

Annual inclusion report 2019



Sightsavers

Doreen uses her sewing machine, given to her as part of the European Commission funded programme to support youth with disabilities in Uganda gain livelihood skills.



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Cover image: Friday Rosemary, a participant in Sightsavers' economic empowerment project, at a welding workshop in Kiryandongo, Uganda.
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A group of patients attend an inclusive eye health screening and surgery in Nampula, Mozambique.

A word from the director

Thanks for taking the time to follow our journey at Sightsavers towards being a more inclusive organisation, both in the programmes that we support, and in the way we are run. Sharing our internal journey externally has developed into a critical part of our approach to our current strategy and will be at the heart of the new strategy we are developing, to be launched next year.

Last year in my introduction, I talked about the importance of sharing openly what works and what doesn't. That's the only way those of us focusing on disability-inclusive development are going to build an evidence base that allows us to both improve what we do, and to support, inform and hold others accountable for delivering more equitable and inclusive programmes. If we can't say what works, and what doesn't, who will?

So I was delighted when the International Centre for Evidence in Disability (ICED) asked Sightsavers to co-host the third International Conference on Evidence in Disability Inclusive Development, which took place in November 2019. It was a great opportunity to learn, share and reflect on initiatives underway, but also

more broadly on the status of the evidence base in disability inclusion, particularly at the high-quality, peer-reviewed end of the evidence spectrum.

The reality? It's not great. The number of studies is low, the quality is varied but overall weak, the geographic spread is patchy and the sectors covered are limited.

With that in mind, it is even more important that this year saw the launch of four new programmes in the disability-inclusive development sector, each supported by the UK government through the Department for International Development (DFID). Two of these projects under the Inclusive Futures programme focus on disability-inclusive development and engaging people in formal



employment. You can read about these programmes in more detail in this report. Both involve a wide range of partnerships, with our strategic partnership with the International Disability Alliance a core part of each programme.

Another of these new programmes is being run by the London School of Hygiene and Tropical Medicine, through the ICED. Called PENDA (Programme for Evidence to Inform Disability Action), it is focused on the generation of academic-quality evidence, primarily but not solely through impact evaluations. We'll continue to work closely with ICED over the next few years as the three programmes get into full swing. The fourth, launched alongside Inclusion Works and run by Leonard Cheshire, also focuses on inclusive employment and we are working with that consortium to ensure learning is shared between the programmes.

The key thread within all these programmes is to generate evidence and learning on what works in disability-inclusive development.

The current picture is confusing: different viewpoints, gaps in the evidence base and a wide range of knowledge platforms. I sincerely hope that by working together with so many stakeholders across these programmes, and by collaborating with other initiatives in the sector, we can start to build a coherent and consistent picture. Only that way will we start to make genuine progress in our shared aim of a more inclusive future.

This continues to be a really exciting time in the sector, with an increasing number of mainstream development actors interested in disability inclusion, more resources available, and a genuine sense of cooperation and opportunity within the sector.

To find out more, read on!



**Dominic Haslam, OBE
Director, Policy and
Programme Strategy**

Progress against our strategic objectives

Four years ago, in 2015, Sightsavers launched its first social inclusion strategic framework: Empowerment and inclusion, which complements our other global strategies on eye health, education, neglected tropical diseases and research. Each year, we take stock of the progress we have made in meeting our objectives.

Our empowerment and inclusion framework focuses on the objectives below:



01

Mainstream disability inclusion in our health programmes



02

Develop demonstrable models of effective inclusive education



03

Scale up efforts to achieve diversity in the workplace



04

Ensure the voice, agency and participation of people with disabilities



05

Facilitate economic independence of people with disabilities

In addition, cross cutting all our programmes, we aim to:

Address gender inequalities and women's empowerment, and develop effective influencing interventions/ approaches

To realign our reporting, this report covers the eighteen-month period between July 2018 and December 2019.

Mainstream disability inclusion in our health programmes



Arjina, who lives in Rangpur city, Bangladesh, had cataract surgery last year through Sightsavers' Right to Health project.

01

Replicating our inclusive eye health model across multiple regions

Over the past 18 months, Sightsavers' global and country teams have been busy with the implementation of several inclusive eye health projects and the design of new initiatives. Working in collaboration with health partners, government departments and disabled people's organisations (DPOs), we have been providing eye health services to women and men with and without disabilities, living in poverty in urban and rural areas, while aiming to strengthen local health systems to become more inclusive of people with disabilities and other marginalised groups.

In Bangladesh and Pakistan we are implementing an inclusive eye health programme funded by UK aid and in Mozambique, Jersey Overseas Aid is funding a project in Nampula province.

© Sightsavers/Cristina Abudo Pires



Eighty-year-old Toto was diagnosed with cataracts at an eye screening clinic in Nampula, Mozambique.

In each country we have a common approach, which includes building capacity of stakeholders and improving accessibility. In each country, we conducted training sessions and sensitisation activities on disability inclusion and gender equity for more than 3,800 community health workers, government frontline workers and hospital staff. Using a bespoke tool (see case study on page 12), we completed accessibility audits of 15 health facilities in the three countries, involving people with disabilities, government representatives and hospital coordinators. Five hospitals were prioritised for accessibility interventions and renovations are underway; audits will be repeated at the end of the process to measure progress.

Progress is also being monitored through the collection and analysis of data disaggregated by age, gender, location and disability, using the Washington Group Short Set of questions on disability (WGSS). We have also developed and tested ways of gathering feedback on the services provided, from people with and without disabilities.

Data from these projects indicates that people with disabilities (additional to the eye health issue for which they are currently seeking treatment) are accessing eye care services at a higher rate than we originally expected; however, they also seem to face more barriers and the quality of care they receive may be relatively low compared to people without such additional disabilities. These observations helped us challenge some of our initial assumptions, and they are guiding us towards a better understanding of the complexities of disability data collection and analysis. We will continue to work closely with our partners to generate evidence, and to use it to improve the reach and quality of eye care services in these regions.



Cataract surgery patients on the way to an eye hospital in Kurigram, Bangladesh.

An important pillar of our inclusive eye health model is the principle that working in partnership with local stakeholders is an effective strategy to reach people experiencing increased marginalisation in society, such as women and girls, people with disabilities, ethnic minorities, older people and displaced people. In each project, we involve underrepresented groups in

decision-making processes, as well as in the design, implementation and monitoring of activities. We recognise that in order to ensure meaningful engagement of DPOs in project design and implementation, it is important to clearly define the terms of collaboration and allocate resources to strengthen local disability organisations.

Look closer...



Sharing our learnings in the development sector

As Sightsavers' inclusive eye health portfolio grows, we are making a conscious effort to collaborate with other organisations and share our experience within the development sector. For example, in September 2018, we hosted a session on inclusive eye health at the Council of Members of the International Agency on Prevention of Blindness (IAPB) in Hyderabad, India, presenting our inclusive health model and initiatives. At the beginning of 2019, we also produced a short film capturing our experience of implementing inclusive health projects across different regions. The film has been widely showcased, including at the UK Department for International Development's annual supplier conference in London.



Find out more at www.sightsavers.org/inclusive_health_services

In May 2019, as part of the CORE Group 2019 Global Health Practitioner Conference in Maryland, USA, Sightsavers organised a workshop on disability inclusion in healthcare, in collaboration with Humanity & Inclusion, Catholic Relief Services, Light for the World and the National Forum of Women with Disabilities of Pakistan. Participants had the opportunity to learn about approaches, tools and experiences of designing and implementing disability-inclusive healthcare programmes across

different regions and fields, including eye health, sexual and reproductive health, and food security. Key recommendations that emerged during the workshop were shared with CORE Group members and published in a blog.



Find out more at www.sightsavers.org/inclusive_health_programmes

In October 2019, Sightsavers and CBM hosted a two-day inclusive health workshop in Dar es Salaam, Tanzania, in collaboration with the Tanzania Federation of Disabled People's Organisations (SHIVYAWATA). The workshop took place prior to IAPB's Council of Members, and aimed to equip participants with practical tools and approaches to identify common barriers to healthcare and design strategies to promote equitable access to services for people with disabilities, women and marginalised groups.

A month later, Sightsavers took part in a conference on disability and development at the London School for Hygiene and Tropical Medicine in the UK. We delivered oral and poster presentations on accessibility auditing using Sightsavers' accessibility package (see case study), and disability data in eye health projects and RAABs.

Case study



Accessibility standards and audit pack

Embedding accessibility and universal design in the development of health infrastructure is important to ensure people with disabilities have the opportunity to access the health services they need. It also promotes greater access and a better experience for the wider population, including, older people, pregnant women, parents, and people who are illiterate or do not know the local language.

In 2019, Sightsavers produced an accessibility standards and audit pack to influence the development of national accessibility standards, assess existing health infrastructure in low and middle income settings, and guide the development of more accessible health facilities.

This toolkit combines universal design principles and recommendations from different countries and international bodies. People with disabilities from Mozambique,

Bangladesh, Pakistan and Malawi were involved in the review and field-testing of the tools, and their contributions have been incorporated in the final product.

Several tools are included in the pack, including an accessibility standards manual, providing detailed guidance to build accessible health infrastructure; and a PowerPoint training presentation, to teach team members how to conduct an accessibility audit.



The accessibility standards and audit pack is available on Sightsavers' website at www.sightsavers.org/accessibility-standards



Neglected tropical diseases

2019 saw the end of several large-scale neglected tropical disease (NTD) programmes, conducted by Sightsavers and our partners. What we learnt from these is now informing the development of new programmes. For example, if we are to succeed in eliminating the blinding eye infection trachoma, we must develop equitable methods for delivery that will treat those people who are hardest to reach. During the UK aid funded trachoma elimination programme and The Queen Elizabeth Diamond Jubilee Trust's Trachoma Initiative programmes, equity aspects associated with trachoma interventions (which could include gender, sociocultural and socioeconomic/vulnerability factors, water and sanitation context and issues of migration, disasters and conflicts) were monitored and addressed in several countries. In order to address these equity gaps, we recruited more women as case finders and community drug distributors, and we reduced physical and cost barriers to accessing surgical services for the most marginalised people, including people in extreme poverty, older people and people with disabilities. In most countries, accessibility was facilitated through locating outreach surgical camps close to communities. There were free surgical services at the point of use, and transport provided for older people and people with disabilities.

Over the next three years, the Sightsavers-led Ascend West and Central Africa programme (which began in the spring of 2019), aims to make major progress towards eliminating five painful neglected tropical diseases. This work focuses on some of the world's poorest countries: Benin, Burkina Faso, Central African Republic, Chad, Cote d'Ivoire, Democratic Republic of Congo, Ghana, Guinea, Guinea Bissau, Liberia, Niger, Nigeria, and Sierra Leone. Sightsavers is working in a consortium to deliver the programme; partners include Mott Macdonald, the Schistosomiasis Control Initiative and the Liverpool School of Tropical Medicine. The UK aid funded Ascend

programme recognises that public health based projects with population coverage targets are susceptible to a focus on easy-to-reach mainstream groups. While that does provide protection for entire future populations, continuing with this 'business as usual' approach will lead to the further marginalisation of specific population groups.

Ascend's project activities are framed within a 'leave no one behind' approach and designed to be inclusive and equitably accessible to all people, regardless of age, gender, ethnicity, religious denomination, or socioeconomic factors. For example, mass drug administration (MDA) will be supported in some of the world's poorest and most conflict-affected countries, and will reach marginalised groups, including people with disabilities. Because NTDs such as schistosomiasis, intestinal worms and trachoma affect women and children more than men, MDA in these projects has been designed to ensure that specific barriers affecting women, people with disabilities, and children are recognised, and interventions are designed to ensure these adversely-affected groups receive treatment. Treatment data will be disaggregated by sex, which enables a more complete understanding of the reach and accessibility of MDA in order to develop better project approaches.

Develop demonstrable models of effective inclusive education



02

Seynabou Bane at her home in Kaolack, Senegal. Seynabou's headmistress has been supportive of inclusive education practices in her school.

Our inclusive education projects across Africa and Asia have had significant success in two key areas: the strengthening of education systems to improve inclusive teaching practices; and the promotion of assistive technologies, education resources, and assessment tools that support the learning of children with disabilities.

Teacher training and system strengthening

In Uganda, almost 100 tutors have now completed the one-year Certificate in Inclusive Education designed in collaboration with Kyambogo University, the Ministry of Education in Uganda and the University of Sussex, UK. The Ministry allocated a training day so that the qualified tutors could train their peers; as a result, messages about inclusion have been delivered across most primary teaching colleges in Uganda.

In Sierra Leone, our pan-disability education project, funded by the European Commission, has supported more than 800 children in 45 primary and secondary schools. To ensure scaling up and sustainability, Sightsavers and the Ministry are engaged in a process of revising the curriculum for teachers' training colleges. The aim is to embed disability inclusion at an early stage, so that the new generation of teachers is better prepared in welcoming children with special education needs in their classrooms, and in how to adapt teaching and learning pedagogies. This work continues in Kenya, where we will be identifying inclusive and successful pedagogies in early childhood settings. As part of the Inclusive Futures programme, we will also be working in Tanzania to support its Ministry of Education in developing a model for inclusive education in primary schools.

In Mali, the adaptation of the national reading test (the Early Grade Reading Assessment) suitable for children with visual impairments has been rolled out in three regions of the country. Based on the results analysis, Sightsavers and the University of Birmingham have designed a new module on teaching strategies to

support literacy development of children with visual impairments, which was tested on special and mainstream schoolteachers. We have now received an extension grant from USAID to strengthen the education system in including children with various disabilities, with a strong component on in-service training and teachers' continuous professional development.



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Souleymane Thiam at his school in Guediawaye, Dakar, Senegal. Souleymane had struggled with his studies before his bilateral cataract operation.

In Senegal, Sightsavers-supported pilot schools, with funding from Irish Aid, have started accommodating children with hearing impairments and children with Down Syndrome. After training, teachers have also established gender action plans to better address the specific challenges faced by girls with disabilities in primary education.

Enhancing the education of children with disabilities goes beyond the classroom. It extends to influencing change in communities, school management, and within governments. In this area, Sightsavers has been delivering interventions in a variety of ways.

In Cameroon, our Irish Aid funded project is supporting the Ministry of Education in scaling up our pilot project to 68 regional and district schools throughout the country. The first phase has started, with the improvement of school accessibility, community sensitisations on the right of children with disabilities to attend mainstream schools, and training for teachers and inspectors. We are also setting up child safeguarding mechanisms within pilot schools with the designation of child protection focal points and the signature of a code of conduct.

Sightsavers is also playing a leading role in the design of an inclusive education policy for Cameroon, through the organisation of regional consultative workshops for parents, community leaders, and education service providers from seven regions.

This essential work extends to our India programmes, which cover six states. The strength of these programmes owe much to strong partnerships, including with the government at various levels. Sightsavers India has provided a range of inclusive education training, including 'Reading Solutions for Children with Print Disability' training at state level to 89 mobile resource consultants from all 51 districts of Madhya Pradesh. We also provided expert input in developing a module for sensitising parents on disability issues. The mobile resource consultants will work to provide further support and training to all parents of children with disabilities studying in mainstream schools in the state. And in West Bengal, we are working with government officials on disability awareness and issues related to the services available to children with blindness and low vision.



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Children in Madhya Pradesh, India, using braille learning materials.

Tools, technology and resources

In Malawi, we support 20 community-based childhood care centres in two remote rural districts (funding for this came from Comic Relief until December 2018 and from People's Postcode Lottery and LDS charities throughout 2019). We have produced calendars that carry core messages about disability and inclusive education. These calendars, which are targeted towards parents, volunteer pre-school teachers and health service workers, are an invaluable source of information and have been well received. We also developed a training flipchart for use by pre-school teachers. Colourful illustrations show how the Malawian early childhood curriculum can be delivered in an inclusive way.

The use of technology and specialist materials has been key to our work, as has our engagement in enhancing resource centres. In India, following the current country strategic plan (2015-19), Sightsavers has developed a special focus on ICT-based learning. This involved upgrading government block resource centres to digital learning empowerment centres (DLEC) by equipping them with technology and other learning materials. As of now, five DLECs are equipped with technology and are fully functional. Laptops, mobiles in accessible formats, e-textbooks and DAISY players are provided to children with visual impairments, as well as training on how to use them. These children are receiving ongoing technical support, enabling them to study with greater independence.



© Sightsavers

A student with visual impairment in Madhya Pradesh, India, using an electronic device containing e-readable textbooks.

Sightsavers India also supports low vision assessments, supplying assistive devices to those in need, as well as the provision of braille kits to allow for the continued education of children with visual impairments. At state level we successfully advocated for the conversion of textbooks into a format suitable for reading on an electronic device, in a move that will benefit 21,000 children with visual impairments in Madhya Pradesh.

Scale up efforts to achieve diversity in the workplace



03

Sightsavers Program Officer Cristina Abudo Pires, photographed in Mossueil district, Mozambique.

Sightsavers continues to strengthen disability inclusion in the workplace.

Wellbeing has been high on the agenda and, under the leadership of the CEO, a wellbeing taskforce has been established. Senior HR business partners have overseen the creation and development of a team of mental health first aiders (MHFA) in the UK. Staff from different teams in the organisation have received specialist training on supporting colleagues experiencing a mental health issue or emotional distress. This service has been promoted internally and the mental health first aiders team is expanding its capacity, with new team members (including those with an international travel remit) due to join the team soon.

Support for new and existing employees requiring reasonable adjustments has continued to develop, with a best practice, collaborative multi-team approach being put in place to ensure that all colleagues with disabilities get the support that they need. This includes giving new starters multiple opportunities throughout the recruitment process to indicate that they may require adjustments; referrals to our international occupational health (OH) provider as needed; and joined-up working between HR colleagues, security, premises/health and safety and IT teams.

All line managers have received new guidance this year on how to support staff with disabilities as well as good recruitment and selection practice. New recruitment software will give applicants additional ways to apply for roles, and provide us with the ability to monitor our reach with candidates with disabilities. Examples of innovative recruitment practice we are adopting have included developing a large print version of the standard application form, developing relationships with agencies that specialise in working with people with different impairments and engaging with specialist job centre recruitment fairs.

We also developed a new recruitment principles document, working in consultation with the UK Department for International Development.

As part of this drive to attract a greater diversity of applicants, in 2018 Sightsavers conducted an accessible recruitment pilot. This enabled applicants to apply and be interviewed using different formats. The aim was to incentivise more people with neuro-diverse conditions to apply for roles. The pilot generated a lot of learning, was positively viewed by applicants and it appears that this process prompted a broader range of applicants.

Sightsavers is an accredited Disability Confident Level 2 employer, and we have started the process towards becoming a Disability Confident Level 3 Leader. As a prospective Leader we are working with job centres in the UK, and we will host a number of events in 2020 to showcase the benefits of being accredited Disability Confident, encouraging other organisations to join the scheme.

We continue to increase disability awareness internally. All new starters take part in our mandatory disability awareness training – between July 2018 and December this year, 118 staff members (new and existing), across nine sessions, have received the training.

The successful social inclusion working group speakers' programme continued to stimulate staff. During the reporting period, we had six sessions covering a range of themes, from accessibility issues experienced by people with dwarfism to the inclusion benefits of IT and of well-designed wheelchairs.



Lee Spencer the 'Rowing Marine', delivers a talk as part of Sightsavers' social inclusion working group speakers programme. Lee recently broke the able bodied world record for rowing solo and unsupported across the Atlantic Ocean from mainland Europe to mainland South America.

The speakers' programme was presented as an innovative practice to members of the ILO's Global Business and Disability Network, of which Sightsavers is a member. This was one of two events where our internal diversity efforts were showcased. Sightsavers' CEO, Caroline Harper CBE, also made a speech at the Global Equality and Diversity Conference about what we are doing and how we aspire to be better.

Supporting greater accessibility is a core priority; across the organisation efforts are underway to embed it in existing processes. Recent highlights include the development of a checklist for staff to make accessible presentations, and guidance on how to organise accessible events – both of which have also been shared with partners externally. We are also now auditing the accessibility of our offices overseas, as well as the hotels used by travelling staff. Areas for improvement in these facilities can then be identified and addressed. To make this process more integrated it has been built into our regular security assessments and the toolkit given to country office staff.

Look closer...



Accessibility and inclusive communications design at Sightsavers

Sightsavers has continued to work towards becoming a leader in the field of accessible design. In March 2019 we ran a series of short talks and a workshop as part of our Perspectives initiative, welcoming other charities, as well as digital and creative agencies to our UK offices to learn more about accessibility and inclusive communications design. The keynote talk on reading and legibility was given by Dr Nadine Chahine, one of the world's foremost experts on Arabic typefaces.

Sightsavers' lead digital designer Matt Roberts was also selected by the British Interactive Media Association as one of its industry figures of note for his work in accessible design, and Sightsavers' Perspectives magazine, featured in last year's annual inclusion report, was shortlisted for a Design Week Award in editorial design.

Sightsavers has committed to the Principles for Digital Development. These are nine guidelines designed to help integrate best practices into technology-enabled programmes in international development.



Learn more at www.digitalprinciples.org

We are in the process of rolling out our accessibility commitments. This year we focused on improving digital accessibility in India. Sightsavers' central online and design team worked closely with communications colleagues from Sightsavers India to transfer the India website onto the more accessible global web platform. This work also included knowledge sharing and training on digital accessibility for the India team.

Accessibility and inclusion

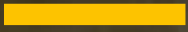
Our social media team has increased its focus on accessibility this year, and has produced expanded guidance to help the wider organisation think about the accessibility of social media communications across Twitter, Instagram, Facebook and LinkedIn especially, with information around use of hashtags, video and imagery.

Our web teams are also increasing the amount of content available in both audio and video formats in a bid to make all our content as inclusive as possible. We aim to follow the Web Content Accessibility Guidelines (WCAG), a set of international standards for online accessibility.



To learn more visit www.sightsavers.org/perspectives

Ensure the voice, agency and participation of people with disabilities



Obougou is a member of the Mbalmayo disability group in Cameroon. The group advocates for people with disabilities to take part fully in political processes.

04

Sightsavers runs two projects on political participation in Senegal and Cameroon. These five-year projects, which started in 2017 and are funded by Irish Aid, are designed to strengthen the citizenship of people with disabilities through participation in political and other decision-making forums. These are now yielding strategic results. We were able to share our learnings in Vienna when the Essl foundation invited Sightsavers to present our experience in delivering this programme at the 2019 Zero Project awards.

In 2019, we placed an increased focus on the collaboration between disabled people's organisations (DPOs) and key stakeholders including ministries, local councils and civil society organisations to ensure better inclusion in the voting process as well as in the governance of local councils.

Presidential elections took place in both Cameroon and Senegal between October 2018 and February 2019. This gave us the opportunity of demonstrating that inclusion is possible during the electoral process and on the day of elections. We held training sessions for a pool of people from civil society, DPOS and the independent electoral commission, on how to conduct accessibility audits of polling stations; and audits were conducted in the two countries. People with disabilities were also officially enrolled as observers. Based on the evidence collected, Sightsavers and our partners made recommendations on how to strengthen inclusion in the next set of elections.

Progress was also made at a local level. In both countries, the mayors in project locations committed to including people with disabilities (those who were trained last year on leadership, advocacy, representation and participation by the programme) in council business. This means they can participate in local council boards or on working groups. In Senegal (Louga, Kaolack and Maroua) local development plans and budgets were developed that supported inclusive education costs in primary schools, especially around assistive devices, food, and learning resources. It taught us that DPO advocacy is likely to be more successful if

strong coalitions are built between DPOs, community leaders and professionals in the education sector. We will continue to work closely with our DPO partners as they strengthen their internal governance and approaches to fully representing their membership in terms of types of impairment, gender and age.



Isseu is the leader of a disabled people's organisation; she is running for regional elections in Kaolack, Senegal.

© Sightsavers/Javier Acebal

In 2018, various studies were undertaken that explored different aspects of the political participation of people with disabilities. For both Senegal and Cameroon, a synthesis was completed, and this set of recommendations has enabled the projects to slightly reorientate their intervention strategies. The priority moving forward is to strengthen interventions that take into account the specific support needs required by people with different disabilities. People with different impairments have different accessibility and communication requirements, so in the reporting period we have strengthened targeted interventions. For example, training in sign language was carried out for members with hearing impairments. We know that younger people and women are often inhibited from articulating their views in patriarchal societies. To address this, we organised meetings for youths with disabilities, which enabled them to gain confidence, ask questions, and express their views. We also organised workshops targeting women with disabilities, giving them the opportunity to discuss gender issues in representation and leadership. Sightsavers, in partnership with UN Women, produced a guide for the increased civil and political participation of women with disabilities, which has been used to train more than 100 women leaders from various regions and organisations.

We want to see disability inclusion embedded in national programmes, and are optimistic that a new partnership with the government body responsible for local development will see this happen more systematically in local council planning.

Since the projects follow a similar logic but in different contexts, we organised a learning exchange. Senegalese staff and stakeholders in the project visited Cameroon to share experiences. The teams were able to share various tools and approaches including tools

designed to facilitate accessible voting by people with disabilities, and how to conduct mass sensitisation on the right of people with disabilities to vote. After the visit, both countries designed an action plan to prepare for the upcoming local and legislative elections.

As an organisation we are documenting this programme and our approach very carefully. Working in the sphere of political participation is complex and sensitive and we need to ensure that we tackle internal growth and learning in real time in order to monitor and adapt the programming accordingly. Another learning opportunity will be provided by the external midterm review of the project, which is currently underway. It is anticipated that this evaluation will guide our next steps in this important thematic area.



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Robert Oyono (centre), the first Senator with a disability in Cameroon, being interviewed by Sightsavers staff.



A meeting of DPO leaders in Senegal to talk about the difficulties that people with disabilities face in elections.

Facilitate economic independence of people with disabilities

Charles Ahumuza works as an electrical engineer with Team Muttico, Technical Services Uganda. He is pictured in Kampala, working with his team to replace an old electrical pole.

05

Development initiatives to support people with disabilities have traditionally focused on livelihood interventions, namely skills development to support small scale self-employment.

Until 2018, Sightsavers had also focused primarily in this area. Our award-winning Connecting the Dots project in Uganda, funded by the European Commission and National Community Lottery Fund, was designed to improve the livelihood opportunities for young people with different disabilities and has a multi-faceted approach, but has primarily focused on working with mainstream vocational training institutions to include youth with disabilities.

Next year will see the conclusion of this programme of work, which we anticipate will demonstrate that long term investment can create sustainable, scalable and cost justified (return on investment) pathways to equipping young people with disabilities with the skills and confidence needed to overcome seemingly impenetrable barriers to livelihoods in very rural contexts.

This has been an eight-year programme of change, challenging attitudes and behaviours that traditionally reinforce those barriers. The programme is now delivering close to a 90 per cent successful transition to employment and enterprise for participants who historically would have very limited, if any, livelihood opportunity, and who would otherwise be far more likely to remain dependent on others throughout their lives.

A conscious livelihoods approach is central to the change, recognising that it goes beyond technical skills training for a job, and is more about empowerment and the coaching of change. This relates not only to the participant but also to the social and economic systems that hold them back; whether that be community and employer attitudes or exclusion from financial systems.

This next year will focus on final evidence collation, the documenting of approaches and how they can become models for mass scale and replication to other country contexts.

As with the anecdotal evidence from our Uganda programme, in India our livelihoods programme has found that a growth in economic independence has improved the confidence of project participants, particularly women. In Rajasthan, we have assessed the gender makeup of DPOs and the number of women in decision-making positions, and have increased female participation through training and accountability mechanisms. This project has increased women's involvement in decision-making processes and given them a stronger voice in their communities.

The primary model in India is the establishment of self-help groups (SHGs). In Odisha, due to our sustained, collaborative advocacy alongside DPOs, the Department of State and Social Security and Empowerment of Persons with Disabilities has more than doubled funding for the SHGs formed by people with disabilities. The department has also agreed funding for a multi-activity centre in Bhubaneswar. Here, people with disabilities will be encouraged to sell goods, seek health and wellness support, and develop their skills. In the state of Jharkhand, Sightsavers has worked closely in partnership with the Jharkhand State Livelihood Promotion Society to secure 48.1 million rupees of funding to support the economic empowerment of people with disabilities.

Models of effective economic empowerment are now emerging. Small, low-cost income-generating enterprises such as poultry farming or goat rearing are proving successful and we are seeing people with disabilities diversifying trades in order to reduce overreliance on any single income.

Making progress in this area is not without its challenges. Convincing banks to loan money to people with disabilities and recognising their credit worthiness has been a challenge. There is still significant work to be done in changing attitudes and addressing stigma.

But there are reasons to be encouraged. The continued strengthening of DPOs and their emergence as institutions for advocacy, and their knowledge of the rights as well as entitlements of people with disabilities, is supporting the creation of an enabling environment and greater engagement in the planning and implementation of government policy.

For many people, entrepreneurship may be a preferential choice providing flexibility and autonomy, while a job in the formal sector may provide more financial security. Yet globally, people with disabilities are under-represented in the formal workforce. In 2018, the UK Department for International Development (DFID) awarded Sightsavers funding to lead a consortium to tackle exactly this issue and find out what works, and what doesn't, in accelerating the participation of people with disabilities in the formal workplace.

The implementation phase of the three-year project, Inclusion Works, under the Inclusive Futures initiative, started in July 2019. The consortium, which includes the International Disability Alliance, the Institute of Development Studies, ADD International and other partners, aims to understand how supply chains and mechanisms can be influenced, at different levels, for greater disability inclusion in the formal employment sector. Across our target countries (Bangladesh, Kenya, Uganda and Nigeria) we are focusing on two or three specific industries, testing different approaches and interventions to understand what is required to facilitate disability inclusion in employment within the labour market system.

One of the first actions was to complete a labour market assessment in each country; to understand how the demand for and supply of skills comes to market, how the market is regulated and what gaps or opportunities emerge from conversations with disabled job seekers, employers, and government agencies.

Those labour market assessments reveal a clear interest from many employers to have disability-inclusive workforces. But we also heard consistently that there are challenges in attracting applicants with disabilities, despite employer efforts. This may be due to employers lacking disability employment confidence, and prospective employees with a disability lacking employment readiness and



Mananu took part in Sightsavers' economic empowerment project in Uganda and trained as a welder.

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Ritah, photographed with her family at a career fair day in Masindi, Uganda, after receiving the hairdressing kit donated to her by Sightsavers.

having feelings of low self-worth (or self-stigma). We have realised that a gap exists in the middle – a convenor and capacity building intermediary to overcome these challenges. That becomes part of the role of the Inclusion Works consortium over the coming three years, and this carries a necessary imperative to institutionalise that role within the system before the end of the programme.

Partnerships are emerging with major employers and associations in all four countries, with a particular interest in innovative approaches. One of these is First Shot, which is a commitment by more disability confident employers to give priority to applications from a mentored

pool of appropriately qualified and employment confident disabled job seekers. In parallel, several employers will pilot internship or work experience programmes to promote employment readiness and job seeker confidence, as well as applying simple self or guided assessments of their organisation's disability readiness. We expect initial evidence of the effect of these and other pilot initiatives within the first implementation year. Within that year we also expect to learn much more about the particular barriers and vulnerabilities faced by women with disabilities in labour markets and adapt our programming to that.

Look closer...



Empowerment framework

Measuring the impact of social inclusion programmes is difficult and we are continuing to test different approaches that capture meaningful data. One of those in the testing phase is a tool to measure empowerment.

With funding from the National Community Lottery Fund, in 2018 we conducted a review of different tools and approaches for measuring empowerment. In our view, none of the tools was replicable so in 2019 we developed an approach that drew on some of the learnings to create an empowerment framework. The approach is still being piloted in Uganda to test each of the tools and assumptions within the framework so that we can develop a robust participatory approach to measuring empowerment, for use within our programmes.

The approach consists of three phases. The first phase is story collection and analysis. During this phase, after completing an informed consent process, peer researchers collect stories from young people with disabilities. These stories, led by guiding questions and prompts, explore the participants' lives before, during and after the project, and their hopes for the future. The group of youth with disabilities and peer researchers then work together to analyse the data through thematic coding – reading through the anonymised stories and identifying key words and phrases that describe the story. In August 2019, phase one was piloted with 23 youth with disabilities and five peer researchers. As a result, we adjusted the questions to ensure clarity, and adjusted the groupings and process to ensure the full participation of all youths with disabilities. We are exploring a parallel process with parents of young

people with more complex impairments to make sure their journeys are captured. Another pilot will be conducted to test the changes.

We are currently in the second phase. The stories are further analysed by a monitoring, evaluation and learning technical staff member, and a framework developed with input from project teams and social inclusion technical staff. In the third phase, planned for 2020, we will take the framework that we develop back to the youth participants to discuss and validate. The peer researchers will support the participants to assess themselves against the framework. The group will then complete some group analysis using the average 'scores'; for example, for females, males or people with different impairments. Through this process they will reflect on their story and understand where they are on their journey compared to other young people with disabilities. They will learn and participate in how the project is monitored.



Pamela, a participant of the European Commission funded programme to support youth with disabilities in Uganda gain livelihood skills.

Look closer...



Inclusive Futures

Inclusive Futures* is an ambitious six year disability-inclusive initiative, funded by UK aid and led by Sightsavers.

The initiative brings together two programmes, 16 development organisations, hundreds of local disability organisations, and public and private sectors to deliver long term improvements working with and for people with disabilities. Its goal is to work towards a world where everyone has the same opportunities to go to school, access quality health care, and claim their right to work through informal and formal employment.



The 16 consortium partners of Inclusive Futures are collectively working in seven countries: Bangladesh, Kenya, Uganda, Nigeria, Tanzania, Jordan and Nepal.

Inclusive Futures consists of two programmes. In the first, Sightsavers is working in close collaboration with the International Disability Alliance and other consortium partners to implement a series of small-scale, innovative projects to increase access to education, health and livelihoods, and combat negative stereotyping and discrimination. We aim to understand what works for long term improved wellbeing and inclusion of people with disabilities in low and middle income countries (Bangladesh, Kenya, Nigeria, Tanzania, Jordan and Nepal), and scale these initiatives up using the evidence we have created through the programme.

Our second programme looks specifically at engaging people in formal employment, working with disabled people's organisations

(DPOs), individuals and employers across various industries in Bangladesh, Kenya, Uganda and Nigeria. Our goal is to challenge the status quo (where people with disabilities are substantially under-represented in formal employment globally) and to harness the power of the private sector to act as an agent for change.

In 2019 we completed four detailed labour market assessments across the countries with training plans now in development. The programme has a much deeper understanding of how the labour markets function and a number of companies are committed to work with the programme. These businesses will be part of the next phase to pilot a range of innovative approaches to support people with disabilities into employment.

*The Inclusive Futures programme complements UK aid's current disability inclusion programming portfolio which also includes the Disability Research Programme (PENDA) and Leonard Cheshire's i2i formal employment programme.

Inclusive Futures consortium partners



Action on Disability and Development (ADD International) | BBC Media Action
Benetech | BRAC | Development Initiatives | Humanity & Inclusion | Inclusion International
The Institute of Development Studies | International Disability Alliance | Leonard Cheshire
Light for the World | Sense International | Sightsavers | Social Development Direct
Standard Chartered | Youth Career Initiative

Participatory design

Key to the work of Inclusive Futures is participatory design, and both programmes ran participatory consultation and design workshops in the countries. During these workshops, participants completed a situational analysis and a needs assessment.

Our workshops were attended by consortium partners' in-country teams, partner NGOs and government partners. We placed high priority on attendance of people with disabilities and DPOs to better understand their experiences and priorities, as well as create a sense of ownership. This 'bottom up' approach also helped participants learn from one another's experiences and expertise.



UK High Commissioner to Kenya, Nic Hailey, cuts the ribbon at an event in Nairobi to launch two inclusive employment projects.

Evidence creation

The work of Inclusive Futures focuses heavily on generating evidence on what works to deliver results for people with disabilities. The evidence created through the programme is being disseminated across the global community and governments.

We have set up a disability inclusion helpdesk at DFID, led by Social Development Direct, which provides on-demand research services to DFID and UK government personnel. We are also supporting Source, the online resource centre on disability and inclusion, which is led by Humanity and Inclusion and intended to develop a knowledge bank for practitioners and academics.



Imelda, from Chamanika, Zambia, tending her groundnuts field after receiving cataract surgery.

Cross cutting objective A: Address gender inequalities and women's empowerment

The mainstreaming of gender is gradually accelerating across our programmes, aided in part by greater rigour in sex disaggregated data collection and analysis, although this is an area that will be scaling up next year.

In terms of programming, Sightsavers produced a paper reflecting on our experience of gender and eye health in Zambia. This paper, an output of our Seeing is Believing funded project, explores how gender barriers in Zambian society affect

women's access to health. One of the factors is the distance to health facilities in rural areas. Women may lack the funds to pay for transport or they may be unable to travel due to safety concerns or domestic responsibilities. Sightsavers, working

with the Ministry of Health, put in place a number of strategies to tackle the gender barriers. These included greater efforts to raise awareness among women and their families via community workers. Home visits have enabled the identification of people with disabilities and older women who may not ordinarily come to central screening points, so that they can be referred. Door-to-door screening has meant that eye health services can be brought as close to the home as possible. One challenge we were not able to overcome in the life of the project was the lack of female healthcare workers. Inadequate education is a root cause and thus requires a multifaceted and systemic approach. To tackle this constraint, we are targeting our efforts towards increasing the number of women among community level workers.

In other programmes, different barriers require alternate strategies. The six-year UNITED programme, which was funded by UK aid, delivered 158 million treatments across five states in Nigeria to tackle neglected tropical diseases. During this programme, it was difficult to reach women in predominantly Muslim areas where women are in purdah (the religious and social practice of female seclusion). To address this, UNITED engaged with women's groups who were then able to serve as drug distribution volunteers and mobilise women for treatment.

Working through other non-health-related community structures to enable women to access services was also a success in Tanzania. Among the Masai population in northern Tanzania, implementing partners working on the trachoma elimination programmes, funded by UK aid and The Queen Elizabeth Diamond Jubilee Trust, observed that, historically, fewer women had access to eye care and trichiasis surgical services compared to men. To address this, the programme identified and trained microfinance group members in the Masai community to encourage female community

members who had trichiasis to seek surgery. Microfinance group members worked as volunteers and were trained in trichiasis case identification and counselling. Women in the groups who had successful surgery, known as trachoma ambassadors, helped raise awareness and encourage others to make use of available services. Microfinance groups have well-established structures and systems which facilitated case finding. The members were well known and respected in their communities and were very proud to assist the programme.

These initiatives illustrate that programme teams are increasingly starting to think outside the box in order to reach women. Embedding a gender perspective at the start of a project's design is critical in order to ensure that the budgets reflect the need for differential approaches and gender mainstreaming becomes part and parcel of Sightsavers contribution to UN Sustainable Goal 5, to achieve gender equality and empower all women and girls.



Jalina Hamis Seif, a trachoma patient in Mmawa village, Ruangwa, Tanzania.

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Case study



Gender and disability study: A perspective from India 2018

The 2011 census estimated that more than 27 million people in India live with a disability. Of these, 14.9 million are men and 11.8 million are women, although these numbers are likely to be underestimated. Despite legal provisions and policies, people with disabilities in rural India experience low levels of physical mobility and poorer access to services compared with people without disabilities, and women are particularly disadvantaged.

Sightsavers' social inclusion programme in India is being implemented in partnership with local non-governmental organisations (NGOS) and state governments. Its focus is on forming DPOs and self-help groups, supporting livelihoods and advocating for system-level changes. Sightsavers India undertook a study to investigate the gender-specific needs and barriers to inclusion for men and women with disabilities in community-based programmes.

We used a qualitative design with in-depth interviews to collect data. Our sample included people with disabilities who were enlisted in Sightsavers social inclusion programmes in the States of Odisha, Madhya Pradesh and Rajasthan. The survey ensured representation of both sexes, different types of impairments and different levels of involvement in local DPOs.

A total of 56 people with disabilities (28 men and 28 women) participated in the study. Both men and women reported that disability had a profound impact on their social participation and quality of life, but women experienced more challenges.

Women were more reliant on their parental families and had fewer opportunities to interact with their external environment. Men with disabilities were more likely to report cases of discrimination in employment and access to financial services, while women reported feeling less valued and appreciated as workers. Women were also less likely than men to be engaged in DPO activities and trainings, often due to lower levels of education and lower self-esteem. Those who actively participated in training programmes conducted by Sightsavers and regularly attended DPO meetings felt more empowered.

The study helped us to better understand how men and women with disabilities are excluded from society in the study areas and identified a number of intrinsic and extrinsic factors that individually and in combination lead to exclusion. It is important that disability programmes recognise gender-specific barriers, develop tailored approaches to support more equitable participation of people with disabilities in social inclusion programmes, and develop evidence-based guidelines and education materials to help families in their care and support. As well as this, DPO/CSO training and other meetings need to be developed with the gender lens in mind, to ensure that the content of training is accessible and personalised to the needs of women with disabilities, particularly those with low levels of education and low self-esteem.



Salifat is 60 and lives in Kebbi state, Nigeria. She has been receiving treatment for lymphedema as part of Sightsavers' lymphatic filariasis treatment programme.

Gender equity dimensions of NTD treatment

The spotlight on gender equity was officially cast on the treatment of neglected tropical diseases (NTD) by the World Health Organization (WHO) in 2009, when it became a requirement for NTD partners to collect sex disaggregated NTD treatment data. The 2030 Agenda for Sustainable Development clearly called the attention of all stakeholders working to eliminate NTDs to the need to mind the 'gender gap' as NTD programmes are planned and implemented.

Sightsavers recognises the need to generate evidence to inform policy regarding gender relations and its effect on NTD MDA coverage.

Between November 2018 and September 2019, in collaboration with the Liverpool School of Tropical Medicine (LSTM), we piloted the use of the WHO gender equity

and rights toolkit. This toolkit had been developed with the aim of aiding NTD programme implementers to evaluate if their mass administration of medicine (MAM) is reaching all eligible populations and ensuring that no one who requires NTD treatment is left behind.

The pilot project, which was conducted in Kwara State, Nigeria, showed us that situations of inequity still exist for some population groups at the community level, even when NTD treatment coverage reports aggregated at district and national levels meet the recommended globally accepted standards. The pilot consisted of a review of quantitative data and qualitative data collection in terms of key informant interviews and focus group discussions.

In some communities, women refused medicines because their husbands or male relatives were not present during distribution of MAM. The gender of community drug distributors (CDDs) was also found to impact coverage as male CDDs described requiring permission of husbands before they could enter households or talk to females; male CDDs often had to revisit when the husbands were present. This affected equity: many women may be left untreated if CDDs cannot access them.

The gendered roles of women as nurturers often mean that women do not take the medication themselves, but rather distribute it to everyone else.

Gender gaps were found to exist particularly in the Patigi town region. Participants in Patigi stated that there were more male than female CDDs. Reasons for this disproportion were attributed to women being seen as the weaker sex and unable to walk long distances, compounded by their lack of transport ownership. Lack of knowledge of MAM and the roles available to them, and lack of consent from male household heads for females to participate as CDDs, were also listed as reasons for the gender gap.

One of the challenges identified during the study was the capacity of the NTD implementers to conduct the analysis of the quantitative and qualitative data required for assessing equity.



© Sightsavers/Rey Byrne

Hajiya, pictured with two of her granddaughters, lives in Kebbi state, Nigeria. She has received training to manage her lymphedema, which in the past has caused her a lot of pain.

The National and Kwara State NTD programme staff, in a meeting with community representatives and other NTD stakeholders, resolved to take forward the findings of the study to make changes in NTD programme implementation – taking into account some of the barriers highlighted above – with the aim of reaching all the NTD treatment eligible populations with these vital medicines.

The intersectionality of disability and gender results in multiple discrimination, so it is critical that women with disabilities are visible within both the women's rights and disability influencing spaces.

Cross cutting objective B:

Developing effective influencing interventions/approaches

We have continued to campaign for the rights of people with disabilities, through our influencing and national advocacy work. This work has taken place during a period of exciting change with a number of firsts in global policy – where disability is increasingly recognised as a critical development issue.

The UK hosted the first Global Disability Summit, along with the government of Kenya and the International Disability Alliance, in July 2018. As noted in last year's annual inclusion report, we worked with DFID on the development of the summit. This included participating in a series of thematic working groups, contributing to policy papers, supporting national-level summits and engaging in the pre-summit civil society day, along with the summit itself. We continue to report on our own commitments made at the summit and are working with a number of partners and countries to ensure the commitments made are leading to lasting change for people with disabilities.

The UN also made huge strides this year with the launch of its first disability inclusion strategy¹, which aims to systematically embed disability inclusion across the UN system. The strategy includes a system-wide policy for all UN agencies, and an accountability framework to monitor progress. Sightsavers, along with a wide range of our partners, fed into the development of the strategy through consultations, participating in networks, and through our work with a number of UN agencies. Now the strategy has been launched, we will continue to feed into supporting policies and plans that the UN is

developing and monitor its implementation to ensure it leads to the change that is required across the UN system.

We have seen significant successes in our advocacy in programme countries. We have advocated with governments to sign up to the African Disability Protocol, an African Union initiative, which Sightsavers also helped develop. As a result of our work with partners, we have seen new disability legislation in Nigeria and Uganda, which now provides stronger protection of the rights of people with disabilities.

Sightsavers continues to work closely with DFID to support its disability commitments. One of Sightsavers' first campaign calls in 2013 was for the UK government to publish a disability strategy – a call that was answered on 3 December 2018 when DFID launched its disability inclusion strategy². The strategy makes a commitment that the UK will play a leading role in ensuring the rights of people with disabilities are met in development efforts. We supported the development of the strategy and its delivery plan through our close working relationship with DFID, and a number of networks who share our passion for influencing the UK to deliver more inclusive – and therefore more effective – development.

Sightsavers was also involved in two of the UK Parliament's International Development Committee (IDC) inquiries. In early 2019, an inquiry was held into DFID's work on disability and development. We submitted written evidence outlining the importance of DFID maintaining momentum on disability following the Global Disability Summit, and of ensuring the UK continued to play a leading global role in promoting the rights of people with disabilities. In April, Sightsavers gave evidence on access to health and people with disabilities. The IDC report³ reflected a number of our recommendations, and the government has since partially or wholly accepted 22 of the IDC's 24 recommendations.⁴

We also submitted evidence, both written and oral, to the IDC's inquiry into the UK's progress on the sustainable development goals. Our focus was on outlining the importance of a participatory approach to SDG implementation, and of embedding the rights of people with disabilities to ensure no one is left behind.

At a global level, we continue to work with governments around the world to advocate for the accountable and accessible implementation of the 2030 Agenda for Sustainable Development. In particular, we work with organisations of people with disabilities to ensure that Voluntary National Review (VNR) processes include the voices of people with disabilities. During 2019, we ensured greater consultation and engagement in Cameroon, Ghana, Pakistan, Sierra Leone and the UK. In Cameroon and Sierra Leone's VNRs, in partnership with others, Sightsavers founded civil society SDG forums and provided significant leadership in linking civil society, including people with disabilities, with those leading the VNR processes in government. This approach has ensured more consultative and open national VNRs, and important commitments to implementation of the SDGs for people with disabilities.

High-level meeting on UHC

In September, a high-level meeting on universal health coverage (UHC) was held at the UN General Assembly in New York, where UN member states adopted a high-level political declaration on UHC. Influencing the declaration has been a priority over the last year – particularly to ensure that the rights of people with disabilities are recognised. Member states have committed to accelerate efforts to achieve UHC by 2030. Crucially, the declaration recognised that leaving no one behind and reaching the furthest behind first is essential to making progress on UHC, and contains a number of welcome commitments on the inclusion of people with disabilities in UHC.

We have continued our positive working relationship with colleagues at the World Bank – building on our engagement over a number of years on the World Bank's recently published non-discrimination frameworks, disability policies and commitments made at the 2018 summit. Our focus over the last year has been on ensuring disability is meaningfully included into the International Development Association (IDA) 19 process – when donors and borrower countries come together to agree priorities over the next three years. We have welcomed the announcement that disability would – for the first time – be a cross cutting issue in the IDA process, and have been working to influence the process to ensure that when the final agreement is announced in December, disability is systematically and meaningfully included.

Look closer...



Calling for an Equal World: Our first steps into global campaigning

The past 18 months have been an exciting time for our disability rights campaign. In Ireland, we launched the Put Us in the Picture campaign with a photography exhibition in Dublin, and throughout the year we've been recruiting supporters. The campaign calls for Ireland's government to prioritise people with disabilities in putting its global development policy into action – a call that has fed into our wider global campaign.

In the UK, our Put Us in the Picture campaign ended 2018 with a successful photography exhibition held in the Palace of Westminster, and on 3 December, the UK government published its first disability strategy, which was the original call of our campaign when it launched in 2013. Given this achievement, we decided to turn our attention to the United Nations, where we'd had success in early 2018 campaigning for the better representation of women on the committee that monitors the UN Convention on the Rights of Persons with Disabilities (UNCRPD) through our call for an #EqualUN. This helped see six women elected to the committee – including Sightsavers' Advocacy Adviser for Social Inclusion, Gertrude Oforiwa Fefoame, who was Ghana's nominee – where previously there had only been one.

We launched our new global campaign, Equal World, in March 2019 in New York, aiming to build the foundations of a global campaigning model for Sightsavers. Our key focus this year has been a petition calling on the UN and its member states to uphold disability rights, with national-level petition requests in 13 of our programme countries throughout

Africa and Asia. In Nigeria, Guinea, Mali and Pakistan, for example, disabled people's organisations have used the petition to influence the implementation and approval of respective Disability Acts and/or Bills, while in Malawi, the national-level petition called on the government to protect people with albinism. This country-level campaigning has resulted in DPOs, disability activists, country office staff and members of the general public campaigning for equality and an end to disability discrimination.

The petition generated more than 50,000 signatures from around the world and was handed in to the UN Secretary-General's office in early December. In 2020 we aim to build on this achievement and ensure progress continues towards the global implementation of the UNCRPD.



Stella, from Cameroon, has a mobility impairment. She has been able to attend school as part of an inclusive education programme.

© Sightsavers/Rodrig Mbok

A community event to raise awareness about symptoms and treatment of onchocerciasis in Makoupsap, Cameroon.



Community based participatory research

Sightsavers strives to build inclusivity into every element of our programming, across our portfolio. This approach goes beyond the design, monitoring and implementation of our projects; it also informs the research we gather, and crucially, how we gather it. In last year's report we explained the approach of community-based participatory research (CBPR) which is not only in alignment with the principles of inclusive practice, but can also improve the involvement of the people who are hardest to reach and better utilise the lived experience found in the communities in which we work.

MMDP In Nigeria

In Nigeria in January 2019, we started the Morbidity Management and Disability Prevention (MMDP) project, with funding from the Task Force for Global Health. As part of our efforts toward continued and improved inclusivity in our lymphatic filariasis (LF) programme, we sought to understand the challenges and needs of people affected by NTDs and their co-endemic diseases. In addition, we sought to assess the additional health services required to manage morbidity and prevent disability beyond the platform of mass drug administration.

We adopted a CBPR approach. This centres on the principles of respectful collaboration, mutual dialogue, and shared decision-making. A total of six co-researchers (consisting of patients living with different disabilities ranging from leprosy and hydrocele to lymphedema) and six health providers were drawn from six local government areas, from two states (Kebbi and Benue).

The first phase of this research provided an opportunity to collectively plan, collect and analyse data to investigate the extent to which the support needs of people affected by NTDs are being met by existing programmes and how new programmes can be designed to meet outstanding needs. This practice facilitated the communities' engagement in highlighting the problems associated with seeking health care services.

As we move forward the next phase of the study will provide a unique opportunity for people living with disabilities to work alongside Sightsavers to design and develop the interventions that will best meet their needs.

Disability disaggregated data



In July 2019 we held a disability data disaggregation (DDD) learning and reflection workshop for key stakeholders internally working on DDD. This was an opportunity to explore what we are doing well in terms of our DDD work, what the challenges were, and what we wanted to do better or differently. As a result of the discussions and our learning over the past few years, we have updated our vision for disability data at Sightsavers.

Sightsavers' vision for disability data

The inclusion of people with disabilities is at the heart of Sightsavers' mission and is now a key aspect of our health, education and other social inclusion work, including political participation and economic empowerment. We aim to be a leader in learning how disability data can best be collected, analysed and used to improve the effectiveness and equity of development programmes.

Disability data is increasingly collected within Sightsavers' programmes where and when it is useful and ethical to do so. We analyse and use this data to help build our evidence base and improve the inclusiveness and effectiveness of our programmes, learning as we go to better understand how best to collect and integrate it.

We share our experiences and encourage other development actors to collect and use disability data to ensure that development progress is inclusive.

Collecting DDD in our programmes

Our recent experience of collecting disability data using the Washington Group Short Set of questions (WGSS) has focused mainly on inclusive eye health programmes. We have used this learning to strengthen practice and we now, through the monitoring, evaluation

and learning (MEL) team working with staff in our country offices, routinely build in the collection of disability data into all new inclusive eye health programmes. Central to this approach is ensuring that the collection of disability data continues to answer specific questions and builds our evidence base.

We are now looking at the systematic collection and use of disability data (using the WGSS) in other areas of our work including NTDs, education and social inclusion, and in projects where we are working as part of a consortium like DID, Inclusion Works and Ascend.

The Washington Group has also developed a number of other question sets to address some of the limitations of the WGSS and to reach out to specific population groups such as children. Sightsavers, through our research team and the MEL team, is currently at various stages of testing these in specific programmes. They include the Washington Group Extended Set on Functioning and the Child Functioning Module. In addition, we are increasingly looking for opportunities to work with governments and other organisations to explore how disability indicators can be integrated into health and education management information systems.

We also continue to consider the use of other tools such as the Model Disability Survey developed by the World Health Organization, and using medical and functional assessments.

Using DDD to help inform our programmes

We continue to improve our understanding of what our data is telling us, and to act on the findings. For example, from the first year baseline collection of data in our inclusive eye health projects in 2018 in Bangladesh, Pakistan and Mozambique, the data shows us that people with disabilities are accessing our services; that prevalence of disability and non-visual disability was higher among women than men; and that it was higher in rural district facilities and outreach camps compared with secondary health facilities in urban areas. This data will now be compared to data collected in year two to help inform and strengthen the different programme activities.

We are also gaining a better understanding of the limitations of the data and what it isn't telling us. This is paramount to inform further work we need to do in this area. We are looking into how to integrate data on disability with other factors of equity into our programmes, in order to monitor participation and need, and ensure that services are accessible to all and of the same quality.

Sharing our DDD learning

We are using the disability data to inform policy briefs and to promote our work more widely; making recommendations for how disability data can be collected in different contexts and highlighting that development actors must do more to address the global lack of data on disability and development.

Sightsavers is also one of the founding champions and an ongoing supporter of the Inclusive Data Charter, a global initiative to accelerate progress around data disaggregation as we work towards the Sustainable Development Goals. This, alongside other opportunities we are facilitating, gives us an international platform to share our experiences of disability data disaggregation, and collaborate and learn from others.

Looking ahead

Exponential growth in our funding for social inclusion programming over the reporting period means that 2020 is likely to generate a lot more evidence around what works, and more importantly, what doesn't.

In 2020, we will have five inclusive eye health projects running – up from three in 2019 – and others in the pipeline. Each initiative has enabled us to refine our approach and we now have a lot of experience about which interventions lead to greater inclusion of people with disabilities. Our ambition in 2020 will be to scale this learning up to other health sectors, working with mainstream partners to demonstrate good practice. Our Ascend programme will also be well underway and we will be reviewing the progress on delivering our strategy to leave no one behind. With 13 countries involved in Ascend, there is huge potential for cross-country and cross-sectoral learning.

We will continue efforts towards becoming an accredited Disability Confident Level 3 employer, and our social inclusion working group will evaluate the organisation's progress in 2020 and revisit our plan of action.

To further enhance the impact of this training organisation-wide, we have conducted a training of trainers session for two new facilitators, including one who based in Kenya, with a view to expanding the training to our country offices more effectively. Staff with disabilities will also have the opportunity to be part of a Disabled Employees Network. This will be a first within Sightsavers and we look forward to it contributing further to our effort to become an employer of choice for people with disabilities. Also, in 2020 we expect to run another staff disability survey

which, we hope, will generate further useful knowledge about how staff feel about disclosing their disability status, among other disability issues.

Our inclusive education portfolio is set to grow substantially with the start of the education projects under the Inclusive Futures programme – in Nigeria, Nepal, Tanzania, Bangladesh, and two projects in Kenya – in which we will be demonstrating innovative and scalable approaches.

We are also launching two projects funded by People's Postcode Lottery – one in Malawi, focusing on early childhood development and education, and one in Sierra Leone with a focus on pre-service teacher training and community-based inclusive education.



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Awa is a member of a DPO, and vice president of the women's association within the national union of blind people in Kaolack, Senegal.

January 2020 will also mark the launch of a report into the education provision for children with visual impairments across sub-Saharan Africa. Sightsavers was commissioned to produce this by UNESCO, to feed into its Global Education Monitoring Report.

Our political participation projects are in the process of being externally evaluated and the draft report already indicates areas where we are making solid progress – not least in terms of raising awareness around disability inclusion with decision-makers. We anticipate that there will need to be a review of the programme’s measurement tools and this will likely drive some innovative thinking. Designing projects that are truly pan-disability in focus requires significant investments in time, creativity and resources.

While at the Zero project award ceremony in 2019, we gained greater exposure to the challenges faced by people with intellectual disabilities in representation and participation. People with intellectual disabilities are often invisible, and excluded from political participation and public life, even if they are not excluded by law (although many are). As a result of what we learned, we have decided to expand this focus and will begin mapping existing associations that work with people with intellectual disabilities in Senegal and Cameroon, and identifying opportunities to better engage this especially marginalised group in our work.

In 2020, we anticipate generating some early learnings from the Inclusive Futures programme. This, combined with a reflection on our successful livelihoods initiatives in Uganda, will yield knowledge that will be invaluable in the design of future economic empowerment projects.

Sightsavers already tracks the coverage of our projects by sex but we are about to embark on a project to roll out the data more systematically to all staff within the organisation, where appropriate, starting with our country offices. This will happen over the next two or more years and should mean that sex disaggregated data gets a much bigger profile within the organisation. We will also be providing analysis support to our country offices to ensure they can use these dashboards and data to inform programme management. As sex disaggregated data will be a key part of this, we are hoping for it to play an increasing role in on-the-ground management and decision-making. Also, a new performance oversight model is being trialled this quarter which provides, for the first time ever, the ability for our monitoring, evaluation and learning team to look at sex and age disaggregated data within existing accountability processes. There will also be a synthesis review which will explore gender in our recent programming in more depth, drawing initially on the current internal evidence base on gender inclusion from our evaluation reports and from an analysis of the sex-disaggregated data available from our portfolio.

We know there is a lot more we need to do in order to effectively deliver our social inclusion strategic framework. But with our additional financial and human resources, we are at an important stage of turning our ambition into something tangible. We will continue to reflect, learn and share evidence in the year ahead.

References:

1. United Nations Disability Inclusion Strategy
2. DFID Disability Inclusion Strategy
3. IDC Report – DFID’s work on disability-inclusive development
4. Government Response to IDC Report on DFID’s work on disability-inclusive development



Collins Kyategeka
photographed with
the motor repair kit
donated to him by
Sightsavers at the
career fair event held in
Masindi town, Uganda.

We work with partners in low and middle income countries to eliminate avoidable blindness and promote equal opportunities for people with disabilities

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