

Government of the Islamic Republic of Afghanistan

STATUS OF DISABILITY AND VICTIM ASSISTANCE IN AFGHANISTAN

Presented by

H.E. Soraya Paikan, Deputy Minister

MINISTRY OF LABOUR, SOCIAL AFFAIRS,

MARTYRS FAMILIES AND DISABILITY

Geneva, Switzerland

22 June 2011

The Government of the Islamic Republic of Afghanistan

Status of Disability and Victim Assistance in Afghanistan

Presentation by H.E. Mrs. Soraya Paikan, Deputy Minster Martyrs Families and Disability Directorate of the Ministry of Labor, Social Affairs, Martyrs Families and Disability

Geneva Switzerland - June 2011

Thank you giving this rare and important opportunity to the Government of the Islamic Republic of Afghanistan. We appreciate the Co-Chairs and states party members interest in Afghanistan and welcome the opportunity to brief you on our progresses, challenges and priorities for the coming years.

Despite the ongoing conflict in Afghanistan for more than 25 years, activities in support of persons with disability in Afghanistan have been implemented. So when Afghanistan became a state party to the mine ban convention, a robust and active disability sector already existed being lead in various sectors by the ICRC, Handicap International, Swedish Committee for Afghanistan and the United Nations Comprehensive Disabled Afghan's Programme. Prior to these, more than 40 years ago, the first Blind School was set up by an NGO and continues today under government ownership. Formal and non formal coordination mechanisms, technical working groups and community based rehabilitation activities crossing all sectors of disability services were functioning then and are functioning now. Progresses have been made despite the lack of funding and the massive challenges in the disability sector in a country undergoing great change and continued conflict.

Afghanistan's existing disability sector has embraced the concept that integrates victim assistance into the broader sector of disability seeing as only differentiation in actions a funding modality coming from mine action donors. The Government of Afghanistan thanks these donors for their flexibility and vision for it has been mine action funding over the past 5 years that has brought needed technical assistance to the government when others have dropped out. It is Mine Action funding that continues today through the United Nations that supports our efforts as requested by the government for the strengthening of disability services and coordination within the sector across three key ministries in particular, but beyond those assisting with civil society development, Interministerial cooperation and the coordination of disability activities and partner inputs. I take this opportunity to also thank the ISU for their valuable support and advice.

It is also with this support that the Government has been active continually working to ensure the obligations of the mine ban convention are considered when developing strategy and policy within the government structures. This has ensured comprehensive planning with realistic actions based on current capacities, available technical support and financial resources.

Mine victims are not the only groups of people or communities that require support from the Government of Afghanistan. My ministry in particular has the great task to ensure children's rights, the rights of the families of those who have been martyred during conflict, employee rights and access to economic opportunity and training, as well as the rights of persons with disability. This last group is not

just those injured by landmines or ERW, but those disabled during past years of conflict as well as newly disabled due to traffic accident, birth and health related disabilities, cluster munitions incidents, IED and terrorist attacks, and military actions. The Government of Afghanistan must look beyond specific services to specific individuals or communities. We must look broader to ensure all Afghan citizens benefit from what the government does. Our choices to date have embraced these concepts and we believe that our progress within the disability sector over the past 5 years have been immense given our resources.

We own our problems and are slowly taking charge of what we can do and are seeking supports to develop our capacities in areas where we find gaps in both financial and technical resources. The government of Afghanistan is committed to persons with disability and the disability sector. The constitution of the Government of the Islamic Republic of Afghanistan guarantees the rights of persons with disability and has several articles specifically to support this.

Article22: Any kind of discrimination and distinction between the citizens of Afghanistan shall be forbidden. The citizens of Afghanistan, men and women, have equal rights and duties before the law.

Article 53: The state shall adopt necessary measures to regulate medical services as well as financial aid to survivors of martyrs and missing persons, and for the reintegration of the disabled and handicapped and their active participation in society in accordance with provisions of the law.

Article 3: The citizens of the Islamic Republic of Afghanistan have equal rights to education without any kind of discrimination.

And

Article 15: Education of children and adults who need special education and training and due for different reasons are left behind from education and training shall be provided in different educational levels, in accordance with related rules.

In 2006, the Ministry of Foreign Affairs led a process to develop an action plan for victim assistance. The first draft, the Kabul Report was good but considered to be ambitious in some areas and not comprehensive enough in others. So during 2007 and into 2008, government ministries including my own, and the Ministries of Education and Public Health took over the leadership of the process with support from the mine action centre, donors, NGOs and other stakeholders. We produced the Afghanistan National Disability Action Plan or ANDAP. Since 2008, the ANDAP has been the guiding document influencing many ministries as well as implementing partners working within the disability sector. Much has been done in the last 3 years with limited resources and we are very proud of our achievements, but we recognize there are gaps and there will always be challenges. The ANDAP progress report of 2010 is available here in Geneva and upon request via email.

The government has also shown its commitment by passing into law new national legislation specifically outlining its obligations to persons with disability.

Afghanistan is also pleased to announce that in May of this year, both the Cluster Munitions Convention and the Convention on the Rights of Persons with Disability have passed through our lower and upper houses of parliament and are ready for ratification. These actions are the result of efforts from persons with disability and the Government supported by NGOs and the United Nations. Even without the CRPD and the CMC the government has shown its commitment in the following strategy documents developed during the past year in line with our constitution and the Mine ban convention obligations.

From the Ministry of Public Health we have a new four year National Disability and Rehabilitation Strategy. The strategy aims to expand disability services through the basic package of health services and the essential package of hospital services. To do this, skilled professionals both physiotherapists as well as prosthetic and orthotic technicians need to be trained. The Ministry will also need to build and expand its capacity to manage and assure quality of services. The strategy seeks to do both as it improves existing services through standardization and monitoring as well as strengthen referrals mechanisms to NGO supported services during a gradual build up of nationally managed programmes over the next 5-10 years.

Also within the Ministry of Public Health is the National Mental Health Strategy of 2010-2013. This strategy is aimed at strengthening psychological and psychiatric supports for persons dealing with mental health issues at the clinical and community levels. The strategy recognizes that not all mental health issues need clinical interventions but that community based mental health as well as peer supports and psychosocial interventions need to be built. These types of interventions are critical to persons with disability who can suffer from the psychological impact of their disability.

My ministry, the Ministry of Labor, Social Affairs, Martyrs Families and Disability strategy is currently in draft form. We hope to have our new strategy in use by the first quarter of 2012. I can however give you an idea of the Ministry's vision. Our vision is an Afghanistan with decent work for all and an enabling environment with equal rights and opportunities for all the vulnerable groups. My directorate, the Martyrs Families and Disability Directorate will focus on social outreach through the provision of counseling to persons with disability, ensure our pension programme is run efficiently, strengthening civil society cooperation and improving our methods of monitoring and reporting.

Last year, the Ministry of Education developed its National Education Strategic Plan of 2010-2013. This four year strategy prioritizes education for all. The Ministry's vision"...is to develop human capital based on Islamic principles, national and international commitments and respect for human rights by providing equitable access to quality education..." The MoE within its strategy has prioritized inclusive and specialized education to ensure all children including children with disabilities have access to education. It is through these methodologies that embrace inclusive and child friendly education that will "...ensure that all children have equal access to quality education regardless of their gender, age, abilities, disabilities or impairments, health conditions, circumstances, as well as socio-economic, religious, ethnic, and language backgrounds."

To launch inclusive education the MoE and UNESCO supported by MACCA piloted activities and have developed the Road Map Towards Inclusion that provides the guidance for the roll out of Inclusive and

Child Friendly Education methodologies that will ensure children with disabilities, their families and their communities are provided the necessary supports and training to access educational opportunities to their fullest capabilities.

I have given you a general overview of the policy environment, the visions and strategies for the disability sector in Afghanistan from just three ministries, but others are well involved through our interministerial task force on disability.

I would now like to provide you with information regarding some of the challenges we face, our priorities, and our needs.

Access is an issue with both physical and social barriers.

Afghanistan does not have an accessible public or private transport system. However the culture of Afghanistan is enabling and assistance for those in wheelchairs or with other mobility impairments are helped by taxi drivers, bus drivers and individual citizens.

Sidewalks are made accessible in some areas of major cities. However, the reconstruction of major cities is far from complete. This will take time and resources. Outside of the major cities, most small towns and villages do not have paved roads or walkways. This leaves them subject to weather conditions and access can be limited seasonally due to snow or rain.

Afghanistan's Primary transport roads are demined and almost all paved allowing for transit to and from our major cities. According to the Ministry of Public Works, the secondary road system is still under construction. And of the 20,000 kilometers of roads estimated to ensure districts are connected approximately 35% have been paved. This is a long term development activity and will never cease as the country grows and roads require maintenance and repair. Our tertiary roads are not paved, but they are the lifeline connecting village to village and town to town. This system supports goods to market and transport to services. Transport connections are essential for rural Afghans to access health and rehabilitation services. The plans for ensuring rural access are laid, but will take time to implement.

Most public buildings and other facilities were built during an era in which access was not considered a priority. Today however, it is. The Ministry of Education provides donors and building contractors with accessible school building plans and even makes them available on its website. The Ministry of Urban Planning also has accessibility guidelines in national languages and although not all ministries know or comply this will be a task for our Inter-ministerial taskforce on disability to advocate and raise awareness. Donors too forget that access is critical to inclusion, and often fund and approve construction projects that are not designed accessible. Afghanistan like most countries worldwide will have to ensure accessibility for many years to come.

As I noted above, access is both physical and social. Social barriers exist in Afghanistan. Awareness raising activities are ongoing and we recognize that this too will take many years to overcome. The cultural restrictions of women and the continued stigmatization of persons with disability are not issues easily resolved and will not disappear overnight. But we are moving forward through the training of

teachers, medical professionals, child protection officers and our government colleagues. Disability messages have been included in primary school text books as well as mine risk education.

Added to these barriers, is the continued insecurity of our country. This also limits the movement of people and impedes access to services in areas of conflict. Firstly, traveling roads where military activities are nearby can be dangerous and deadly. Second, operating health and rehabilitation services or training and education activities in some areas cannot be done due to threats and violence. Recently the ICRC opened a rehabilitation center in Helmand Province; a volatile area. We are pleased to know our citizens can seek services and encourage others to do the same.

Monitoring and Evaluation is also a challenge in Afghanistan. The ongoing conflict restricts government, NGOs, and the UN from visiting areas of the country to gather information and collect data. However, in areas where we can, we do. We monitor, meet with stakeholders and try to assess the needs and aspirations of people with disabilities. And although there is no national system at this time that pulls together systematically and regularly information about disability services and the beneficiaries, each ministry does have its own mechanisms. The lines of coordination are beginning to spread out connecting the ministries, NGOs, the UN and donors. For example, the Ministry of Public Health has a disability task force that tracks the activities of organizations providing physical rehabilitation services. Monthly numbers with regards to individuals served and the types of services provided is gathered into a data spread sheet. Ministry of Education has data collection methods through its schools, teachers and school principals. And my ministry has data on persons with war related disabilities as part of its pension programme. We also ensure victim data through the Mine Action Coordination Center working closely with our Department of Mine Clearance.

The Ministry of Labor, Social Affairs, Martyrs and Disability is tasked to put all disability related information together for reporting on the status of disability throughout the country. We need to consolidate our methodologies and strengthen the reporting lines to ensure we have the best available information. The coordination of implementing partners is good, but our reporting formats and systems need to be improved. We are looking forward to working with the ISU this year to assist with our monitoring and reporting systems.

Another challenge we face is implementing activities that will expand and improve disability services as well as provide needed outreach to communities. Funding and technical expertise are our greatest challenges. And funding is our greatest need.

Today we have priority projects focusing on disability services that specifically support not only the needs of persons with disability but that build government capacity to manage our services and the skilled labor force required to expand them. These projects include the training of new physiotherapists and prosthetic and orthotic technicians, launching our inclusive education initiatives and upgrading teacher training at the university level, improving community mental health services, expanding opportunities for employment and vocational training, and developing our new action plan in line with our continued obligations to the Mine Ban Convention as well as our new but complementary obligations to the CMC and CRPD.

If we are to reach out to all those who need physiotherapy services, we will need to expand and decentralize our training activities. Currently we have approximate 257 active physiotherapists working throughout Afghanistan serving a population of 27 million. Approximately 20-25 students graduate each year from the MoPH Physiotherapist Training Institute. We need some 775 physiotherapists to provide services just within our Basic Package of Health Services. This will take years at the current training levels. But only 5 if we gain the needed funding for our 5-year plan.

The MoE inclusive education road map elaborates a way of rolling out inclusive teaching methodologies that draw the participation of families and communities into schools to support the dreams and ambitions of children with disabilities. The road map includes building the higher education faculty and departments for both inclusive and special education teacher education. The road map provides for 7 regional centers of learning and technical support to ensure principals and teachers have the needed resources to support new ideas and the challenges they will face. The launch of this programme waits funding.

MoLSAMD seeks to expand its CBR initiatives through standardized training and professionalizing of the workers. We also wish to develop a disability specific Rehabilitation Counseling diploma programme that will develop peer counseling and social work professions specifically for persons with disability. Both initiatives require funding.

Additionally to the previously noted activities, the MoLSAMD wishes to expand its Labor and Vocational Training activities. We need to understand the root causes of unemployment among persons with disability and how we can better prepare people for the workplace. We need to understand what advocacy activities are needed and targeted within the public and private sectors to ensure job preparedness and availability. We also need to explore best practices for entrepreneurial activities among persons with disability and even the possibilities of businesses by and for persons with disability at a larger scale. Our government mandates that 3% of the civil service jobs be held for persons with disability, but filling jobs at all levels is a challenge. Research is needed to help guide us.

With the coming ratification of the CRPD, a large and daunting task is in front of us. We need training, to raise awareness and solidify our monitoring and reporting processes. These things take time as well as dedicated and well trained staff.

To ensure all of the above activities are supported and inputs are provided from civil society we must tap into and promote the talent that exists among persons with disability including landmine survivors. Civil society actors are gaining great strength and their voices are being heard throughout the country. We are listening. We wish to do more, but are limited by the resources at hand. The Government of Afghanistan has asked the United Nations to assist us; they have responded by establishing the Afghanistan Disability Support Programme and are providing us with technical support in three key ministries. Funding for this and other programmes is required if progress is to continue.

I wish to thank our donors, those that support disability services and those that support the government in its efforts to coordinate, expand and ensure quality. I would also like point out that without mine action funding, we might not be where we are today. Thank you very much.