can improve the quality of services offered to GBV survivors and increase their safety (UNFPA EECARO 2015).

Assessing GBV-Related Risks as Part of a Development Response to Displacement Impacts in Uganda

Uganda currently hosts the third largest refugee population in the world (approximately 1.2 million), the majority of whom are women and children. The World Bank scaled up activities under the **Development Response** to Displacement Impacts Project in the Horn of Africa, supporting access to basic social services in refugee-hosting communities. In this context, an assessment was conducted in Uganda's refugee-hosting districts to identify key risk factors for GBV, map services, and provide recommendations (Government of Uganda and World Bank 2020). The report recognized that GBV against women and girls (especially intimate partner violence) was prevalent in both refugee and host communities, with disability (and childhood) an aggravating factor, and that existing services were uncoordinated and inaccessible in situations of intersecting GBV.

Three Key Questions to Ask on GBV and Women with Disabilities during the Project Cycle

- 1. Data: Are data on gender-based violence disaggregated by gender and disability?
- **2.** Frameworks: Do national laws prohibit gender-based violence, especially against women and girls with disabilities?
- **3.** Program: Do women and girls with disabilities have effective access to information and complaint mechanisms? Are support services addressing violence accessible (such as shelters, health services, social protection)? Are GBV stakeholders adequately trained to address women and girls with disabilities?

Sample Project Indicators to Measure Inclusion of Women with Disabilities in GBV Programs

- ① Data on gender-based violence disaggregated by gender and disability
- Percentage of women and girls with disabilities who are survivors of domestic violence, rape, or sex trafficking, including online sexual exploitation
- Number of sexual exploitation, abuse, and harassment cases brought to authorities and/or workplace complaints logged with employers by women and girls with disabilities
- Percentage of women with disabilities among persons who contacted GBV help lines and benefited from GBV support services
- Percentage of women and girls with disabilities benefiting from GBV-program activities
- Percentage of shelters and/or GBV-response information accessible to women and girls with disabilities
- Number of women and girls with disabilities who have received training on GBV, including online sexual exploitation

e. Health

Persons with disabilities need general physical and mental health services like everyone else and specialized services related to their disability (for example, surgery, specific medication, or assistive devices).

Some are more susceptible to injury and infection and are more likely to develop secondary conditions because of their disability (OHCHR 2020). Yet persons with disabilities have poorer access to health services, compared with persons without disabilities. Globally, persons with disabilities are less likely to be able to afford health care and more at risk of suffering catastrophic health expenditure (WHO and World Bank 2011).

The risk of exclusion from health care is even higher for women and girls with disabilities (<u>WHO</u> and <u>World Bank 2011</u>). Compared with men with disabilities, women with disabilities are three times more likely to have unmet health care needs than men without disabilities (<u>UNDESA 2018a</u>). Access to sexual and reproductive health services is particularly challenging (<u>Special Rapporteur</u> on the Rights of Persons with Disabilities 2017</u>). Limited evidence from a few developing countries shows that 29 percent of births by women with disabilities are not attended by a skilled health care worker, gaps compared with nondisabled women being particularly high in rural areas.



Additionally, an average of 22 percent of women with disabilities have unmet family planning needs (UNDESA 2018a). Coerced and forced sterilization against persons with disabilities is a harmful, discriminatory practice that continues today (National Women's Law Center 2022). Evidence shows that women with intellectual and psychosocial disabilities are particularly at risk of being coerced or forced to be sterilized (Servais et al. 2004; WHO 2014).

Access to health care is often denied for women with disabilities. A study conducted in India, for example, found that medical professionals held stigmatizing views of disability as a problem to be fixed, and it exposed other barriers in accessing medical facilities and devices, such as inadequate height of examination tables, inaccessible bathrooms, and the lack of sign language interpreters and assistants during medical checkups and procedures (<u>Salian 2022</u>). Developing inclusive health care systems is vitally important because the number of people with disabilities is increasing worldwide, particularly women with disabilities.

Emerging Practices in Inclusive Health

• Universal health coverage: All women with disabilities should have access to health services. Universal health coverage can help ensure that women with disabilities have access to health services, medicine, and vaccines without suffering financial hardship.

- Participatory practices: Health care models, which empower patients to actively participate in decision-making about their treatment, can improve health outcomes and patient satisfaction and reduce costs (WHO 2016). This requires providing women and girls with disabilities, especially those with intellectual disabilities, with adequate information in accessible format and in easy-to read or plain language, so that they can make meaningful choices. Health-related policies should be developed and implemented with the participation of persons with disabilities across the full range of disability (UNDESA 2016).
- Community-based rehabilitation and health care: Community-based health services delivered outside the clinic (for example, through mobile health units, home care, or outpatient visits) are more effective than institutional care. They ensure better access to services, especially for rurally based women with disabilities, and can promote independent living within the community. In one longitudinal study of a community-based rehabilitation program in Afghanistan, results indicated improvements in overall well-being of persons with disabilities, even in a conflict context (Trani, Vasquez-Escallon, and Bakhshi 2021).

Expanding Availability of Inclusive Health Services through World Bank Operations in Tuvalu

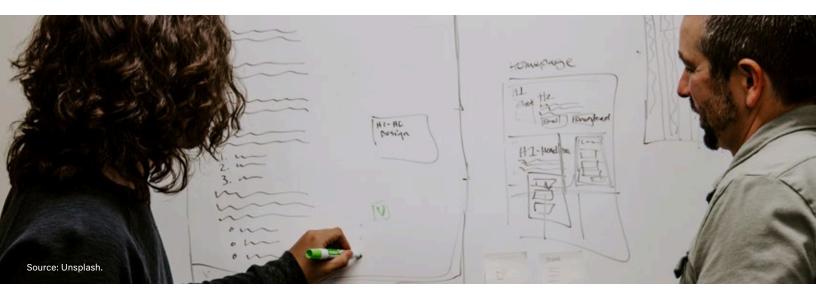
The World Bank's <u>Health System Strengthening Project</u> in Tuvalu aims to boost the delivery of health services, incorporating both disability and gender considerations. No specific strategies are currently in place for addressing gender inequalities in health care. In addition, unmanaged onset of diseases is a top risk factor for disability, especially among women. Planned activities include upgrading sanitation facilities in health clinics so that they are accessible for women and persons with disabilities; strengthening clinical capacities (for example, diagnostic services, surgery) and general screening programs for all the adult population, coupled with awareness-raising and outreach activities to reduce the risk of acquired disabilities; investing in inpatient mental health services and rehabilitation (patients with mental health problems are often held in local jails) and social service counseling for GBV survivors; purchase of field vehicles for specimen collection and outreach and communication technology equipment for remote consultation; digitalizing patient records; and organizing short, frequent, and online practical trainings for human resources, with a special focus on GBV-detection.

Three Key Questions for Task Team Leaders to Ask on Inclusive Health Access during the Project Cycle

- 1. Data: Are data on health disaggregated by both gender and disability?
- **2.** Frameworks: Does the health law ensure that health facilities and information are accessible to and affordable for women and girls with disabilities?
- **3.** Program: Are disability-specific health services and assistive technologies widely available? Are health care workers trained on how to manage the health needs of women and girls with disabilities?

Sample Project Indicators to Measure Inclusive Health Care

- ⊕ Percentage of girls with disabilities who have received full immunizations
- Percentage of women and girls with disabilities who have access to general health services, reproductive health services, and health care information
- ① Number of women and girls with disabilities who have been subjected to (forced) sterilization
- ⊕ Percentage of health care facilities that provide disability-specific services
- ⊕ Percentage of health care facilities equipped to receive women and girls with disabilities
- ⊕ Number of health personnel trained on gender and disability inclusion



f. Digital Development

Rapid digital transformation has created new jobs and expanded access to the labor market. Globally, more than 90 percent of jobs have a digital component (Tyers-Chowdhury and Binder 2021).

Online platforms have provided girls and women with disabilities with new pathways to communicate, interact, and receive information. Digital assistive technologies and adaptive devices are increasingly important in promoting independent living and enabling access to education, transportation, health, social protection, finance, e-government, and other services in a cost-effective manner (Raja 2016). Women and girls with disabilities are at high risk of being deprived of digital technology's benefits. Although the role of gender and disability in mobile use varies by country, women with disabilities have among the lowest rates of mobile and smartphone ownership, and barriers include lack of perception of benefits, literacy, digital skills, and safety concerns (<u>GSMA 2020</u>).

Promoting the Inclusion of Women with Disabilities through Artificial Intelligence

Bridging the digital divide has become critically important to the socioeconomic inclusion of women and girls in an increasingly digitalized world. Artificial intelligence offers enormous opportunities for persons with disabilities. Smart software, particularly in assistive technology, can promote independent living for persons with different types of impairments and improve access to services and benefits through automated data processing. However, it also entails significant risks that need to be regulated with the active consultation of persons with disabilities, including women with disabilities (Special Rapporteur on the Rights of Persons with Disabilities 2021).

Addressing Barriers to Digital Skills for Girls and Women with Disabilities in Uganda

The <u>Uganda Digital Acceleration Project</u> aims to support digital economy transformation by expanding access to high-speed internet, digitizing government services, and creating an enabling environment, among others, for women and persons with disabilities. Activities under this project include expanding internet access to places where women and other marginalized groups can safely use it, designing and implementing government e-services considering both gender and disability, supporting digital skills training for persons with disabilities and women (especially women-owned small and medium enterprises), and addressing the needs of persons with disabilities for connectivity by providing assistive technologies.

Three Key Questions to Ask on Digital Skills and Women with Disabilities during the Project Cycle

- **1.** Data: Are data on digital access and inclusion available and disaggregated by both gender and disability?
- **2.** Frameworks: Are any measures in place to protect girls and women with disabilities against online bullying, abuse, and exploitation?
- **3.** Program: Are any programs in place to help women and girls with disabilities access education and training on digital skills and digital safety and to afford digital technologies?

Sample Project Indicators on Digital Access and Inclusion

- Percentage of women and girls with disabilities who own and use technological devices (for example, mobiles phones, smartphones, laptop, tablets) and benefit from digital assistive technology and adaptive devices
- ⊕ Social protection coverage for digital technologies, especially for health, education, and employment purposes
- ① Training programs on digital skills and digital safety for girls and women with disabilities
- Number of reported incidents of cyberbullying, sexual abuse, and financial exploitation against women and girls with disabilities

g. Water

Access to water is a fundamental human right and a vital underpinning of good health and socioeconomic inclusion.

Contaminated or inadequate drinking water and poor sanitation and hygiene can cause diseases and dehydration, affect physical and mental health, and even lead to death. About 2 billion people worldwide do not have access to safely managed drinking water, 3.6 billion people do not use safely managed sanitation services such as private toilets and latrines, and 2.3 billion lack basic handwashing facilities (WHO and UNICEF 2021). Evidence suggests that the risk of exclusion is even higher for persons with disabilities because they face specific attitudinal, infrastructural, and environmental barriers in accessing water resources and sanitation facilities (World Bank 2017a). Dependency on others for accessing water resources such as drinking, sanitation, hygiene, and irrigation can result in adverse and unsafe personal consequences, particularly for women with disabilities, for example, an increased risk of sexual and financial exploitation (World Bank 2017a). Women and girls with disabilities face great challenges in managing their personal hygiene in a dignified and healthy way because of inaccessible or insufficient infrastructure and the double stigma attached to disability and menstruation (UNICEF 2021a). They are often unable to use water supply, sanitation, and hygiene facilities whenever they need, even within their own home.

As global pressure on water resources increases (also because of climate change), it is vitally important that the needs of women and girls with disabilities are not excluded. Natural disasters disproportionately affect both women and persons with disabilities. For example, a WBG study on inclusion and mobility in Kumasi, Ghana, showed that when flooding occurs, people with disabilities are more likely than other groups not to travel because of the impact of the floods on mobility and safety (Arroyo and Dominguez Gonzalez 2023, forthcoming).

Emerging Practices in Access to Water

- Innovative technologies: Innovative technologies are increasingly important to improving access to clean and safe water and sanitation, especially for persons with disabilities, while conserving and protecting water resources and improving water resilience worldwide.
- **Participation:** Inclusive water policies and programs should ensure that persons with disabilities, particularly women, participate in decision-making processes and procedures regarding water planning, management, and delivery.
- Universal design: Accessible, safe, and inclusive water supply, sanitation, and hygiene facilities based on universal design benefit everyone in the community, including elderly persons, families with young children, pregnant women, and persons with injuries or ill health.

Source: Tim Mossholder, Unsplash.

Inclusive Responses to Water and Sanitation Challenges in Indonesia

A World Bank project in Indonesia focused on inclusive water development and access through community participation. The Water Supply and Sanitation for Low Income Communities Project (PAMSIMAS) supported the government in providing universal access to water for its population by supporting sustainable water supplies for underserved rural and peri-urban populations (World Bank 2020b). The program has promoted the active participation of marginalized groups, including women and persons with disabilities, at all stages of the process, for example, by holding community meetings in accessible venues, checking the facilities to assure accessibility, and developing inclusive water facility specifications technical standards. In constructing disability-inclusive school water supply, sanitation, and hygiene facilities, the incremental costs for items such as ramps and rails were found to be marginal or nonexistent relative to the much larger costs of pipes and pumps of the water supply and sanitation system. Thus, disability inclusion is a modest amount if incorporated at the beginning of the activities. Retrofitting, however, would be substantially more expensive.

Three Key Questions on Inclusive Water Access to Ask during the Project Cycle

- **1.** Data: Are data on access to safe drinking water and safe sanitation and hygiene facilities disaggregated by both gender and disability?
- **2.** Frameworks: Are any measures in place to prevent and combat violence against girls and women with disabilities in the water supply, sanitation, and hygiene sector, especially when using communal facilities?
- **3.** Program: Do schools, health care facilities, transportation systems, government buildings, workplaces, and other key institutions have water supply, sanitation, and hygiene facilities accessible and safe to use for women and girls with disabilities?



Sample Project Indicators on Inclusive Water Supply, Sanitation, and Hygiene Projects

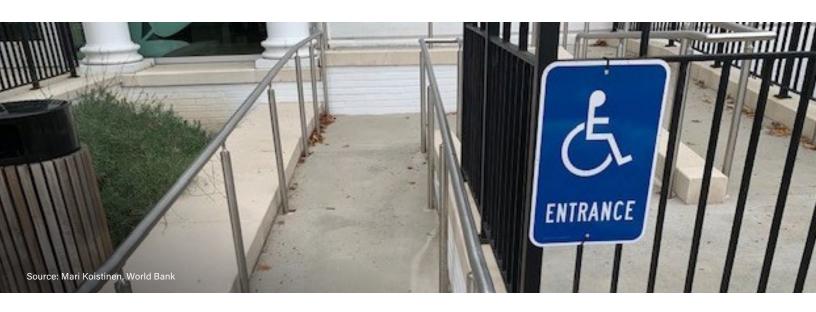
- ① Percentage of women and girls with disabilities who have access to safe drinking water
- ⊕ Percentage of public services (schools, health care facilities, transportation systems) with safe and accessible sanitation facilities for girls and women with disabilities
- Percentage of households where women with disabilities have access to an adequate sanitation facility
- Availability of financial support for water-related costs in health and social protection systems for women with disabilities
- Percentage of girls and women with disabilities trained in personal hygiene and safety measures in water supply, sanitation, and hygiene

h. Transport and Urban Planning

Transport plays an essential role in socioeconomic stability and has been shown to be the largest challenge to participation in the labor force in developing countries (ILO 2017).

Mobility constraints are a major factor in the marginalization of persons with disabilities and such constraints exacerbate personal, social, and economic isolation (World Bank 2015). Inclusive transportation systems enable persons with disabilities to access education, employment opportunities, health care, and any other service and place intended for public use. Ensuring that women and girls with disabilities can effectively access transportation requires more than providing physical access to vehicles or to information

about transportation scheduling (World Bank 2022c). For example, women have different trip patterns than men because of their social and economic roles, including household and caretaking duties, which can influence the transportation modes they use and the distance and frequency of travel (Borker 2022a; Borker 2022b; Sustainable Mobility for All 2017). Women and girls also face different constraints from men, especially relating to safety, which can influence their travel choices. Because women and girls with disabilities rely on transit as an essential means of integration and are perceived as vulnerable, they are hardest hit by the violence and crime that can exist in environments related to public transportation, such as overcrowding, time spent waiting, low-lit areas, and lack of monitoring. Actual or perceived danger can cause them to take circuitous routes or seek to change employment schedules, affecting



their economic standing (<u>ludici, Bertoli,</u> <u>Faccio 2017</u>). In addition, women and girls with disabilities may forego using even free services, such as health care or education, if they must pay for transportation, including for someone supporting them such as a family member or personal assistant (<u>World</u> <u>Bank 2022c</u>). Including women and girls with disabilities in transportation requires a holistic approach that incorporates both a gender and disability dimension to help address a multitude of barriers, including accessibility issues, safety concerns, harmful social norms, and lack of funds.

Emerging Practices in Transportation

• Trip chaining: Making means of transportation accessible is not enough. It is essential that all steps along the route are accessible. Inclusive transportation system design should consider every link in the trip chain (for example, accessible pedestrian streets, accessible ticketing services) to improve usage. • Smart technologies: New assistive technologies, especially artificial intelligence-enabled systems (for example, navigability tools, virtual maps, accessible routes tracking), can significantly improve mobility and transportation services for persons with disabilities (<u>UN Special</u> <u>Rapporteur on the Rights of Persons with</u> <u>Disabilities 2021</u>).

Universal Design and Gender Considerations

The principle of universal design ensures that spaces, structures, and objects are designed considering all people regardless of age, size, or disability. However, attention also needs to be paid to the intersection of these areas with gender. This requires considering elements such as cost, safety, and violence prevention when deciding on location, lighting, and other factors. Systematically including women with disabilities as stakeholders in project design, implementation, and evaluation is one way to ensure that both gender and disability are considered.

Construction of an Accessible and Safe Bus Terminal in Sri Lanka

In Sri Lanka, the <u>Kandy Multimodal Transport Terminal Development Project</u> seeks to enhance accessibility, efficiency, and safety for public transportation users of a central bus terminal. The project proposes to incorporate both disability- and gender-inclusion standards. For example, the terminal is expected to be built based on universal design principles and will include women-only waiting areas, breastfeeding rooms, and well-lit sanitation facilities. Safe and disability-friendly walkways will be developed to ensure easy access to the station, and special focus will be placed on safety from sexual harassment—for example, inclusion of a kiosk and hotline to report sexual harassment incidents, signage, and messaging to reduce sexual harassment of female commuters; training drivers and conductors; and developing protocols for bystander intervention.

Three Key Questions to Ask during the Transport Project Cycle

- **4.** Data: Are data on access, use, safety, and demand for transportation services disaggregated by both gender and disability?
- **5.** Frameworks: Do social assistance programs offer women and girls with disabilities compensation or other forms of financial support for transportation costs?
- **6.** Program: Are safe and accessible transportation routes to schools, health centers, markets, and other important public service settings available?

Sample Indicators for Gender and Disability-Inclusive Transport Projects

- ⊕ Policies adopted that establish universal design principles and reasonable accommodation measures in both public and private transportation systems
- ① Percentage of people using public transportation who are women and girls with disabilities
- Percentage of women and girls with disabilities experiencing difficulties in accessing education, employment, and health care because of the lack of accessible or safe transportation
- ⊕ Share of women and girls with disabilities benefiting from financial assistance for transportation purposes
- ⊕ Reported incidents of violence against women and girls with disabilities during transportation

i. Fragility, Conflict, and Violence and Disaster Risk Management

Conflict, violence, disaster, and humanitarian emergencies affect persons with disabilities disproportionately.

In addition, conflict, disaster, and humanitarian disasters often result in an increase in the number of persons who acquire disabilities (CRPD Committee 2015). Persons with disabilities are particularly exposed to negative socioeconomic impacts both during and in the aftermath of a disaster. They are more likely to be left behind during evacuation, to be injured, and unable to reach humanitarian assistance. The death rate for persons with disabilities during times of conflict and disaster is estimated to be at least twice as high as that of other affected populations (HI, CBM, and International Disability Alliance 2020). Women and girls with disabilities are in an even worse situation because they must also overcome gender-specific barriers and inequalities (CEDAW Committee 2018). Women are exposed to higher levels of violence, morbidity, and mortality than men. For example, during the 2004 Indian Ocean tsunami, between 70 and 80 percent of the victims were reported to be women (ESCAP 2022). Women and girls with disabilities are among the first groups to lose access to essential goods and services such as water, food, shelter, basic nonfood items (including menstrual hygiene products), and health services. They are also more likely to be pushed further into poverty in the aftermath of a disaster (ESCAP 2022; CBM, HI, and International Disability Alliance 2020).

As the frequency of natural and constructed disasters is anticipated to worsen, inclusive disaster management and recovery systems that can guarantee access to protection and safety for girls and women with disabilities are critically important. Understanding the range of barriers, (including disability-related barriers, gender inequality, and higher risk of violence) experienced by diverse women and girls with disabilities is the first step in sound planning (Erman et al. 2021; Balikisu, Escobar Saenz and Trohanis 2022). Stakeholder engagement-bringing women with disabilities into the conversation-is vital to building this understanding and recognizing women with disabilities as significant agents of change and not just victims (as outlined in the Sendai Framework for Disaster Risk Reduction 2015-2030). Building resilience in advance through social protection programs and involving women with disabilities in reconstruction post disaster are some ways to build back better (World Bank 2022a).

Emerging Practices: Gender-and Disability-Sensitive Disaster Management

- New technologies: Digital technologies can improve the capacity of persons with disabilities and their families and response personnel, community workers, and disaster management authorities to prepare better, respond quickly, and access disaster relief services more easily (<u>Raja 2016</u>).
- Inclusive leadership: Including women with disabilities in disaster management processes and allocating positions of leadership and responsibility to them can better ensure that their needs are addressed but also help change stereotypes and foster positive social perceptions.
- **Cost efficiency:** Integrating disability inclusion into social protection systems to build resilience and into management preparedness and recovery at the outset benefits all affected populations and helps lower the cost versus retrofitting later on (Uzair, Balog-Way, and Koistinen 2021).

Adaptation of Public Buildings Critical to Disaster Response in Romania

WBG Task Teams are increasingly focusing on disability- and gender-inclusive measures to prevent and respond to disasters. For example, in Romania, the <u>Strengthening Disaster Risk</u> <u>Management Project</u> seeks to improve the seismic safety and structural resilience of public buildings that have a critical function in disaster and emergency response, such as fire stations. All new constructions, upgrades, and retrofitting are based on gender- and disability-inclusive design, for example, gender-sensitive dormitories, safe bathrooms and sanitary facilities, and universal access principles. Female professional and volunteer staff using the buildings are direct beneficiaries of the project.

Three Key Questions to Ask during the Project Cycle

- **1.** Data: Are data on populations affected by disaster management and recovery disaggregated by both gender and disability?
- 2. Frameworks: Have national procedures for evacuation, humanitarian assistance, recovery, and reconstruction been informed by women and girls with disabilities? What budget has been allocated to address their needs?
- **3.** Program: Do women and girls with disabilities have access to accessible evacuation and to shelters? Is safety from GBV a consideration for women and girls with disabilities during disasters and in recovery?

Sample Project Indicators

- \oplus Fatality rates during disasters among women and girls with disabilities
- \oplus Share of women and girls with disabilities who have access to evacuation
- ① Number of shelters adjusted to accommodate women and girls with disabilities
- ⊕ Share of women and girls with disabilities receiving humanitarian assistance (water, food, clothes, hygiene kits)
- Number of reported incidents of gender-based violence against women and girls with disabilities during disaster
- ① Number of women and girls with disabilities participating in disaster management planning

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