

**The National Strategic Plan of the Disability Sector in the Occupied  
Palestinian Territories**

**For the Supreme Council of the Affairs of Persons with Disabilities**

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## **From the Supreme Council of Persons with Disabilities:**

Palestine commits itself to the United Nations convention on the protection of the rights and dignity of the persons with disabilities in 2006. The persons concerned with the Disabilities sector work and coordinate their efforts as part of a general national attitude to support the persons with disabilities and help them use their energies and expand their participation in the process of building and developing the Palestinian society and its liberation from the occupation.

The national strategic framework of the disability sector provides a suitable ground to enable all active organizations in the sector to abide by a unified national attitude to joint efforts to improve the living standard of the persons with disabilities, their families and their surrounding them giving the opportunity for leading the process of the community transformation of concepts and beliefs. This commitment stems from a need to increase and deepen coordination and cooperation among all the influencers in the sector to confront the challenges which impede the full and effective participation of the persons with disabilities and also to reduce dispersion and duality in the sector while preserving diversity.

This strategy was based on the efforts of all effective organizations in the sector including both governmental and civil organizations and the organizations of the persons with disabilities with the effective participation of the persons with disabilities themselves whether at the level of sectors or geographical distribution.

The work to promote the strategic framework coincides with the formation of the Supreme National Council of the Affairs of the Persons with Disabilities which in its turn will supervise the completion of the sectoral policies, operational plans and follow-up of the implementation of the plan, control on the implementation process and compliance with carrying out the revision annual evaluation of the plan.

The Council in its official capacity and its members in their representative capacity commit themselves to abide by the plan and work to put it into implementation

In conclusion, the Supreme Council extends its thanks and appreciation to whoever contributed to this national achievement, especially the work team of the Development Centre and other effective Palestinian institutions which contributed in their turn to enrich this product.

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## **First Part: The Introduction and Methodology of the Work**

## **First: An Introduction to the Strategic Plan**

The Disability sector in Palestine witnesses a dynamic movement at all levels in which all efforts from active of several parties organizations operating in the sector are being condensed to improve the standard of living the for persons with disabilities and integrate them in a community that accepts diversity. This strategic framework comes to promote the efforts made to coordinate and animate the existing and potential energies in the sector that expressing the need for providing suitable grounds for a joint action aiming at the development of a strategic framework for the persons with disabilities. Hence comes the need for participating in the development process which requires concentration on tackling with the developmental issues and building the community and the state without neglecting the role and place of the active organizations in the sector and their efforts to obtain their national rights. The Disability sector in Palestine is subject to external influences. Like other sectors, it interacts is influenced by the total changes of the surrounding environment. It is dangerous to subdue to the influences of external variables without being prepared to confront and address them. In order not to deal with these variables according to energy consuming reaction and unknown results, it is necessary to work in accordance with a clear vision and a path of action seeking to achieve specific targets enabling us to use the available energies and mobilize the potential energies in an effective manner. A diverse group of official and civil organizations and unions interact inside the sector. Risks escalating under this institutional variation and uncertainty associated with different identity, sense, changes rabidly and growing external threats. Therefore, the future management process is of great importance in this regard. While it is characterized by a high degree of difficulty and in the light of this importance, several organizations operating in the sector work to grope their future and build it according to clear guidance, distant from continuous response to reactions. Under the uncertainty about the future, the success of these organizations depends on clarity and harmony of their purposes and priorities. This strategic framework seeks to provide the suitable grounds for the work of the active organizations in the sector on the one hand and management of the future on the other hand.

The people with disabilities often face a set of problems including:

- Poverty
- Limited access to opportunities.
- Weak community acceptance and discrimination on the basis of disabilities as a reflection of prevailing negative attitudes
- Incomplete legislations in general not implemented.
- Limited policies lacking comprehensiveness and undeclared and not implemented.

It is not possible to confront these issues individually or randomly which requires in its core making radical changes on the disability sector and on the society in general . The importance of the strategic framework of the disability sector stems from the need for leading and managing the desired changes in the shift process in the life of the persons with disabilities and in the society as a whole. This plan is

considered, as a strategic framework, constitutes a tool and an opportunity to manage the process of change in a unified framework and with the participation of concerned parties. What have exactly been mentioned expresses the need for strategic planning? It is necessary to shift from responding to reactions to planned and studied action based on strategic vision and objectives as well as the shift from. This will shift from fragmentation of aimless efforts to the concentration and massing the resources to confront a specific case or a certain situation. Within the framework of a group of radical changes in the work and concepts in the sector, perhaps the most important of them is strongly involving the persons with disabilities in work sector. Through this involvement, their initiatives and their pressure to make the disability issue among the Palestinian National Community work priorities, the joint collective action at the disability level becomes a strong crane to manage the transformation process and a driving force to bring about the desired change. What about the possible scenarios? Shall we abide by this strategic framework and work to implement it in the case of the continuation of the status quo (incomplete national sovereignty and the continuation of the occupation) or shall we work on the increasing deterioration of the situation (the return of the occupation ,and the worsening of the political situation ) or within the framework of a sovereign Palestinian State, in addition to that , the potential diversity in the roles, responsibilities and the alternation which could happen on the positions of the stakeholder level and accordingly their role in implementing and following up the implementation of the strategic plan. However, starting from comprehensive strategic issues makes the implementation of process possible regardless of the scenario besides . Starting from the policies which lead the work enables everybody to adapt and work in the implementation under all potential scenarios. What is important here is to lead and manage the change process towards the goals and not to be held in programs which depend on the political situation, the funding opportunities and in some cases the change of the first row of leadership. Hence, the leadership of the work within a unified strategic framework which guarantees diversity and variation in the sector means the necessity in choosing known and clear directions and massing efforts and energies to achieve specific goals and joint vision. It basically aims to fight swing in the institutional work between the charity and the medical model and based on the process rights and development perspectives.

In order to make it possible to engage all stakeholders in the sector in the planning process and the implementation of the plan, the ordinary procedures were neglected alternatively , the work began on the development of a broad strategic framework including everybody and leading all energies through specific work policies with a unified vision instead of explaining all operational details with a framework of a detailed plan involving divergent some of them can be applied ,others were excluded . The engagement whether of the persons with disabilities must be one of the basic components of this strategic framework by involving them in the development or their participation in the implementation process, control, revision and assessment of the strategy.

This strategic framework provides a tool to lead the national work in the disability sector within a unified vision for joint work as part of the legal and development framework. This strategic framework provides

five strategic topics based on the intervention attitudes through their policies associated, immediate and future intervention programs, and building the capacities of the organizations operating in this sector.

The development of this strategic framework requires converting its strategic subjects and policies into work programs for the organizations operating in this sector, and luring the organizations and parties working in other sectors and fields towards this field. As strategic planning is a dynamic process, the presentation of this framework constitutes the beginning of well-connected and continuous processes which begins by commitment to this strategic plan, working to implement it, monitoring the implementation process, assessing and revising the plan in order to measure its success and harmony with the surrounding environmental developments.

## **Work Methodology**

The methodology adopted by the strategic planning team is based on working in multiple directions in disability field taking into consideration the best investment of time and effort. The methodology concentrated on the direction of studying the reality, diagnosing it and finding an inclusive vision based on the rights as a part of various community variables through It is occurred cope with developmental processes and attitudes at all levels in addition to the contribution of this sector to both as actors, influencers in the development process and beneficiaries similar to the rest of the segments and groups of the society based on the basis of a fair and enabling the persons with disabilities to achieve a decent life and citizenship on human rights basis. The strategic planning of the disability sector transpires its goals from its importance as a development thought on which the vision and attitudes are developed to participate in facing the challenges in this sector. They are achieved through the most effective methods which reduce exclusion and marginalization of the persons with disabilities. The treatment of the Disability sector issue as a part of this strategic planning process in the first place is based on the cognitive outcome that clarifies the fact of the problems and factors, affect this issue and are influenced by it. Accordingly, the research team adopted a participatory work methodology with all effective parties, the persons with Disabilities and their families, the civil and governmental organizations, the disability organizations, some of the local bodies and human rights organizations, international organizations and various community individuals and organizations.in general of , the various attitudes of societal groups' towards a certain issue and the effect of these attitudes on the practices are one of the most important factors affecting this issue and which are reflected on the various life aspects of the group which face these reflections and are influenced by it .The participatory methodology depends on the work team in terms of diversity It was also based on the comprehensiveness of the dialogues in terms of the discuss axes , their openness and in terms of the geographical and regional distribution.

### **Work Stages and Methodology:**

The designing and building of the strategy was based on the participatory methodology; in designing the research tools, in dialogue, discussion, analysis and the conclusions. This attitude started from the convictions of the research team concerning the multiple models which deal with the issue of Disabilities in the Palestinian institutional context .It is reflected on the mechanisms adopted in dealing with the disability issues at the institutional and societal levels.

### **The strategic planning the process of through the following stages:**

#### **First phase: Formation of the Strategic Planning Team and the Preparation Process**

1. The strategic planning team consists of five persons. including researchers in the field of disabilities, strategic planning expert and experts in this sector from the persons with disabilities. The Disability Department in the Ministry of Social Affairs was approved as a reference for the team in addition to more expanded reference group formed from the active organizations in the sector.
2. Revision of the international and local literatures concerning the disabilities' issue beginning from the rights and legislations, passing to the related models, various perspectives and ending



with the strategies as well as the statistical studies dealing with the social , demographic characteristics and the conditions of the persons with disabilities in Palestine (see the references list).

3. Holding a workshop for launching the strategic and the approval of It is methodology.

#### **Second phase: Field Work**

1. Ten meetings of Individual consultancy interviews and meetings were held with the representatives of the concerned organizations which included the Ministry of Social Affairs, Ministry of Education and Higher Education, civil organizations, unions and disabilities' experts.
2. : Twelve workshops at the level of the Governorates were held at the level of the Governorates; 9 in the West Bank Governorates and four in the Gaza Strip. Different actors participated in these meetings whether on individual or institutional based on Disabilities issues who were no less than 180 actors from both sexes.

#### **Third phase: Focus group Meetings at the District Level**

1. Seven specialized meetings focus groups were held at the district level. These meetings were expanded because they included specialized organizations with various roles. two meetings with the governmental organizations, a meeting with civil organizations, a meeting with the organizations concerned with laws and legislations, meetings with the service provider organizations and another one with the persons with disabilities organizations.

#### **Fourth phase: Analysis Phase**

1. Filling the questions of related the concerned persons. This form was distributed to various effective organizations in the disability sector. It concentrated on four main items: 1) A general description for the characteristics of each organization that connected with disabilities. 2) Points of strength of each organization. 3) Points of weakness facing the work of each organization. 4) The potentials of future perspective intervention in the strategy.
2. Four expanded analytical workshops were held in which different parties participated. They lasted for four working days continuously. Which aimed at producing the sector tree problem analysis for, identifying and formulating the strategic issues, identifying the issues resulting out comes , analysis of the sector presenting the concluding mission, vision and the value system governing the work of the system.

#### **Fifth phase: Presenting the Results of the Work**

1. The results of the first draft of the strategy were presented and discussed with concerned the parties in the West Bank and the Gaza Strip. This framework was developed in accordance with their notes .

2. Presenting the plan document to the National Council of Disabilities for discussion, development and approval.

## Second Part: Analysis of the Sector's Environment

### First: Concept and Its Development<sup>1</sup>

In the current Palestinian reality, there are group of the conceptual frameworks in dealing with the disability issue as well as disproportionately spreading in other countries . Perhaps the most important conceptual frameworks dealing with disabilities are:

- 1- **Charity Model (inferior):** It depicts the person with disabilities as a disabled person who needs kindness and compassion. This model leads the issue of disabilities to the care institutions which deal with the social affairs of the persons with disabilities giving them the aid needed as a part of their responsibility towards them .It is also a matter which is based only on the relief dimension considering them unable to integrate and participate effectively in the society, practice their life and carry out their responsibilities.
- 2- **Economic Model:** It defines disability as “the inability of the person to practice work”. It also evaluates the degree to which weakness affects the individual’s productivity and the economic effects of it on the individual, employer and the state. It includes the loss of income, the push of the individual to seek aid, less profit margins for the employer and the social insurance payments. This model is directly associated with the tragic/charity model.
- 3- **Medical Model:** The medical model defines disability as “a problem related to the individual and directly resulting from disease or other health disorders, or trauma or another health problem and as a result of this , it is requires condense medical care which is provided in the form of individual treatment by professional specialists.” In the medical model, the confrontation of the disabilities aims at achieving medical treatment or amending the individual and the behavioral change which leads in general to treatment or effective treatment of disabilitythe medical care available in the medical model is also regarded as the main issue. At the political level, the main response is the modification and correction of the health care policy.
- 4- **The Interactive Social Model:** This model defines disability as “a negative interaction between the person with disability and all environmental, institutional barriers and obstacles which impede the person’s access to the social, political, economic, civil and cultural life **in equal** with

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<sup>1</sup> The details of references and literatures are available in the annexes see for example DET( Literatures series of Disabilities equality training). Manual (1) : Their training and our training : Social equality in the society manual by Lez R, Paul Dark and Inji Ono. Training Manual (2) Promotion of the Disabilities level from theory to practice by Even Malojin and Inge Ono or see also (Nagata, Kozue Kay (2008) & Leeds University 1996).

others. Some of these barriers and obstacles can be summarized in the following: the negative community attitudes towards the persons with disabilities and their result from prejudice practices and policies in addition to that the organizations working in the field of disability adopt the policy of isolation in dealing with the issue of disability and the persons of disabilities, inflexible institutional practices and policies, the non-access of the persons with disabilities to information as a result of the adopted design and dissemination techniques, absence of the minimum elements of adjustment in the buildings, inadequacy of the means of transportation and the negative reflections resulting from the cultural heritage towards disabilities.

- 5- **Human Rights and Developmental Model or Perspective:** In its definition of disability, this model is to a great extent similar to the social model. But most importantly, it confirms the rights of the persons with disabilities and doesn't generally differ from the human rights which are inseparable and indivisible. It does not also separate the disability issue from the other various issues. The disability concept is subject to development and it is not constant at all. It confirms that the persons with disabilities are the basic engine of their own life and the only reference to determine the required interventions in their issues at the level of policies, legislations, strategies and interventions concerning them in the various sectors taking into consideration approving the required procedures, facilitating arrangements, the individual differences, gender, age and all fields of life<sup>2</sup>.

The model is prevailing in each society as a reality and concept that applies to the public practices in words and behavior and is necessarily reflected on the definitions on which the legislations, policies and strategies are based on include all the interventions that can be approved, complied and implemented by the state towards the issue of the persons with disabilities. The definition which was mentioned in the Palestinian law regarding the rights of the disabled person (1999) was an essence of the Palestinian culture with its attitudes, habits and customs towards the persons with disabilities. This definition was reflected on a big set of interventions and programs targeting the persons with disabilities in various sectors.

**This plan starts from the human rights developmental model** and in accordance with the special concept of disability as mentioned in the UN convention of the Rights of the Persons with Disabilities in 2006 where disability is defined in the permeable **as a constituting concept which is still underdevelopment and that disability happens because of interaction among the persons who have problems, difficulties and barriers in the surrounding situations and environments which impede** their full and effective participation in their society on an equal basis with others.

The term basis a person with bold disability as mentioned in article (1) (the purpose) includes all the persons with difficulties or with long term impairments whether physical, mental or sensory which may prevent them when dealing with various barriers from the full and effective participation in the society equally with others.

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<sup>2</sup> The united Nations Convention on the Rights of Persons with Disabilities, Permeable, General Concepts 2006.

## **Second: Persons with disabilities in the Palestinian reality, analysis of reality from a legal, economic, social and political perspective**

### **The Human Rights Framework for the Persons with Disabilities/ Laws and Legislations**

At the Palestinian level the legislative initiative was fruitful in integrating disabilities in the legislative process and the enacting , of laws. This initiative represented an important achievement which in its turn constitutes a promising leap at the level of human rights work in on the ground. Efforts were made to intermix the technological development in the Palestinian reality and inspire the change spirit derived from the nature of the qualitative political transition in the Palestinian territories represented in the establishment of the Palestinian National Authority benefiting from the principles, conventions and laws of the world.

The above mentioned initiative resulted in legal provisions organizing disabilities in Palestine considering it as joint a responsibility of several governmental and non-governmental parties and it also resulted in the enactment of the law of the rights of the persons with disabilities no. (4) in 1999 as an independent legislation including a group of provisions, articles and basic rights needed for the life of the persons with disabilities. In addition to other provisions specified in the effective laws which are related to the general reality; the most important of them are: the Palestinian revised basic law (2005), labor law 7/2000, civil service law 4/1998. In spite of the importance of this law, its role on the ground and the need to put it in application and implementation, there is a failure and weakness in it which can be summarized in the following points<sup>3</sup>:

**Definition:** The definition mentioned in the law of the persons with disabilities refers to the disabled and concentrates on the organic disabilities and functional deficits (degree of disabilities or difficulty) and the which effect the limited effectiveness of this activity which does not accord with the modern attitudes in the definition of disability as mentioned in the international convention. This definition also affects the nature of the governmental procedures and policies which shall be designed and adopted to meet the requirements of the persons with disabilities based on the health perspective only.

- **Absence of the peremptory capacity:** The law did not provide for accountability mechanisms and control systems in a way that guaranties its full implementation.
- **Blurred systems and regulations** which were translated in a way that explains all the details of the translated text and guaranties its implementation showing the executive bodies charged with monitoring to what extent the organizations are committed to its implantation, a matter which made the disability issue as social cases issues belonging to the departments of the Ministry of Social Affairs.
- **Existence of a legal contradiction between** the texts of some of the legislations organizing the rights of the persons with disabilities. While both the disabled rights law and labor law provide for the right of the persons with disabilities to work at the percentage of at least 5%, article (24)

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<sup>3</sup> Rights of the persons with disabilities law No. (4) 1999.

of the civil service law provides for that the applicant for a job that should be free from diseases and disabilities.... Etc. In addition to the contradiction resulting from the implementation of the public rights regulations making them limited to specific group such as customs exemption which was limited to physically disabled persons only while the law of the disabled made it an absolute right to everybody.

## 2- The most important indicators and the reality of the persons with disabilities in the Palestinian territories<sup>4</sup>

According to the expanded definition (it has some difficulty, great difficulty cannot at all). The percentage of disabilities in the Palestinian territory is about 7%. It is the same percentage in the West Bank and the Gaza Strip. According to the narrow definition (great difficulty or cannot at all) this percentage in the Palestinian territories amounted to 2,7% and 2,9 in the West Bank and 2,4% in the Gaza-Strip. It amounted to 2,9% among males while 2,5% among females in the Palestinian territories.

The Percentage of Disabilities in the Palestinian Society in accordance with the Narrow Definition and Expanded Definition.

Type of Disabilities	Narrow Definition (Great difficulty - cannot at all)			Expanded Definition (some difficulty – great difficulty – cannot at all)		
	Palestinian Territories	West Bank	The Gaza Strip	Palestinian Territories	West Bank	The Gaza Strip
Total disabled difficulty	2.7	2.9	2.4	6.9	6.9	6.9
Total disabilities/difficulties	4.6	4.7	4.1	11.0	11.3	10.8
Visual	0.6	0.6	0.5	2.4	2.5	2.4
Hearing	0.4	0.5	0.3	1.3	1.3	1.2
Physical	1.3	1.4	1.1	2.9	3.0	2.7
Memory and concentration	0.6	0.6	0.6	1.5	1.5	1.6
Communication	0.6	0.6	0.5	1.1	1.2	1.0
Slow learning	0.7	0.7	0.6	1.1	1.1	1.2
Psychological	0.4	0.4	0.4	0.7	0.7	0.7

when discussing the results with the relevant organizations and the disability organizations, the persons with disabilities and their families, several questions emerged about the statistics especially within the narrow concept. The organization notices that according to the international standards and the indicators available to them from the field and in the light of the social culture and social and political

<sup>4</sup> These results are based on the survey concluded by the Palestinian Central Bureau of Statistics in partnership with the Ministry of Social Affairs (Survey of the Persons with Disabilities – 2011)

situation that, Disabilities rates in the Palestinian territories are much larger than this rate. We would like to extract the following texts from the discussions held in the regional workshops about the issue:

- The rate is much larger because the disabilities especially those of females are concealed. Hiding persons with Disabilities is associated with the social culture. Cultural concepts some cases were occurred to in the Governorates of Hebron and Nablus. There are families who refrain from registering their disabled boys and girls for social considerations.
- It is expected that the disabilities' rate in Gaza will be higher than the West Bank due to the last wars on Gaza.
- There are some cases of persons of disabilities who are not registered in the civil status registers. Children with disabilities are not registered in the civil register.
- Absence of the accepted standards to define a conceptual framework for the definition of disability.
- There is no approved definition applicable to the persons with disabilities in Palestine and the definition mentioned in the law is not clear.
- The official authorities including the Ministry of Social Affairs, Ministry of Health, the Ministry of Education and Higher Education) and also the Union register the disability cases as they receive them and there are no unified information in one register.

**Demographic indicators of the persons with disabilities (according to the narrow concept):**

- The male disability rates (2.9%) are higher than that of females (2.5%).
- Disability rates rise with the rise of age.
- According to Governorates indicates , Jenin Governorate registered the highest disabilities' rate while Jerusalem was the lowest where the rate was 4,1% of the total individuals who are disabled in the Governorate of Jenin, followed by Hebron Governorate where the rate was 3.6% .This rate was 1.4% in Jerusalem Governorate. In the Gaza Strip the highest rate was in the Governorate of Gaza (2.5%), one third is in the Governorate of the North of Gaza, Rafah and Dair El Balah with the same rate of 2.4% while the lowest was in the Governorate of Khan Yunis (2.2%).
- The survey results showed that the physical disabilities is more spread among the persons with disabilities. The results showed that 48.4 % of the total persons with disabilities suffer from physical disabilities, followed by slow learning disabilities (24.7%).
- The medical reasons are most prominent reasons of disabilities. 43.7% of the difficulties/ visual disabilities were due to medical reasons. This reason formed 29,1% of the hearing impairment, 42.9% of the physical disabilities, 28.7% of the memory and concentration disabilities and 27.6%

of the slow learning disabilities and 27.2% of the psychological disabilities while the congenital reasons were responsible for communication disabilities 33.6%.

**Social and economic indicators for the persons with disabilities ,15 years and above (according to the narrow concept)**

- More than one third of the persons with disabilities did not join education at all. The survey results show that 53.1% of them are illiterate.
- Results indicated that 87.3% of them were unemployed (during the survey period in 2010/2011).
- 34.1% of the persons with disabilities did not marry at all while the rate of marriage among the persons with disabilities is 44.5% in the Palestinian territories without any differences between the West Bank and the Gaza Strip. The rate of widows (including both sexes ) is 18.2% ,15.9% in the West Bank and 23.1% in the Gaza Strip .The divorced (including both sexes) rate is 2.4% in the Palestinian territories, 2.8% in the West Bank and 1.6% in the Gaza Strip.

**There is a need for information (results from various workshops)**

- The information accuracy level is retreating before the sensitivity of the socio-psychological issue. Therefore, the data is below the actual fact.
- The bad economic conditions drive the family to submit inaccurate data to get support and aids.
- The rates are below the reality though the study is scientifically correct. This is associated with the distribution of disabilities (the increase of disabilities in the poor areas).

**Effects of the environmental and material obstacles on the life of the persons with disabilities 18 years and above:**

- The majority of them are unable to use the public transportations.
- One third of the persons with disabilities face total difficulties in performing their daily activities at home.
- More than one fifth of the persons with disabilities little bit level (drop) education due to the environmental and material obstacles.
- Difficulties in the practice of the daily activities (a little more than one third face difficulties in having a bath independently. Nearly one third face difficulties when they put on their clothes and they face difficulties in using the toilet) .

**Disabilities and Lack of Services (results of various workshops)**

- Weak participation of the persons with disabilities in identifying their priorities and their need for services.

- There is a weakness in the self-assessment indicators of the organizations. This leads the organizations to accept work easily where they will be satisfied with just providing the service while avoiding the most difficult projects of working with cognitive disabilities and to Where work and evaluate of the effects need a long time.
- Absence of national policies which guarantee access to the services.
- Absence of complete crew as well as the limited specialization, especially in the diagnosis process.
- Inaccuracy of information and their limitation.
- The absence of the service is connected with the cost.
- Lack of justice in distributing the services geographically and according to the kind of disability.
- The association of the services with the funding agenda and their priorities not according to the local need.

The sector is managed through projects here and there by either civil or governmental organizations funded by donors. These projects have definite durations which end by the end of funding. The sector is managed in this way. without mapping for the existing projects, their contents or the targeted groups. This indicates that the work is working run randomly without coordination and clear references in the management of the sector, especially in view of the fact that there are several actors.

#### **Urgent adjustments in the house infrastructure including adjusting toilets, kitchens and visual system.**

**Absence of adjustment, opportunities and access which contribute to the limited motion, transferability and getting key opportunities in learning and other services. (results of various workshops)**

- Lack of house adjustment.
- Lack of adjustment in public facilities and official institutions.
- limited mobility and transferability because of the lack of adjustment of public transport.
- Limited opportunities to integrate the children with mental disabilities.
- Academic and professional capacities and other capabilities of the persons with disabilities do not rise to the requirements of integration.

#### **Difficulties of implementing out the daily life activities outside the house of the persons with disabilities, above 18 years of Age.**

A majority of 84% of the persons with disabilities face difficulties in visiting the family and friends. The same rate faces difficulties in participating in social occasions. 85% face difficulties of moving around the local environment. A majority faces difficulties in having access to public services.

#### **Some difficulties in performing the activities outside the house because of the non-adjustment of the infrastructure of the surrounding Environment.**



It was found out that 54.7 of the persons with disabilities have difficulty in moving because the pavements of the street are inappropriate. As regards crossing the street, it was found out that 60.4% of the persons with disabilities face difficulties in crossing the street because of the lack of the infrastructure. As regards the size of the directional signs, it was sound out that 40.3% of the persons with disabilities face difficulties in walking and crossing the streets because of the non-adjustment of the size of the directional signs. 42.9% of these persons face difficulties because of the lack of recreational services and 48.4% of them face difficulties due to the lack of adjustment of the parking lots.

### **3- Social exclusion and marginalization of the persons with disabilities<sup>5</sup>.**

Generally speaking, the social attitude prevailing places the persons with disabilities in an inferior status even when we look at them in kindness and compassion. This attitude stems from the care culture before its being associated with humanitarian motives. This inferior view is consolidated in societal behavior which consolidates the circuits of exclusion and isolation of the persons with disabilities to the extent which makes the isolation environment and dependence a rule of life for these persons and their world through which they think. This isolation is explicitly expressed when the person with disability is a female. since she becomes a source of shame and perhaps disgrace. At the time when the persons without disabilities constitute the world of data for the persons with disabilities, they kidnap the elements of normal life from them. In addition to that, they produce vocabularies which classify these persons according to the kind of their disabilities and also words characterized by negative attitude, slander and mockery. For example, the person with mental disability becomes mad, the person who uses the wheelchair is called handicapped and the person with visual disabilities is called blind. Accordingly, the person's disabilities determines his/her identity and the ways of dealing with him/her in his/her surroundings whether individuals, groups or organizations in some cases.

**The persons with disabilities are still suffering from the negative view and the lack of societal acceptance which enhances the negative societal discrimination against them. (Results from various workshops)**

- Negative community discrimination against the person with disabilities.
- Negative typical view to the inability of the person with disabilities.
- The weak societal readiness to integrate the children with disabilities.

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<sup>5</sup> These results depend on a study conducted by the development study centre supported and funded by the Palestinian Women Centre for Researches and Documentation (2012).

- The attitudes and negative practices towards the persons with disabilities and in several fields( for example, the person with disabilities is considered as an obstacle to learning of the rest of his colleagues on the grounds that he needs more care and interest). The other issue is associated with and depends on the attitudes of teachers through their negative dealing with the students of disabilities or the provision of special potentials such as education.
- Attitudes associated with the disability concepts, listing them under medical concepts and that integration in schools is dependent on medical reports

### **Third: Disabilities and the National Policies:**

In light of the revision of a study conducted by the Development Studies Center – Birzeit University to monitor the sensitive indicators of disabilities in the policies, references and programs carried out by the civil, governmental and international organizations to include and integrate the issues of the persons with disabilities in 2010. It is noteworthy to refer to the **following conclusions**<sup>6</sup>:

- 1- The limit number of organizations in various sectors with in their plans , program and specific policies adopted in the inclusion of the issues of persons with disabilities and targeting them.
- 2- Weakness of the polices adopted by several organizations, programs and projects which are carried out by them .
- 3- Most of the organizations interviewed lack a policy which believes in the need not to exclude any group of the society and ensures taking all the necessary procedures that would achieve this.
- 4- Some of the policies, if available, are affected by the negative societal directions towards the issues of the persons with disabilities and they are necessarily reflected community on the issue of dealing with the issues of disability as a human rights issue and not sectoral.
- 5- The absence of a policy to organize the investment of the financial and human resources to include the persons with disabilities and guarantee their access to the rights and services on equal footing (basis) with others.
- 6- There is ambiguity in the decisions makers of many organizations about their concept of the general policy.
- 7- Some organizations indicate that they abide by the policy of non-discrimination, exclusion or exception but there are no measures taken by the officials to guarantee the inclusion of the persons with disabilities.

### **Disabilities and Policies (Results of various workshops)**

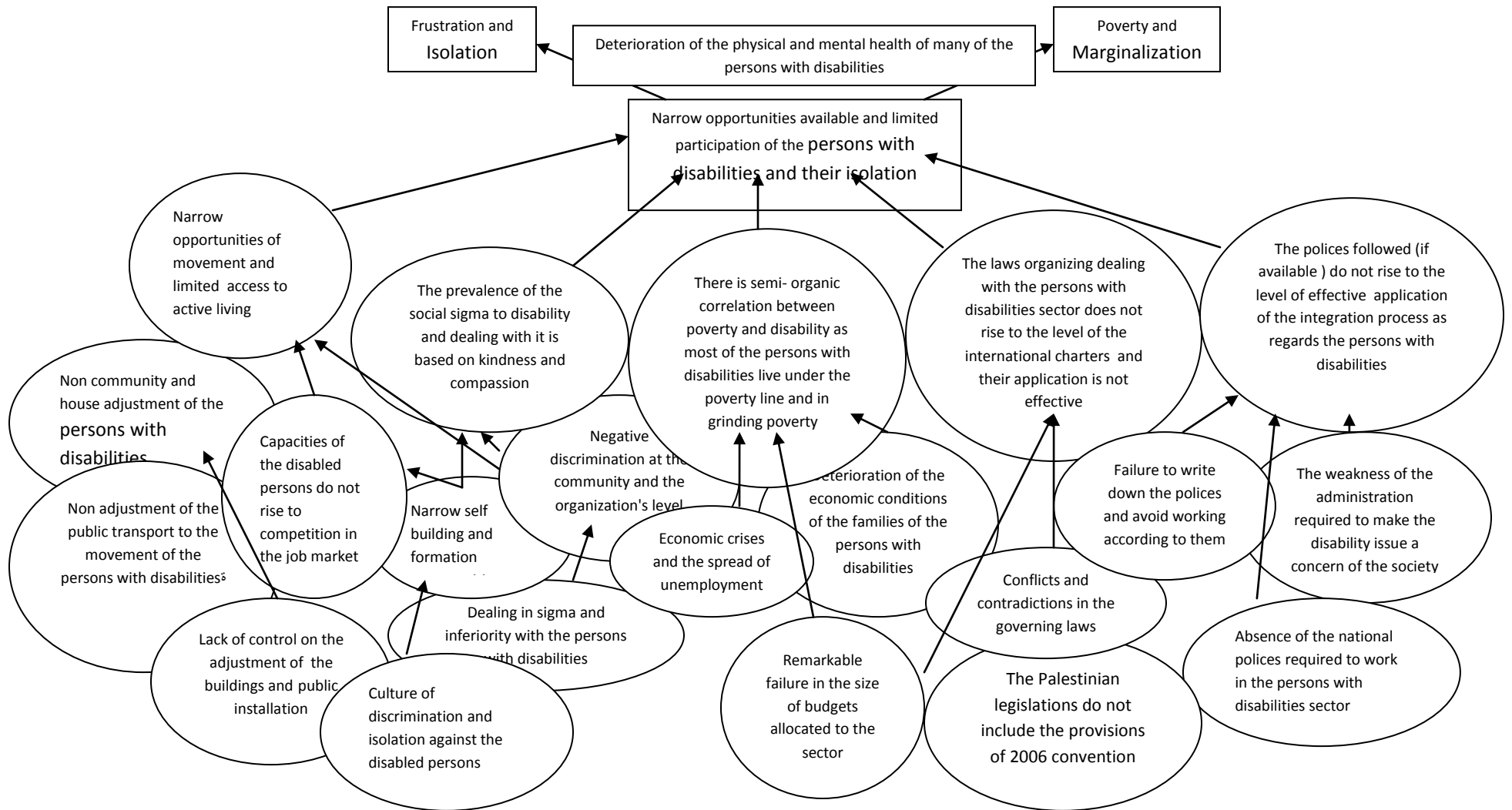
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<sup>6</sup> Development Studies Center, 2010 (unpublished study conducted on the sensitive indicators in the vital sectors and disability).

- There are multiple references in the issue of policies.
- Policies are not in force in the attitudes of the Ministries.
- Part of the policies is associated with the international funding and not as part of the national need.
- Attitudes affect the policies.
- In general the policies are still traditional and they do not rise to the level of the human rights concept.
- The policies are associated with persons and based on personal interests.
- The absence of indicators of policies implementation.
- There is a big gap in implementing the existing policies despite the problems they face (a gap between the theoretical and practical application in the field).

### Forth: Analysis of the Problem's Tree

In the light of the data contained above through the analysis of the reality and as part of the framework of a group of workshops, the Disabilities reality can be displayed through the following problem's tree :



### **Third Part: Analysis of Capacities:**

#### **Institutional Framework of the Persons with Disabilities' Sector:**

Analysis carried out by the persons concerned in the sector of the persons with disabilities, analysis of capacities and building challenges, the organizations and strategic issues in the field of capacities.

#### **The Supreme Council of the Affairs of Persons with Disabilities:**

An amended presidential decree was issued (at the beginning of 2012) which amended the presidential decree issued on September 2010 regarding the supreme council for persons with disabilities. This council included in its membership according to the decree 16 organizations including in its structure, governmental organizations, civil organization, the organization of the people with disabilities and the private sector in addition to the Independent Commission for Human Rights as an observer member. The decree specified the main objectives of the council as being the coordination of the governmental and non-governmental efforts aiming at the achievement of decent life for the persons with disabilities.

#### **The tasks of the Council shall be as follows:**

- Following-up the implementation and application of the international conventions which the Palestinian National Authority committed itself the persons with disabilities.
- Preparation of the required strategies and policies concerning the care and rehabilitation of the persons with disabilities and achieving their integration and participation in full in the society.
- Monitoring and observing the plans and achievements of the Ministries and all the organizations associated with the persons with disabilities to ensure the promotion of the government's performance in this regard.
- Evaluating of the achievements of all the governmental and non-governmental departments working in the field of Disabilities.
- Proposing to amend the legislations related to the persons with disabilities to ensure implementation of the strategic and public policies.
- Developing the required standards for the quality assurance of the programs and services provided to the persons with disabilities.
- Formation of the permanent and provisional committees to help the council carry out its tasks.
- Enacting a byelaw organizing the work of the council and showing its work mechanism.

#### **First: Governmental sector:**

##### **1- Description of the sector:**

The governmental institutions are one of the two pillars (in addition to civil organizations) of the disability sectors. The governmental institutions both the legislative and executive are responsible for planning and drafting the laws and policies and putting them into implementation. They often lead the coordination efforts through their supervision of the coordination committees coordinating the work of the various organizations in specific issues and fields including disability. An example for this is the Supreme Council of Disabilities and the National Committee for the Disability Card led by the Ministry of Social Affairs. The various governmental organizations work to implement specialized programs and the approaches and policies concerning the persons with disabilities. Each of these organizations work according to each field of work. These programs vary according to their nature though most of them are concerned with service provision. In return there are programs which can be classified to Rehabilitation, Guidance, Facilities, Adjustment, Empowering and Integration.

### **The National Committee of the Disability Card:**

The council of the Ministers, in 2011/2012 resolved to form the National Committee for the Disabilities Card which included as members 12 governmental Ministries to be charged with five main tasks:

- Submitting a proposal for an executive regulation for the disabled card.
- Coordination of the efforts and activities related to the services guaranteed by the card of the person with disabilities.
- Developing the plans of the persons with disabilities.
- Definition and monitoring of the budgets required to implement the disability card.
- Proposing a procedures directory to ensure the implantation of the card objectives.

The decree provided for (in the implantation context) (article 3): Charging each member ministry in the national committee to form an internal committee in it to ensure the Implementation by the Ministry of the tasks in accordance with the law of the disabled rights and the committee submits its reports through its delegates to the National Committee.

### **2- Points of strength:**

The points of strength can be classified in to:

- (a) Legal and authority field. The Ministry of Social Affairs is responsible for the sector in addition to the specialized councils and committees and the availability of a law and a plan related to persons with the disabilities, in addition to integrating them as a key group in the social protection plan.
- (b) The institutional field: Specialized departments in the Ministry of Social Affairs and the Ministry of Education and Higher Education, rehabilitation of staff , coordination among the various

relevant departments inside each organization, coordination between the governmental organizations and others and the allocation of budget in some Ministries.

- (c) Programs: Specialized programs in the main Ministries according to the kind of disability and the goal (service, empowerment), directive programs across several Ministries and health preventive and the therapeutic programs.
- (d) Adjustments and Facilities: Customs exemptions, adjustment of the new buildings ( especially in schools ), provision of the required facilities for integration in some fields specially education and allocating a percentage of 5% to employ the persons with disabilities.

### **3- Points of weakness and gaps:**

**Obstacles and points of weakness are summarized in the following:**

- a- Lack of resources and dependence on foreign funding a matter which reduces the possibility of sustainability in projects and policies
- b- Inadequate qualified staff and the rarity of some specialization.
- c- Overlapping roles of various organizations and the frequency of some programs and failure to have access to some groups or areas.
- d- Flaws in the laws and legislation specially especially and the concentration of the definition of the disability on traditional concepts and the absence of an authority for application and punishment.
- e- Weakness and rarity of some programs.
- f- Lack of specialized studies and surveys.
- g- Difficulty of renovation of most of the old buildings or offering facilities in transportation and other public services.

### **4- Future opportunities and the opportunities available to the implementation of the strategy**

- (a) Continue to present the existing programs and developing them like (staff , empowering program, customs exemption, rehabilitation of centers, inclusive education, compact classes and health and psychological counseling.
- (b) The current qualified staff with the need to qualify staffmore ones .
- (c) Activating the role of the supreme council for the affairs of the persons with disabilities and other coordinating boards depending on the existing relationships with local and international organizations.
- (d) Continue to adjust the infrastructure, transportation and others.

## **Second: Civil sector:**

The civil sector can be divided into the primary service providing organizations, the grassroots organizations of the persons with disabilities and human rights organizations which will be dealt with here.

### **1- Description of the sector:**

The organizations providing the primary services work in several fields (rehabilitation, occupational and physiotherapy, providing assistance tools, psychological, social and professional counseling, in addition to programs, educational institutions and health centers. Many of these organizations are members of the coordinating boards and specialized committees. The grassroots organizations of the persons with disabilities work in such fields as (representation, support, raising awareness, preparation of databases and work in the legal and human rights field). But the human rights organizations revise the laws and legislations, raise awareness and offer legal consultations.

### **2- Points of strength:**

The primary services provision organizations: Most of them have qualified staff and databases in the organizations' operating areas. They cover marginalized areas and population communities. They have expanded partnerships with several international and governmental organizations. They represent the persons with disabilities in several issues. They commit themselves to work in accordance with the international standards and finally some of them work in accordance with the human rights and development perspective.

The grassroots organizations of the persons with disabilities work to provide jobs to the persons with disabilities and they work on the integration issue, work on the social gender issue, putting pressure on the decision makers, contribution to legal and legislative arguments.

Human Rights Organizations: Great respect for these organizations, which are represented in several international forums, they include in their membership include many of the coordinative official bodies. They have knowledge and specialized staffs.

### **3- Points of weakness and gaps:**

Organizations providing primary services: Lack of material and human resources, dependence on foreign funding, weakness of coordination and integration of the organizations working in the same field and with governmental organizations, duality of services provision, lack of awareness of disability issues at the society and the official levels. The organizations working in this field have good and benevolent approaches in this field. The grassroots organizations of the persons with disabilities: They depend on foreign funding and some of them have no branches. Human Rights organizations: lack of specialization in the field of disabilities.



#### **4- Future opportunities:**

The organizations providing primary services: They continue to provide the current services and programs and they develop them. They invest in the current and future human staff. They concentrate on support, awareness rising as well as databases connection and promotion of coordination. Grassroots organizations for the persons with disabilities: Work in the legal and representative fields, documentations and preparation of studies. Human Rights Organizations: The availability of strategy constitutes a starting point and authority for the work of the human rights organizations in this field.

#### **Third: International Organizations**

##### **1- Description of the sector:**

The international organizations work to develop capacities, researches and data collection, application of new entrances, their addition to adjustment issues, training, technical assistance support, provision of medical, health, educational and operational assistance. In addition to that, they funded a number of civil and governmental organizations.

##### **2- Points of strength:**

Their reliance on new entrances especially human rights in dealing with the disability issues. They have specialized staff and they have expanded partnerships, diverse resources and board field experiences.

##### **3- Points of weakness and gaps:**

Lack of working crews, there are urgent needs which reduces the work at the strategic and long-term levels, the restrictions of the occupation, political division, linguistic factor. There is a large number of non- native speakers of Arabic. In many cases they do not respond to the needs and requirements of the field.

##### **4- Future opportunities:**

Coordination with the governmental and civil organizations commitment to mass the required materials and technical resources. Assistance in the preparation of the legislations and policies.

#### **Fourth Part: Challenges, strategic themes and issues:**

Through the previous analysis based on the problems tree and through the treatment of the results of the workshops the following themes and issues were reached to deal with the persons with disabilities:

- Disabilities and policies
- Disabilities and rights
- Disabilities and poverty
- Disabilities and directions

-Disabilities and the access possibility and available opportunities (kinds of services and their effectiveness and efficiency).

**First: Strategic themes' frameworks and the components of each theme of the strategic Issues (according to the results of the discussions in the workshops):**

### **1- Main Issues of Disabilities and Rights**

- Translation of law no. 4/1999 to regulations and procedures which helping and including of the implementation process.
- Access to justice which provides legal protection.
- The Palestinian legal system needs revision and re-building.
- Development of the legislation to suit the international and regional standards.
- Absence of the sense of human dignity from the laws and procedures overshadows the process of empowering the persons with disabilities.
- Legal culture and legal awareness are missing.
- Absence of completion and harmony between law no. 4/1999 and the laws, regulations and other procedures.
- Weakness of the legal, administrative and judiciary procedures.
- Building a system for monitoring and accountability in the issues of equality.
- Building procedures, systems and legislations on the basis of actual participation of persons with Disabilities.

### **2- Main issues and policies of disability**

- Learning from the previous work experience.
- The policies are associated with their approval and not with the persons with disabilities.
- Linking the policies to a clear time framework.
- Building the policies in accordance with the analytical reading of their effect.
- Circulation of the policies after the experiment of their application.
- Declaring the existing policies and accountability for their application.
- Building policies by participation and reconciliation, especially the participation of the person with disabilities.

- Building specialized policies within the various work sectors and the relevant themes.
- Legal comparison: Launching policies is a part of the legal bases and not services.
- Translating the policies into programs.
- Adjusting the policies to the various needs and individual differences.
- Determining the necessary policy requirements.
- Participation and empowerment (approaches and directions of policy applications ).
- Integration: Rehabilitation as a process aiming at the empowerment and integration.
- The adoption of policies on the basis of human dignity (adjustment, access and rights) means that there should be a series of procedures to secure dignity.
- Connection harmony and completeness among policies.
- Positive discrimination: It is still needed by the Palestinian context.
- Reality based the real Palestinian political economic or social reality.
- Concentration on variation in politics between the various components of the sector whether governmental and non-governmental.
- The issue of control on the policy implementation.
- Development Studies Center, 2010 (unpublished study conducted on the sensitive indicators in the vital sectors and disability Removal of contradictions between the written policies and practice.
- The general policies should include in its framework clear standards and procedures.
- A big gab in implementing the existing policies despite the problems resulting from them (a gap between the theoretical and practical application in the field.

### **3- Main issues and approaches of disability:**

- The social awareness constitutes the spinal cord of the promotion of the persons with disabilities.
- The social awareness components have been neglected and absented for a long time.
- Absence of a comprehensive national program aimed at the formation of the community thought .
- Despite the belief in the excellence of the prevailing culture, the reality reflects a different image of dealing with the persons with disabilities based on the stigma.

- The adopted value system makes the persons with disabilities see themselves as inferior to others and creates defense mechanisms and means the most important of which is naturalization.
- Spread of the social stigma in the consciousness and the community behavior.
- The negative view is deep and when the social gender accompanies the Disabilities (women and girls with disabilities).
- The view and benevolent dealing (based on compassion) is spread under the little of kindness and the spread of the sense of inferiority.
- Verbal physical and human violation in the system of dealing with the persons with disabilities.
- Issues of mental thinking, is the most vulnerable to abuse which needs specific interventions awareness and the conduct of the decision maker process is based on the negative attitude towards the persons with disabilities.
- The media role is still limited and short of keeping pace with the changes and supporting the disabilities' issues.
- Awareness of the persons with disabilities did not rise to the level of thinking based on the human rights perspective.
- The role of the traditional community organizations(temples, family and tribal forums) promote the traditional awareness
- The school are still concentrating on the traditional awareness and they need a lot of work to be able to facilitate the integration process in education.
- Absence of a unified understanding of the concepts and terminology of the disability sector.
- Emphasizing the affirmative approach (positive bias in the awareness work).
- Adhering to positive values in dealing with persons with disabilities.
- Creation of awareness to accept the integration process especially the awareness based on the adoption of the human rights approach.
- Awareness of the executive crew in the organization of the rights, policies, dealing, referral and practices.
- Failure of the national media and media men to keep pace with the latest developments in the sector.

- The media does not deal seasonally with the issues of the persons with disabilities. But the work approach is meant to actively contribute to the development approaches based on human rights.
- The need to activate the media through criticism, disapproval and change.
- The ideal means and techniques in policies for contracts and communication especially the persons with disabilities in the topic of human rights issue.
- The basis of negative attitudes and stereotypes associated with the persons with disabilities is the existing isolation. Accordingly, we need to develop integration programs and create an environment designed to allow and accommodate the existence, access and participation of the persons with disabilities side by side with the persons without disabilities.
- Contrast between the thinking and practices. This needs to change the approaches and sometimes the human rights perspective as a thought . In practice, the staff starts from the benevolent or medical perspective.
- The political well in affecting the prevailing thinking.
- Awareness programs for the families of the persons with this abilities since the attitudes and experiments are built and formed in the identity of the persons with Disabilities beginning from the family.
- Good example: which means enhancing the positive models calling for chance.

#### **4- The main issues of disability and poverty:**

- Disability constitutes a ground of poverty.
- Limited access opportunities to the living capitals (sources) (natural sources, financial capital, market, human capacities and social capital) increase the poverty circle on the one hand and the rate of the persons with disabilities on the other hand.
- Weakness of self-capacities and the limited opportunities of economic and social empowerment of the persons with disabilities.
- Absence of the persons with disabilities from participation in the productive process and accordingly in the real development.
- Narrow job opportunities which accord with the kinds of difficulties and various disabilities.
- Prevalence of the relief and charity nature in the work program directed to the persons with disabilities.

- The Palestinian society lacks a social security program a matter which contributes negatively to marginalization and exploitation of the persons with disabilities violating their rights, affecting their dignity and keeping them in the poverty circle .

#### **5- Disabilities and opportunities:**

- Absence of clear and written policies including the service provision mechanism of the persons with disabilities.
- The lack of the available information and weakness of awareness limit the possibility of having access to services
- Rarity and inadequacy of services at the geographical and specialized level according to the kind of disability and bad distribution of services geographically and according to the kind of disability.
- There are no comprehensive and sustainable program for rehabilitation and capacity building. What is available just for projects (a matter which limits the services).
- Absence of technical specialized technical staff.
- A large portion of services is centered on conceptual framework depending on the benevolent and medical model.
- The services provided by the private civil sector depend on irregular foreign funding.
- Absence of specified criteria to select the beneficiaries when providing the service.
- Absence of participation and cooperation among the organizations operating in this sector.
- High cost of the service which prevents the access of the persons with disabilities from limited income to reach it .
- Weakness of the participation of the persons with disabilities in determining the priority and the need for the services.
- There is a weakness in the self-assessment indicator and this eventually leads the organizations to work in the easy fields in which it is possible to assess the service provided with great satisfaction ignoring work in the projects with the persons with mental disabilities where work with them and evaluation of the effect need a long time.
- Absence of a complete crew and multiple specializations specially in the field of diagnosis.
- The absence of the service is connected with cost.
- Weakness of the disability movement and its effect on the ground.

- Absence of justice in distributing the services geographically according to the kind of disability.
- The connection of services with the funding agenda and their priorities and not the local need.
- A facilitating and friendly environment for the persons with disabilities to have access to the resources and services.
- Dissemination of information on the rehabilitation and services programs and the ways of reaching them.

## **Second: Identity**

### **1. Mission of the Sector:**

The sector of disability with its multiple components works to make a change in the surrounding environment in the sector itself to activate development by participation and to enable the persons with disabilities and their families to lead a decent life and enjoy citizenship on the basis of human rights and the belief that the Disabilities issue is a human right and fair development issue.

### **2. Vision or the Dream:**

Full citizenship in the rights , duties and participation of an inclusive society which approves and interacts with the individual differences.

In order to achieve this vision, all those concerned work to play their roles whether they are governmental organizations, civil society organizations or mass organizations. This applies to the civil organizations which should play their role fully in implementing these strategic directions. Certainly the persons with disabilities have a very important role to play. Their experience, experiments, knowledge and initiatives have a decisive role to ensure the implementation of this plan. Accordingly, the effective participation constitutes the main pillar of this plan.

### **3. Values and Principles Leading the Sector's Work:**

**The implementation of this plan is dependent on a group of values and principles, the most important of them are:**

- Respect of the inherent human dignity for the persons with disabilities.
- Preserving the privacy and the independence of every individual and his/her right to choose.
- Respect the freedom of others, laws and non-discrimination.
- Partnership and effective participation of the persons with disabilities.

- Encouraging the societal values which enhance positive dealing with the natural variation in the community.
- Confirming equality between men and women and reducing the gender gap.
- Achieving social justice as regards rights and duties and equal opportunities.
- Belief that the achievement of the public interest is based on response to the interests of the marginalized groups.
- Belief that the persons with disabilities have the experience and experiments required to promote the disability sectors the same as other sectors.

### **Third: The Strategic Goals, Directions and Policies**

**Areas of intervention:** This strategy was built to cover five broad areas from the strategic themes. Each of them includes a list of strategic issues, in addition to the issues of capacity building as an issue connected with the active organizations in the disability sector.

Therefore, the strategic plan will start from the concentration on the strategic issues (Disabilities and policies, disabilities and rights, disabilities and poverty, disabilities and directions, disabilities and access) and not other sectors like (health, education, social services, work, infrastructure and recreation etc....).

Because this issues reflect the general framework for the problems facing the persons with disabilities regardless of the sector which means starting from dealing with the problems and their management and accordingly creating a difference in the living conditions of the persons with disabilities and not to limit the strategic interventions in sector framework which may conceal the comprehensive vision of intervention. In other words, starting from issues as frameworks for the strategic plan is based on the need to make a radical change in the standards of living of the persons with disabilities in its strategic concept. That means moving from the current situation to a new situation which harmonizes with the vision of the sector represented in full citizenship in rights , duties and participation in an inclusive society which interacts with the individual differences includes It the management of change to create the positive differences in all the topics mentioned above regardless of the sector concerned with the case.

The strategic framework includes intervention strategies which include directions, intervention and the main areas of intervention. From this ground efforts are made to develop the work programs of the active organizations in the sector So that, all organizations start from one vision and unified strategic directions for each according to its sector and field of work. So, all these efforts will lead to an inclusive strategic framework including all efforts and capacities. Starting from the strategic issues, ensures the comprehensiveness of the entrance on the one hand and gives an opportunity to a broad participation and also concentration on the strategic issue to make a change instead of partial detailed programs which transform the plan into a work program. The persons concerned have to follow this plan with



plans and programs of all active organizations in this sector. It is supposed that this will be completed in the first year of plan implementation. In these plans and programs, each organization will determine the scope and intervention for each issue, adopt the policies and identify how to achieve these policies in the form of intervention and work programs for each organization.

This strategy is implemented by depending on the existing roles and responsibilities of the concerned persons with this sector. The revision of this strategy is carried out periodically with the annual report concentrating on the revision of the directions of the policies and strategic work approaches and renewing them if required.

**Intervention Strategies:**

- 1- Policies directed towards the integration process and which guarantee meeting the needs of the persons with disabilities (political will).
- 2- Comprehensive and suitable legislations and ensuring the rights and justice (rights).
- 3- Decent living for the persons with disabilities (poverty).
- 4- A society accepting positively the Disabilities , viewing it and dealing with it as a part of the natural variation in the society (attitudes)
- 5- Equal opportunities and availability of access possibilities (access).
- 6- The active organizations in the sector are able to play their roles (sector capacities).

### **Strategic Approach1:**

#### **Effective policies directed to the process of inclusion and integration in the vital life fields based on the human rights attitudes towards the persons with disabilities**

The efforts made for the inclusion and integration of the issues of the persons with disabilities in the Palestinian society process can be dispersed or their effects may diminish, if they are not led by clear, declared and approved policies. The active organizations in the disability sector accumulated rich experience in dealing with persons with disabilities and was able to open a bold and constructive dialogue about the national model for dealing with disability. Great efforts are being made by the persons with disability and the active organizations in the sector to enhance the use of the development human rights model in Palestinian society.

#### **Intervention Policy Direction1:**

Leading the process of inclusion and integration of the persons with disabilities with clear, approved and declared policies can ensure the creation of a friendly environment responding to the rights of the persons with disabilities and the requirements of their full and effective participation.

#### **The Main Outlet:**

The disability sector is led by a system of guided policies to ensure the rights, inclusion and integration process.

#### **Success Indicators:**

- -Increasing the number of texts, documents and memorandums of understanding which are being adopted and ensure the policy of disability equality like any other human rights issue through another sector.
- High rate of inclusion of the persons with disabilities' issues in any policy when dealing with the issues of anti-discrimination and exclusion.
- The availability of a set of specific, clear and declared procedures for the policy implementation process.
- Increasing the number of persons with disabilities benefiting from the educational services in any form by 20% minimum of the percentage of the persons with disabilities in Palestine.
- Increasing the number of schools containing rooms to accommodate the persons with learning difficulties and minor mental difficulties which accord with the percentage of the persons with disabilities in every Governorate.
- Increasing the number of the qualified staff to teach the persons with disabilities regardless of the kind of disabilities/difficulty they face providing that they occurred with the number of the persons joining education.

- Increasing the number of awareness brochures and the services manuals by all ways which ensure their being available for all people without exception.
- The availability of unified references for the standards characterizing the various services and which should be declared in all Governorates.
- Increasing the number of diversity kinds of specializations from which the medical committees are formed in all Governorates and which determine the disability degree (disability rate) of the persons with disabilities.
- Adopting a new reference in the diagnosis and evaluation of the disability degree.
- Increasing the number of building and facilities characterized by full adjustment to ensure the movement of the persons with disabilities independently and in dignity.
- Increasing the number of the staff from the persons with disabilities and reduce the number of complaints in this regard.

#### **Current Interventions (Immediate)**

- The adoption of policies which ensure the participation and involvement of the persons with disabilities in approving and drafting any policy related to the integration and inclusion of persons with disabilities in a comprehensive manner.
- Dissemination and declaration of the educational policies and the programs associated with them (policies of inclusion and integration of persons with disabilities in education, policies of inclusion and integration of the persons with disabilities in the early childhood programs, general education and vocational education, policies of inclusion of the issues of the persons with disabilities in the school curricula, policies to ensure that educational card school environment contains the various individual differences based on the right and equality, policies of special education related to the educational programs of the persons with mental disabilities and autism and multiple disabilities, policies of including the issues of the persons with disabilities in the higher education programs).
- Development, dissemination and declaration of the operational policies (policies concerning the inclusive vocational training and that 5% of personnel of each establishment should be from the persons with disabilities, the policy which ensures the occupation of the persons with disabilities to their posts independently and in dignity through taking all the required procedures through providing the reasonable facilitating measures.
- Development, dissemination and circulation of the adjustment of the infrastructure, public facilities, public transport and information.
- Development, dissemination and declaration of the proper inclusive health policies as regards the deficiency concept (degree of disability), (disabilities), the policy of diagnosis and inclusive

health care awareness/ health promotion, prevention, rehabilitation, supporting systems, health insurance, customs exemption and health referrals.

- Development and adoption of the policies related to health information which allow all people including the persons with disabilities to have access to it, adjustment including the geographical distribution of services and their connection with the kinds of disability, gender and age)
- Development of a policy system which ensures the comprehensiveness of diagnosis and evaluation of the disability degree of the persons with disabilities.
- Development and dissemination of the budgets and the reports associated with policies.
- Development and dissemination of the reports associated with the implementation of the official policies such as education and employment policies based on the 5% ratio at least
- The development of the health and rehabilitation policies to be clear and declared and based on the respect of human dignity and the right of the receiver to the service, to know the available service available and the choice freedom.
- Policies of clarifying the bases and mechanisms of service provision to the persons with disabilities to expand the circle of beneficiaries from the service.
- Developing the policies of intervention/field rehabilitation to ensure the dignity of the persons with disabilities and their families and their access to the required services.
- Clear, specific, approved and declared polices about the standards and specifications which should characterize the various services.
- Development of clear, declared and specific policies regarding the mechanisms, follow-up and control procedures on the compliance of the sector with the quality of the services and dealing with the disability issues in human rights and development perspective.

**Future Interventions:**

- Activating the role of the Supreme Council of the Affairs of Persons with Disabilities in the field of developing, follow-up and implementation of the policies.
- Activating the role of the Supreme Council of the Affairs of Persons with Disabilities in developing a national policy to deal with the disability sector, lead the work of the governmental sector, civil organizations and the organizations of the persons with disabilities starting from a human rights and developmental concept based on participation to make essential changes in the policies, legislations and practices.
- Activating the control role of the state institutions on the private sector with the supervision of the Supreme Council of the Affairs of Persons with Disabilities through guided and ruling policies encouraging the civil/social responsibility.

- Developing of the funding policies of the sector in harmony with the implementation of the strategic plan and its abidance.
- Development of clear and declared accountability policies to develop the accountability mechanisms for the mistakes and violations of the rights of persons with disabilities and the policies of prevention against them. Most of the Palestinian active organizations in the disability sector with a general policy believe in equality and non-discrimination when providing the services with the absence of the specialized, approved and binding policies to the work of the organizations with limited exceptions. The absence of the relationship among the policies adopted by the organizations, programs and projects which they carry out makes the issues of the persons with disabilities connected with some departments and fully integrated in the work of organization in a way that enables them to circulate all the services and programs without exception. Also there is no allocation of budgets to implement existing policies starting from a complete system of participation, in view of the fact that participation is not only a right of the persons with disabilities, but it is also an entrance to benefit from their capacities and experience. It is directly connected with the expansions of the circle of choices available to people to participate in development and guarantees the participation of the relevant officials or that the people concerned determine their future having the right to choose the way of participation in building the society. Understanding to the rule of building policies in an interactive manner guarantees the contribution of all the concerned persons and at the same time depends on knowledge, experience and available experiments.

**Intervention Policy Direction2:**

**Complete System for Participation**

**The Main Outlet:**

**A clear system for inclusion and complete containment passed on participation**

**Success Indicators:**

- The number of publications circulating the successful experiments and the best practices.
- The number of organizations which signed and committed themselves to disseminate and implement the code of conduct.
- The number of partnership contacts with the community organizations seeking the integration of the people with disabilities.
- The number of sectoral strategies which were revised and developed to ensure the disability issues.
- Inclusion of the national strategy in the sectoral strategies.
- Inclusion of the disability issues, containing and integration of the persons with disabilities comprehensively in a number of organizations operating in other sectors.

- Increasing the number of media programs which address the issues of the persons with disabilities based on and in compliance with the human right direction , the mechanisms , the language resulting from it and the areas of concentration in the covering or media dealing process.

#### **Existing Interventions (Immediate)**

- Writing the best practices in the field of participation and embodying them in the form of a work approach for the Supreme Council for the Affairs of the Persons with Disabilities.
- Building the capacities of the Supreme Council for the Affairs of the Persons with Disabilities (institutional, technical and human) enhancing the participatory practices.
- Developing of the code of conduct leading the policies and methodologies of the work of the active organizations in the sector in a participatory context.
- Developing of a matrix of the standards to be complied with when including the disability issues in all the strategies and national work plans in various sectors, work and interests fields.

#### **Future Interventions:**

- Developing of support models and capacity building through joint work by the central and grassroots organizations.
- Establishing of partnership relations between the disability organizations and the organizations operating in other development fields to include the disability sector issues in their field of work.
- Developing of policies which ensure the promotion of the level of cooperation in the sector among the organizations effective in the sector in complete frameworks and the organization of relations among them.
- Developing of the intervention policies to include the backward and forward retreat of the issue of intervention issue to create them in circular frameworks and not linear.
- Developing of mechanisms which ensure the media coverage of the developments of the policies to put them into implantation and also the media coverage of the best practices.

#### **Intervention Policy Direction3:**

##### **Framework and principles to lead the policies in the disability sector**

##### **The Main Outlet:**

The start of the policies from the principles' rule and the harmony of the policies of the people concerned among themselves within the rule of principles.

##### **Indicators of Success:**

- The number of policies based on the human rights and development principle.
- The number of policies developed on the basis of framework and was circulated to the concerned parties.
- The increase in the size of budgets allocated to the policy implementation.
- Number of municipalities and local councils which worked to include the disability issues in their plans and field of work.
- **Starting from the human rights principle:** The policy based on the human rights perspective can be inclusive or directed towards the comprehensive inclusion in contrary to the policies based on the traditional concept which enhance the principles of exclusions, dependence, charity and disability.
- **The role in development process and dependence on participation:** Starting from the idea that the persons with disabilities play a central role in the development process taking into consideration the available energies to them. At the same time the development process serves the interests of the persons with disabilities and considers the participation entrance not only to meet the interests and points of view but also to benefit from the capacities available to the persons with disabilities and to expand the options' circles.
- **Dependence on the social gender perspective:** Within the framework of marginalization of the disability sector, girls and women with disabilities were marginalized regardless of the available potentials to them or without taking into consideration giving them the opportunities required to achieve their interests as a group or to a productivity resulting from the opportunities given to them.
- **Local dimension:** The policies take the local dimension into account in their implementation which means that the local authorities (governorates and municipalities) should develop specified mechanisms and municipalities to integrate and include the issues of the persons with disabilities with effective participation of all sectors and persons of disabilities in their areas of influence. The Ministry of Local Governance should play its supervisory, monitoring, technical and evaluation role in this field. This should be included in their work plans. The Supreme Council for the Affairs of Persons with Disabilities should ask the Ministry of Local Governance for this.
- **Allocation of budgets:** The development of policies including positive discrimination in favor of the persons with disabilities reduces the historical gab in all fields of decent life including the basic vital rights (education, health, social service and work). The official organizations, civil organizations and organizations of persons with disabilities should allocate special budgets to implement the policies adopted by these organizations.

- **Participation and distribution of roles:** The effective participation based on the distribution of roles secures the joining of efforts in one framework which preserves the independence of everybody and reduces dispersion and duality.
- **Starting from positive bias:** The supporting system in its general concept for comprehensive inclusion.
- **Connecting policies with effective programs:** Repair of the existing programs based on temporary intervention and associated with foreign funding, starting from the principle that every policy - in order to be effective- requires supporting programs to implement them and the building of the programs and projects according to the policies So that, the projects may constitute a unified system going in the same direction.
- **Writing, declaration and the right of access to the information:** One of the guarantees of applying the policies is represented in the ability of the persons with disabilities to have access to them and to the information related to them. Accordingly, the guarantee of transparency and openness will open a room for accountability and follow-up.
- **Starting from the inherent respect of human dignity** principle and preserving the privacy and dependence of every individual and his/her right to choose and participate in drafting policies.
- **Entitlements:** Inclusion of entitlements and capitals (human, financial, natural, market, infrastructure and social links) in the policies.
- **Encouraging the societal values which enhance dealing positively with variation in the society:** The policies directed to change the prevailing attitudes towards dealing with persons with disabilities as dependent individuals in the society.

#### **Intervention Policy Direction4:**

##### **Complete system of procedures to support the prevention policies**

##### **Main Outlet:**

**A clear system to prevent accidents, diseases and medical errors which contribute to the high rates of disabilities**



**Success Indicators:**

- Issues disseminate and distribute the preventive measures against hereditary diseases.
- Develop and disseminate the early diagnosis of diseases system.
- The number of follow-up to the cases of medical errors, accountability and questioning procedures.

**Current Interventions (Immediate)**

- Developing of a set of procedures which help curb hereditary diseases whether by vaccination or imposing restrictions represented in carrying out a group of tests before marriage.
- Developing of some traffic monitoring procedures and applying professional strict safety procedures to prevent accidents.
- Developing of a system for early diagnosis of diseases which allows pro-active dealing with them before they deteriorate.
- Developing of a set of effective mechanisms and procedures to control the performance of the medical staff and follow-up the medical errors by means of questioning and accountability.

**Future Interventions:**

- Developing of the policies which ensure raising the level of cooperation in the religious frameworks and the organizations working in the fields of the prevention issues.
- Developing of the intervention policies and the inclusion of the backward and forward retreats in the intervention issue so that work proceeds in circular frameworks and not linear to work on a participatory prevention program.
- Developing of mechanisms that ensure media coverage of the developments in the prevention field.

**Strategic Approach 2:****Legislations Ensuring Rights and Equality:**

The international convention on the rights of persons with disabilities was approved in 2006 after the enactment of the disability law no. (4) of 1999. Accordingly, the law does not include many of the important articles contained in the convention. The Palestinian law does not abide by the rights of the persons with disabilities according to the spirit of this convention which is characterized by a

comprehensive and objective characteristics and enhances the human rights and the development approach in dealing with the issues of the persons with disabilities.

In addition to this, several if not the most of the persons with disabilities and their families are not aware of the rights of the persons with disabilities whether the rights provided for in the local laws or legislations or those provided for in the international legislations and conventions.

### **Intervention Policy Direction 1**

**The Palestinian legislations are undergoing a deep revision process based on the perspective of the human rights and development approach and on the commitments associated with the UN convention on the rights of the persons with disabilities in 2006**

#### **The Main Outlet:**

A set of coordinated laws and legislations which enhance the principle of the right of development supposed to provide services and stress the respect of the human dignity and full participation.

#### **Success Indicators:**

- Increase the number of documents which adopt the disability system included in the national strategy and the developments resulting from it.
- The number of legislations including the privacy of both sexes of the disability sector.
- The new Palestinian Disability Law is based on human rights and consistent with the international conventions.
- Clear institutional structure and effectiveness in the monitoring process.

#### **Current Interventions:**

- Definition of the disability concept in a way that consistent with the international convention, human rights principles and the interactive dimension between the person and the environmental barriers and obstacles.
- Circulation of concepts and unification of its use and the reflection of this on the policies and programs.
- Revision of the legislations from the perspective of social gender including the specialties of both sexes in them
- Drafting and approving the legislations which take into consideration the variety, individual differences and the consequent requirements, entitlements and intervention mechanisms.
- Confirming the sovereignty and independence of the Supreme Council for the Affairs of the Persons with Disabilities through the procedures and the special clarifications of the presidential

decree to ensure its role in developing the legislations, procedures, accountability and control over its implementation.

- Developing of the explanatory and implementation procedures of the law and work systems to include the mechanisms and procedures required for the application of the legislations, regulations and control.

#### **Future Interventions:**

- Redrafting the disability law to be based on human rights and to consist with the international conventions and the changes in the sector.
- Developing of the Palestinian Legislations to suit the new law.
- Developing of the monitoring mechanisms to monitor the application of polices, legislations and procedures as well as the institutionalization of the monitoring process.

#### **Intervention Policy Direction 2**

##### **Leading the work and relationships in the sector according to the regulations and work procedures system**

##### **Main Outlet:**

##### **A system of explanatory and executive procedures as well as work systems and procedures**

##### **Success Indicators:**

- The degree to which the internal, explanatory and executive regulations cover the disability law items.
- Indicators of the effectiveness of the supreme council of the affairs of persons with disabilities (number of meetings, approved documents, policies developed etc.)
- Indicators of the participation of the persons with disabilities in the development of directories, regulations and procedures.

#### **Current Interventions (Immediate)**

- Developing of the explanatory and executive regulation, procedures and directories regarding the interpretation of the items of the law and the explanation of the ways of their implementation.

- Developing of the work directories (procedure directory) for the implementation of the central programs in participation with the concerned persons .
- Confirming the role of the Supreme Council for the Affairs of the Persons with Disabilities in the approval of the regulations, laws, procedures and controlling the implementation.
- Confirming the participation and involvement of the persons with disabilities and their families representing all disabilities/difficulties in the process of approving the laws, regulations, procedures and monitoring their implementation.
- Confirming the participation and involvement of persons with disabilities and their families representing all disabilities/difficulties in the process of approving the regulations, laws, procedures and control on their implementation.
- Developing the work mechanisms which will ensure that the Supreme Council for the Affairs of the Persons with Disabilities receives reports about the implementation of the legislations, laws and procedures and that it submits these reports to the public and people concerned.

#### **Future Interventions:**

- Revising of work directories, legislations and regulations to ensure their cohesion regardless of the implementing department.
- Periodical revising of the laws and regulations and their development in the context of learning from the experiment and on the basis of the best practices .

#### **Intervention Policy Direction 3**

##### **Accountability and guarantee of the implementation of the legislations , regulations, laws and procedures connected with them**

#### **The Main Outlet:**

##### **Mechanisms and laws of accountability to control the implementation**

#### **Success Indicators**

- Number of the accountability applied cases against the law violators.
- Issuance of a presidential decree regarding the new articles in the law including the penal articles (penalties when violating any of the law items) in a specific, strict and clear way.
- A dynamic database to enable the people concerned to have access to the information.
- The number of active monitoring and documentation committees affiliated to the Supreme Council for the Affairs of Persons with Disabilities.
- The number of legal support cases to persons with disabilities.

- Copies of the available law and adjusted to the persons with disabilities.
- The number of the supporting documents aimed at understanding the law and which are available to the persons with disabilities (according to the kind of disability), (legal directories and copies of the available law and adjusted as regards understanding, flexibility and simplicity of the information to the persons with mental, hearing disabilities or the persons who have learning difficulties).
- The existence of an adequate number of qualified sign language interpreters in the human rights organizations and courts.

**Current Interventions (Immediate):**

- Developing of the penal procedures which rule the application of the law which should be binding to all organizations and individuals.
- Developing of the monitoring bodies existing in the ministries and networking among these organizations as well as networking with the active organizations in the sector.
- Developing of a compulsory mechanism to exchange information, impose the process of dissemination and presentation of information (ensure the right to have access to information to everybody without exception on the basis of disability or the kind of Disabilities/difficulty).
- Confirming the role of the Supreme Council for the Affairs of the Persons with Disabilities in ensuring the monitoring and documenting of the implementation of laws as well as monitoring and documenting of any violation process.
- Developing work mechanisms that allow the way for the society and community organizations to ask the process of applying the laws, regulations and procedures.
- The developing of a verified awareness and acceptance program which accepts the fact that the rights of the persons with disabilities do not differ from the human rights.
- Developing of a guiding directory for the persons with disabilities in a way that ensures access to information by all persons regardless of their disabilities/difficulties.
- Developing of mechanisms and procedures which ensure access of persons with disabilities to all legal and human rights services independently and in dignity, the same as other Palestinian citizens in a way which guarantees the addressing and removing all barriers and obstacles whether environmental, material and institutional which impede the achievement of justice.

**Future Interventions:**

- Developing of accountability mechanisms associated with the need to bridge the existing gaps in the effective legislations and methods of their implementation

- Developing of an institutional structure to monitor and bring to account the violators of the law or those who refrain from its implementation showing the lines of authority, powers and roles.
- Copying the legislations and the explanatory regulations related to the rights of the persons with disabilities and their inclusion in the other Palestinian laws.

#### **Intervention Policy Direction 4**

##### **Effective access of the persons with disabilities to the pillars of justice**

##### **Main Outlet:**

**The persons with disabilities can have access to the pillars of justice equally with others.**

##### **Indicators of Success:**

- The number of the buildings of the pillars of justice and the easy access to them(adjustment).
- Number of the follow-up cases carried out by the networks
- The complaint and legal follow-up program.

##### **Current Interventions (Immediate):**

- A training and awareness program including all the pillars of justice, the rights and ways of dealing with the persons with disabilities.
- Developing of a complaint program and the programs which ensure the safety of complaints, procedures and dealing with them.
- Developing of regulations and mechanisms to monitor the protection of the persons with disabilities against violence and negative discrimination on the basis of disability, exploitation and disregard.

##### **Future Interventions:**

- Building effective and influential networks with the human rights organizations and security apparatuses to monitor and fight all kinds of negative discrimination, violence and exploitation of the persons with disabilities.
- Creation of bodies and organizations applying all quality and safety standards to protect the persons with mental disabilities whether moderate or severe.

#### **Strategic Approach 3:**

##### **Decent living for the persons with disabilities:**

Persons with disabilities lead a difficult life. The persons with disabilities groups are the most marginalized and deprived at all levels. They are deprived economically, socially, culturally or politically. The persons with Disabilities are exposed to poverty because they lack education and they have narrow work opportunities as well as the absence of social protection, the availability of a program or a system for social insurance. They are often exempted from community participation. It is always known that the poorest individuals and families are more exposed to disabilities because of their inability to have access to food, medical treatment and protection against social risks and natural disasters. It is necessary to point out the fact the disability sector suffers from class, age and geographical gaps despite the fact that the persons with disabilities are more vulnerable and more exposed to external factors, difficult living conditions and political factors. Relationship between poverty and disability is reciprocal and adverse. At the time when poverty increases the disability rate, the disability in its interactive concept plays a pivotal role in increasing the poverty rate.

### **Intervention Policy Direction 1**

**A package of interventions which ensures that the persons with disabilities are enjoying a decent standard of living**

#### **Main Outlet:**

**Decent standard of living for the persons with disabilities and their families**

#### **Success Indicators:**

- The high rate of those people covered by the social protection program for the most difficult and severest cases.
- Increase in the number of those covered by the economic and social empowerment programs for the persons with disabilities.
- Raising the standard of living of persons who receive aids from the protection program to raise their standard to a decent level (poverty line).
- The degree of effectiveness of the disability card program and the service package based on it.
- Number of persons with disabilities covered by the social security program.

#### **Current Interventions:**

- Deepening and expansion of the social protection program to include all the most difficult cases, a matter which ensures that the size of intervention enhances the access of the persons with disabilities to a decent standard of living (adequate food, clothes , housing and medicine).

- Developing the main work principles to ensure the respect of human dignity in case of intervention in the most difficult cases.
- Developing a computerized program to diagnose and assess the persons with disabilities who meet the standards which enables them to benefit from the social protection program provided that this program is comprehensive and based on the social interactive model and the human rights approach to disabilities.
- Developing clear mechanisms and standards which ensure that the persons with disabilities especially women, youth and elderly people benefit from the economic empowerment and the exchange of information to ensure the comprehensiveness of coverage and limit duality.
- Accelerate work on the disability card from the perspective of participation of the official and various community organizations provided that this card is based on the human rights perspective and access to decent standards of living for persons with disabilities.

**Future Interventions:**

- Formation of the social protection networks at the governorates level which ensures the achievement of a decent living and social protection for the persons with disabilities based on the spirit and the standard of the human right approach in all organizations and with the participation of the private sector.
- Activating of the monitoring mechanism, collection and distribution of information to ensure that the persons with disabilities benefit from the service provided by the various governmental organizations including training, financial aid and interim care.
- Developing complete improvement program including all entitlements rings (human capacity, access to the natural resources, access to the market and capital, benefiting from the social networks) which may lay the foundation to ensure access of persons with disabilities to the suitable and adjusted house equally with other community groups, concerning the job entitlements, salary, pension and health care programs.
- Including of the rights of the persons with disabilities in the social security system when approved. The state shall be responsible for the coverage of the contributions of the persons with disabilities in the fund.

**Intervention Policy Directions (2)**

**Listing the disability issues in all the policies and programs aimed at achieving social and economic development.**

**Main Outlet:**



## **The comprehensive containing and including disabilities in a way which enhances justice and limits the poverty of the persons with disabilities**

### **Indicators of Success:**

- Number of sectoral development policies which include the disability issues in the social and economic policies.
- The effectiveness of the joint database of the sectors and exchange of information.
- Number of analytical (assessment and evaluation ) studies for the integration process.
- The just geographical distribution of the social and economic development programs in the various Governorates, especially in the marginalized areas.

### **Current Interventions:**

- Revision of the Palestinian official and community development interventions (health, agriculture, industry, youth, women etc.) from the perspective based on excluding the persons with disabilities to identify the gaps in the integration of the disability issues in them.
- Reviewing and analyzing the issues and attitudes related to the integration of disabled in the field of social and economic development to be dealt with in the Palestinian development plans and programs.
- Participation and involvement of persons with disabilities in the integration programs, in addition to their participation in determining the issues and arranging them according to their priority in accordance with their perspective.
- Work to establish a joint database for the various organizations working in the field of disabilities to ensure the comprehensiveness of the services and to limit duality.

### **Future interventions:**

- Controlling the intervention of disability issues in the natural development interventions through declared and clear mechanisms and systems.
- Assuming and leading role of the Supreme Council for the Affairs of Persons with Disabilities in activating the disability issues as a non-sectoral issue in the development plans and programs.
- Establishing of a center for the disability sector sources in the Palestinian territories including four main aspects: 1. Database for the persons with disabilities. 2. Information base for the available services .3. Guiding and counseling support center. 4. Advisory and training program
- Connecting the social protection networks (mentioned above) with the source centre of the disability sector to activate the monitoring process and benefit from the information at the local level.

### **Intervention Policy Directions (3)**

#### **Expanding the potentials of having access to jobs as a main key to improve economic security and welfare of the persons with disabilities and their families**

##### **Main Outlet:**

Persons with disabilities enjoy the economic security mentioned above which is above the poverty line approved in the Palestinian territories

##### **Indicators of Success**

- The decline of the cases violating the quota in the private and public organizations.
- Committees set up from the human rights organizations to monitor the process of employing persons with disabilities and identify to what extent the organizations abide by it.
- Issues and indicators associated with disabilities should be included in the models used by the Directorate of Inspection in the Ministry of Labor.
- An alternative regulation about the health fitness based on a comprehensive and human rights perspective for disabilities.
- The effectiveness of the joint database of the sectors.
- Number of analytical studies (assessment) of the integration process.
- The number of successful evaluation projects carried out and managed by groups of persons with disabilities.
- Number of the feasibility studies which are ready and favoring the persons with disabilities.
- Number of persons with disabilities who have professional skills in areas which meet the market demands.

##### **Current Intervention**

- Applying the provisions of the law by employing 5% of the persons with disabilities through the approval of the inspection and operation procedures to achieve this.
- Monitoring the application of the legal article providing that 5% of the personnel in every establishment should be given to the persons with disabilities by impartial monitoring committee.
- Developing of a tax system which takes into consideration the provision of decent living for persons with disabilities and their families.
- Incentive system for the private sector to accommodate the persons with disabilities.

- Awareness campaigns about the merits of employing the persons with disabilities, conducting and securing the facilitating measures aimed at qualifying the persons with disabilities without discrimination against them on the basis of the kind of disability/ difficulty.
- Cancelling of the regulations and laws which limit the employment of the persons with disabilities (health fitness issues).

#### **Future Interventions:**

- Adjusting the rehabilitation and vocational training centers and programs to create a friendly environment for the persons with disabilities.
- Expansion and variation in the rehabilitation and vocational training programs in the centers of persons with disabilities to meet the requirements of the job market.
- Provision of the required capital to carry out income generating projects for the persons with disabilities (such as incubator/ cooperatives).

#### **Strategic Approach 4**

##### **A community which accepts the persons with disabilities as one form of the natural variation**

The social attitudes overcome the policies and approaches unless they have their own political approach. The community deals with persons with disabilities in Palestine is characterized by some special characteristics like charity, compassion and the view based on poverty and inability which may sometimes amount to stigma and the society's denial of the existence of the persons of disabilities which leads to exclusion and marginalization. The development of the exclusion attitude in the approaches and practices of the Palestinian organizations limits the acceptance and embracing of the persons with disabilities. Disabilities and persons with disabilities are considered as disabled only to the extent that the persons with disabilities within this perspective are responsible for this case in a way that drives in many cases the individual and organization to give up the role which they should play towards the issue of integrating the persons with disabilities.

With the expansion of the struggle and the endeavors of the persons with disabilities and their organizations, the society witnesses a movement in its concepts and behavior and accordingly in its ways of dealing with and accepting the persons with disabilities. The development in the sector in many fields (legislation, services, highlighting the leading models of the persons with disabilities in the development work) is the greatest evidence of the social changes. Thus this move is led by a symmetric and studied method, it is expected that the positive view accepting the natural variation will be deepened, a matter which will be reflected on the groups of the society and narrowing the inherited negative view.

#### **Interactive Policy Direction (1)**

**The movement of the society to the state of accepting and expanding the field for the participation of the persons with disabilities**

**The Main Outlet:**

**A social sector accepting the participation of the persons with disabilities actually and effectively in the society**

**Indicators of Success:**

- Number of media programs which deal with disability issues.
- Number of media campaigns which address the disability issues.
- Decline of the unacceptable characteristics towards the disabilities included in the educational programs.
- Number of the integrating and linking social and cultural activities between the persons with disabilities and the local communities.
- Number of the reciprocal activities among families in various areas, especially the marginalized areas.

**Current Interventions (Immediate):**

- Building the capacities of media men in the field of changing the typical images of the persons with disabilities.
- Developing media programs to address the society to change the typical ideas and the wrong prejudices towards the persons with disabilities.
- Organizing recreational societal events with the participation of the persons with disabilities to support the social integration process.
- Organizing of societal meetings to exchange experience.
- Supporting and promoting protection networks and exchange experiences among themselves.
- Developing programs to promote the participation of the persons with disabilities and their families in the entertaining programs, social, cultural, technical and political events.
- Concentrating awareness program for families of the persons with disabilities which may ensure justice and equality in the house and benefit from the capacities of the family.
- Making the required amendments to the school curriculum to include the wrong ways of addressing the issues of the persons with disabilities in shape and content.

**Future Interventions:**

- Empowering the persons with disabilities to free themselves from the sediments of the past and the reflections of the society to achieve the self – empowerment and gain better skills in communication and participation in the community fields.
- Adjusting the public community places (community center, clubs, playgrounds, theaters, book houses and workshop places) to achieve the access of the persons with disabilities independently to them.
- Promoting the rights of the persons with disabilities in the facilities as a positive place to reduce the existing gap.

### **Intervention Policy Direction3**

**Encouraging the positive practices to limit the negative attitudes and practices in the organizations which impede the integration of the persons with disability**

**The Main Outlet:**

**Social and institutional attitudes to ensure integration and participation based on the human rights perspective**

**Success Indicators:**

- Directory of the accepted behaviors and the number of copies distributed.
- Indicators showing the change in the social awareness.
- Number of the developed source centers.
- Generalization and accountability in integration programs.
- Number of schools implementing the comprehensive integration policy of the persons with disabilities in the educational process.

**Current Interventions (Immediate):**

- Developing of a list or directory of behaviors showing the negative attitudes prevailing and the human rights perceptible which enhances the positive attitudes and circulate them in the form of posters and regulations inside the various Palestinian organizations so as to become later a reference to the proper communication approaches with the persons with disabilities.
- Developing of awareness programs by the support of disability organizations and experts to be implemented inside the governmental and non-governmental organizations and the specialized disability sector to change the prevailing attitudes towards the persons with disabilities.

- Organizing of events and practical programs inside these organizations with the participation of the persons with disabilities to support the social integration process and limit the negative attitudes.
- Applying the special item of the quota of employing the persons with disabilities in the governmental institutions provided that each job should be accompanied by the work facilitating measures to enable the employee to carry out his/her job in dignity, professionally and independently.

#### **Future Interventions:**

- Beginning the application of the comprehensive employment process in all community organizations and the private sector institutions which takes equality in consideration and create opportunities to limit the negative attitudes .
- Encouraging the development of the positive integration models (as case studies) in the organizations with strategic capitals to encourage and monitor the challenges of integrating the persons with disabilities in the private sector institutions to promote the integration effectiveness and limit the negative attitudes.
- Development of the inclusive educational programs so as to become qualified and able to accommodate the persons with disabilities without discrimination on the basis of disability in the early primary stages.
- Changing the schools of the persons with disabilities to source centers to train their staff to work in these centers and support the process of integration in the educational process in the regular schools.

#### **Strategic Approach 5**

##### **Equal Opportunities and Easy Access**

Despite the efforts made to rehabilitate and empower the persons with disabilities as an introduction to the comprehensive integration which ensure the empowerment of the human capital, there is a remarkable weakness due to the gaps at several levels: The district level, the services are centered in four areas (Ramallah, Bethlehem, Nablus and Gaza) while these services are absent in the South of Hebron, Tubas, Salfet, Northern Gaza and the Middle Area in the Gaza Strip. At the second level, the services decline because of their association with some kinds of disability like the mental disabilities, autism, learning difficulties, hearing and multiple disabilities. But the third level includes narrow opportunities for females with disabilities in all

fields, especially in the vocational training. In addition to the level related to the quality of services which constitutes in most of the cases a key axis in the complaints of the persons with disabilities to be supported by the rehabilitation organizations themselves. Building the productive capacities of the persons with disabilities and the removal of obstacles in the access to the sources and their comprehensive economic and social integration constitutes a main entrance to the sustainable development and not only an entrance to expand the participation opportunities.

### **Intervention Policy Direction 1:**

#### **Activation and facilitation of the procedures and transactions to limit the bureaucratic procedures.**

##### **The Main Outlet:**

##### **Transparent and flexible system to facilitate access to the institutional services**

##### **Indicators of success:**

- Indications of the decline of the bureaucratic obstacles in the transactions of the persons with disabilities.
- Number of indications of the unification of work procedures.
- Number of cases reached through the outreach programs.
- Number of persons who can deal with computer programs.
- Application of the disability card program.

##### **Current Interventions (Immediate)**

- Revision and redrafting of the work procedures adopted in the provision of services including depending on the human rights perspective, respect of human dignity, the required time to carry out the transaction, the requirements of the bureaucratic procedures (signatures, the supporting documents) and considering the ability of many of the persons with disabilities to move and transfer.
- Organization of the relationship between the center and the branches so that the procedures may not be subject to interpretations and moods of the persons working in this field which creates confusion to the applicant of service which may not be provided in dignity.
- Development of mechanisms which ensure access to the most vulnerable persons (women with disabilities, persons with mental disabilities, children with disabilities, persons with compound disabilities, persons with disabilities in the marginalized and distant areas).
- Provision of the tools, capacities and human resources required to ensure access to the most vulnerable persons who are in need of the public services.

- Issuance of indicators about mechanisms and procedures of including the persons with debilities in the main vital system (health, education and work).

### **Future Interventions**

- Computerization of the procedures to include the building of a central available database to all service providers in a way which enables them to have access to all data about the person requesting the service and relieve him/her from moving to bring the bureaucratic evidences and information

### **Intervention Policy Direction 2**

#### **Development of a complete professional system to diagnose the disability degrees**

#### **The Main Outlet**

**The diagnosis processes of the disabilities' degree are based on comprehensive and professional standards and bases internationally accepted**

#### **Success Indicators:**

- The degree of improvement in the process of diagnosing the disability degree based on the international standards.
- An effective national committee to follow up the results and complaints of diagnosis and the low rate of these complaints.
- The number of the trained specialists in diagnosing the disability degree.
- The clear developed standards to build the diagnosis process in field applications.
- Increasing the number of committees which carry out the diagnosis process and the variety of their specializations.

#### **Current Interventions (Immediate)**

- Development of the bases and criteria of diagnosing the disability degrees based on the international criteria starting from the comprehensive, interactive and human rights concept of disability.
- Training and empowering the diagnosis and assessment committees.
- Setting up diagnosis and assessment committees with multiple specializations.
- Developing of the diagnosis and assessment procedures in a way which ensures human dignity.
- The diagnosis and evaluation procedures should be declared and subject to accountability and monitoring, in a way which guarantees the integrity of the diagnosis process.



- Working according to a time schedule which ensures the access of the persons with disabilities in the distant areas.
- Adjusting of all centers and directorates related to M.O.H.
- Revising of the health insurance system and other services associated with the degree of disability which guarantees rights and equality.

**Future Interventions:**

- Periodical revision of the criteria, linking their development and putting them according to the required changes by international achievement.
- Rehabilitation and training of new national staff who are able to continue and ensure the quality of work.
- Computerizing the data of the disability degree of the persons with disabilities linking them to the disability card program.

**Intervention Policy Direction 3**

**Provision of all basic and vital services for the persons with disabilities as a right to enjoy a decent living**

**The Main Outlet:**

**The access of the persons with disabilities to the basic and vital services is guaranteed**

**Indicators of Success:**

- Decline of the complaints submitted because of the inability to have access to services.
- Decline of the number of buildings built without taking into consideration the adjustment conditions.
- Drop of the unemployment rate of the persons with disabilities.
- Increase in the just distribution of the support tools for the persons with disabilities.

- The number of the anti-violence programs against the persons with disabilities.

**Current Interventions:**

- Drawing a road map to ensure the access of the persons with disabilities to all the services equally with other citizens and categorizing the issues which limit this.
- Implementing of a program to guarantee priorities in general education to the children with disabilities to have their right to enjoy the same amount of dignity which reflects the educational policies enhancing the principle of equality among the children.
- Development of a package of procedures based on bringing into accountability the public and community organizations which limit the access of the persons with disability to the services.
- Provision of a reference and comprehensive unified system at the national level to monitor the quality of the supporting devices, materials and access which enable the persons with disabilities to have access and get the various services, the rest of their rights and the extent of their need to them.
- Revision of the engineering code system (engineering specifications,) the development of mechanisms to ensure its application and the development of a monitoring program for implementation and effective accountability for failure to abide by it.
- Developing of intervention systems to ensure fighting violence against the persons with disabilities including sexual and physical attacks on women and the persons with mental disabilities.

**Future Interventions:**

- Based on the priority rule (positive bias) the higher education should be open to the students with disabilities either by granting them additional points for admission or exempting them from a portion of the tuition fees and providing government grants to the persons who are unable to pay the fees concentrating on the principle of adjustment.
- Developing of clear and specific systems in the universities which guarantee the access of the students with disabilities to the public facilities inside the university campus and to the information too. They also monitor the facilities which should be provided and mass the resources to be offered .
- providing authority, inclusive and unified system at the national level of concerning the provision of supporting tools and devices which enable persons with disabilities to have access and obtain the various services and rights.

- Unification of the main standards at the national level based on the priority level to create jobs for the persons with disabilities either by giving them additional points to get the job, incentive exemption or encourage the organization by giving them tax exemption by a certain percentage. As The Palestinian law for the rights of the persons with disabilities in 1999 A.D stressed the importance of observing the principle of adjustment and right of access easily and equally.
- Adopting of international criteria concerning the quality of service and the supporting tools received by the persons with disabilities which enhance the chances of access to all fields of life.
- A complete package of procedures aimed at curbing poverty and increasing the opportunities available to the persons with disabilities (specially children, youth and women) through improving labor, education, health care, social services and promoting their welfare and empowerment.
- Adopting by the governmental organizations of a rehabilitation and community empowerment program (C B R) as a national strategy to ensure the access of the persons with disabilities to various services.
- Adopting by the organizations operating in the field of disability of a unified national system of referral to the services at their three level: Grassroots, middle and national.

**Intervention Policy Direction (4):**

Giving the persons with disabilities an opportunity to build their own capabilities a matter which will enables them to participate in the social economic life.

**Main Outlet:**

Persons with disabilities should enjoy the freedom to choose the shape and field of their participation in the social economic life.

**Indicator of Success:**

- Increasing in the number of persons with disabilities who got a suitable vocational training.
- Increasing in the number of persons with disabilities who got the suitable required supporting tools for participation.
- Dropping of the unemployment rate among persons with disabilities.
- A manual including a base for the services available.
- Increasing the number of services and the justice of their distributions according to the various areas.

**Current Interventions (Immediate):**

- Developing awareness program and self-empowerment to encourage the persons with disabilities to develop their capacities, interact and participate in the community.
- Developing the existing rehabilitation and empowerment programs in a way which expands access opportunities for the persons with disabilities and deals with the technological development.
- Developing joint learning program and exchanging experience.
- Developing a database including all the available services and designed for the access and use of the persons with disabilities provided that they are documented by all means which ensures the access of all persons with disabilities to the information included without discrimination on the basis of disability/difficulty.
- Providing the persons with disabilities with the supporting tools to build capacities and which ensure access to the services and information.
- Developing complete rehabilitation and empowering programs responding in their design to the requirements of the kind of disability and gender.

**5-Intervention Policy Direction:**

**Inclusive and adjusted communities enhancing the participation of the persons with disabilities.**

**Main Outlet:**

The persons with disabilities live in adjusted communities which ensure their gaining various opportunities and full inclusion in the social, economic and cultural life.

**Indicators of Success:**

- Increasing in the number of the persons with disabilities who live in adjusted houses.
- Increasing in the number of the persons with disabilities who use public transportation independently and in dignity.
- Number of positive intervention cases by the private sector organizations.

**Current Interventions (Immediate):**

- A support and pressure campaign to apply the engineering code for the special housing to improve the housing environment in a way which ensures the freedom of movement and gives suitable access independently to the persons with difficulties.
- A program to improve and amend the housing environment of the persons with disabilities from the poor and vulnerable families to ensure their access to various facilities in the houses.
- An awareness campaign for citizen to teach them how to improve the housing of their children with disabilities to ensure their access to services and facilities.
- Starting adjustment of the means of transport and public transportation.
- A project to activate the role of the private sector towards their social responsibilities and make them respond to the process of their integration and providing them with the information.

**Future Interventions:**

- Developing of the possibility of having access to the urban and natural environment through planning and supervision system to activate the participation and integration of all members of the society.
- Intervene to ensure the adjustment of all forms of transportation to the use of the persons with disabilities as well the provision of the information service.

**6-Strategic Approach**

**Empowerment of the active organizations in the disability sector to perform its mission**

**1-Intervention Policy Direction:**

The relationship among all parties of the sector is managed on the basis of partnership, active participation and a clear distribution of roles as part of the achievement of the public interest.

**Main Outlet:**

**Clarity and transparency of roles and relationships in the sector:**

**Indicators of Success:**

- Increase the number of the organizations participating in the central and local committees.
- Increase the number of the social joint interventions among the organizations.
- Number of the cases of the exchange of the information and experiences(effectiveness of the computerized information system)

**Current Intervention (Immediate):**

- Activating the participation of the organizations in the various central committees (CBR,DPOS-coordination networks).
- Supporting the local protection networks by effective participation of the organizations and coordination of efforts at the local levels to ensure effectiveness.
- Developing programs and joint work interventions with the vulnerable groups and areas.
- Developing a code of conduct to govern the work in the sector and the relationships among the organizations
- Developing a computerized system among the organizations to identify the problems and challenges of access to the actual rate of the persons with disabilities.

**Future Intervention:**

- Developing work with the persons with disabilities so that it may be based on sustainable programs and not provisional projects.
- Sustainability of intervention in the disability sector in a way which ensures the achievement of the required results of the program.
- Developing a dynamic data base which lays the foundation for the exchange of experience and information.

**2-Intervention Policy Direction:****Investment and building the capacities of the organizations operating in the disability sector.****Main Outlet:**

The organizations operating in the disability sector are able to provide their services and interventions in a professional way on continued bases.

**Indicators of Success:**

- Increase the numbers of the organizations working according to the approved directories and regulations.

- Increase the numbers of the effective quality testing programs.
- Increase the number of the sustainable programs and interventions.
- Drop the number of organizations which depend basically on foreign funding in its work.

**Current Interventions (Immediate) :**

- Showing the aspects of the professional or development specialization of the organizations operating in the sector and the approval of dealing with them accordingly.
- Completing of the institutional capacity building(regulations, directories organization's infrastructure, human capacities). And the number of the organizations operating in the sector.
- Promoting of the administrative and professional capacities of the staff of the organizations and departments.
- Bridging the professional gaps among the organizations operating in the sector and the development of their proficiency and the attitudes of the staff of these organizations.
- Assurance of the quality of the services provided through buying the services by the governmental organization from the organizations which abide by the quality standards during the provision or designing the services to the persons with disabilities.

**Future Interventions:**

- Work approach in accordance with sustainable programs.
- Diversity of the funding sources and encouraging the local organizations to fund as part of their social responsibility.
- Adopting the projects which contribute to the creation of productive environments instead of continuing to import and consume of the assisting tools and the adjustment products.
- Provision and support of the source center with the information and required tools to enable it to perform the task assigned to it.

**Annex No. (1): Work Methodology on the National Strategy of the Persons with Disabilities**

The methodology adopted by the strategic planning team is based on working in multiple directions in the field of disability taking into consideration the best investment of time and effort. The methodology concentrated on the direction of studying the reality, diagnosing it and finding an inclusive vision based on the rights as a part of various community variables through keeping pace with the developmental processes and their attitudes at all levels and the contribution of this sector to both as actors, influencers in the development process and beneficiaries as the rest of the segments and groups of the

society on just basis and in a way that enables the persons with disabilities to achieve a decent life and citizenship on human rights basis. The strategic planning of the disability sector transpires its goals from its importance as a development thought on which the vision and attitudes are based upon to participate in facing the challenges in this sector through the most effective methods which reduce exclusion and marginalization of the persons with disabilities. In the first place, The treatment of the disability sector issue as a part of this strategic planning process, is based on the cognitive outcome which clarifies the fact of the problems and factors which affect this issue and are influenced by it. Accordingly, the research team adopted a participatory work methodology which is open to all effective parties, the persons with disabilities and their families, the civil and governmental organizations, the disability organizations, some of the local bodies and human rights organizations, international organizations and various community individuals and organizations. Most often, the various societal groups' attitudes towards a certain issue and the effect of these attitudes on the practices are one of the most important factors affecting this issue and which are reflected on the various life aspects of the group which face these reflections and are influenced by it .The participatory methodology depended on the team in terms of diversity and it was also based on the comprehensiveness of the dialogues in terms of the discussion pivots and their openness and in terms of the geographical and regional distribution.

The strategic planning of a vital and important social sector is a very difficult and complicated process as a result of the number of the needed actors and interventions whether at the level of interests, practices or even the work directions. Therefore, the strategic planning is not an easy process. As a result of these challenges, the planning and field work was not easy and it was important to adopt a participatory approach to enhance the work.

### **Work Stages and Methodology:**

The strategy structure was based on the participatory methodology; in designing the research tools, in dialogue, discussion, analysis and the conclusions. This trend emerged from the convictions of the research team concerning the multiple models which deal with the issue of disability in the Palestinian institutional context which is reflected on the mechanisms adopted in dealing with the disability issues at the institutional and community levels. Our vision to work on the disability sector is based on the fact that it is considered as one of the main developmental and rights issues which is related to the life of 7.4% of the Palestinian citizens. Those citizens who have no doubt ,for cultural, religious and legal reasons do not enjoy the different rights and do not have access to the available services on equal footing-basis- (without avoiding the fact that the circle of those affected by the disability issue is much wider than the persons with disabilities themselves which includes their families, social and institutional surrounding...). Therefore, this proposal is dealing with this issue in a comprehensive and sectoral manner based on the right of the persons of disabilities , full citizenship without segmentation and that



the rights of the persons with disabilities which are indivisible and not different from the human rights as mentioned in all laws and local and international conventions.

**The strategy passed through the following stages:**

- The formation of the strategic planning team consisting of five persons. The team includes researchers, strategic planning expert and experts from the persons with disabilities. The team formed a wider reference through the discussions with persons with disabilities which also included representatives from the disability sector.
- Revising the international and local literatures concerning the strategy issue as well as the statistical studies dealing with the social and demographic characteristics of the Palestinians and the conditions of the persons with disability in Palestine. In addition to revising the different and available literatures and policies from different organizations plus the revision of the Palestinian effective laws and legislations and to what extent there are contradictions with other legislative experiences or the international conventions regarding the persons with disabilities.
  1. Revising the disability strategies in different states at the regional or international levels.
  2. Holding a general and main consultancy meeting with the concerned organizations and female and male activists in the disability movement to announce the launching of the work and present the work methodology and mechanisms.

**First Phase of the Field Work: This phase of the strategy included two tools for dialogue:**

1. Individual consultancy interviews and meetings: Not less than ten meetings were held with the representatives of the concerned organizations in the Ministry of Social Affairs and other experts in the disability field whether they are from organizations providing the services or Disabilities organizations or the related experts this filed .
2. Workshops at the level of the Governorates: Twelve expanded workshops were held at the level of the Governorates; 9 in the West Bank Governorates and 4 in the Gaza Strip. Different actors participated in these meetings on individual or institutional bases in disability issues who were no less than 180 actors from both sexes. Five main axles were discussed in these workshops:
  - The reality of the persons with disabilities in regards to the policies.
  - Examining the available information whether they are from studies or official data about the persons with disabilities.
  - Programs and services provided to the persons with disabilities at the level of each Governorate.

- The relationship between the active organizations and exchange of information among them.
- Analyzing the problems' tree at the level of the Governorates.

### **The second phase: Aggregate Meetings at the District Level**

Seven meetings were held at the district level. These meetings were more specialized as they included specialized organizations with various roles. They included two meetings with the governmental organizations, a meeting between civil organizations, a meeting with the organizations concerned with laws and legislations, two meetings with the service provider organizations and a meeting with the persons with disability organizations. The objectives of these meetings varied according to the type of the organization, but in general it was an opportunity to analyze the capacities of the Palestinian organizations in the Disabilities sector and to identify the related points of weakness and strength and the future contribution of the different organizations to the strategy according to each organization's role. All this was associated with the pivots and the main five issues which were a base for the work. This phase also included different meetings with experts to develop the indicators of discussion and dialogue or to discuss the results of each phase of the work on the strategy., Not less than 8 individual meetings were held in the second place .

### **The third phase: Analysis Phase**

This phase included analytical workshops. Four expanded analytical workshops were held by participation different parties. They lasted for four working days continuously. They aimed at producing an analysis tree for the sector problems, determining and drafting the strategic issues, determining the issues resulting from them, analysis of the sector identity and concluding the mission, vision and the value system governing the work of the system.

Analysis form of the concerned persons: This form was distributed to the various effective organizations in the disability sector. It concentrated on four main items: 1) A general description of the characteristics of each organization and which are connected with disability. 2) Points of strength of each organization. 3) Points of weakness facing the work of each organization. 4) The potentials of intervention in the strategy work from the future perspective.

**The fourth phase:** Presenting the results of the strategy's first draft and discussing it with the parties concerned in the West Bank and the Gaza Strip. This framework was developed in accordance with their remarks.

**Finally,** putting the strategy in its final shape and adopting it by the Supreme Council of the Persons with Disabilities.

### **Challenges which Faced the Work:**

1. Working in the Gaza Strip: The absence of the funding partner – Ministry of Social Affairs.
2. A number of the vital concerned organizations in this sector were not committed to attending the meetings, a matter which stressed the necessity of holding additional meetings with these organizations or other workshops at a smaller level to make sure that all parties participated in the dialogue.
3. The conflict among the organizations which was reflected sometimes on the discussion.
4. Personal conflict of some individual with the thought of the team working on the strategy.

## **Annex No. (2): Analysis of the Sector's Environment**

### **1.1 Concept and Its Development<sup>7</sup>**

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<sup>7</sup> The details of references and literatures are available in the annexes see for example DET( Literatures series of disabilities equality training). Manual (1) : Their training and our training : Social equality in the society manual by Lez R, Paul Dark and Inji Ono. Training Manual (2) Promotion of the Disabilities level from theory to practice by Evin Malojin and Inji Ono or see also (Nagata, Kozue Kay (2008) & Leeds University 1996).

Disability with all its various shapes has been associated with the human presence historically and formed one of the genuine social dimensions in the community structure for each human group. But it is still subject to the groups' perspectives and their philosophical and thoughtful frameworks and systems which made it an exceptional and bizarre case which does not accord with the total values comm. on in the society, and being the organic difference affecting the type of interaction between the persons of disabilities and other people. This deformed remained attitude controlling the attitudes of the individuals reflected on their practices, impressions and behaviors towards the persons with disabilities. The truth is that this attitude is formed from a mixture of multiple origin ideas with a varied dimension in which in its essence related to a group of thoughtful dimension and is based on a number of attitudes and philosophies, the most important of which are:

**First: The religious direction which** connects the disability issue with the issue of good and evil and it interacts with it on this basis.

**Second: Utilitarian productive direction** which connects the disability with the economic dimension It forms the general values to deal with it as a human issue on the basis of capacity, production revenue and contribution to the process of generating productive resources.

**Third: Biological healthy direction** which builds the value dimension in the interaction with individuals on the basis of health efficiency, the equality, completion and maturity of capabilities and their development into in a joint sensory, supportive, organic, emotional and mental phase in a way that any deficit in these contents is seen as a deficiency, disabilities and an incomplete humanity.

These attitudes extended from the partial phase reflected on the individuals' practices to the standard phase integrated in the value system which led to a cultural state about the Disabilities which participated in the formation of the concept of marginalization and exclusion or framing, inclusion and integration. This was clearly seen in all practices, experiences and interactive behaviors in the dynamic process in the social and cultural communication they are clearly appeared in the governmental procedures, policies, legislative, programs and the nature of the provided services, the level of participation, its size and the human interaction in the civilized activity in its wide concept. This led to new formations in understanding and realizing disability from a value perspective, judging and forming it, according to the directions of each thought, the dimensions of each philosophy. The most important conceptual branches resulting from that in defining disability can be summarized in a group of models which deal with disabilities:

**1. Charity Model (inferior):** It depicts the person with disabilities as a disabled person who needs kindness and compassion. This model led the issue of disability to the care institutions which deal with the social affairs of the persons with Disabilities giving them the aid needed as a part of their responsibility towards these persons, a matter which is based on the relief dimension only considering them unable to integrate and participate effectively in the society, practice their life and carry out their responsibilities.

**2. Economic Model:** It defines Disabilities as "the inability of the person to practice work". It also assesses the degree to which weakness affects the individual's productivity and the economic effects of

it on the individual, employer and the state. It include the loss of income, the push of the individual to get aid, less profit margins for the employer and the social insurance payments. This model is directly associated with the tragic/charity model.

**3. Medical Model:** The medical model presents the disability as “a problem related to the individual and directly resulting from disease or other health disorders, trauma or another health problem As a result, it requires condense medical care which is provided in the form of individual treatment by professional specialists.” In the medical model, the confrontation of the Disabilities aims at achieving medical treatment or amending the individual and the behavioral change which leads in general to treatment or effective treatment of Disabilities. Also, the medical care available in the medical model is regarded as the main issue. At the political level, the main response is the modification and correction of the health care policy.

**4. The Social Model:** This model defines disability as a negative interaction between the person with Disabilities and all environmental, institutional barriers and obstacles which impede the person’s access to the social, political, economic, civil and cultural life in equal with others. Some of these barriers and obstacles can be summarized in the following: The negative community attitudes towards the persons with Disabilities and the reflected prejudgment practices and policies, in addition to that , the organizations operating in the field of Disabilities adopt the policy of isolation in dealing with the issue of Disabilities and the persons of Disabilities, inflexible institutional practices and policies, the non-access of the persons with Disabilities to information as a result of the adopted design and dissemination techniques, absence of the minimum elements of adjustment in the buildings, inadequacy of the means of transportation and the negative reflections resulting from the cultural heritage towards disabilities<sup>8</sup>.

**5. Human Rights and Developmental Model:** In its definition of disability, this model is to a great extent similar to the social model. But most importantly ,it confirms the rights of the persons with disabilities and it in no way, differs from human rights which are inseparable and indivisible. It does not also separate the Disabilities issue from the other various issues. The disability concept is subject to development and it is not constant at all. It confirms that the persons with Disabilities are the basic engine of their own life and the only reference to determine the required interventions in their issues at the level of policies, legislations, strategies and interventions concerning them in the various sectors taking into consideration approving the required procedures, facilitating arrangements, the individual differences, gender, age and all fields of life<sup>9</sup>. These models were reflected on directing the meaning of disabilities partially or totally as part of definite concepts which follow the model adopted by the parties to put these concepts whether national organizations or social attitudes or independent regional legislations in which the effect of the medical model is clearly presented in the definition of disability defined by the World Health Organization which considers disability<sup>10</sup> as:

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<sup>8</sup> <http://www.leeds.ac.uk/Disabilities-studies/archiveuk/Northern%20Group/defining%20impairment%20and%20Disabilities.pdf>

<sup>9</sup> UN Convention on the Rights of the Disabled, Preamble, General Principles, 2006

<sup>10</sup> WHO, 1995

***“The damage to the individual as a result of a deficiency or disability which impedes the normal individual in terms of his/her age and gender in the frame of social and cultural factors experienced by the individual.”***

It is also defined by the Universal Declaration on the Rights of the Disabled Persons 1975 as ***any person who is unable to ensure by himself or herself, wholly or partly, the necessities of a normal individual and/or social life, as a result of deficiency, either congenital or not, in his or her physical or mental capabilities.*** In the Palestinian Law of the Rights of the Disabled Persons 4/99, Disabilities is defined as ***“the total or partial stable Disabilities of the individual in any of his/her senses, physical or mental capabilities which impedes the individual from meeting the requirements of his/her normal life in the circumstances of non-disabled persons”***. It can be said that these definitions refer to Disabilities or the deficiency as the main identifier of the meaning of Disabilities and how it limits capabilities, and reduces the opportunities of participation in the social and practical life, in the conditions that are relatively associated with the levels of social and cultural dimensions in every society without paying attention to the interaction between deficiency, the organic and sensory difficulty of the individual and the surrounding social and material environment from a comprehensive perspective. This perspective which requires harmony between the individual’s capabilities and the environment’s conditions normally based on the material reality and its adjustment to meet the standards of all groups in spite of the different capabilities. Based on this, Disabilities is subject to the explanation of the exceptional differences which do not accord with the standards of the individuals’ normal life.

In regards to the mentioned models and attitudes which controlled the formation of a special thought about disabilities, we find a qualitative progress and development in understanding disability from the circles of discrimination, exclusion and trusteeship and noticing it as a problem to the developmental rights concept .It subjects the different variables in the conceptual correction process of the disabilities, meaning in a way that accords with the essence and the human conscience according to the principles agreed upon internationally and which call for the respect of the basic human values. This led to several conversions and qualitative leaps which were shaped in the form of understandings and conventions crowned by the international convention of the rights of the persons with disabilities (2006). This qualitative leap in the attitudes towards disabilities happened as a result of the involvement of the persons with disabilities themselves in the human rights work which calls for equality and justice and the coincidence with the social liberation movements and liberal attitudes which are active in defending the basic human rights in the sixties of the last century. Here we refer that the prevailing model in each society towards disability as a reality and concept is not only reflected on the public practices in words and behavior, but it is also necessarily reflected on the definitions on which the legislations, policies and strategies are based on to include all the interventions which can be approved, complied and implemented by the state towards the issue of the persons with disabilities. The definition which is mentioned in the Palestinian law no. (4), regarding the rights of the disabled person (1999) was an essence of the Palestinian culture with its attitudes, habits and customs towards the persons with disabilities. This definition was reflected on a big set of interventions and programs targeting the persons with disabilities in various sectors.

## **1.2: Persons with disabilities in the Palestinian reality, analysis of reality from a legal, economic, social and political perspective**

### **1.2.1 The Human Rights Framework for the Persons with Disabilities/ Laws and Legislations**

The overwhelming liberal attitude which is emerged in the western communities during the last century especially after the first and second world wars and the appearance of international organizations led to the appearance of many social movements which call for the ideology of the community and its prevailing values in a way that guarantees the full justice and decent living to the different segments of the community particularly for those who suffering from discrimination and marginalization such as women, children, people of black skin and the persons of disabilities whose numbers are increased as a result of the wars especially the two world wars. These movements led to the existence of a number of charters which are concerned with their issues and affairs. The most important of which at the level of disabilities<sup>11</sup> are:

1. The declaration on the rights of the mental retardation issued by the United Nations General Assembly on December 20<sup>th</sup> 1971.
2. The universal declaration on the rights of the disabled persons (1975) issued by the United Nations General Assembly.
3. Principles of protecting the person who mentally sick and improving the mental health care issued by the UN General Assembly.
4. The unified rules related to the equality of opportunities of the disabled issued by the UN General Assembly on December 20<sup>th</sup>, 1993.

Then the work started after that at a different level as part of attempts and initiatives which inspired the international change, coalitions and world blocks to put special principles which are more progressed and harmonized with the rights and dignity of the disabled persons. The persons of disability organizations started to impose their will on the general reality to improve the opportunities of participation, integration and renewing and updating the environment according to a different understanding of the human life, a matter which requires the need for the existence of legislations which guarantee social justice and equality in all aspects of life. These legislations are based on the full and effective participation of the persons with disabilities themselves in decision making and the constructing process as a whole without depicting disability from the perspectives of care and trusteeship as it was before in the previous times. Disability was seen as a part which cannot be exceptional or excluded from the whole basic human rights has a great impact on directing the conscious will of the disability movement which inspired the spirit of the permanent change and employed all available potentials organizationally at the level of media cultural, development and community to achieve its ambitions and embodies its spirit in the general human reality. As a result, the first international convention on the rights of the disabled was issued in 2006 which was the most signed by the state members in the United Nations. Upon approval and signing, this convention is a

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<sup>11</sup> <http://www.un.org/Depts/ah/dhlara/resguida/resins.htm>

binding legal document to any state which contains a complete regulation of civil, cultural, political and economic rights and by which all states are committed to guarantee its application and take into consideration all procedures for that. The most important thing in this convention is dealing with disability in a way that presented a meaningful and developmental dimension in its understanding and this was pointed out before. The convention included a set of basic principles and necessary items which guarantee the decent, independent living and integration in the community freely and completely. The general 8<sup>th</sup> principles of the convention form the base of the legal rights and human values. It can be said that this convention became the first reference for the rights of the disabled persons as a result of being universal and locally effective upon approving and signing it, a matter which requires reconsidering and evaluating the legislations and effective laws at the national level in accordance with the mentioned in the convention.

At the Palestinian level the legislative initiative was fruitful in integrating disability in the legislative process and the enactment of laws. This initiative represented an important achievement at rights level

in on the ground. Efforts were made to intermix the technological development in the Palestinian reality and inspire the spirit of change derived from the nature of the qualitative political transition in the Palestinian territories represented in the establishment of the Palestinian National Authority benefiting from the principles, conventions and laws of the world. In regards to the privacy of the Palestinian reality looking for independence, decent living and developing a motion based on the strength of the increasing percentage of the persons with disabilities and the principles of, equality in full citizenship, renouncing violence by all means as mentioned in the Palestinian basic law, the previously mentioned initiative are resulted in having legal texts which organize Disabilities in Palestine as a joint responsibility in which several governmental and non-governmental parties participate in. In addition to that, a number of advocacy and lobbying campaigns is implemented by the movement of the persons with Disabilities during the nineties of the last century. This leads to enacting the rights of the disabled law no. (9) of 1999 as an independent systematic legislation which guarantees a set of legislations, items and the necessary and basic rights of the disabled persons in addition to other set of definite texts in the effective laws related to the reality, the most important of which are: the revised Palestinian basic law (2005), the labor law 7/2000 and the civil service law 4/1998.

The provisions of the rights of the disabled law 4/99 honored the persons with disabilities and were as an initiative to start dealing with the issue of disability as follows<sup>12</sup>:

1. First chapter definitions and general provisions.
2. Second chapter: Special rights.
3. Third chapter: Adjustment of the public places to the persons with disabilities.
4. Fourth chapter: Final provisions.

The Ministry of Social Affairs was assigned as a specialized ministry to apply the law. Article II in the law provides for that “the disabled person has the right to enjoy a free and decent life and other services like any other citizen who has the same rights and he/she has also duties according to his/her capabilities and potentials. Disability should not be a reason to impede the disabled person from enjoying these rights.”

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<sup>12</sup> The Law of the Rights of the Disabled Persons No. (4), 1999



Article III indicates that “the state shall guarantee the protection of these rights and the facilitation to get their rights and that the Ministry of Social Affairs shall coordinate with all concerned parties to achieve that through the awareness programs directed to the persons with disabilities, their environments and families.”

Article 9 provides for that “the state shall put the necessary regulations and procedures which guarantee the protection of the persons with disabilities from discrimination.” Article 10 stressed on a set of necessary services for the persons with disabilities and the necessity of their provision particularly in these fields:

1. The social field including educational and awareness programs.
2. Health field including all the associated support tools and health insurance.
3. Educational field and all the organized different educational means which suits all the different types of disabilities.
4. Rehabilitation field.
5. The field of work and the protection of the right to work with the percentage of 5%.
6. Field of recreation and sport.
7. Public awareness field.
8. Adjustment of building and general facilitations (see third chapter of the law).

Article 18 of the fourth chapter in the final provisions provides for that “Each provision which violates this law is null and void”. In spite of the importance of this law, its role on the ground and the importance of its application, there are several aspects of failure and weakness in it which can be summarized as follows<sup>13</sup>:

**Definition:** The mentioned definition in the law of the persons with disabilities refers to the disabled and concentrates on the organic disabilities and functional deficiency (degree of deficiency or difficulty) and the effect of this on the limited effectiveness of his/her activity which does not accord with the modern attitudes in the definition of disability as mentioned in the international convention. This definition also affects the nature of the governmental procedures and policies which shall be designed and adopted to meet the requirements of the persons with disabilities based on the health perspective only.

**Absence of the peremptory capacity:** The law did not provide for accountability mechanisms and control systems in a way that guaranties its full implementation.

**Blurred systems and regulations** were translated in a way that explains all the details of the translated text and guaranties its implementation showing the executive bodies charged with monitoring to what extent the organizations are committed to its implantation. This matter which made the Disability issue as social cases issues belonging to the departments of the Ministry of Social Affairs.

**Existence of a legal contradiction** is in the texts of some of the legislations organizing the rights of the persons with disabilities. While both the disabled rights law and labor law provide the right of the persons with disabilities to work at the percentage of at least 5%. Article (24) of the civil service law provides that the applicant for a job should be free from diseases and disabilities.... etc. In addition that to , the contradiction is resulted from the implementation of the public rights regulations making them

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<sup>13</sup> The mentioned texts are from (Law no. 4/1999, law no. 4/1998, law no. 4/2000).

limited to specific group such as customs exemption which was limited to physically disabled persons only while the law of the disabled made it an absolute right to everybody.

## **Results of the Workshops**

### **Disabilities and Rights**

- Defect in the laws and legislations.
- Defect in the work of the Disabilities organizations on the rights of the persons with Disabilities.
- Disabilities law does not accord with international convention.
- The current law contradicts with some legislations, policies and the executive regulation.
- Lack of awareness.
- The domination of the charity and medical models in general and in some of the law articles.
- Non- commitment to the law and the flaw in its application.
- The governmental organizations are not committed to the law application.

**The law needs to be re-drafted and amended in a way that accords with the development of concepts and perspectives of the issue of the persons with disabilities as a human rights issue and not charity.**

- The law does not accord with the convention of 2006.
- The law is not updated in accordance with the human rights system.
- Absence of procedures to deal with non-compliance with law application (penal system).
- The law puts the Disabilities case on the shoulders of the Ministry of Social Affairs though it is a national responsibility.
- There is no study about the cost of the application of law.
- In spite of developing the policies to work in this sector, none of them were approved or applied.
- Considering the Ministry of Social Affairs as the reference party in regards to supervision, and follow-up. This means that Disabilities is a social affairs issue and not a social, political and human rights one.
- There are deficits in the definitions, most important of which is the definition of the disabled person related to how Disabilities is seen as a medical and charity issue which needs to be re-considered concentrating on the definition of the disabled.
- It enhances the medical and charity attitudes.
- It deals with disability as a charity and not human rights issue.
- Some aspects are closed; they do not have detailed items which bind their application.

In confirmation of our conclusions on the disability law, a workshop conducted to review the legislations related to disabilities included several remarks, the most important of which are:

- Item (10) in the revised basic law (2005) provides that “Palestine shall abide by all international conventions and agreements.” In spite of all that, there is a gap between the disabled law and the international convention to enhance the rights and dignity of the disabled persons as the law was before the international convention to enhance the rights and dignity of the disabled persons (2006).
- The law does not accord with the convention of 2006.
- The law does not deal with the human rights system.
- The law does not deal with the disability issue from the human rights perspective. No article or word was mentioned in the law regarding the effective participation particularly in decision making and all policies related to disabilities. All articles were clearly clarifying that the state is the sponsor and shall provide everything without involving any effective participation and role for the persons with disabilities.
- Absence of measure to deal with non-compliance of the law (penal system).
- The law places the disability issue on the shoulders of the Ministry of Social Affairs though it is a national responsibility.
- It is necessary to indicate the number of the executive regulations issued to implement the law meaning (how many executive regulations issued after the law and related to it since 1999?). This gives the reader a clear idea about legislation and implementation. For example, some articles in the law provide for that it is the responsibility of the state and government to do something: Article (3) the state shall be responsible...,article (5) the state shall...,article (9) the state shall...,article (11) the state shall work...,knowing that the other articles clearly show the responsibility of the Ministry of Social Affairs and other ministries. The question which poses itself: How many executive regulations and decisions which were issued to implement this?
- There is no study about the cost of applying the law.
- Considering the Ministry of Social Affairs as an authority in regards to supervision, and follow-up, this means that disability is a social affairs issue and not a social, political and human rights one. This direction was enhanced through making the Supreme Council of Disabilities connected with the Ministry of Social Affairs, a matter which requires conducting a study and comparing it with the neighboring countries.
- There are deficits in the definitions, most important of which is the definition of the disabled person related to how disability is seen as a medical and charity issue which needs to be re-drafted including the definition of the disabled person as mentioned in the Palestinian law.
- Absence of monitoring mechanisms in the law while 2006 convention includes monitoring and grievance mechanisms.
- It is not included that the Supreme Council of Disabilities is the authority which requires a special chapter for it in the law by virtue of time in establishment.

### **1.2.2 The Most Important Indicators and the Reality of the Persons with Disabilities in the Palestinian Territories or the Reality of Disabilities Statically<sup>14</sup>**

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<sup>14</sup> These results depend on the survey which was implemented by the Palestinian Bureau of Statistics in partnership with the Ministry of Social Affairs (Survey of the persons with Disabilities, 2011).

According to the expanded definition (it has some difficulty, great difficulty or he/she cannot at all). The percentage of Disabilities in the Palestinian territories is about 7%. It is the same percentage in the West Bank and the Gaza Strip. According to the narrow definition (great difficulty or cannot at all) this percentage in the Palestinian territories amounted to 2,7% and 2,9 in the West Bank and 2,4% in the Gaza-Strip. It amounted to 2,9% among males while it amounted to 2,5% among females in the Palestinian territories.

#### Rate of Disabilities among the Palestinian people according to the narrow and expanded definitions

Type of Disabilities	Narrow Definition (Great difficulty - cannot at all)			Expanded Definition (some difficulty – great difficulty – cannot at all)		
	Palestinian Territories	West Bank	The Gaza Strip	Palestinian Territories	West Bank	The Gaza Strip
Total disabled difficulty	<b>2.7</b>	<b>2.9</b>	<b>2.4</b>	<b>6.9</b>	<b>6.9</b>	<b>6.9</b>
Total disabilities/difficulties	<b>4.6</b>	<b>4.7</b>	<b>4.1</b>	<b>11.0</b>	<b>11.3</b>	<b>10.8</b>
Visual	0.6	0.6	0.5	2.4	2.5	2.4
Hearing	0.4	0.5	0.3	1.3	1.3	1.2
Physical	1.3	1.4	1.1	2.9	3.0	2.7
Remembering and concentration	0.6	0.6	0.6	1.5	1.5	1.6
Communication	0.6	0.6	0.5	1.1	1.2	1.0
Slow learning	0.7	0.7	0.6	1.1	1.1	1.2
Psychological	0.4	0.4	0.4	0.7	0.7	0.7

On discussing the results with the relevant organizations and the disability organizations, the persons with disabilities and their families, several questions emerged about the statistics especially within the narrow concept. The organizations notice and in accordance with the international standards and the indicators available to them from the field and in the light of the social culture and social and political situation that the disability rates in the Palestinian territories are much larger than this rate. We would like to extract the following texts from the discussions held in the regional workshops about the issue:

- The rate is much larger because the disabilities especially those of females are concealed. Hiding persons with disabilities is associated with the social culture. Some cases were referred to in the Governorate of Hebron. There are many attitudes to conceal this belief. There are families who refrain from registering their disabled boys and girls for social considerations.
- It is expected that the disability rate in Gaza will be higher than the West Bank due to the last wars on Gaza.
- There are some cases of persons of disabilities who are not registered in the civil status registers. Children with disabilities are not registered in the civil register.
- Absence of the accepted standards to define a conceptual framework for the definition of disabilities/shame
- There is no approved definition and applicable for the persons with disabilities in Palestine and the definition mentioned in the law is not clear.
- The official authorities including the Ministry of Social Affairs, Ministry of Health, the Ministry of Education and Higher Education) and also the Union register the disability cases as they receive them and there are no unified information in one register.

**Demographic indicators of the persons with disabilities (according to the narrow concept):**

- The male disability rates (2.9%) are higher than that of females (2.5%).
- Disability rates rise with the rise of age.
- As regards the Governorates, Jenin Governorate registered the highest disability rate while Jerusalem was the lowest where the rate was 4,1% of the total individuals who are disabled in the Governorate of Jenin, followed by Hebron Governorate where the rate was 3.6%. This rate was 1.4% in Jerusalem Governorate. In the Gaza Strip the highest rate was in the Governorate of Gaza (2.5%), one third is in the Governorate of the North of Gaza, Rafah and Dair El Balah with the same rate of 2.4% while the lowest was in the Governorate of Khan Yunis (2.2%).
- The survey results showed that the physical disabilities are more spread among the persons with disabilities. The results showed that 48.4 % of the total persons with disabilities suffer from physical disabilities, followed by slow learning disabilities (24.7%).
- The morbid reasons are most prominent reasons of disabilities. 43.7% of the difficulties/ visual disabilities were due to morbid reasons. This reason formed 29,1% of the hearing impairment, 42.9% of the physical disabilities, 28.7% of the memory and concentration disabilities and 27.6% of the slow learning disabilities and 27.2% of the psychological disabilities while the congenital reasons were responsible for communication disabilities 33.6%.

**Social and economic indicators for the persons with disabilities, 15 years and above (according to the narrow concept)**

- More than one third of the persons with disabilities did not join education at all. The survey results show that 53.1% of them are illiterate.
- Results indicated that 87.3% of them were unemployed (during the survey period in 2010/2011).
- 34.1% of the persons with disabilities did not marry at all while the rate of marriage among the persons with disabilities is 44.5% in the Palestinian territories without any differences between the West Bank and the Gaza Strip. The rate of widows (including both sexes ) is 18.2% ,15.9% in the West Bank and 23.1% in the Gaza Strip .The divorced (including both sexes) rate is 2.4% in the Palestinian territories, 2.8% in the West Bank and 1.6% in the Gaza Strip.

**Results of the Workshops**

**There is a need for information**

- The information accuracy level is retreating before the sensitivity of the socio-psychological issue. Therefore, the data is below the actual fact.
- The bad economic conditions drive the family to submit inaccurate data to get support and aids.
- The rates are below the reality though the study is scientifically correct. This is associated with the distribution of disabilities (the increase of disabilities in the poor areas).

**List of unmet needs of the persons with disabilities who do not use support tools/services**

**Persons with visual disabilities:** 18.2% of the persons with disabilities need magnifying glasses, 13.7% need personal escort, 10.9% need a screen reader and 10.1% need a stick to use it while walking.

**Persons with hearing disabilities:** 46.5% of the persons with hearing disabilities need hearing aid without the telephone adapter, 44.4% of them need hearing aid with the telephone adapter, 16.1% of them need loud speakers, 14.3% need artificial cochlea and 12.5% need visual and sensory alarms.

**Persons with physical disabilities:** 37.1% of the persons with physical disabilities need physiotherapy services, 24.0% need special tools in the toilets, 23.5% need electric wheel chair, 22.7% need occupational services, 21.1% need support tools in walking (crutch, walker).

**Persons with communication disabilities:** 37.1% of persons with such disabilities need speech therapy, 32.6% need a special speech device, 20.5% need a computer, 13.7% need a communication panel and 12.5% need a sign language interpreter.

**Persons with memory and concentration disabilities:** 32.5% the persons with such disabilities need medicines, 20.4% need technical devices to help them remember (electronic board), 15.4% need technical devices to help them communicate such as (ID card).

**Persons with slow learning disabilities:** 39.9% of the persons with such disabilities need psychosocial services, 37.0% need a specialized education program, 35.8% need occupational services, 31.1% of them need speech therapy and 28.5% need physiotherapy services.

**Persons with psychological disabilities:** 38.2% of persons with such disabilities need advanced psychiatric services by a psychiatrist, 34.7% of them need support by specialized centers, 30.3% need medicines, 30.0% of them need medical services, 27.5% need social services.

### **Effect of the environmental and material obstacles on the persons with disabilities (18 years and above)**

**Avoidance of integration because of other people's attitudes:** 8.7% of the persons with disabilities in the Palestinian territories always avoid doing anything because of the people's attitudes towards them; 9.5% in the West Bank and 7.7% in the Gaza Strip.

#### **Inability to use public transportation:**

76.4% of the persons of Disabilities in the Palestinian territories do not use public transportation because of the absence of the necessary infrastructure to be able to use it, 75.5% in the West Bank and 78.1% in the Gaza Strip.

**Full difficulties in performing daily activities at home:** 34.2% of individuals with disabilities in the Palestinian territories said that they cannot perform their daily activities at all inside their homes due to the physical and environmental constraints; 32.1% in the West Bank and 38.4% in the Gaza Strip.

**More than one fifth of the persons with disabilities had to drop out educational institutions due to environmental and physical constraints:** 22.2% of individuals with disabilities in the Palestinian territories stopped going to schools due to environmental constraints and physical; 23.2% in the West Bank and 19.4% in the Gaza Strip: 21.7% males and 22.9% females.

**Difficulties in performing daily activities:** The data showed that bathing alone is one of the biggest difficulties individuals with disabilities face in the practice of daily activities 37.4%; 29.6% for males and 39.6% among females, followed by a difficulty in getting dressed by himself/herself 29.3%; 25.9% males and 32.8 % females, and then using the bathroom 24.1%; 20.3% males and 27.9% females, and going to bed and leaving him/her alone 22.7%; 18.5% males and 27.2% females, and finally eating alone 12.3%; 11.5% males and 13.3% females.

### Some of the workshops' results:

#### **Disabilities and the scarcity of services**

- Weakness of the participation of people with disabilities in determining the priorities and need for services.
- There is a lack of self-evaluation indicators, which leads institutions eventually to do the easy work by which it is possible to assess the service provided with high consent while ignoring the work on projects with people with intellectual disabilities whose work and impact assessment take a long time.
- The absence of national policies.
- Absence of integrated crew and multidisciplinary diagnosis.
- Limited information and inaccuracy.
- The absence of the service is also linked to the cost.
- The weakness of the disability movement and its impact on the ground.
- The absence of justice in the distribution of services geographically and by type of disability.
- Linking services with funding agenda and priorities rather than local need.

**The sector is managed through projects here and there by institutions, whether civil or governmental funded by donors. These projects have specific durations that expire with the end of funding. This sector is managed this way including projects without "mapping" of existing projects or their content or their target groups. This shows the randomness of work without any coordination or a clear reference in the sector management especially that there are many players involved.**

#### **Urgent adjustments in the infrastructure of homes**

**Special ramps at home:** 24.6% of individuals with disabilities in the Palestinian territories said they urgently need ramps in their homes to help them move; 28.3% in the West Bank and 16.2% in the Gaza Strip.

**Adjusted toilets:** 33.7% of individuals with disabilities in the Palestinian territories said they urgently need adjusted toilets in their homes; 35.8% in the West Bank and 28.8% in the Gaza Strip.

**Adjusted kitchens:** 19.6% of individuals with disabilities in the Palestinian territories said they urgently need adapted kitchens in their homes; 21.4% in the West Bank and 15.4% in the Gaza Strip.

**Elevator:** 15.0% of individuals with disabilities in the Palestinian territories said that they urgently need elevators in their homes; 14.7% in the West Bank and 15.5% in the Gaza Strip.



**Visual alarms:** 7.8% of individuals with disabilities in the Palestinian territories said that they urgently need a system of visual alarms in their homes; 7.3% in the West Bank and 9.3% in the Gaza Strip.

**Some the results of the workshops:**

**The absence of adjustment, accessibility and full access to opportunities, which certainly contribute to the limited mobility and access to major opportunities in education and other services.**

- The lack of home adjustment
- The lack of adjustment of the public utilities and official institutions.
- The limited movement of non-accommodation of public transport.
- Limited opportunities for the integration of children with mental disabilities.
- The capacity of people with disabilities do not live up to the requirements of integration.

**Difficulties in carrying out daily-life activities in outdoor environments for people with disabilities aged 18 years and above**

**Visiting family and friends:** 83.9% of individuals with various disabilities have difficulty in visiting family and friends, followed by 61.5% of individuals with psychological disabilities have difficulty in performing this activity, and then comes individuals with visual disabilities 59.5%, then individuals with memory and focus disabilities by 58.6%, individuals with slow learning disabilities by 58.2%, 57.8% of individuals with communication disabilities, and 45.1% of individuals with hearing disabilities.

**Performance of social events:** 84.9% of individuals with various disabilities suffer from difficulties in carrying out social events, followed by individuals with slow learning deficiencies, then individuals with psychological disabilities and memory and concentration disabilities by two-thirds (67.1%), 63.5% of individuals with communication disabilities, followed by 60.8% of individuals with visual disabilities, 51.2% of individuals with hearing disabilities have difficulties in carrying out this activity.

**Movement in the local environment:** 85.3% of individuals with various disabilities have difficulties in performing this activity, followed by 61.8% of individuals with visual disabilities 59.4% of individuals with communication disabilities, 58.8% of individuals with learning disabilities, and 58.0% of individuals with memory and focus disabilities, 56.9% and 50.0% of people with mental disabilities and hearing disabilities, respectively.

**Access to public services:** The results indicated that people with physical disabilities suffer the most from access to public services, followed by individuals with communication disabilities; 74.4% and 67.2% respectively. The same applies to access to banking services; 26.9% for those with physical disabilities and 25.0% for those with communication disabilities, and access to health care services; 79.4% and 65.6% respectively.

**Access to the workplace:** people with visual disabilities suffer the most from access to the workplace; 13.0%, followed by individuals with hearing impairments; 9.7%.

**Adjustments needed for currently enrolled individuals with disabilities aged between 10-17 years in order to complete their education**

**People with visual disabilities:** 24.5% of individuals with visual disabilities need transport services accommodated to their disabilities in their schools so that they can complete their education, 25.0% need adjustments in the school buildings' design, 38.5% need adjustments in the classroom and 11.5% need adjustments in water toilets.

**People with hearing disabilities:** 15.2% of individuals with hearing impairments need transport services accommodated to their disabilities in their schools so that they can complete their education, and 12.5% need adjustments in the school buildings, 24.2% need adjustments in the classroom and 3.1% need for adjustments in the water toilets.

**People with communication disabilities:** 12.5% of individuals with communication disabilities need transport services adjusted to their disabilities in their schools so that they can complete their education, 6.3% need adjustments in the school buildings, 12.5% need adjustments in the classroom, and the same percentage need adjustments in the toilets.

**People with physical disabilities:** 50.0% of individuals with physical disabilities need transport services accommodated to their disabilities in their schools so that they can complete their education, 46.3% need adjustments in the school buildings, and half of them need adjustments in the classroom, and more than half of them 52.8% need adjustments in the toilets.

**People with memory and concentration disabilities:** 25.0% of individuals with memory and focus disabilities need transport services accommodated to their disabilities in their schools so that they can complete their education, 20.0% need to adjustments in the school buildings, 21.1% need to adjustments in the classroom and 10.5% need to adjustments in toilets.

**People with slow learning disabilities:** 3.8% of individuals with learning disabilities need transport services accommodated to their disabilities in their schools so that they can complete their education, 1.9% need adjustments in the school buildings, and 5.8% need adjustments in the classroom and 1.9% need adjustments in the toilets.

**Adjustments needed for working individuals with disabilities aged 18 years and over in order to be able to work**

A set of requirements was highlighted to facilitate the involvement of individuals with disabilities of 18 years and over in the labor market. The following results review some of these adaptations.

**Transportation:** 34.7% of people with physical disabilities reported that they need transport services accommodated to their disabilities so as to have access to the workplace, followed by 31.7% of people

with visual disabilities, 20.0% of people with mental disabilities, 17.6% of individuals with hearing disabilities, and 12.5% of individuals with communication disabilities.

**Easy-to-use toilets:** 26.4% of people with physical disabilities reported that they need adapted toilets in the workplace so that they can work, 16.1% of individuals with visual disabilities, 9.1% of individuals with memory and focus disabilities, and 5.9 % of individuals with hearing disabilities.

**Technical tools, speaking programs, a portable device for taking notes:** 44.4% of individuals with communication disabilities are in need for such technologies in the workplace in order to enable them to work, 26.5% of individuals with hearing disabilities, 22.6% of individuals with visual disabilities, and 1.4% of people with physical disabilities.

**Adjustment of the work office:** 36.4% of individuals with learning disabilities need this adjustment, followed by 28.8% of people with physical disabilities then individuals with visual disabilities by 25.8%, 20.6% of individuals with hearing Disabilities, and 16.7% of individuals with mental health disabilities need this adjustment.

#### **Difficulties in having access to perform activities in the outdoor environment due to lack of adjustment of infrastructure in the surrounding environment**

During the survey, individuals with disabilities at the age 18 and above were asked about the difficulties they face while performing community activities and other stuff in the outdoors environment. The results have shown that 54.7% of individuals with disabilities have difficulty in movement because sidewalks are not convenient, and with respect to crossing the streets, it was found that 60.4% of individuals with disabilities have difficulty in crossing the streets due to lack of the infrastructure necessary for them. With regard to the size of street signs, results have shown that 40.3% of individuals with disabilities have difficulty in walking and crossing the streets because of lack of accommodated size of street signs. Difficulty faced by individuals with disabilities while performing activities at outdoors environment has been measured; where 42.9% of these individuals are having difficulty due to the lack of recreational services, and 48.4% of them are facing difficulties due to lack of accommodation of parking.

#### **View of other people:**

During the survey, the difficulties faced by individuals with disabilities of 18 years and over in several areas because of the look of others to them were studied and measured. These areas were: communicating with people, looking for work, communication in the surrounding environment such as the neighborhood. The proportion of individuals who have difficulty in communicating with those around them because of how others view them was 36.6% in the West Bank and about 34% in the Gaza Strip. About the job search, it was found that the percentage of individuals with disabilities who are having difficulty in looking for a job was 14.0% in the West Bank and 19.4% in the Gaza Strip. In communication with the surrounding environment in the neighborhood, the proportion of individuals

with disabilities who have difficulty in this area because of how others perceive them was 42.5% in the West Bank and 40.4% in the Gaza Strip.

### **1.2.3 Community exclusion and marginalization of people with disabilities<sup>15</sup>**

In general, a prevalent community view perceives people with disabilities with inferiority, even when seen with compassion and charity, this view finds its roots in the culture of care before it has to do with humanitarian motives.

This perception of inferiority rooted in the behavior of community control circuits of exclusion and segregation of persons with disabilities, which primarily become the base of the lives of these people based on isolation and dependency. This becomes the world through which they think. This isolation reaches its peak when the person with a disability is a female, in which case the female is major source of shyness, and perhaps shame. Where people without disabilities set the world of people with disabilities, they deprive them from elements formal life. In addition to isolation and exclusion, the community produces a degrading language with vocabulary categorizing them by type of disability, which is full of negativity, cynicism and defamation. For example, any person with intellectual disabilities becomes insane, any person who uses wheelchairs is handicapped, and persons with visual disabilities become blind. Thus the type of disabilities defines his/her identity and the way surroundings individuals, groups and sometimes institutions deal with them. Moving from the language with this type of cultural exclusionary inventory, this culture is also expressed through social and institutional attitudes towards people with disabilities. This is what we find flagrantly even in basic human rights and services. Educating persons with disabilities is part of hierarchical priorities set by persons without disabilities at the top of this hierarchy, and if the family of the disabled person is financially and socially capable, they can consider educating their members with disabilities. Of course, the priority in this case goes to the male family members rather than the females with disabilities reflecting the gender discrimination rooted in the society in general. At the institutional level, providing education to the people with disabilities is also perceived from the same exclusionary perspective. Instead of having a flexible educational system that integrates people with disabilities with their peers, they are placed in schools special for them (based on the shelter). This actually limits the world of people with disabilities when receiving education, which is considered a basic right and a first step in integrating them and granting them their full and equal rights. Even the existing applied integration experiences, it seems that those working on it are not fully convinced of its importance because these experiences are just an echo of funding requirements from the foreign institutions. In the labor market, the person with a disability bears the responsibility of the absence of accommodations in the work environment and institutions in general. The problem becomes associated with the total of persons with disabilities as if this problem is related to each individual of them separately. Even when engaging the people with disabilities in the work environment, the social expectation is based on the conviction that the integration of persons with disabilities leads to low productivity without any study that proves this expectation as if people without

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<sup>15</sup> These results are based on a study conducted by the Development Studies Center, supported and funded by the Palestinian Women Research and Documentation Center (2011).

disabilities have the same degree of productivity. Institutions of various kinds give priority to persons without disabilities even within the percentage approved legally (5%) There are attempts to violate this percentage or interpret it to commensurate with the institution's considerations. For some of these institutions, it is better to pay the fine for violating the law than to hire someone with a disability and pay his/her salary and keep him/her at home. In this context, the degree of exclusion maximizes when the person looking for a job is a female with disabilities. Although the results reflect the society's acknowledgement of the rights of people with disabilities in social and political participation as well as cultural rights, but this recognition is challenged with community practices that limit its actual value. In the dominant culture, there is a further distinction between the public and private spaces, the closer the person with a disability is to his/her private space; the higher is the recognition of their rights. On the contrary, this recognition decreases in the public sphere. The issue of participation in the decision making process and the acquisition of control sources seem to be the most sensitive issues in the society as this space is left for older men with powers and wealth ... Not surprisingly, in light of the foregoing, there is a decrease in the society's confidence of people with disabilities in many areas.

Despite the large percentage of people with disabilities in the Palestinian territories, much of the adequate information about the institutions that work on issues of disabilities are not available for even people with disabilities themselves, or their families which is a logical responsibility of the institutions themselves not the individuals. It is primarily the institution's responsibility of these institutions to reach to all the society's segments. But if the actual practice of these institutions is to wait in their institutions' offices and buildings for people to come to them, these practices distorts the social role of these institutions and reflects the charitable view connected to superiority. And that's why the assessment of these institutions by those who know them was low compared to the reports of the institutions themselves.

Although the existing perspective of compassion and charity towards people with disabilities, the results of the study revealed a high percentage of violence committed against them. What is surprising is that more than half of the participants in the survey saw people with disabilities exposed to violence. What makes it worse is that a third of them were passive and didn't defend the victims of violence either by himself/herself or by communicating with his/her family or contacting legal concerned institutions. It seems that the dominant culture did not leave within these data any space for the recognition of real citizenship and humanity of persons with disabilities. Once they are deprived from their fundamental rights, and then they become vulnerable to violence and deprivation. When it comes to persons with a mental disabilities, they are not socially perceived as human beings, rather they are dealt with as a source of cynicism, irony and entertainment in the best conditions irrespective of his/her acceptance of being subject to violence since they are considered unconscious. Further, with respect to women with disabilities, although the degree of exposure to violence is relatively lower, but this stems from isolating them from social life, and thus they are less prone to social violence, but possibly they are more exposed to domestic violence. Furthermore, some women with mental disabilities are completely segregated for fear of becoming a victim of sexual exploitation, and even in this case, they become a source of shame. For families with one member with disabilities, there are two factors that guide their stance; it depends first on the society's public perception. These families consider financial challenges the biggest problem

they face, followed by the psychological challenges. The first challenge is the dominant medical view when dealing with issues of disabilities, as if all that is needed for persons with disabilities are medical devices and services. The psychological challenge stems from the society's inferior look towards people with disabilities and possibly their families. This divine test may be a punishment for the family because it is not only a test for the person with a disability, but it also has a great influence on marriages in this family as the person with disabilities is not considered qualified for marriage. In addition, having a person with disabilities as a family member reduces the marriage opportunities for the other members of the family for fear of inheriting the disabilities or infection. It should be noted here, that the study showed clearly that people with disabilities are not a consistent group in many cases in terms of access to services, and some patterns of social behaviors associated with them. In addition to exclusion and marginalization of women with disabilities, the place of residence and social class play a role in determining these people's access to services, and some of the behaviors against them. In cities, access to services increases compared to a clear decline which is observed in the villages. With regard to social class, a person with a disability from a rich family receives more attention from his family compared to those from poor families. However, some rich families don't pay attention in a positive sense, rather they tend to isolate the disabled members of their families in shelter institutions and centers since they have the financial capacity to do so. It is striking that the culture that we dealt with some of its elements cast a shadow on all components of the sample; there are no substantial differences between the society in general, people with disabilities and their families. There is a degree of identification and acknowledgement of the mainstream culture without any attempts to challenge it and try to change it. It is important to emphasize that the reactions of the participants in the study towards disability issues reflect the mainstream socially and culturally without necessarily reflecting the position everyone has on an individual level. It is a reflection of cultural patterns and social mainstream that stem from the expertise and experience of the participants, which the study considers as one of the main factors of study that should be changed. On the other hand, the reliance of the study on the human rights' perspective in dealing with disabilities issues has led to pointing out the gap between this perspective and the reality of the Palestinian society. It means that the extent and depth of the gap is mainly based on the perspective of analysis used in the study. Finally, none of the results, whatever shocking, or different from some expectations, are the product of reality itself within the analytical framework, which leads us to assume that this should constitute an incentive for individuals and institutions to work hard in order to change this reality towards the integration of people with disabilities in the development process based on their rights in various fields.

Finally, the issue of disabilities cannot be understood and analyzed in isolation from the complexity of all contexts, and their different effects. The social attitudes and social and institutional behavioral patterns are the outcome of economic, political and cultural factors without ignoring or underestimating the role of the occupation, and the structural discrepancies of the components of the Palestinian society, which should cooperate together and exert more efforts to raise the awareness about the issues of disabilities as a priority on the basis of human rights. This space of recognition and awareness of the rights of the disabled should fight the dominant patterns associated with disabilities.

### Some of the workshops' results

#### **People with disabilities still live in a state of negative perception and societal acceptance, reinforcing negative societal discrimination against them**

- Negative social discrimination against people with disabilities.
- Negative stereotypes of the inability of a person with a disability.
- Weakness of the society's readiness to integrate children with disabilities
- Negative attitudes and practices towards people with disabilities in several fields (for example, the person with a disability is considered as a barrier which hinders the learning process of the rest of his colleagues on the grounds that he is in need of more care and attention), and the second issue is linked to the teachers' attitudes through their negative tendencies in dealing with students with disabilities or providing special environment for them such as education.
- Attitudes towards issues of disabilities fall under medical concepts and that integration at schools is subject to a medical report

### **1.2.4 Disabilities and National Policies**

In light of the review of a study carried out by the Centre for Development Studies - Birzeit University to monitor disability-sensitive indicators in the policies, terms of reference and the programs implemented by governmental and non-governmental and international institutions in connection with the integration of disability issues in the year 2010, the following conclusions **should be noted**<sup>16</sup>:

1. The small number of institutions at different sectors adopted at the top of their plans and programs a specific policy based on inclusion of the issues of the people with disabilities or targeting them. Some institutions pointed out that they follow the policy of inclusion based on equality and non-discrimination in the provision of services on any ground such as the Ministry of Education and Higher Education and Palestinian Red Crescent Society and the UN Relief and Works Agency for Refugees.
2. Weakness almost up to absence of the relationship between the policies adopted by many institutions, programs and projects that are being implemented, which makes Disabilities issues connected with some circles and cannot be integrated with all services and programs, for example, UNICEF and the World Bank.
3. Most of the interviewed institutions lack the existence of a policy based on not excluding any group in the society and ensuring that all measures are taken to achieve this goal. A wide range of institutions express their commitment to the Palestinian law for the rights of people with disabilities in 1999,

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<sup>16</sup> Development Studies Center, 2010 (unpublished study conducted on the sensitive indicators in the vital sectors and disability).

however, these institutions didn't refer to the procedures and measures to which they are committed to implement in order to ensure the application of this law under which the roles and the responsibilities of these institutions are highlighted, for example, the Ministry of Labor, the Ministry of Transportation, the Federation of Trade Unions and the Office of the High Commissioner.

4. Some policies, if any, are influenced by the negative societal attitudes towards disability issues, which reflect certainly on the objectivity of dealing with the issue of Disabilities as a human rights issue. For example, it is unlikely that the Ministry of Education and Higher Education accepts the integration of students with intellectual disabilities in regular schools despite its adoption of a policy of education for all for fear of disrupting the educational environment and the idea that the behaviors of students with intellectual disabilities will affect students without disabilities.

5. The absence of a policy governing the investment of financial or human resources to integrate persons with disabilities and ensure their access to rights and services on an equal basis with others. For example, the institutions dedicate a certain proportion of its budget to accommodate its buildings or the programs they implement.

6. The blurry of the decision makers in many institutions about their conception of public policy, which made many of them narrate the programs targeting people with disabilities carried out in response to the question about whether they have a particular policy to ensure the integration and inclusion of people with disabilities in their plans and programs, for example, the Ministry of Social Affairs.

7. Some institutions indicate that they are committed to a policy of non-discrimination, exclusion or exception, but they do not have any measures they take to ensure the comprehensiveness of people with disabilities, which keeps this policy loose and useless, for example, the Ministry of Women and the Ministry of Planning.

8. Several international organizations report that they face many obstacles in the Palestinian context, which limits the possibility of activating or application of public policy to which they are committed in other countries or in the countries of their inception such as, UNDP, EC.

#### **From the results of the workshops**

##### **Disabilities and policies**

- Multiple references in the policies' subject.
- A deficit in the legal concept generates absence and attitudes in ineffective policies.
- Policies are not valid and effective in the policies and attitudes of the Ministries.
- Part of the policies is related to international funding and not within the national need.
- Attitudes affect the policies.



- In general, policies are still conventional and did not live up to the concept of human rights.
- Policies are linked to persons and based on personal interests.
- The absence of indicators for the implementation of policies.
- High gap in the implementation of existing policies despite the problems they have(gap between the theoretical and practical application in the field.

### **Annex No. (3): Capacity Analysis Table**

This annex depended on the information of the organizations released by them. Any organization not included here, we did not receive any information from it.



<b>Future intervention Potentials</b>	<b>Points of weakness</b>	<b>Points of Strength</b>	<b>Main characteristics of the Organization</b>	<b>Organization</b>
<ul style="list-style-type: none"> <li>- Programs (card, empowerment program, customs exemption, rehabilitation of centers ,etc )</li> <li>- Relations networks with various departments</li> <li>- Financial resources even though they are limited</li> <li>- The supreme council for the persons with disabilities</li> <li>- The disability card committee</li> <li>- A staffs to introduce services at the level of all governorates in the country</li> </ul>	<ul style="list-style-type: none"> <li>- Limited financial resources</li> <li>- Limited and weak human resources</li> <li>- Weakness of the administration of the specialized administration structure</li> <li>- Legal obstacles</li> <li>- Few byelaws and polices</li> <li>- Overlapping of roles between the ministry and other government departments</li> <li>- Huge needs vis-à-vis the potentials</li> <li>- Weakness and absence of some the programs (awareness program ,movement program)</li> </ul>	<ul style="list-style-type: none"> <li>- Legal authority directorate</li> <li>- The general Directorate for the persons with disabilities</li> <li>- Counselors of inclusion and disability in the districts.</li> <li>- The existence of a special plan in the Ministry</li> <li>- Management of a policy to implement and develop the rules and programs</li> <li>- Existence of some budgets</li> <li>- Lunching the cards programs</li> </ul>	<ul style="list-style-type: none"> <li>- Responsible for the sector of rehabilitation</li> <li>- provides direct services (relief aids, money shelter services , education, vocational training ,moving guidance to the blind ,economic empowerment ,customs exemption ,funding tools of services and facilities ,(adjusting houses))</li> <li>- presiding over the national committee for disability card</li> <li>- General administration of the persons with disabilities and employees belonging to the general administration in every department</li> </ul>	<p>Ministry of Social Affairs</p>
<ul style="list-style-type: none"> <li>- The existence of a number of programs (inclusive education ,sources rooms, integrated classes, relations with various departments)</li> <li>- A qualified staff to provide support and integrate the students in the general education schools at the level of the directorates and special education supervisors to follow up the work and teacher to provide educational and psychological support</li> <li>- A n educational guidance program in the school</li> <li>- Adjustment of school systems and instructions related to success ,re-exam</li> </ul>	<ul style="list-style-type: none"> <li>- Non existence of budgets for the department</li> <li>- Limited financial resources and dependence of the department on foreign funding which may be some times allocated to a certain activity or item.</li> <li>- Lack and weakness of the human resources at a level of the department and directories vis-à-vis the size of needs</li> <li>- Non existence of a general administration for special education</li> <li>- Lack of the policies and instructions which support</li> <li>- Load Work of the department</li> <li>- Rarity of the special education specializations</li> </ul>	<ul style="list-style-type: none"> <li>- The general Directorate for counseling and special education</li> <li>- Responsible for supervision of the programs and services in the Ministry and the field and their integration in the strategic plan of the Ministry</li> <li>- The existence of a department for special education and special education supervisors as well as inclusive education counselors in the departments</li> <li>- Educational supervision over the inclusive education</li> <li>- Coordination with the educational guidance program in providing psychological and social services to the integrated students</li> <li>- Specialists with various specializations in the center of sources of the special education to support the students and their families and to achieve the best integration in the</li> </ul>	<ul style="list-style-type: none"> <li>- Providing of educational services</li> <li>- (Integration program, support of the schools affiliated to the civil organizations ,providing the blind with books according to Braille system, classes for special education ,libraries for persons with disabilities ,counseling )</li> <li>- Member of the national committee for cards and member of the supreme council</li> </ul>	<p>Ministry of Education and Higher Education</p>

<p>and failure</p> <ul style="list-style-type: none"> <li>- Specialists in various specializations to evaluate the students and provide support to them and their families</li> <li>- Provide machines to print the school books according to Braille system</li> <li>- Provide school buildings(General education schools ) which can be used and adjusted to integrate the students</li> <li>- Membership of the Ministry in the national committee for the disability card and the supreme council for the persons with disability</li> <li>- Coordination with the vocational and technical education to adjust the specializations to the needs of the students with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of tools to diagnose the mental capabilities</li> <li>- Absence of special education sources centre in the various areas</li> </ul>	<p>schools of the Ministry of Education and Higher Education</p> <ul style="list-style-type: none"> <li>- Special education female teachers to the resource rooms in the schools</li> <li>- A plan for the department</li> <li>- Experienced staff in the work</li> <li>- Cooperation and coordination between the Ministry and the governmental and non-governmental organizations working in the field of disability</li> <li>- Adoption of the inclusive education and integration policies and philosophy</li> <li>- Adoption of the constructive school classification policy</li> <li>- Adoption of the support of special education organizations policy</li> <li>- Printing the school books according to Braille system for the blind students and enlarging the school books for students with low vision</li> <li>- Exemption of the students with disabilities from the annual school donations</li> <li>- Provide facilities for the students with disabilities in the general secondary school examinations</li> <li>- Transforming most of the projects into programs within the department</li> </ul>		
<ol style="list-style-type: none"> <li>1.Training of staff</li> <li>2.Adjustment of health centers and hospitals</li> <li>3.Adoption of the disability work card</li> <li>4.Developing of plans and strategies concerning the disabled at the level of the Ministry of health</li> <li>5.Coordination between the ministries</li> </ol>	<ol style="list-style-type: none"> <li>6. Lack and weakness of human resources</li> <li>7. Non- adjustment of health centers to meet the requirements of the person with disability</li> <li>8. Lack of bylaws ,policies and strategies for the persons with</li> </ol>	<ul style="list-style-type: none"> <li>- Existence of several health programs and policies to implement and develop the health programs for disability including : <ol style="list-style-type: none"> <li>1- Children's vaccination program</li> <li>2- Periodical tests for pregnant ladies- screening of fetus disabilities</li> <li>3- Post - natal test program and</li> </ol> </li> </ul>	<ul style="list-style-type: none"> <li>- Responsible for providing a package of services and health aids to the persons with disabilities</li> </ul>	<p><b>Ministry of Health</b></p>

<p>and organizations in the field of disability</p>	<p>disabilities</p> <p>9. Weakness of some of the programs which detect disabilities</p> <p>10. Lack of the financial resources required to meet the needs of the person with disability from the health point of view</p> <p>11. Lack of the studies about the needs of the persons with disabilities</p>	<p>family planning (between pregnancies )</p> <p>4- Eye test services and measuring the eye pressure</p> <p>5- Eye test for diabetics</p> <p>6- Health education services and awareness concerning the preventive health and health life patterns</p> <p>7- Home visits for elderly people and special cases</p> <p>8- Central and supreme medical committees concerned with examining the person with disability and estimate the disability rate</p> <p>9- Follow up the patients with mental disabilities in the community mental health clinics</p>		
<ul style="list-style-type: none"> <li>- Setting up a national team for social security ,revision and amendment of the work dictionary to develop penalties for failure to employ this group</li> <li>- Enactment of a minimum wage law</li> <li>- A project to develop the inspection services from quantity and quality points of view with the international labor organization and in partnership with national and international organizations</li> </ul>	<ul style="list-style-type: none"> <li>- Limited financial resources and weak experience of some of the human resources</li> <li>- Limited inspection potentials</li> <li>- Weak of criminal protection for not employing the persons with disabilities</li> <li>- Absence of social security system</li> </ul>	<ul style="list-style-type: none"> <li>- A Job market information system to provide special databases of the persons looking for jobs and unemployed persons</li> <li>- The need that 5% of the organizations work force should be from the persons with disabilities</li> <li>- Some of the vocational training centers should meet the requirements of disabled staff</li> </ul>	<ul style="list-style-type: none"> <li>- Member of the card national committee and member of the supreme council</li> <li>- Inspection of the special operational sectors and vocational training centers</li> <li>- Legal counseling and legal services through the labor offices</li> <li>- Vocational guidance</li> <li>- Awareness of employers</li> <li>- Preparation of the staff qualified for the vocational training and supervising the adjustment of the places of work and meeting the conditions of the vocational safety</li> </ul>	<p>The Ministry of Labor</p>
<ul style="list-style-type: none"> <li>- Participation of experts and consultants from the Ministry of Social Affairs in the annual meetings held with the regional committees and experts from other specializations to clarify the picture and support work according to the plan</li> </ul>	<ul style="list-style-type: none"> <li>- The officials responsible for this file and the sectoral members are not working on full time basis</li> </ul>	<ol style="list-style-type: none"> <li>1- The existence of a legal authority for the issue of environmental adjustment</li> <li>2- Existence of sectoral committee for the disability card comprising specialists from the Ministry of Local Government</li> <li>3- Existence of annual plan for the adjustment issue and an attempt to grant a prize for the best local board in the issue of adjustment in</li> </ol>	<ul style="list-style-type: none"> <li>- A member of the card national committee and a member of the supreme council</li> <li>- Ensures the provision of facilities in the public facilities</li> <li>- Follow up the work of the municipalities in the adjustment issues</li> <li>- Ensures the compliance of individuals with the application of the technical specifications</li> </ul>	<p>Ministry of Local Government</p>

		cooperation with (CBR), Diakonia and the municipality fund		
<ul style="list-style-type: none"> <li>1- Cooperation with public transportation companies to reduce the fair of the persons with disability</li> <li>2- Qualification of the public transportation buses to carry the persons with disabilities easily</li> <li>3- Printing stickers to be distributed on the glass of the vehicles of the persons with disabilities</li> <li>4- Awareness of the rights of the persons with disabilities through audio and visual media concerning their rights in the means of transportation</li> <li>5- Coordination with the unions of the driving schools teaching owners by preparing a vehicle for them in every governorate</li> </ul>	<ul style="list-style-type: none"> <li>1. Inability to reduce the fair in the public transportation vehicles because they are privately owned</li> <li>2. Cooperation of the local councils with the ministry to allocate parking lots for the cars of the persons with disability</li> <li>3. Non existence of qualified public vehicles until this date</li> <li>4. The absence of driving school vehicles qualified for the use of the persons with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>1- The permanent committee of the persons with disabilities</li> <li>2- Permanent membership in the card of the persons with disabilities</li> <li>3- Allocation of parking lots for the persons with disabilities near the public and private organizations</li> <li>4- Unification of license fees of the vehicles of the persons with disabilities</li> <li>5- Allocating of vehicles to teach driving to the persons with disabilities</li> <li>6- Awareness of the rights of the persons with disabilities by using public vehicles</li> </ul>	<ul style="list-style-type: none"> <li>- Member of the card national committee and member of the supreme council</li> <li>- Adjustment of public vehicles</li> <li>- Ensure the creation of special parking lots for the vehicles of the persons with disabilities</li> <li>- Customs exemptions</li> <li>- Drivers awareness</li> </ul>	Ministry of Transportation
<ul style="list-style-type: none"> <li>- It has relationships networks with mass media and a media staff expert in the field of support and legislation in the field of media</li> </ul>	<ul style="list-style-type: none"> <li>- It has limited financial resources</li> <li>- It suffers from the lack and weakness of the human resources</li> </ul>	<ul style="list-style-type: none"> <li>- It is supervising the non sectoral national strategy in the field of media</li> <li>- It has offices in most of the governorates which wages support and awareness campaigns in various fields of priority</li> <li>- It is responsible for organizing the media sector in Palestine</li> <li>- It is about to inform an information committee within the card national committee with the aim of coordination the governmental and civil media efforts regarding the persons with disabilities</li> <li>- It has effective contributions to development and coordination of policies and media efforts</li> </ul>	<ul style="list-style-type: none"> <li>- Member of the card national committee and observer member in the supreme council</li> <li>- It provides media services in cooperation with a large number of private radio and TV stations supervised by the Ministry</li> <li>- Support campaigns through symposiums, workshops and various events through the offices of the Ministry spread all over the governorates.</li> </ul>	Ministry of Information
<ul style="list-style-type: none"> <li>- The programs and services that can be presented to the programmers and the mail</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of material potentials specially for some of the high expensive programs</li> </ul>	<ul style="list-style-type: none"> <li>- Creation of technological programs which help the persons with disabilities in their daily life</li> <li>- Providing free mail services for the persons with disabilities</li> <li>-</li> </ul>	<ul style="list-style-type: none"> <li>- Responsible for the organization, management and control of the communications , information technology and postal sector</li> <li>- Member of the card national committee and member of the supreme disability council</li> <li>- Adjustment of the communication and</li> </ul>	Ministry of Communications

			<p>information services</p> <ul style="list-style-type: none"> <li>- Creation of free mail service for the visually impaired persons</li> </ul>	
<ul style="list-style-type: none"> <li>- Providing financial resources</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of financial resources</li> </ul>	<ul style="list-style-type: none"> <li>- Implementation of the adjustment conditions in the public buildings ,instillations, housing projects and roads and amending the existing ones</li> <li>- Abiding by the implementation of the disability law no 4 /1999 .</li> <li>- The public administration for buildings</li> <li>- Political will to implement the disabled rights law</li> </ul>	<ul style="list-style-type: none"> <li>- Responsible for infrastructures and housing projects and adoption of criteria and technical engineering and architectural specifications specially regarding designing and planning for public buildings ,instillations ,housing projects and roads to facilitate the movement and access of the persons with disabilities</li> <li>- Preparation of the roads and pavements including the traffic lights on the highways</li> </ul>	<p>Ministry of Works</p>

**Civil Sector**

<b>Future intervention Potentials</b>	<b>Points of weakness</b>	<b>Points of Strength</b>	<b>Main characteristics of the Organization</b>	<b>Organization</b>
<ul style="list-style-type: none"> <li>- Provision of services to the persons with disabilities through a national referral system</li> <li>- There is a possibility to sign an agreement to buy services with other government organizations</li> <li>- Provision of training by qualified and experienced staff</li> </ul>	<ul style="list-style-type: none"> <li>- Dependence on the development of some programs and the foreign support</li> <li>- Rarity of some specializations in the field of rehabilitation which imposes a burden on the society in recruiting the staff and training them</li> <li>- Continuation of some of the negative attitudes towards the persons with disabilities in the Palestinian society</li> </ul>	<ul style="list-style-type: none"> <li>- We work with the experts as rehabilitation services are spread in all governorates and covers various kinds of disabilities with the exception of visual impairment</li> <li>- It has specialized and highly experienced personnel in the field of rehabilitation</li> <li>- It carries out community rehabilitation programs aimed at reaching the persons with disabilities in their places of residence</li> <li>- The community awareness programs concentrate on rehabilitation and disability ,also the community awareness programs concentrate on the field of rehabilitation and disability</li> <li>- Care and in coordination and networking with other organizations working in the same fields , membership in the committees and national boards concerning the sector</li> <li>- It receives support from the international partners in the international movement of the Red Cross and Red Crescent</li> <li>- It is interested in developing the capacities of staff on continued bases</li> <li>- It concentrates on the development of work programs with the families of the persons with disabilities</li> <li>- It provides services to the citizens for symbolic fees or gratis</li> <li>- Providing several services and programs by the society (health care ,mental health and youth and volunteers programs ) for the persons with disabilities</li> <li>- The society participates in the 3 regional committees</li> </ul>	<ul style="list-style-type: none"> <li>- The Palestinian Red Crescent Society is the national society of the Palestinian people and it is a member of the international union for the Red Crescent and Red Cross Societies</li> <li>- It is also a member of several national committees and boards working in the field of rehabilitation and disability such as the supreme council for disability and the board of directors of the special Olympics ,the board of directors and the technical committee of the Emirati Fund for the rehabilitation of the persons with disabilities projects and others in addition to participation in the regional committees of the community rehabilitation program</li> <li>- The disability and rehabilitation sector is considered a part of the strategic goal of the social development in the Palestinian Red Crescent Society</li> <li>- The Society and through the programs carried out by the rehabilitation department and capacity development ,the rehabilitation services for the persons with disabilities specially children in addition to elderly people, injured, sick people ,children with growth problems and others who are in need of the rehabilitation services available in the society .These services are provided through 29 rehabilitation centers and therapeutic and rehabilitation unit ,8 of them are specialized centers in the rehabilitation and capacity building of children with mental disability in addition to a new rehabilitation center in Arraba in Jenin in participation with the local community .There are also 4 centers and schools specialized in the learning of deaf students as well as 2 centers specialized in the rehabilitation of children suffering from Cerebral Palsy and 10 centers and units specialized in physiotherapy and occupational</li> </ul>	<p>The Palestinian Red Crescent Society</p>



			<p>therapy ,5 units for the rehabilitation of hearing and speech in addition to the community programs such as the community special education program targeting children with mental disabilities and their families</p> <p><b>The rehabilitation services provided :</b></p> <ul style="list-style-type: none"> <li>○ <b>Implementation of the specialized programs</b></li> <li>- <b>Teaching, rehabilitation and training the deaf children</b></li> <li>- <b>Special education , rehabilitation programs and capacity building of the children with mental disability</b></li> <li>- <b>Comprehensive rehabilitation of the children with Cerebral Palsy</b></li> <li>- <b>Socio –psychological counseling for the beneficiaries and their families</b></li> <li>- <b>Speech , linguistic , physiotherapy and occupational therapy for all groups and ages</b></li> <li>- <b>Hearing test</b></li> <li>○ <b>Prevention and awareness of disability and the rights of the disabled</b></li> <li>○ <b>Home visits for the persons with disabilities and providing what they need specially those who live in distant areas</b></li> <li>○ <b>Implementation of follow up programs with the families</b></li> <li>○ <b>Implementation of support and creativity programs (disability sports, art ,libraries ,educational games and others )</b></li> <li>○ <b>Provision of the service of the assisting tools</b></li> <li>○ <b>Detection , diagnosis and early intervention</b></li> </ul>	
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<ul style="list-style-type: none"> <li>- The possibility of rehabilitation for the largest number of beneficiaries.</li> <li>- Specialized training and rehabilitation courses.</li> <li>- It receives the cases referred from the various governorates in the country.</li> <li>- Sports training for the persons with disabilities.</li> <li>- Rehabilitation College to accommodate the students.</li> <li>- It has a specialized nursing college</li> </ul>	<ul style="list-style-type: none"> <li>- It depends on foreign funding</li> <li>- the intervention program outside the center is not expanded.</li> </ul>	<ul style="list-style-type: none"> <li>- The existence of relationship networks with the various rehabilitation organizations.</li> <li>- There is a qualified and trained staff</li> <li>- The ability to accommodate beneficiaries for the society's services.</li> <li>- It has partnership agreements with the government.</li> <li>- Its services are low cost and available to all people.</li> <li>- It has membership in the national rehabilitation committees in Palestine.</li> <li>- It has a field rehabilitation program for the persons with disabilities.</li> <li>- It has clear plans and strategies for community rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>- A Specialized center in the spine's trauma at the National level .</li> <li>- A specialized center in the physio, occupational and water therapy.</li> <li>- It has a qualified and specialized staff</li> <li>- It provides various rehabilitation services</li> </ul>	<p>Patients' Friends Society-Ramallah</p>
<ul style="list-style-type: none"> <li>- Developing and expanding of the database concerning disability in the targeted areas and their referral and facilitating their access to the various rehabilitation services in the targeted area</li> <li>- Community Awareness and support for the issues and rights of the persons with disabilities to ensure their application and abidance by them</li> <li>- Training and empowerment of the staffs of the ministries and the civil community in societal rehabilitation and inclusive development</li> <li>- Waging awareness and support campaigns in the local support communities</li> </ul>	<ul style="list-style-type: none"> <li>- Weakness of communication and adequate cooperation between the program and the concerned ministries(Ministry of Social Affairs, M. O. H., Ministry of Labor and Ministry of transportation etc) because of the lack of cooperation among these ministries</li> <li>- The inability to expand the work of the program in view of the lack of financial resources.</li> <li>- Duality in providing the services in contradiction with the strategy and plans of the program by other organizations</li> <li>- Weakness of the local community participation and its various resources in activating the role of rehabilitation based on the local community</li> </ul>	<ul style="list-style-type: none"> <li>- There is a qualified crew of field staff and also supervision and management.</li> <li>- There is a database for the persons with disabilities in the areas of Bethlehem and Hebron.</li> <li>- The program is based on the provision of services in all the areas of the south</li> <li>- There is a partnership with the ministry of local government through work with the local authorities and in accordance with the staff of these authorities which are responsible for the issues and needs of the persons with disabilities in the local communities.</li> <li>- There is a relationship network with various organizations which facilitate reaching the areas and beneficiaries.</li> <li>- Legal representation through the formation and empowerment of several self-support and backing groups to the persons with disabilities and their families and their participation in the support efforts to apply the laws and policies related to disability.</li> <li>- A reference to the programs of a three</li> </ul>	<ul style="list-style-type: none"> <li>- Rehabilitation</li> <li>- Occupational Therapy</li> <li>- Speech Therapy</li> <li>- Physiotherapy</li> <li>- Assisting aids</li> <li>- Mental, social, occupational and diagnostic counseling</li> <li>- Cochlea transplant</li> <li>- Motor training</li> </ul>	<p>The service providing organizations</p> <p>The primary services providing organization (CBR)</p>

		<p>national organizations providing rehabilitation services and medical services at the national level(these are the Bethlehem Arab society for rehabilitation, the Palestinian Red Crescent society/Hebron and Health work committee</p> <ul style="list-style-type: none"> <li>- A bidding by work on rehabilitation according to the international standards of the World Health Organization and inclusive development</li> </ul>		
<ul style="list-style-type: none"> <li>- Field surveys and access to houses</li> <li>- There is a database from which all the people can benefit</li> <li>- Programs and interventions at various levels (miscellaneous activities).</li> <li>- Establishing of a committee to support the persons with disabilities and strategic visions</li> <li>- Training field for students</li> <li>- Training of the persons with disabilities, their families and the support and backing committees</li> </ul>	<ul style="list-style-type: none"> <li>- Weakness of the financial resources available from the donors</li> <li>- Absence of a national plan able to unify the efforts and programs of the organizations</li> <li>- Lack of the financial resources of the existing communities</li> <li>- Weak participation of the persons with disabilities in leading the community work</li> <li>- The lack of national governmental authority for the community rehabilitation</li> <li>- High cost of rehabilitation especially( assisting aids amendments etc)</li> </ul>	<ul style="list-style-type: none"> <li>- Developing of field rehabilitation program</li> <li>- Direct house work with the persons with disabilities</li> <li>- Carrying out field surveys in Bethlehem to ensure the availability of a complete database</li> <li>- Two trained rehabilitation workers from the same local communities</li> <li>- Access of the program to various poor and marginalized villages.</li> <li>- Real partnerships with the local authorities(Local Councils and Municipalities) to carry out the community rehabilitation</li> <li>- Material contributions from the local communities in favor of the rehabilitation of the disabled</li> <li>- The existence of staffs from trained persons of disabilities.</li> <li>- Partnership agreements with the Ministry of Local Government to rehabilitate the persons with disabilities</li> <li>- There is a regional committee including civil governmental and non-governmental organizations</li> </ul>	<ul style="list-style-type: none"> <li>- Rehabilitation based on the local community</li> <li>- Direct field work for the persons with disabilities and their families</li> <li>- Community work with the local community organization</li> <li>- Coordination of relationships with various organizations at various levels</li> <li>- Work with various disabilities and ages</li> </ul>	<p>Rehabilitation Program based on the local community (CBR) in the middle of the West bank</p> <p>Red Crescent Society, Patients Friends Society and Ministry of local government as they constitute(a regional rehabilitation committee) in the middle of West Bank</p>
<ul style="list-style-type: none"> <li>- Introducing of the speech therapy and special education</li> <li>- Provision of adequate area for various activities</li> <li>- Promotion of the services provided to</li> </ul>	<ul style="list-style-type: none"> <li>- The absence of speech therapy services and special training.</li> <li>- The absence of adequate area for activities</li> <li>- The prosthetic limbs and devices</li> </ul>	<ul style="list-style-type: none"> <li>- Respect of the right of the beneficiaries to have the best service</li> <li>- Provision of the service of the rehabilitation, diagnosis, assessment, and the determination of the needs and</li> </ul>	<ul style="list-style-type: none"> <li>- Provision of the rehabilitation service at the mediator level through a comprehensive team with multiple specializations</li> <li>- Concentrating on engaging the families in the rehabilitation process</li> </ul>	<p>Farah for rehabilitation/ the Palestinian Medical Relief Society</p>

<p>children suffering from autism</p>	<p>need more development</p>	<p>the work of the therapeutic plan and its follow-up</p> <ul style="list-style-type: none"> <li>- Using assessment tools like Gmfm-Gnffts-Scale</li> <li>- Participation of the person, his\her family and the surrounding people in the training process</li> <li>- Existence of a computerized data system for the visitors to be used as a database</li> <li>- Raising the efficiencies and capacities of the crew as part of a systematic training programs</li> <li>- Reaching the largest possible number of beneficiaries in the North of the West Bank</li> <li>- Existence of a distinguished relationship with the community rehabilitation center through field work</li> <li>- Distinguished relationship with the national centers like princess Bassma /Referral and training</li> <li>- Relationship networks through coordination and networking</li> </ul>	<ul style="list-style-type: none"> <li>- Referral point to the rehabilitation program at the mediator level</li> <li>- Sources center to be used by the rehabilitation program and the families of the persons with disabilities</li> <li>- Provision of prosthetic limbs service and assistance devices</li> <li>- Provision of rehabilitation services for children suffering from autism</li> </ul>	
<ul style="list-style-type: none"> <li>- Putting pressure on the decision makers and concerned departments to apply the Palestinian disability law</li> <li>- Moving the services to the residential areas, the people of which cannot reach the city because of the siege imposed on the main cities by the Israeli forces</li> <li>- The adoption of local councils and community organizations for the issue of disability through partnership with the program and taking the social responsibility towards the persons with disability</li> <li>- Expansion of new big residential areas</li> <li>- Promotion of the civil rights and community accountability culture and accordingly the democratic culture</li> <li>- Enhancing the work to change the community attitudes to achieve</li> </ul>	<ul style="list-style-type: none"> <li>- Difficult access to some areas for various reasons</li> <li>- Lack of financial resources which impedes the expansion of the program's work</li> <li>- Difficulty in providing some assistant tools or make the suitable environmental adjustments to suit the persons with disabilities</li> <li>- Negative attitudes impeding the achievement of social integration</li> </ul>	<ul style="list-style-type: none"> <li>- Building a database for the persons with disabilities in all the work sites of the program which assists in the planning process of the community rehabilitation process including house visits ,preventive and community activities, referrals and assistance services</li> <li>- There are a trained and qualified rehabilitation staff</li> <li>- Effective administrative and supervisory system</li> <li>- Continued work to build and promote the capacities of the program's staff as part of a clear work plan</li> <li>- Coverage of the program to wide residential areas in the North of the West Bank</li> <li>- Work with all kinds of disabilities and age groups</li> </ul>	<ul style="list-style-type: none"> <li>- The Community Rehabilitation Program has been working the Northern area of the West Bank since 1995 in partnership with the Palestinian Medical Relief Society and the Palestinian Red Crescent Society</li> <li>- Provision of rehabilitation services at the first level through house visits to the persons with disability through which their needs and priorities will be determined by their participation and the participation of their families developing the required plans according to this as well as the training of one of the family members</li> <li>- Referral of some of the persons with disabilities to the specialized and semi specialized centers at the middle and national levels ,of the cases which need these services as well as their follow up</li> <li>- Prevention against disability and early</li> </ul>	<p>Rehabilitation program based on the local community \Nablus ,Qalqilia and Tulkarem The Palestinian Medical Relief Society and the Red Crescent Society</p>

<p>integration and access to the persons with disabilities</p>		<ul style="list-style-type: none"> <li>- The availability of strong relationships network with the local community organizations and governmental and non governmental organizations</li> <li>- Working as an authority and connecting link between the persons with disabilities and their families on the one hand and the organizations working in the field of disability and rehabilitation on the other hand</li> <li>- Independence and impartiality in the programs work and tackling the various issues from a professional perspective</li> <li>- The existence of a role to the persons with disabilities and their families as supporting partners to the program through the supporting and backing groups</li> <li>- Participation of the local councils and societies in the social responsibility towards the disability issues</li> <li>- Continuation of the program for long years contributed in the creation of permanent communication contacts with the representatives of the local communities</li> </ul>	<p>detection of it in cooperation with the primary health care programs</p> <ul style="list-style-type: none"> <li>- Social integration of the persons with disability within the framework of their community (school integration )</li> <li>- Community work: The program works to facilitate the process of forming organized groups by the persons with disabilities ,their families and volunteers from the local communities with the aim of dealing with disability issues ,its support and waging pressure and hearing campaigns</li> <li>- Support the opportunities of the persons with disability in obtaining the vocational and operational training .The program works to help the persons with disabilities in work age to develop their practical and vocational skills</li> <li>- Facilitating the process of providing assistant devices and tools and making the required environmental amendments for the persons with disabilities .</li> <li>- Training and continuous education of the supporting groups from the local community and the staff of the program in order to develop their performance</li> <li>- The rehabilitation program work includes the areas of Nablus. Qalqilia, Tulkarem and Salfet</li> <li>- The program also covers and as part of it work mechanisms more than 44 residential site including 220 thousand people each the majority of whom are in the rural areas</li> </ul>	
<ul style="list-style-type: none"> <li>- The comprehensive specialized awareness services are available to all groups and ages</li> <li>- Specialized staff in various medical and rehabilitation fields</li> <li>- Inclusive development programs targeting the persons with disabilities in the local communities</li> <li>- There is a mobile rehabilitation team.</li> <li>- Ability to participate in the capacity building of the staffworking in the field of</li> </ul>	<ul style="list-style-type: none"> <li>- Dependence on the foreign funding to meet its increasing requirements</li> <li>- Lack of awareness of the local authorities of the issues and rights of the persons with disabilities</li> <li>- Disability issues do not take adequate status on the national agenda</li> <li>- Weakness of the disability</li> </ul>	<ul style="list-style-type: none"> <li>- Recognized at the international level as being a center specialized in rehabilitation and medical services (Sources and referrals reception center at the national level )</li> <li>- It adopts the inclusive approach in providing services and works in accordance with the inclusive development perspective and rights approach towards disability and its various issues</li> </ul>	<ul style="list-style-type: none"> <li>- Bethlehem Arab Society for Rehabilitation is a national society which provides specialized rehabilitation services including Physiotherapy ,water therapy ,occupational therapy and other services including psychological and social intervention as well as mental treatment and rehabilitation, speech therapy, language ,swallowing problems ,hearing services and rehabilitation after the Cochlea transplant, visual rehabilitation ,social services and providing the assistant aids and devices</li> </ul>	<p>Bethlehem Arab Society for Rehabilitation</p>

<p>disability</p> <ul style="list-style-type: none"> <li>- Provision of the technical support required for the issues of rehabilitation and disability</li> <li>- Work as sources center in the field of disability and rehabilitation</li> </ul>	<p>movement in Palestine and the weakness of the participation of the persons with disabilities in the society</p> <ul style="list-style-type: none"> <li>- The charity and medical approach prevails over the human rights and development approach</li> <li>- The lack of unity of the efforts made to support the disability issues which weakens these efforts</li> <li>- Absence of policies and development plans related to disability</li> <li>- Exclusion of the persons with disabilities from the national plans of the Ministries</li> <li>- Absence of coordination , joint planning and mal distribution of services in comparison to distribution of disability</li> <li>- Lack of specialists in the field of rehabilitation in an adequate manner and lack of the specialization required in the local universities</li> </ul>	<ul style="list-style-type: none"> <li>- It has more specialized professional staff</li> <li>- Provision of quality services to the Palestinian citizens at the national level</li> <li>- It plays a leading role in integrating the persons with disabilities and it works hard to enhance their participation in the various aspects of life equally with others</li> <li>- It provides equal job opportunities for the persons with disabilities</li> <li>- It has strategic partnerships with local and international organizations</li> <li>- It gives care to capacity building of the staff working in the field of disability</li> <li>- It works in the spirit of the team and the participatory approach</li> </ul>	<p>for various hearing ,visual ,motor and mental assistance to the various disabilities and ages</p> <p>Specialized medical and surgical services including eye medicine and surgery, bone, nerves ,E.N.T, general surgery, cochlea transplant, Baha operations, plastic surgery, arthritis treatment, rheumatism's diseases, osteoporosis, heart and artery diseases, treatment of digestive system diseases, emergency and intensive care services, pathological tests, radiology, CT scan and endoscopy.</p> <ul style="list-style-type: none"> <li>- The special education and inclusive education program at the level of kindergartens and primary classes</li> <li>- Field rehabilitation and field socio psychological intervention programs , the program of (CBR) , community awareness and support programs, awareness, capacity building and empowerment of the persons with disabilities and their families programs, awareness of the child protection, children's right and the rights of the persons with disabilities programs, capacity building of the local authorities and community centers in various fields related to disability</li> <li>- A vocational training program for the persons with disability</li> </ul> <p>Drama and entertainment programs for children including those with disabilities</p> <ul style="list-style-type: none"> <li>- A member of the supreme council for the affairs of persons with disabilities, a member of the advisory council of the Ministry of Social Affairs, a member of the organizations working in the field of disability network, a member of the national committee for inclusive education for the students with disabilities/Ministry of Education and Higher Education and Higher Education and a member of the Palestinian network for child network.</li> </ul>	
<ul style="list-style-type: none"> <li>- Access to all persons with disabilities and</li> </ul>	<ul style="list-style-type: none"> <li>- Dependence on foreign funding</li> </ul>	<ul style="list-style-type: none"> <li>- Organizations based on the program and</li> </ul>	<ul style="list-style-type: none"> <li>- A joint program with the Medical Relief</li> </ul>	<p>The rehabilitation</p>

<p>estimating their needs</p> <ul style="list-style-type: none"> <li>- Development of the policies related to the persons with disabilities at the national level</li> <li>- Empowerment of the persons with disabilities to participate in the political life and development of special organizations for them</li> <li>- Development of the local communities to adopt disability issues</li> <li>- Empowerment of woman with disabilities</li> <li>- Promotion of work to create a change in the attitudes of the local communities to achieve inclusive social integrity of the persons with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>- The occupation practices curbs access of the persons with disabilities in sealed areas</li> <li>- Disability has no priority in the national plans</li> </ul>	<p>have experience in the health work</p> <ul style="list-style-type: none"> <li>- Trained and experienced work in the community programs</li> <li>- Inclusive and clear information system</li> <li>- Database about the persons with disabilities in the areas where the programs works</li> <li>- The program's approach is based on dealing with disability completely(Provision of training services, support, human rights and development services)</li> <li>- Non-centrality and local community empowerment through the existing partnership with the local communities</li> </ul>	<p>Society and Patients' Friends Benevolent Society which started in 1992</p> <ul style="list-style-type: none"> <li>- The program works to achieve social integration of the persons with disabilities and access to the disabled in their local communities, the adoption of the persons with disabilities issues, advocating their rights, facilitating the access of the persons with disabilities to rehabilitation services , improving their life conditions and preparing the local communities to adopt the disability issues and change their negative concepts towards disability, prevention and early detection in cooperation with primary health care services in addition to providing rehabilitation services at the first level and carrying out referrals to various community sources and to all levels</li> </ul>	<p>program based in the local community/Jenin</p> <p>The Palestinian Medical Relief Society and the Society of the Patients' Friends</p>
<ul style="list-style-type: none"> <li>- Qualified staff with adequate numbers to provide services</li> <li>- Financial resources are somehow limited and the association is dependent on foreign funding</li> <li>- Strong relationships with the relevant organizations and networks</li> <li>- The distinguished area of the location and the availability of enough and adequate areas of land allows expansion in providing the services and carrying out money generating projects</li> </ul>	<ul style="list-style-type: none"> <li>- Limitation of the financial resources</li> <li>- Awareness of many of the persons with disabilities and their families of the rights of this group</li> <li>- Continuation of the negative attitudes towards the issues of the persons with disabilities</li> <li>- Inadequate media materials which reflect the size and quality of the services provided by the association</li> <li>- The association depends on foreign funding and there are no money generating projects</li> </ul>	<ul style="list-style-type: none"> <li>- Integration in providing services to the targeted groups</li> <li>- There is an experienced and qualified crew with high efficiency, commitment and affiliation</li> <li>- The society is wide spread all over the areas of the West Bank, East Jerusalem and ability to reach the marginalized areas</li> <li>- The society is widely open and it has strong relations networks with relevant organizations</li> <li>- Highly prepared to participate in the knowledge and skills through providing highly transparent training service</li> <li>- Ability, effectiveness and speed of intervention during the crises</li> <li>- The organization has a professional diagnosis unit to provide is service effectively and in a distinguished manner.</li> <li>- The association has a respectable reputation in the community and among the local and international organizations</li> </ul>	<ul style="list-style-type: none"> <li>- Rehabilitation</li> <li>- Occupational therapy</li> <li>- Speech therapy</li> <li>- Physiotherapy</li> <li>- Diagnosis</li> <li>- Cochlea transplant</li> <li>- Motor training</li> <li>- Assisting tools</li> <li>- Socio-psychological counseling</li> <li>- Professional diagnosis (guiding and professional direction)</li> <li>- Family counseling</li> <li>- Adjustment of houses, schools and public places for the persons with disabilities.</li> </ul>	<p>Christian Youth Assembly</p>

- The association enjoys the trust of the targeted group in the quality of the services provided in the program

**Persons with Disabilities Organizations**

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<b>Future intervention Potentials</b>	<b>Points of weakness</b>	<b>Points of Strength</b>	<b>Main characteristics of the Organization</b>	<b>Organization</b>
<ul style="list-style-type: none"> <li>- Access to a large group of women with disabilities</li> <li>- Participation in determining the needs of women with disabilities</li> <li>- Participating in approving and implementing the law</li> <li>- It guarantees the access of women with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>- It depends on the foreign funding</li> <li>- It has no branches in the governorates</li> </ul>	<ul style="list-style-type: none"> <li>- Supporting creation of jobs for women with disabilities</li> <li>- Working to integrate the disability issues in the local community</li> <li>- Achieving financial independence for women with disabilities, community awareness, issues of pressure and support</li> <li>- Empowerment of women with disabilities</li> <li>- It works at the national level</li> <li>- Contribution to decision making</li> <li>- Contribution to the amendment and implementation of the Palestinian law of the persons with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>- Representation, support, awareness and organizations</li> </ul>	<p>Hope Stars Society for Empowerment of Women with Disabilities</p>
<ul style="list-style-type: none"> <li>- Representing the women with disabilities in the national and international forums</li> <li>- It is responsible for defending the rights of the persons with disabilities</li> <li>- It monitors the application of the disabled law no. 4 in 1999</li> <li>- It monitors the violations against the persons with disabilities where the disability may be resulting from these violations</li> <li>- Conducting the studies concerning the reality of the persons with disabilities</li> </ul>	<ul style="list-style-type: none"> <li>- The Union is an association belonging to the PLO</li> <li>- Participation of the persons with disabilities in the Arab and International forums</li> <li>- The bylaw of the union governs its work and its relationships with the board of its branches</li> <li>- There are periodical elections for the board of directors and the boards of its branches</li> <li>- Its branches spread across the country</li> <li>- The number of its members exceeded 40 thousands members</li> <li>- The union has an internal monitoring board to monitor the</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of financial resources</li> <li>- The Union depends on volunteers from the board of directors and its branches</li> <li>- The database depends on archiving</li> </ul>	<ul style="list-style-type: none"> <li>- The Union has strategic pillars in its work and on which it relies in its activities and movement which are distributed to various pivots in working in advocating the rise of a persons with disabilities</li> <li>- Establishment of a legal unit</li> <li>- Development of the electronic database</li> <li>- Amendment of the disabled rights law</li> </ul>	<p>The General Palestinian Union for Persons with Disabilities</p>



work of the various works of the union  
 - Just representation of the disabilities  
 - Representation of women

**Human Rights Organizations**

<b>Future intervention Potentials</b>	<b>Points of weakness</b>	<b>Points of Strength</b>	<b>Main characteristics of the Organization</b>	<b>Organization</b>
<ul style="list-style-type: none"> <li>- The presence of a strategic plan for the commission concentrating on the issue of the persons with disabilities giving them more interest</li> <li>- Launching the national investigation regarding the rights of the persons with disabilities in descent works which may shed light on this right and accordingly promote the conditions of this group.</li> <li>- Allocating of enough resources for the commission to start implementing the plan</li> <li>- The spread of the commission (offices and field researchers in the West Bank and the Gaza Strip)</li> </ul>	<ul style="list-style-type: none"> <li>- The lack of a law organizing the work of a commission</li> <li>- The absence of specialization in the work</li> <li>- The lack of qualification for the commission's crew regarding dealing with the persons with disabilities (involvement in civil and political rights at the expense of the economic, cultural and social rights)</li> </ul>	<ul style="list-style-type: none"> <li>- The main points of strengths enjoyed by the commission include the big respect it enjoys because of its legal capacity ( the degree of establishing the commission, the text of article 31 of the Palestinian basic law), the commission is a member of several international and regional forums in addition to its competence and wide role in the field of protecting and promoting human right.</li> <li>- The commission has coalitions and alliances at the local level</li> <li>- It is an observer member in the Supreme Council for Disability issued by a presidential decree</li> <li>- It is characterized by independence, impartiality, experience, effectiveness and professionally.</li> <li>- It has experienced and educated crews in the fields of human rights</li> <li>- The commission spreads in the West Bank and the Gaza Strip</li> <li>- The commission enjoys the confidence of the citizens especially the persons with disabilities which makes them resort to the commission to ask for help and legal advice</li> <li>- The commission is working now to launch a campaign to achieve national recognition of a persons with disability</li> </ul>	<ul style="list-style-type: none"> <li>- Revision of the laws, legislations, regulations and national polices</li> <li>- Providing consultancies to the government regarding the respects and abiding by the international and regional charters and national legislations</li> <li>- It works to protect the human rights (through intervention and mediation ) as well as monitoring and documentation at the national level</li> <li>- It receives complaints, enhances and circulates the human rights culture through awareness, pressure and support</li> </ul>	<p align="center">Independent Commission</p>

**International Organizations**

<b>Future intervention Potentials</b>	<b>Points of weakness</b>	<b>Points of Strength</b>	<b>Main characteristics of the</b>	<b>Organization</b>
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			<b>Organization</b>	
<ul style="list-style-type: none"> <li>- Mainstreaming disability policy in all UNRWA programs.</li> <li>- Coordination with MOSA &amp; NGO's</li> <li>- The new project on advocacy</li> <li>- Different types of services and programs</li> </ul>	<ul style="list-style-type: none"> <li>- Weakness of the base of beneficiaries</li> <li>- Weakness of the effect measurement</li> <li>- Lack of the working crews</li> <li>- Continuous and urgent needs</li> </ul>	<ul style="list-style-type: none"> <li>- International agreement</li> <li>- Strategic plan</li> <li>- High experience of the crew</li> <li>- There are partners in the camps/local committees</li> <li>- Easiness and clarity of access to the resources</li> <li>- Presence of disability specialized program.</li> <li>- Diversity of resources including health, education, training, loans and operation</li> </ul>	<ul style="list-style-type: none"> <li>- Development of infrastructure and adjustments capacities, training, technical assistance, support, medical health educational and operational assistance</li> <li>- Direct Services</li> <li>- Funding services</li> <li>- Technical services</li> <li>- Infrastructure and adjustment</li> <li>- Training</li> </ul>	UNRWA
<ul style="list-style-type: none"> <li>- Commitment to work to encourage the parties which support the disability sector in a way which accords with the rights' owner</li> <li>- Commitment to raise enough funds to support the development of the development sector in accordance with the approach based on the rights of the persons with disabilities</li> <li>- Commitment to support and develop the policies of development, legislations and national programs aiming at consolidating the rights of the persons with disabilities and preserving the changes in their life</li> </ul>	<ul style="list-style-type: none"> <li>- Increasing demands by the donors which affect our efficiency</li> <li>- English language limits direct communication with our grassroots partners(the last layer of the pyramid which gathers the community groups)</li> <li>- The restrictions imposed by the political situation/occupation</li> <li>- Division between the West Bank and the Gaza Strip</li> </ul>	<ul style="list-style-type: none"> <li>- Available and work in the field for a long time</li> <li>- They have experience in the community rehabilitation program</li> <li>- Efficiency and experience in the field of human rights, development and democratic approach in rehabilitation</li> <li>- Broad network and basic elements, local, regional and international donors</li> <li>- Respect of the priorities of the partners and the efforts they make in the field of development. Impartiality and proficiency are considered of the most important characteristics leading their practical mission</li> </ul>	<ul style="list-style-type: none"> <li>- Two non-governmental international organizations having great international and regional experience</li> <li>- Diakona is a development organization which has experience in the projects related to human rights and democracy. But NAD is an organization representing the persons with disabilities (right owners). It has great experience in the rehabilitation programs. Diakona and NAD believe in long term partnership and the need to provide financial and technical support at the local and national levels. They consider that support and capacity building are of the most important strategies and that participation and the role of the right owners of leading the project is the most important basis of the implementation process</li> </ul>	Diakona/NAD

## **Annex (4) Exercises to identify the identity and the mission**

### **Identification of the organization identity**

#### **1- Why do we live?**

- participation
- in development.
- Achievement of justice, equality and participation.
- Providing services to the persons with disabilities.
- Empowerment of persons with disabilities.
- Respect of the human variation.
- Making a change.
- Empowerment of the families of the persons with disabilities.
- Decent living and full citizenship.
- Lobbying and networking.
- Integration of the persons with disabilities in all the community sectors.
- An effective force aspires to building and construction.
- Improving the quality of living of the persons with disabilities.
- Achievement of justice.
- Provision of means to the persons of disabilities.
- Employing information technology to serve the persons with disabilities.
- Eradication of poverty and fighting corruption.
- Eradication of illiteracy.
- Making a change in the social awareness.

#### **2- With whom and for whom are work?**

- We work with the governmental organizations and private sector for the persons with disabilities.
- We work with one another for the society.
- We work with all the components of the Palestinian society for the persons with disabilities.
- We work with the persons with disabilities for a humanitarian country for all.
- We work for participation in decision making with the civil and governmental sectors.
- We work with every person or organization seeking to make a change in the sector of persons with disabilities.
- We work with the persons with disabilities for their sake.
- We work in participation with the community organizations for the sake of a marginalized segment in the Palestinian society and to achieve a better life.
- We work with the persons with disabilities and their families to improve the life of these persons.
- We work with everybody to achieve justice and equality.
- We work together for the sake of the whole people and all the spectrums of the society.
- We work with ourselves and to achieve our interests.
- We work to build the administrative and technical capacities of the persons with disabilities.

### **3- What distinguishes us from others?**

- Belief in the capacities of the persons with disabilities.
- We endeavor to make a change in the Palestinian society.
- The persons with disabilities have a humanitarian cause (in light of human rights).
- The diversity is slow in progress and there is a disclosure for the group which we are dealing with.
- Engaging the groups exposed to disclosure in the planning, implementation and follow-up .
- Isolation.
- Patience.
- Joint collective work.
- Diversity and work for the sake of a joint objective.
- We work with a sector suffering from exclusion and marginalization.
- Belief in rights and diversity in accordance with participation.

#### **Identity:**

##### **Vision or the Dream**

- A sector which is in cohesion with joint visions and effective in a system related to the rights of the persons with disabilities and seeking to improve their life conditions.
- Feeling and living like any person without disabilities.
- An inclusive society which does not exclude any body.
- A sector working in accordance with integrating strategies to achieve complete equality for all persons with disabilities.
- Cooperation of the organizations working with the persons with disabilities with the governmental organizations.
- Equal opportunities and participation in decision making.
- A society which gives the persons with disabilities equal opportunities and equality in rights and duties.
- Unified, effective, coordinated, organized and partner sector at all levels.
- Representatives of the persons with disabilities in the legislative council.
- Social justice and change.
- The Palestinian society is dominated by equality and participation of all people.
- An integrating society without discrimination.
- Application of the strategic plan by clear strategies and clear budgets without foreign interventions.
- Integration of policies to include all programs.
- Being fair and just to the full rights of the persons with disabilities and effective participation in decision making.
- Change to promote the conditions of the persons with disabilities.
- Change the attitudes of the society towards the persons with disabilities and access to full citizenship.

- Persons with disabilities are educated.
- The will of change to the best.
- The disability sector should be integrated in the society and not marginalized.
- A unified sector which is able to help the persons with disabilities achieve their goals.
- An effective sector in developing and applying policies to serve the persons with disabilities.
- Consistent sector based on understanding the principles, objectives and joint visions to achieve the objectives of the persons with disabilities.
- The movement of the persons with disabilities from the margin to the centre.
- Replacing the word disabled with the word "citizen".
- An accepting environment designed to accommodate all individual differences.
- Dealing with responsibility towards the persons with disabilities.

## **Annex No. (5) List of References in English and Arabic**

### **List of references and sources in Arabic:**

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