Seventy-fifth session

Item 72 (b) of the provisional agenda*

Promotion and protection of human rights: human rights questions, including alternative approaches for improving the effective enjoyment of human rights and fundamental freedoms

Rights of persons with disabilities

Note by the Secretary-General

The Secretary-General has the honour to transmit to the General Assembly the report of the Special Rapporteur on the rights of persons with disabilities, Catalina Devandas-Aguilar, submitted in accordance with Human Rights Council resolution 35/6.
In the present report, the Special Rapporteur on the rights of persons with disabilities, Catalina Devandas-Aguilar, examines the importance of international cooperation to support the implementation of the rights of persons with disabilities and provides guidance to States on how to ensure that international cooperation is inclusive of and accessible to persons with disabilities.
I. Introduction

1. In the present report, the Special Rapporteur on the rights of persons with disabilities, Catalina Devandas-Aguilar, underscores the progress and challenges in making international cooperation inclusive of and accessible to persons with disabilities and provides guidance to States and other international stakeholders on how to implement disability-inclusive strategies, policies, initiatives and partnerships. Being the final report of the current mandate holder, it includes an overview of her work and achievements over the past six years.

2. In preparing the report, the Special Rapporteur analysed 40 responses to a questionnaire sent to Member States, national human rights institutions and civil society organizations, including organizations of persons with disabilities. She also commissioned a study to assess the extent to which international cooperation was inclusive of and accessible to persons with disabilities, which included surveys and interviews with 26 bilateral and multilateral agencies and 10 private donors. Owing to the coronavirus disease (COVID-19) pandemic, an expert group consultation scheduled for June 2020 had to be cancelled.

II. Overview of the work of the mandate holder

3. Over the past six years, the Special Rapporteur has supported the inclusion of the rights of persons with disabilities at the international, regional and national levels. She did so by undertaking country visits, issuing thematic reports promoting legal and policy reforms, participatory approaches, accountability and disability-inclusive data collection, providing support for and advice to the United Nations system and Member States and sending communications on alleged human rights violations affecting persons with disabilities. She also advocated the disaggregation of data by disability status in the framework for monitoring the implementation of the 2030 Agenda for Sustainable Development.

4. To assess the human rights situation of persons with disabilities, the Special Rapporteur conducted nine country visits at the invitation of the Governments of Canada, the Democratic People’s Republic of Korea, France, Kazakhstan, Kuwait, Norway, Paraguay, the Republic of Moldova and Zambia. Unfortunately, owing to the COVID-19 pandemic, she could not visit Botswana and China as planned.

5. In addition to the present report, the Special Rapporteur issued 10 thematic reports, focusing on social protection, participation in decision-making, disability-inclusive policies, access to rights-based support, sexual and reproductive health and the rights of girls and young women with disabilities, legal capacity and supported decision-making, the right to health, disability-specific forms of deprivation of liberty, older persons with disabilities, and the impact of ableism in medical and scientific practice. Research conducted in preparation for those reports and advocacy work included expert consultations, research studies, literature reviews and discussion papers. She also contributed to the chapter on disability in the United

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Nations global study on children deprived of liberty\textsuperscript{3} and has led the drafting of international principles and guidelines on access to justice for persons with disabilities.\textsuperscript{4}

6. The Special Rapporteur advocated and supported improved coordination and cohesion within the United Nations system to promote the rights of persons with disabilities. She actively promoted a process to strengthen system-wide accessibility, inclusion and mainstreaming of the rights of persons with disabilities in the United Nations. At the request of the Executive Office of the Secretary-General, she conducted a baseline review of United Nations action to mainstream accessibility and disability inclusion, which informed the development of the United Nations Disability Inclusion Strategy adopted in 2019. She also advocated the inclusion of disability as a component of the work of all United Nations human rights treaty bodies and special procedure mandate holders, promoting common strategies for the inclusion of disability in the agendas of other mandate holders. She welcomes the increased attention paid by other experts of the special procedures system to the rights of persons with disabilities.

7. In accordance with the Convention on the Rights of Persons with Disabilities, the Special Rapporteur endeavoured to adopt accessible and participatory methods of work. All her country-specific and thematic reports are available in accessible formats, including Easy Read. She worked in a participatory, consultative and open manner, actively involving persons with disabilities and their organizations in all her endeavours, issuing open calls for input to inform her thematic studies and organizing expert consultations with the participation of a broad range of stakeholders. She also aimed to promote awareness of the rights of persons with disabilities among the general population, through messages and other communications on embracing diversity and disability pride, while combating ableism.\textsuperscript{5}

8. As at 15 July 2020, the Special Rapporteur had sent 148 individual or joint communications to States to bring to their attention information regarding alleged human rights violations or concerns affecting persons with disabilities. Communications sent and replies received are available in the communications reports and in the public communications database of the special procedure mandate holders.\textsuperscript{6}

9. The Special Rapporteur highlights the value of the special procedures system in advancing human rights globally. Serving as the Chair of its Coordination Committee enabled her to understand the reach and potential of mandate holders to achieve transformative change in the lives of the most marginalized. She expresses her deep gratitude to all those who collaborated with her during her mandate, including representatives of Member States, civil society, persons with disabilities and United Nations entities, among many others, without whom her work would not have been possible. Finally, she extends her thanks to staff of the Office of the United Nations High Commissioner for Human Rights and to her office for their continuous support and partnership.

\textsuperscript{3} Manfred Nowak, \textit{United Nations Global Study on Children Deprived of Liberty} (2019).
\textsuperscript{5} See www.embracingdiversity.net.
\textsuperscript{6} See https://spcommreports.ohchr.org.
III. Leaving no one behind: the role of international cooperation in supporting disability inclusion

10. Persons with disabilities are estimated to represent approximately 15 per cent of the world’s population, the majority living in low-income and middle-income countries. They are more likely to live in poverty compared with their peers without disabilities and, owing to structural inequalities linked to attitudinal, environmental and institutional barriers, are less likely to have access to employment, health, education, social protection and other services. Persons with disabilities also experience multiple and intersecting forms of discrimination and oppression. Women with disabilities are more likely to be poor or unemployed or lack adequate support than men with disabilities. In conflict and emergency situations, persons with disabilities are often among the most adversely affected, sustaining disproportionately higher rates of morbidity and mortality. The adverse impacts of climate change are also likely to be experienced more severely by persons with disabilities (see A/HRC/44/30).

11. The COVID-19 pandemic is deepening pre-existing inequalities and having a severe impact on the gains made in the past decades on the rights and inclusion of persons with disabilities. Persons with disabilities are among those most affected by COVID-19, experiencing a greater risk of both contracting and dying from the virus. They are further disadvantaged by the socioeconomic consequences of the pandemic and government responses. Social care institutions, nursing homes, psychiatric facilities and group homes, where persons with disabilities are often institutionalized, have been hit particularly hard by COVID-19. Advancing the rights of persons with disabilities and ensuring their inclusion in global development and humanitarian action are thus essential. As the international community reflects on the processes of recovery and building back better, it is necessary to ensure the provision of disability-inclusive investments and policies and to translate them into universally designed systems, inclusive economies and communities that guarantee equal opportunities for all, including persons with disabilities and their families.

12. Disability-inclusive responses and policies are critical to enabling persons with disabilities to participate in and benefit from development and humanitarian outcomes and processes (see A/71/314). That entails considering disability-related issues and, where appropriate, disability-specific measures in all public policies and programmes. It also entails enabling the meaningful participation of persons with disabilities through the design, implementation, monitoring and evaluation of such policies and programmes. Moreover, the inclusion of persons with disabilities in development and humanitarian action demands a human rights-based approach to disability, which means adhering to and promoting international human rights norms and standards, including the Convention on the Rights of Persons with Disabilities.

13. The adoption of the Convention by the General Assembly in 2006 paved the way for the inclusion of persons with disabilities in the development agenda and

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8 *Disability and Development Report: Realizing the Sustainable Development Goals by, for and with Persons with Disabilities* (United Nations publication, Sales No. 19.IV.4).
humanitarian action. Unlike the Millennium Development Goals, the 2030 Agenda is inclusive of persons with disabilities, with explicit references to them in several of the targets. While some Sustainable Development Goals and targets do not contain explicit references to disability, all of them must be met for persons with disabilities, given the overarching commitment to leaving no one behind. The Addis Ababa Action Agenda of the Third International Conference on Financing for Development and the Sendai Framework for Disaster Risk Reduction 2015–2030 are also inclusive of persons with disabilities, given that they are explicitly referenced in both frameworks.

14. New commitments to rendering humanitarian action inclusive of persons with disabilities have been adopted in recent years. In 2016, in the context of the World Humanitarian Summit, over 70 stakeholders, including States, United Nations entities, civil society and organizations of persons with disabilities, endorsed the Charter on Inclusion of Persons with Disabilities in Humanitarian Action. In 2019, the Security Council adopted a landmark resolution on the situation of persons with disabilities in armed conflict and humanitarian crises (resolution 2475 (2019)), in which it called upon Member States and parties to armed conflict to protect persons with disabilities in conflict situations and ensure that they had access to justice, basic services and unimpeded humanitarian assistance. Also in 2019, the Inter-Agency Standing Committee adopted its first set of guidelines on the inclusion of persons with disabilities in humanitarian action.12

15. Underpinned by the Convention on the Rights of Persons with Disabilities and the 2030 Agenda, the United Nations system has started to strengthen its focus on disability inclusion. In 2019, the Secretary-General launched the United Nations Disability Inclusion Strategy, which provides the foundation for sustainable and transformative change on disability inclusion through all pillars of the work of the Organization. The Strategy was informed by an institutional review led by the Special Rapporteur and includes a policy and an accountability framework, with benchmarks to assess progress and accelerate change on disability inclusion. It is expected that the Strategy will help all United Nations entities to systematically include the rights of persons with disabilities in their work, both externally and internally.

16. Against that background, international cooperation becomes a key element in supporting disability inclusion and achieving the enjoyment of all rights by all persons with disabilities. As stated in articles 1 (3), 55 and 56 of the Charter of the United Nations, Member States have committed themselves to achieving international cooperation in order to promote and encourage respect for human rights. While States bear the primary responsibility for their own economic and social development and international obligations, the international community has a shared responsibility to support and facilitate national efforts for the realization of all human rights, including the rights of persons with disabilities.

17. International cooperation, including South-South and triangular cooperation, is key for disability-inclusive development and humanitarian action. It is needed to ensure that sufficient means of implementation exist to provide countries with the opportunity to achieve the rights and inclusion of persons with disabilities. Without disability-inclusive international cooperation, the Sustainable Development Goals are not achievable. Through financing, technical assistance and knowledge-sharing, international cooperation can support States in developing the will and capacities necessary for disability inclusion and further strengthen the capacity of persons with disabilities and their organizations to hold States accountable and to engage in advocacy on policy. By working together, States, international actors and organizations of persons with disabilities can ensure that resources are distributed

fairly and that persons with disabilities truly benefit from and participate in
development and humanitarian action on the ground.

18. International cooperation includes a wide range of activities between States,
such as development assistance, humanitarian aid, economic and trade cooperation,
military aid, counter-terrorism, peacebuilding assistance and cultural exchanges. The
present report is focused exclusively on development assistance, including
humanitarian aid, and on how bilateral and multilateral agencies, as well as private
donors and foundations, transfer financial support and technical expertise for
disability inclusion.¹³

IV. International cooperation in the Convention on the Rights
of Persons with Disabilities

19. The Convention on the Rights of Persons with Disabilities is the first human
dights treaty to include a stand-alone provision on international cooperation. In article
32 of the Convention, the role of international cooperation in supporting national
efforts for the full realization of the rights of persons with disabilities is underlined.
Previously, the Charter of the United Nations (art. 1) and human rights instruments
such as the Universal Declaration of Human Rights (art. 22), the International
Covenant on Economic Social and Cultural Rights (art. 2) and the Convention on the
Rights of the Child (arts. 4, 17, 23, 24 and 28) contained references to international
cooperation only in relation to the implementation of economic, social and cultural
rights.¹⁴

20. International cooperation is referred to in several provisions of the Convention.
The importance of such cooperation in improving living conditions and in the
progressive realization of economic, social and cultural rights is recognized in the
preamble (1) and in article 4 (2). Articles 32, 37 and 38 contain broader references to
the role of international cooperation in supporting the implementation of the entire
treaty. While each State party has primary responsibility for implementing its
obligations under the Convention, article 32 marks a step forward in recognizing the
obligation of States to take appropriate and effective measures
in the context of
international cooperation to support national efforts to realize the purpose and
objectives of the Convention.

21. Furthermore, the important role of international and regional organizations, civil
society organizations and, in particular, organizations of persons with disabilities in
cooperating internationally through partnerships to give effect to the Convention is
recognized therein. In that connection, international, regional and non-governmental
actors also bear an obligation to respect human rights. With regard to United Nations
entities, while they are not formally bound by the Convention, they have an obligation
to promote and encourage respect for human rights for all, without distinction, in the
light of the Charter. In the case of persons with disabilities, that commitment is
reinforced through the 2030 Agenda and the United Nations Disability Inclusion
Strategy. Similarly, international non-State actors, including international
non-governmental organizations, private donors and multinational corporations, are
required to respect the rights of persons with disabilities, although they are not

¹³ For the Organization for Economic Cooperation and Development, humanitarian aid is
considered a sector of official development assistance, which includes disaster prevention and
preparedness, reconstruction relief, relief coordination, protection and support services,
emergency food aid and other emergency or distress relief.

¹⁴ See also General Assembly resolution 48/96, annex (Standard Rules on the Equalization of
Opportunities for Persons with Disabilities, rules 21–22), adopted on 20 December 1993, a
significant antecedent to article 32 of the Convention on the Rights of Persons with Disabilities.
directly bound by the Convention. The responsibility of States parties in protecting individuals and groups from private, non-State actors has systematically been acknowledged in international human rights law. In article 4 (1) (e) of the Convention, States parties are called upon to take all appropriate measures to eliminate discrimination on the basis of disability by any person, organization or private enterprise.

22. Article 32 (1) of the Convention contains a non-exhaustive list of four key measures that could support the realization of the rights of persons with disabilities through international cooperation. First, States should ensure that international cooperation, including international development programmes, is inclusive of and accessible to persons with disabilities (art. 32 (1) (a)). Inclusion is a principle of the Convention that, in the context of international cooperation, involves overcoming structural barriers to enable persons with disabilities to participate in and benefit from international cooperation processes and outcomes on an equal basis with others. Accordingly, it demands a commitment to the inclusion of persons with disabilities and the adoption of corresponding targets. That requires mainstreaming disability into all international cooperation efforts, in addition to disability-specific initiatives, as well as the meaningful participation of persons with disabilities and their organizations in all stages of international cooperation.

23. Second, States should facilitate and support capacity-building, including through the exchange of training programmes and best practices (art. 32 (1) (b)). Capacity-building is a key means of delivering disability-inclusive international cooperation. As the lack of understanding and capacities remains a significant barrier to inclusion, States should first increase their own internal capacity and support efforts in order to build the capacities of their partners. Capacity-building efforts must be accessible and conducted with the active participation of persons with disabilities and their organizations.

24. Third, States should facilitate cooperation in research and access to scientific and technical knowledge to promote the inclusion of persons with disabilities (art. 32 (1) (c)). Research is an indispensable tool for providing evidence-based solutions to overcome inequalities and barriers experienced by persons with disabilities in society, and is also referred to in articles 4 (1) (f) and (g) and 31 (1) of the Convention. Research can help Governments, civil society and international cooperation actors to achieve better outcomes for persons with disabilities. To contribute to disability inclusion, research must be guided by a rights-based approach to disability. Furthermore, the data collected should be disaggregated by disability to help to assess the implementation of States’ obligations under the Convention (art. 31 (2)).

25. Fourth, States should provide technical and economic assistance, including by enabling access to and sharing of assistive technologies and through the transfer of technologies to benefit persons with disabilities (art. 32 (1) (d)). Accessible and assistive technologies are important resources for advancing the inclusion of persons with disabilities. Consequently, the Convention goes beyond the traditional focus of

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15 See, for example, Human Rights Committee, general comment No. 18 (1989) on non-discrimination, para. 9, and general comment No. 28 (2000) on the equality of rights between men and women, para. 31; Committee on Economic, Social and Cultural Rights, general comment No. 20 (2009) on non-discrimination in economic, social and cultural rights, para. 11, and general comment No. 24 (2017) on State obligations under the International Covenant on Economic, Social and Cultural Rights in the context of business activities, para. 7; Committee on the Elimination of Discrimination against Women, general recommendation No. 28 (2010) on the core obligations of States parties under article 2 of the Convention, para. 9; and Committee on the Rights of Persons with Disabilities, general comment No. 6 (2018) on equality and non-discrimination, para. 13.
international cooperation on capacity-building, making the role of research and technology, as components of international cooperation, visible.

26. In addition, international cooperation must be consistent with the human rights-based approach to disability provided for in the Convention. Accordingly, it should move away from charitable and medical models to a rights-based approach, in which persons with disabilities are considered rights holders, rather than mere recipients of charity, protection or care. Primary prevention of health conditions and impairments falls outside the scope of the Convention. All international cooperation efforts must uphold and promote human rights norms and standards, such as non-discrimination, accessibility, participation and accountability (see A/71/314).

27. International cooperation must respect the principle of non-discrimination. In that regard, it is important to support national efforts to advance legislation and policies on non-discrimination,\(^{16}\) prohibit discrimination on the basis of disability and provide reasonable accommodation. Furthermore, international cooperation should not create barriers or promote discrimination against persons with disabilities, including in its multiple and intersecting forms, which has a negative impact on the most excluded among persons with disabilities. For example, investing resources in the development of new segregated settings, such as special schools or institutions, is not acceptable.\(^{17}\) Moreover, international cooperation efforts should embrace diversity, by promoting public awareness of the capabilities and contributions of all persons with disabilities and by accepting them as part of human diversity.

28. Accessibility is another important principle of the Convention, enshrined in article 9. In the context of international cooperation, it means that all international cooperation processes and outcomes must be accessible, so as to enable the inclusion of persons with disabilities. Accessibility measures need to be broad in scope to enable access and use by all persons with disabilities, as well as to meet universal design requirements and accessibility standards. Specific examples of accessible international cooperation include building facilities without physical barriers, including accessibility standards in procurement contracts and making information, communication and materials available in alternative formats to facilitate consultations with persons with disabilities in all stages of the programme cycle.

29. International cooperation should promote the meaningful participation of persons with disabilities, given that they know best the barriers that they face and the impact that such barriers have on their lives. Accordingly, they and their organizations must be consulted and actively involved at every level of the development, implementation and monitoring of international cooperation plans, programmes and projects.\(^{18}\) Involving persons with disabilities in decision-making processes is fundamental, not only because it results in better decisions and more efficient outcomes, but also because it promotes agency and empowerment (see A/HRC/31/62, para. 28). In that way, persons with disabilities would be both agents and beneficiaries of development aid.

30. Accountability is also a critical component of a rights-based approach to disability in international cooperation initiatives and should be integrated into all stages in the policy cycle. Accountability frameworks, policies and mechanisms must be in place to ensure that the decision-making processes, actions and outcomes of international cooperation actors are oriented towards disability inclusion. This

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\(^{16}\) Committee on the Rights of Persons with Disabilities, general comment No. 6, para. 72.

\(^{17}\) Committee on the Rights of Persons with Disabilities, general comment No. 5 (2017) on living independently and being included in the community, para. 96.

\(^{18}\) Committee on the Rights of Persons with Disabilities, general comment No. 7 (2018) on the participation of persons with disabilities, including children with disabilities, through their representative organizations, in the implementation and monitoring of the Convention, para. 92.
requires the identification of duty bearers, the allocation of responsibilities, the adoption of human rights indicators with specific benchmarks and targets\textsuperscript{19} and the collection of disaggregated data to measure progress and monitor the impact of international cooperation on achieving the inclusion of persons with disabilities.

31. Research shows that article 32 of the Convention is often underreported in State parties’ reports to the Committee on the Rights of Persons with Disabilities.\textsuperscript{20} That lack of reporting, including on mainstream development programmes, reveals the need for further guidance. In its concluding observations, the Committee has recommended that States mainstream the rights of persons with disabilities into the implementation and monitoring of the Sustainable Development Goals and that all international cooperation efforts are fully inclusive of persons with disabilities, from the design of programmes and policies to implementation, monitoring and evaluation. Furthermore, the Committee has recommended that States, jointly with international development actors, systematically and meaningfully consult organizations of persons with disabilities.\textsuperscript{21}

V. Progress and challenges in donors’ approach to disability-inclusive international cooperation

32. Since the Convention on the Rights of Persons with Disabilities was adopted, bilateral and multilateral donors and agencies, the private sector and foundations have increasingly endeavoured to address disability inclusion in their work. However, the extent and breadth of inclusive strategies, policies, initiatives and programmes vary significantly by donor. The present section reflects the Special Rapporteur’s findings on the current state of affairs in relation to how donors include disability in their international cooperation efforts.

A. Policy development and strategic planning

33. According to the information gathered, most donors do not have specific strategies, policies or guidelines that directly address the inclusion of persons with disabilities. Of the bilateral donors, multilateral agencies and private donors sampled for the present report, only one third reported having a disability-specific strategy, policy or other similar type of commitment. Compared with a research study carried out in 2018, in which it was estimated that 9 per cent of bilateral and multilateral donors had disability-specific policies, this represents an increase.\textsuperscript{22} Although the increase reflects a positive trend, the Special Rapporteur remains concerned by the small number of specific policies on disability. The current strategies of the Department of Foreign Affairs and Trade of Australia, the Department for International Development of the United Kingdom of Great Britain and Northern


\textsuperscript{20} Andrea Shettle, Anne Hayes and Isabel Hodge, “Stakeholders’ understanding and monitoring of the implementation of CRPD article 32”, June 2018.

\textsuperscript{21} See, for instance, CRPD/C/RWA/CO/1, para. 60; CRPD/C/AUS/CO/2-3, para. 60; CRPD/C/ESP/CO/2-3, para. 61; and CRPD/C/URY/CO/1, para. 66.

\textsuperscript{22} Andrea Shettle, Anne Hayes and Isabel Hodge, “International development: disability policy and practice”, 2018.
Ireland and the World Bank provide strong examples of disability-specific strategic documents.23

34. While the number of disability-specific strategies or policies is relatively low, many donors are increasingly mainstreaming disability into their broader policies and strategies. The majority of donors reported that disability inclusion was emphasized in their general strategic documents or policies. However, a closer review of the policies and plans shows that one third did not contain any references to persons with disabilities. Some donors do not refer to disability as part of their overarching strategy, but only in sectoral thematic strategies, such as on education. In addition, 45 per cent of the policies reviewed addressed persons with disabilities only as part of “vulnerable groups”, without considering disability inclusion per se. It is important to stress that including persons with disabilities in the category of marginalized or vulnerable groups often results in their exclusion from actual programming.24 Thus, a general commitment to disability inclusion without paying attention to the specific situation and needs of persons with disabilities will most likely result in the group being overlooked.

35. The adoption of the Convention has been a catalyst for the increased attention given to disability inclusion in policy development and strategic planning. In fact, 67 per cent of the disability-specific or disability-inclusive policies reviewed are expressly based on the principles of the Convention. Moreover, the majority of such policies were developed after 2018, suggesting that references to persons with disabilities contained in the Sustainable Development Goals and the organization of the first Global Disability Summit, held in 2018, both strongly linked to the Convention, may have played an important role.

36. Some donors focused on developing guidance and building internal capacity around disability inclusion in general, instead of devising a disability-specific strategy or policy. Without denying the importance of such actions, they are insufficient to achieve systemic change, since a strategic framework is needed to provide direction and focus on disability inclusion. The Department for International Development of the United Kingdom and the World Bank have adopted a twin-track approach, whereby they have put in place disability-specific strategies and have mainstreamed disability into broader policy documents. This constitutes good practice, since it provides an overall clear commitment to disability inclusion while ensuring that such a commitment is not compartmentalized, but mainstreamed across all key thematic areas.

B. Programming

37. Bilateral, multilateral and private donors have taken steps to strengthen disability inclusion in mainstream and disability-specific programmes. The majority of donors reported having both disability-specific programmes and other programmes that are inclusive of persons with disabilities. Moreover, most bilateral donors adopted internal processes to strengthen the inclusion of disability in mainstream programmes. In one example of a good practice, the United States Agency for


24 Anne Hayes and Shauna Caria, “How USAID’s solicitations and resulting awards include underrepresented groups”, briefing paper, May 2019.
International Development requires that its programmes guarantee the accessibility of any construction that they fund directly.

38. Most programmes targeting persons with disabilities are focused on social protection, economic empowerment, education, urban development and humanitarian activities, followed by access to justice, participation and health. However, disability inclusion in other pressing areas, such as climate change, disaster risk reduction and food insecurity, deserves greater attention. In addition, while donors are increasingly acknowledging the importance of disability inclusion, few are setting targets, especially in education.\(^{25}\) It is also of concern that several funding opportunities primarily address persons with sensory and physical impairments, while little attention is paid to other groups of persons with disabilities. For example, in a recent study, it was shown that only 1.3 per cent of all disability-relevant development assistance included persons with intellectual disabilities.\(^{26}\)

39. Several donors continue to invest in programmes and projects contrary to the rights of persons with disabilities. While it is encouraging to note an increase in investment in programmes on inclusive education, in practice many continue to support the functioning of segregated schools and classrooms.\(^{27}\) Similarly, it is alarming that funding that in principle is intended for deinstitutionalization processes and for community-based support continues to be allocated to building and maintaining institutions, including smaller facilities, such as small group homes. Therefore, training is required so that donors ensure that all their programmes comply with the Convention.

40. Although most donors report having some sort of disability programming, it has been revealed through research that full disability inclusion in programming has yet to be achieved and that existing interventions are minimal compared with the inclusion of other marginalized groups. Reports on programming often do not contain references to persons with disabilities, in contrast with other groups in vulnerable situations who are included and, thus, most likely to be addressed in activities. For example, a review of the overall active World Bank portfolio in 2016 showed that disability-inclusive programmes accounted for only 2 per cent of the Bank’s programmes.\(^{28}\) Furthermore, guidance notes produced by bilateral, multilateral or private donors are not sufficiently disseminated and seem to lack prominence, applicability or monitoring, thus limiting their impact. Donor-supported programmes are yet to be designed and implemented in a way that takes into consideration the needs of persons with disabilities.

C. Resource allocation

41. Although comprehensive comparative data are unavailable, initial evidence collected for the present report suggests that disability-specific programmes are significantly underfunded, receiving less than 1 per cent of donor funding. A review of the Development Assistance Committee Creditor Reporting System projects of the Organization for Economic Cooperation and Development suggests that, between 2014 and 2018, less than 0.2 per cent of all international aid was allocated to projects


\(^{26}\) Inclusion International, “Excluded from the excluded: people with intellectual disabilities in (and out of) official development assistance” (forthcoming).

\(^{27}\) Ibid.

\(^{28}\) Valerie L. Karr and others, “No one left behind: a review of disability inclusive development efforts at the World Bank”, *Knowledge Management for Development Journal*, vol. 12, No. 2 (2016).
supporting persons with disabilities as a primary objective. That means that, of every $100, only $0.20 is allocated for persons with disabilities. When including projects with a significant objective of assisting or empowering persons with disabilities, such spending represented between 1.3 and 1.9 per cent annually over the same period. While in 2018 a total of $3.6 billion was identified by donors as disability-relevant aid, only one quarter of it was used to promote disability inclusion or was compliant with the Convention. Since there are no consistent ways to track disability-specific and disability-inclusive funding, it is not possible to accurately measure the percentage of total donor funding allocated to such programmes.

42. Some donors reported considerable efforts to increase funding for disability inclusion projects. For example, Finland consistently allocates a comparatively significant share of its official development assistance to disability inclusion, at least 2 per cent of its total funding. Private donors are also progressively increasing their funding, with approximately 2 per cent of human rights funding allocated to disability. For example, the Ford Foundation indicated that it commits between 4 and 5 per cent of its annual budget to disability-specific or disability-inclusive programmes, while the Nippon Foundation reported committing 1.5 per cent.

43. In 2018, the Development Assistance Committee introduced a voluntary disability policy marker to track development finance that promotes the inclusion and empowerment of persons with disabilities. Under the marker, development cooperation activities are identified as “principal,” “significant” or “not targeted”, depending on how much they are focused on disability inclusion. Given that less than one third of all official development assistance has been assessed against the marker, uptake is not yet complete, although it is expected to grow over the coming years. Currently, 47 bilateral donors use or are introducing the disability marker, which constitutes good practice and is a good indicator to alert donors of projects at risk of leaving persons with disabilities behind.

D. Participation

44. While there is growing recognition of the importance of consulting and engaging with organizations of persons with disabilities for policy and programme development, there is minimal literature available on whether and how such consultations take place in the area of international cooperation. That makes it difficult to assess how meaningful the involvement of persons with disabilities is and whether their engagement leads to more inclusive planning and programming.

45. The International Disability Alliance, in a global survey conducted in 2019, reported that approximately half of respondent organizations of persons with disabilities had engaged with funding agencies formally or informally. Nevertheless, responses suggested that respondents had limited knowledge of the funding agencies, and their participation and consultation were primarily related to obtaining access to funding. The Alliance also found that persons with visual, hearing or physical disabilities were more likely to engage with donors compared with other groups of persons with disabilities. It was indicated in contributions to the present report that

donors did not have a consistent strategy to consult and engage meaningfully with persons with disabilities and their organizations. Some donors engage regularly with the Alliance as a global organization, while others directly consult organizations of persons with disabilities in their own countries and/or in recipient countries.

46. Nordic countries have adopted a strong participatory model of international cooperation, which provides a good framework for the sustained participation of organizations of persons with disabilities in decision-making and implementation. For example, in Denmark, Finland, Norway and Sweden, funding for disability-related international cooperation is partly channelled through national organizations of persons with disabilities in those countries, which then provide grants and technical assistance to grass-roots organizations in low-income and middle-income countries.\(^{33}\) This model is an example of good practice that promotes international partnerships between disability organizations in the global North and the global South. In Spain, Grupo Social ONCE, an organization led by persons with disabilities, supports the inclusion and autonomy of blind persons and other persons with disabilities.

47. Private donors and foundations also developed good practices that demonstrate the importance of the active participation of persons with disabilities in grant-making. For example, the Disability Rights Fund and the Disability Rights Advocacy Fund support organizations of persons with disabilities to advocate their rights and inclusive development through a participatory grant-making scheme, which includes the participation of persons with disabilities on the board and the grant-making committee. Private donors such as Open Society Foundations and Wellspring Advisors have also played a key role in supporting the development and work of international, regional and local organizations of persons with disabilities. Funding for disability inclusion should directly support the work of such organizations, without intermediaries, enabling them to be active participants in transforming their own communities.

E. Accountability and evaluation

48. Some bilateral and multilateral donors have implemented accountability policies and frameworks to track progress on their strategic priorities. For example, the Department for International Development of the United Kingdom has established an inclusion delivery board to ensure senior-level responsibility for the implementation of its disability strategy. The World Bank has adopted a disability inclusion and accountability framework in addition to including persons with disabilities as a category of disadvantaged or vulnerable individuals or groups in its Environmental and Social Framework. The Asian Infrastructure Investment Bank has included persons with disabilities in its Environmental and Social Framework, requiring clients to address the risks and impact of projects on vulnerable groups, including persons with disabilities. That entails carrying out consultations in an inclusive and accessible manner, including by providing information in an understandable and readily accessible form, using the principles of universal design in the construction of new facilities and adopting accessible grievance redress mechanisms. However, in a recent review of due diligence documents for the stand-

\(^{33}\) See, for example, the work carried out by the Disabled People’s Organisations Denmark, Abilis Foundation (Finland), Disability Partnership Finland, Atlas Alliance (Norway) and My Right (Sweden).
alone projects of the Asian Infrastructure Investment Bank, significant gaps were
demronstrated, as was a lack of consistency in compliance with its Framework. 34

49. While there are substantial knowledge gaps in donors’ understanding of what
works in terms of disability inclusion, their evaluation processes do not appear to be
set up to systematically improve the evidence base. For example, 60 per cent of
donors sampled reported conducting inclusive evaluations, of which only 40 per cent
had policies regarding disability in programme evaluations. While most bilateral
donors highlighted that their programme evaluations were focused on effectiveness
and impact, none appeared to have made disability a mandatory component of
programme evaluations. The lack of data disaggregated by disability is a major
limitation for the evaluation of disability-inclusive programmes. Only half of the
donors evaluated disaggregate data on the basis of disability. This means that, while
programmes that target persons with disabilities may be evaluated through a disability
lens, that is not the case for disability-inclusive mainstream programmes. Moreover,
only 40 per cent of the donors sampled track disability in their online databases.

50. Some bilateral donors evaluated their broader portfolio of disability-inclusive
work or had it independently reviewed. This was the case, for example, of the
Norwegian Agency for Development Cooperation, the Department for International
Development of the United Kingdom, the Department of Foreign Affairs and Trade
of Australia, the Italian Agency for Development Cooperation and the United States
Agency for International Development. There is a dearth of information on how
effectively broader programmes include persons with disabilities.

F. Research

51. Donors are starting to undertake or scale up disability-specific and mainstream
research to collect data regarding persons with disabilities, but much remains to be
done. Only one third of donors reported undertaking or funding research focused on
disability, with very little information on how broader research programmes are
focused on persons with disabilities. Current programmes focused on disability are
limited and not reflected in broader research strategies. Most bilateral donors and
multilateral agencies do not have coherent research strategies on disability inclusion,
nor do they mainstream disability into research strategies. Donors typically do not set
requirements regarding the inclusion of persons with disabilities, including data and
findings disaggregated by disability. Only the Luxembourg Agency for Development
Cooperation requires the inclusion of persons with disabilities in research proposals.
Research on international cooperation carried out by research centres and universities
is also not disability-inclusive.

52. There is a clear need to apply a rights-based approach to disability in research.
Donors do not set or require safeguards regarding the participation of persons with
disabilities, enabling researchers to easily overlook the rights of such persons.
Discriminatory ethical approval requirements can also hinder efforts to include
persons with disabilities in research, by denying their legal capacity to give consent
to or refuse their participation. In addition, organizations of persons with disabilities
strongly sense that their involvement in research is often tokenistic and limited to
having access to it, without genuinely engaging in data collection, grant management
or governance. Consequently, the voices of and data regarding persons with
disabilities are broadly absent from mainstream research, despite persons with

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34 Bank Information Centre, “Inclusion of people with disabilities in AIIB-funded infrastructure
projects: an analysis of due diligence documentation for AIIB stand-alone projects”, January
2019.
disabilities often being part of the research cohort and/or ultimately being among the intended beneficiaries of action emerging from the research findings.

53. The need for greater investment in disability-inclusive research and high-quality data is largely justified. The COVID-19 pandemic has exacerbated the need for evidence on how to ensure that response and recovery processes are inclusive of persons with disabilities and their families. However, recent evidence and mapping of gaps show that the quality and quantity of research on disability inclusion remain very limited, and a broad, fundamental need for research remains. Furthermore, there is overemphasis on research related to health, including health prevention, to the detriment of areas such as economic inclusion, support needs, empowerment and intersecting discrimination. There is also very limited disability research in low-income countries, reflecting a clear geographical imbalance. Generally, there is a need for high-quality evidence to guide the implementation of the Convention, in particular on the basis of applied and operational research.

G. Capacity-building

54. Most bilateral donors and multilateral agencies are taking steps to build their internal capacity on disability rights inclusion, primarily through the development and implementation of staff training on disability-inclusive development. For example, the Japan International Cooperation Agency provides mandatory online training for its staff on disability inclusion and non-discrimination. The Inter-American Development Bank has conducted several broader training sessions on the Convention on the Rights of Persons with Disabilities. Other broader efforts to build internal capacity are focused on helping staff to apply a human rights-based approach and a non-discrimination lens, rather than on disability-specific knowledge. Many bilateral donors and multilateral agencies build the capacity of their partners and key external stakeholders, as well as organizations of persons with disabilities.

55. In addition to training, some donors employ innovative practices to increase staff technical capacity. For example, the Swedish International Development Cooperation Agency disseminates learning materials by email and the intranet, and Dubai Cares conducts “deep-dive” monitoring visits to all its programmes, sharing information in meetings and lunchtime seminars and documenting it in monitoring and evaluation reports. The Department of Foreign Affairs and Trade of Australia disseminates information through its disability focal points and the intranet. Many bilateral donors and multilateral agencies also rely on peer learning to build internal capacity, including through lunchtime meetings and communities of practice.

56. Although donors make significant efforts to build their internal capacity, half of respondents indicate that they still lack the internal capacity and expertise to advance the rights of persons with disabilities. Some bilateral donors and multilateral agencies do not have technical focal points on disability, which affects the broader focus on disability inclusion. In some instances, staff who make funding decisions or design programmes have a good understanding of disability, but those who support the implementation of projects do not, or vice versa. Some donors have gaps in specific sectors that are starting to focus on disability inclusion, such as inclusive procurement, disaster risk reduction and climate change, showing that niche expertise is still required. Furthermore, efforts to recruit more persons with disabilities to

ensure that donor organizations are inclusive and that staff with lived experiences of disability help to shape better programmes and initiatives remain largely insufficient.

H. Multi-stakeholder partnerships

57. Effective multi-stakeholder partnerships can support the implementation of the rights of persons with disabilities by bringing together different sectors, approaches and complementary resources. Since the Convention on the Rights of Persons with Disabilities was adopted, multi-stakeholder partnerships have been created to collaborate on disability inclusion in the development and humanitarian agendas. In 2011, upon the advocacy of the International Disability Alliance, the United Nations Partnership to Promote the Rights of Persons with Disabilities was established to support the implementation of the Convention, by facilitating coalition-building and capacity development at the country, regional and global levels. The Partnership provides funding to United Nations entities to conduct joint programming on disability issues prioritized by local actors, including relevant authorities and organizations of persons with disabilities. Since 2012, the Partnership has funded 39 joint programming initiatives amounting to approximately $350,000 per country, in addition to three regional and seven global projects. Although funding for the Partnership has increased steadily over the years, this represents only 0.3 per cent of the total funds provided by bilateral donors within the various multi-donor trust funds.

58. The Global Action on Disability Network, launched in 2015, is a coordination body of bilateral and multilateral donors and agencies, the private sector and foundations working to enhance the inclusion of persons with disabilities in international development and humanitarian action. It is a unique and valuable space for knowledge-sharing and coordination among donors and the disability community, which helps to create awareness of and an appetite for disability-inclusive international cooperation among donors, while providing practical guidance for successful disability inclusion. The Special Rapporteur welcomes the initiative and encourages donors and other partners to continue to strengthen the Network so that it can fulfil its potential and deliver critical guidance and support to its members.

59. The Global Disability Summit held in 2018, which was organized jointly by the Department for International Development of the United Kingdom, the Government of Kenya and the International Disability Alliance, is another good example of multi-stakeholder partnership to promote disability-inclusive international cooperation. At the Summit, 968 substantial and wide-ranging commitments on disability rights inclusion were made, and over 300 States and intergovernmental and private organizations signed the Charter for Change, calling for focused implementation of the Convention. The event was a milestone for disability-inclusive development and humanitarian action. In that regard, it is positive to note that Argentina hosted a follow-up event for Latin America in 2019, and that Norway will host the next Global Disability Summit, in 2021.

VI. Ensuring disability-inclusive and accessible international cooperation

60. States can take measures to ensure disability-inclusive and accessible international cooperation, including by mainstreaming disability into all their international cooperation efforts, adopting a human rights-based approach to
disability, improving implementation, monitoring, participation, accountability and research on disability and mobilizing greater resources for disability inclusion.

A. Disability mainstreaming and targeted action

61. Both mainstream and targeted efforts are essential to securing disability-inclusive international cooperation. States should mainstream disability inclusion into all their policies and programmes on international cooperation, including those that target groups other than persons with disabilities. At the same time, States need to implement disability-specific policies, programmes and initiatives to ensure the rights and inclusion of persons with disabilities in all aspects of development and humanitarian cooperation. Such a combination of mainstream and targeted measures is essential to ensure the systematic inclusion of persons with disabilities. International cooperation must contribute to the promotion of disability inclusion across all sectors, including development, humanitarian action, human rights and climate change action. Importantly, disability must be mainstreamed into all COVID-19 recovery responses, together with targeted action, to ensure the systematic inclusion of persons with disabilities and to build back better.

62. States should adopt a clear policy framework for the inclusion of persons with disabilities across all international cooperation efforts. In fact, policy development and strategic planning on disability inclusion provide a clear public commitment to persons with disabilities, as well as a valuable reference point to monitor how disability inclusion is progressively realized. For that purpose, States should consider adopting strategies or policies that directly address the inclusion of persons with disabilities in international cooperation, as well as mainstreaming disability within broader strategies. When persons with disabilities are referred to only in general strategies and policies or are simply considered part of groups in a vulnerable situation, there is a high risk that their rights and needs will not be considered when development or humanitarian efforts are implemented.

B. Ensuring a human rights-based approach

63. International cooperation must follow a human rights-based approach, guaranteeing that international cooperation efforts are anchored in a system of rights and corresponding obligations established by international human rights law. In particular, international cooperation must uphold and promote the rights-based approach to disability enshrined in the Convention on the Rights of Persons with Disabilities. International cooperation related to primary prevention policies, while being an important component of global health, cannot be considered part of the efforts to promote the rights of persons with disabilities (see A/73/161, para. 8). Furthermore, under no circumstances should international cooperation undermine the rights of persons with disabilities, segregate them or create or exacerbate barriers. For example, the COVID-19 pandemic has shown once again that institutions can be deathtraps and that greater efforts are required to end institutionalization once and for all.

64. International cooperation should respond to the diversity of the disability community. As a heterogeneous group, persons with disabilities have a wide range of impairments, with diverse identity traits such as race, colour, sex, sexual orientation, gender identity, language, religion, age and national, ethnic, indigenous or social origin. International cooperation can assist in strengthening communities, by

37 Maastricht Principles on Extraterritorial Obligations of States in the Area of Economic, Social and Cultural Rights, para. 3.
investing in groups in a marginalized situation who are often overlooked or rendered invisible on account of prevailing sociocultural values. For example, by promoting the inclusive education of children with intellectual disabilities, they will have the same opportunities as other children, and awareness will also be raised within the broader community. Similarly, by targeting women and girls, including those with disabilities, efforts can be made to unlock their potential and through them bring benefits to their families and wider communities.

65. International cooperation based on humanitarian purposes should never be interrupted or denied because of multilateral or unilateral sanctions. While international sanctions clearly do not apply to the provision of humanitarian aid and other similar activities, they have directly contributed to increasing reluctance among donors to fund projects in countries in which a sanctions regime is in place, affecting persons in the most vulnerable situations, including those with disabilities. International cooperation must guarantee that the rights and needs of persons with disabilities are taken into account in all humanitarian crises as soon as they arise.

C. Resource mobilization

66. Consistent with international commitments, including ratification of the Convention on the Rights of Persons with Disabilities, States that are in a position to do so must provide international assistance, including financial and technical assistance, to other States that lack the resources to fulfil their human rights obligations towards persons with disabilities. Greater financial resources are needed to reduce inequalities affecting such persons across the world and to fulfil the promise of leaving no one behind, as are better approaches and the transfer and sharing of knowledge, technology and materials. The Global Action on Disability Network should consider promoting targets for disability-specific funding, which all donors should progressively work to achieve within their overall funding portfolios.

67. As part of their disability-inclusive international cooperation efforts, donors should consider adopting guidelines on inclusive budgeting, to ensure that budgeted programmes fully include persons with disabilities. Multi-stakeholder partnerships can play an important role in developing such guidance, including by providing examples of inclusive budgets and indicative costs for common activities designed to strengthen inclusion. Furthermore, it is important to ensure that value-for-money considerations do not have a negative impact on disability inclusion. This can be avoided, for example, by explicitly incorporating equity into value-for-money criteria and by avoiding unit cost comparisons between disability-inclusive programmes and those that do not include persons with disabilities.38 When considering official development assistance investment in private sector instruments, States should conduct human rights impact assessments to explore the potential implications for the rights of persons with disabilities.

68. Importantly, external support, including South-South and triangular cooperation, should be coordinated with national policies and priorities. Existing power imbalances between high-income countries and low-income and middle-income countries that perpetuate a donor-recipient paradigm must be addressed, since they are not conducive to the creation of sustainable and effective partnerships (see A/HRC/28/59). It is therefore necessary to move towards a genuine partnership based on the sovereign equality of States and the principle of international cooperation. In that connection, the Special Rapporteur welcomes the contributions received on South-South and triangular cooperation, such as the joint efforts of the Ibero-

American programme on the rights of persons with disabilities, bringing together eight States in Latin America and two in Europe and civil society organizations with the aim of enhancing legislation and public policies through dialogue, and the joint efforts of Colombia and El Salvador to strengthen Paralympic sport in those countries.

D. Participation

69. States and multilateral and private donors must closely consult and actively involve persons with disabilities and their organizations in all efforts related to international cooperation, including the identification of priorities, policy development, implementation and evaluation. States should also take into account their expertise in capacity-building and research activities. In addition to consulting international organizations of persons with disabilities, donors should directly engage with local organizations of persons with disabilities in their own countries and in recipients’ countries to ensure that they are both agents and beneficiaries of official development assistance.

70. To guarantee the adequate participation of persons with disabilities and their organizations, donors should consider establishing disability-specific or disability-inclusive consultative forums or working groups linked to national cooperation agencies, in particular to follow up on the implementation of the Sustainable Development Goals. They should also consider building partnerships with organizations of persons with disabilities to deliver grants and technical support at the country level. Participatory funding models, including participatory grant-making, which cede decision-making power to the communities affected by funding decisions, should be further explored and adopted.

71. Donors should consider increasing direct funding to local organizations of persons with disabilities. While disability-inclusive international cooperation has increased generally, some donors have reduced the number of regions and countries in which they operate, thereby affecting organizations of persons with disabilities in middle-income countries, which still lag behind in institutional development and face significant operational barriers. Donors must improve coordination among themselves to avoid overlooking themes or geographical regions and/or duplicating efforts. They must also urgently shift project grants to core funding, in order to empower organizations of persons with disabilities to pay better attention to organizational development, strategic planning, capacity-building and political opportunities. In addition, they need to apply greater flexibility to enable organizations without solid financial means or funding history, such as small grassroots organizations, to obtain access to funding without the need for intermediaries.

E. Accountability

72. Accountability is a key feature in ensuring a human rights-based approach to development and humanitarian action. It requires States and other duty bearers to take responsibility for their actions, to answer for them to those affected and to take appropriate corrective and remedial action when their conduct or explanation is deemed inadequate. This requires clearly defined duties and performance standards, as well as mechanisms in place to monitor the degree to which duty bearers comply

with the standards. States and multilateral agencies, as well as private donors, should consider adopting accountability frameworks to measure progress on disability inclusion.

73. International cooperation actors should adopt and use the disability marker of the Development Assistance Committee in all official development assistance to measure and monitor financing for disability inclusion. Tracking development finance on disability inclusion provides a crucial contribution to monitor the implementation of the Convention on the Rights of Persons with Disabilities and the Sustainable Development Goals, as well as to improve the availability and quality of data regarding disability-inclusive international cooperation and humanitarian activities. While internal markers other than the Committee’s disability marker could be needed, they should be used in addition to it, thereby allowing for comparable data regarding resource allocation.

74. The COVID-19 pandemic and its socioeconomic consequences require robust international cooperation between and among States, in partnership with international and regional organizations, civil society and organizations of persons with disabilities, to provide a disability-inclusive response and recovery. For that purpose, donors need to urgently establish accountability mechanisms to check that all COVID-19 response and recovery funds are measured against indicators that target persons with disabilities. If such persons and their families are excluded, the recovery process from the pandemic risks exacerbating pre-existing inequalities and threatens the shared responsibility to build back better for all. It is important that the reallocation of funds to support COVID-19-related activities neither affect nor undermine disability inclusion efforts.

75. States and multilateral agencies must commit themselves to collecting data disaggregated by disability status, in order to measure the impact of development and humanitarian programmes on persons with disabilities. By collecting such data, donors gain a better understanding of their beneficiaries’ profiles and are in a better position to tailor their programme activities. By requiring data on disability, donors stress the importance of disability inclusion in programmes, making them less likely to be “disability-absent”. The short set of questions of the Washington Group on Disability Statistics, together with the United Nations Children’s Fund/Washington Group module on child functioning, provide a cost-effective method of collecting data disaggregated by disability in an internationally comparable manner.

F. Research

76. States and other donors must place greater emphasis on research and access to scientific and technical knowledge on the rights and inclusion of persons with disabilities. Research is a powerful instrument for social change, which could help to instigate institutional, policy and cultural change and provide evidence-based solutions to achieve better outcomes for persons with disabilities. Strengthened coordination and collaboration within the research community are needed to ensure that persons with disabilities are routinely included in research and to help in shaping an ambitious research agenda.

77. Donors must support research informed by and grounded in the human rights-based approach to disability. Research must be accessible to and inclusive of both researchers and participants with disabilities. Research processes and ethical frameworks must be guided by the standards of the Convention. Furthermore, donors should prioritize research initiated and led by the disability community and/or that responds to a rights concern arising in that community. A participatory approach helps
to better take into account the diversity of persons with disabilities and to better understand the multidimensional nature of the disability experience.

G. Capacity-building

78. The delivery of disability-inclusive international cooperation requires bilateral donors and multilateral agencies to have strong internal capacities. Key components include a single disability lead, good in-house understanding of disability and regular access to external technical support. Disability-specific training is essential to create greater staff confidence in disability inclusion and to help to ensure that the rights of persons with disabilities are considered. Training must be provided to all staff – not only those working on disability-inclusion – and be carried out with the participation of persons with disabilities and their organizations. For example, the Ministry of Foreign Affairs of Finland collaborates with such organizations to deliver disability training to its staff, as well as to key external partners, to build internal understanding of important disability-specific initiatives. Training on the role of bilateral, multilateral and private donors as employers of persons with disabilities is also necessary.

79. Donors should aim to increase the capacity of external actors, including the United Nations system and organizations of persons with disabilities. Capacity-building provided to such organizations needs to have a greater focus on governance, strategy, leadership development and financial and project management. While capacity-building activities have increased in general, the disability community strongly believes that international cooperation continues to “preach to the converted”. The capacity of mainstream organizations, including large consultancy groups and international non-governmental organizations, must also be built so that they can be disability-inclusive and compliant with the Convention.

VII. Conclusions and recommendations

80. International cooperation can play an important role in promoting the rights of persons with disabilities and supporting disability inclusion in development and humanitarian action. Since the Convention on the Rights of Persons with Disabilities was adopted, there has been greater awareness of the importance of disability-inclusive international cooperation, as reflected by the inclusion of persons with disabilities in the 2030 Agenda and other international processes. Nevertheless, except in a few cases, this increased attention has not resulted in a significant growth in resource allocation for dedicated disability-inclusive or disability-specific programmes and projects. When international cooperation funding was allocated in that manner, it often did not include a rights-based approach to disability. Unless international aid to support the inclusion of persons with disabilities is increased, the international pledge to leave no one behind, in particular in a post-COVID-19 scenario, is at risk.

81. The Special Rapporteur makes the following recommendations to States with the aim of assisting them in ensuring inclusive and accessible international cooperation:

(a) Integrate disability inclusion into the design, implementation, monitoring and evaluation of all mainstream policies and programmes on international cooperation and complement them with disability-specific policies and programmes;
(b) Ensure a human rights-based approach to disability in the design, implementation, monitoring and evaluation of all international cooperation efforts and refrain from funding or implementing programmes and projects that are contrary to the rights of persons with disabilities;

(c) Include persons with disabilities in all COVID-19-related international cooperation efforts, as both agents and beneficiaries of aid;

(d) Closely consult and actively involve persons with disabilities and their organizations in all efforts related to international cooperation, including by establishing formal consultative mechanisms in decision-making processes related to international cooperation;

(e) Increase international cooperation to enhance the work of organizations of persons with disabilities;

(f) Promote, develop and strengthen the capacity and competence of international cooperation agencies and multilateral financial organizations on disability inclusion and the human rights-based approach to disability;

(g) Collect data disaggregated by disability, sex and age to adequately assess the impact of programmes and projects on persons with disabilities;

(h) Adopt and systematically use the disability marker of the Development Assistance Committee of the Organization for Economic Cooperation and Development in all official development assistance to measure and monitor financing for disability inclusion;

(i) Support research and access to scientific and technical knowledge on the rights and inclusion of persons with disabilities, and facilitate access to and sharing of accessible and assistive technologies.

82. The Special Rapporteur recommends that the United Nations system, including all its programmes, funds, specialized agencies and other organs, continue its efforts to implement the United Nations Disability Inclusion Strategy.

83. The Special Rapporteur recommends that international private donors and foundations systematically ensure disability inclusion in all their international cooperation efforts and respect the rights of persons with disabilities in accordance with the Convention.