Breaking Away from 'Special': Critical examination of the mainstreaming of disability in development cooperation by state development agencies

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Abstract

This study analyses how disability mainstreaming by state development agencies can be improved in development cooperation. While disability should be regarded as a cross-cutting issue that is interrelated to other development issues, it has been seen as a 'special' issue due to the assumption that disability is a medical and rehabilitation problem. Utilising concepts such as the 'majority world', 'development cooperation' and 'disability' in line with the social model, the study explores development cooperation on disability issues by selected state development agencies, namely USAID, DFID and JICA, in the context of the majority world.

Findings of this study illustrate how disability issues have been marginalised in development cooperation, close relation to other development issues especially poverty.

This study seeks to answer the research question, 'How and in what way do state development agencies address disability issues in a majority-world context?', by analysing and discussing how state development agencies conceptualise disability and development using models of disability and approaches of development

cooperation, and how state development agencies address the mainstreaming of disability via disability-specific projects, the twin-track approach, and mainstreaming disability in development cooperation.

In terms of the discussion in this study as a whole, some 'hints and tips' can be extracted by which to improve the mainstreaming of disability. First, institutional support by state development agencies can be strengthened so that their staff can enhance their understanding of disability mainstreaming to demonstrate their knowledge in practice.

Second, disability could be re-conceptualised as a cross-cutting issue, to make its relation to other issues clear. For this, the Capability Approach would be helpful to understand disability and other development issues within one framework; it would make it possible to analyse those issues through functionings and capability, where clearer understanding of the deprived situations of people in the majority world can be analysed, regardless of the issues in question.

Third, it is often difficult to maintain a broad or non-biased vision when an agency adopts a certain model or approaches to disability and development cooperation. Depending exclusively on one model of disability could narrow the scale of the programme. Moreover, relying solely on the MDGs as a development cooperation approach could lead to ignoring important issues like disability, which is not included clearly in the MDGs (Albert et al. 2005). DFID's constraints with PRSP could be also noted in this context. Forth, a budget line not only for disability-specific projects, but also for disability mainstreaming, could be allocated. Fifth, state development agencies' partnerships with DPOs and other NGOs is increasing, but could be expanded further to reflect disabled people's perspectives for more inclusive development. Advisory committees including DPOs for state development agencies are expected to facilitate further partnerships and contribute disability mainstreaming. Finally, but most importantly, disability remains a 'special' issue, which hinders the mainstreaming of it. Individual staff of state development agencies, like the author, should realise that if the failure to eliminate this embedded attitude as a social barrier in such organisations

continues, disability mainstreaming in the majority world will not be

possible.

Abbreviations and Acronyms

ADA   Americans with Disabilities Act

APCD   Asia-Pacific Development Center on Disability

BRICS   Brazil, Russia, China, India and South Africa

CRPD   United Nations Convention on the Rights of Persons with Disabilities

DET   Disability Equality Training

DFID   Department for International Development (UK)

DPO   Disabled People's Organisation

ECOSOC   Economic and Social Council (United Nations)

EDF   European Disability Forum

ICIDH   International Classification of Impairments Disabilities and Handicaps

ICF   International Classification of Functioning Disability and Health

ILO   International Labour Organisation

JBIC   Japan Bank for International Cooperation

JICA   Japan International Cooperation Agency

MDGs   Millennium Development Goals

NGO   Non-Governmental Organisation

NORAD   Norwegian Agency for Development Cooperation

ODA   Official Development Assistance

OECD   Organisation for Economic Co-operation and

              Development

PRSP   Poverty Reduction Strategy Paper

SAP   Structural Adjustment Programme

UN   United Nations

UNDP   United Nations Development Programme

UPIAS   Union of the Physically Impaired Against Segregation

USAID   United States Agency for International Development

WHO   World Health Organization

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1. Introduction

This dissertation will review the present situation and challenges in terms of mainstreaming disability in development cooperation, especially by state development agencies, and study how it can be promoted more effectively.

1-1. Background

The world does not seem to be proportionate; inequalities can be observed among countries and people. While people in rich and developed countries, or the 'minority world', enjoy their wealth and well-being, people in poor developing countries, or the 'majority world', face various difficulties such as poverty. On the other hand, the world is now more economically and politically interdependent than ever. This 'growing interdependence', which involves every state and all people, can be seen in examples such as 'the oil price shocks of the 1970s […] economic imbalances and financial crises, global warming, and international terrorism' (Todaro and Smith 2011 p.27).

Donors, such as the United Nations (UN), 'minority world' countries, state development agencies and non-governmental organisations (NGOs) have been continuing their 'development cooperation' to remedy such inequalities, especially by tackling poverty using the Millennium Development Goals (MDGs) and the Poverty Reduction Strategy Paper (PRSP), among others. Improvement in terms of these challenges can certainly be observed; however, there is a potential problem with development cooperation, in that it does not seem to be inclusive enough for marginalised groups such as disabled people (Albert et al. 2005, 2006). For example, it is argued that disability issues and disabled people have not been mainstreamed in development cooperation, despite the fact that disabled people, including children, account for 15% of the world's population – equivalent to one billion (WHO and World Bank 2011). Of these, 80% live in the majority world, and 20% of these people are estimated to be impoverished (World Bank 2011). Disabled people and disability issues have been excluded from mainstream development programmes, and have been treated exclusively by 'disability-specific projects' which 'target […] persons with disabilities and their specific needs' (Lord et al. 2010 p.31), since they are seen

as 'special' with a need to be treated by specialists (Jones 1999; Hurst 1999; Miller and Albert 2006), especially medical specialists since there is an assumption that disability is a medical and rehabilitation problem.

The emergence of the social model of disability, as well as policy implications by the UN and some development agencies, have highlighted that disability is not a special issue, but an issue relating to social oppression created by society. Yet, disability has not been sufficiently mainstreamed. Through working as an officer at the Japan International Cooperation Agency (JICA), which is the state development agency of Japan and a provider of official development assistance (ODA), the author has been engaged in various development projects in a range of fields throughout the world. These projects tackle development issues such as poverty, and some have succeeded in encouraging 'marginalised groups' such as women, children, ethnic minorities and disabled people (Jones 1999) in the majority world. However, within projects where marginalised groups are not directly targeted, they are often not inclusive to such marginalised members of society. For example, construction of a preschool education facility in Senegal by the

Government of Japan was initially planned without considering accessibility for disabled children. The plan was challenged by members of a local disabled people's organisation (DPO), who stated that such a school would not be able to accept disabled children, and would thereby perpetuate the exclusion of disabled people. Eventually, the construction plan was revised to be more barrier-free before the construction was completed. Furthermore, a disabled teacher was employed. The Government of Senegal selected this successfully accessible preschool as a model for preschool facilities in Senegal, calling it the 'JICA model' (JICA 2009a). Nonetheless, this eventually successful case highlights a problem which must be addressed; the initial plan had been approved by stakeholders such as the government of Senegal and Japan, and JICA, without considering the voices of the local community, especially marginalised groups (JICA 2009a). This kind of case can also be observed elsewhere. Why does such a situation remain? Answering this question and improving the mainstreaming of disability in development cooperation is the purpose of this dissertation.

1-2. Aims and Objectives

The overall aim of the research is to evaluate the process and present situation of mainstreaming disability in development cooperation, especially by state development agencies, and explore how it can be promoted more effectively.

The first objective is to analyse and discuss policies, methods and approaches of state development agencies to development and disability. The second is to review the theoretical aspect of issues related to development and disability, and to describe the process of development and disability mainstreaming. The third is to identify how state development agencies conceptualise disability and development. The forth is to analyse how state development agencies address mainstreaming disability.

This dissertation will also contribute to analysing why disability has yet to be sufficiently mainstreamed.

1-3. Research Questions

This research will address a fundamental research question with two secondary questions:

Main question: How and in what way do state development agencies address disability issues in a majority-world context?

Secondary research question 1: How do state development agencies conceptualise development and disability?

    1-1.   In terms of models of disability

    1-2.   In terms of approaches to development cooperation

Secondary research question 2: How do state development agencies address mainstreaming disability?

    2-1. By disability-specific projects

    2-2. By the twin-track approach

    2-3. By mainstreaming disability in development cooperation

1-4. Terminology Employed

Some terms employed in this dissertation cannot be considered 'mainstream'. However, there are persuasive reasons to use them, as described below. Exceptionally, to respect the original content of resources, direct quotations may contain the terms, such as 'developing countries', which should be replaced in this dissertation.

'Majority World' and 'Minority World':

The term 'development' could be considered controversial; 'developing countries' or 'underdeveloped countries' imply 'a ladder of development' where the rich Western countries sit on the top and the poor countries are situated at the lower rung (Stone 1999 p.4). As this perspective would perpetuate the current global hierarchy, the terms 'majority world' and 'minority world' seem to be preferable. The 'majority world' could be seen as the so-called 'developing countries, the South, the Third World' and/or as 'the world that the vast majority of the world's people live in, yet they have access to a fraction of the world's wealth and power' (ibid.). On the other hand, the 'minority world' can be regarded as 'the West, the North, industrialised countries' and/or as 'the richest countries of the world with a minority of the world's people exploit[ing] the lion's share of global resources' (ibid.).

It is important to note that the term 'majority world' does not intend to separate states geographically; rather, it 'gets away from geographical notions about wealth and power' (ibid.). While minority world with enormous wealth within poor countries can be found (Stone 1999), *majority world in the context of poverty* exists in rich

countries, for example 'homeless disabled people' in the UK

(Sheldon 2010 p.6). Disabled people can be poor even in the rich

minority world, may experience limited access to services, and 'are

almost completely ignored by academics, policy makers and the

disabled people's movement' (ibid.). Thus, apart from implying a

geographical classification, it is important to note that the term

'majority world' implies 'inequitable distribution of resources'

(Sheldon 2010 p.9). Having said this, however, this dissertation will

mainly discuss the majority world in poor countries, since the aim of

this study is to raise awareness about development cooperation with

respect to mainstreaming disability and disabled people in such

countries.

'Development Cooperation':

Development can be defined as 'the process of improving the quality

of all human lives and capabilities by raising people's levels of living,

self-esteem, and freedom' (Todaro and Smith 2011 p.5). The

Organisation for Economic Co-operation and Development (OECD),

to which donor countries belong, calls the assistance officially

provided by state governments 'Official Development Assistance'
(ODA). This is defined as:

> Flows of official financing administered with the
> promotion of the economic development and
> welfare of developing countries as the main
> objective, and which are concessional in
> character with a grant element of at least 25
> percent (using a fixed 10 percent rate of discount).
> (OECD 2003 n.p.)

As seen above, development is often used with the term 'assistance'
or 'aid', which implies that development is a donation for the poor or
the less developed. For example, Harry S. Truman, the 33rd
president of the US, stated in his inaugural address that:

> We must embark on a bold new program for
> making the benefits of *our scientific advances and*
> *industrial progress available for the improvement*
> *and growth of underdeveloped areas* (Truman
> 1949 n.p., emphasis added).

This is an explicit statement that development assistance should be delivered from the advanced countries to the less developed. This perspective is quite common; in OECD, assistance to other countries for the purpose of development is often called 'aid' (Glennie 2011 n.p).

However, the term 'aid' sounds fairly old-fashioned, and seems to have been replaced by 'development cooperation' in OECD documents because emerging donor countries prefer collaborative relationships which 'emphasise not charity or rich donor-poor recipient relationships, but working together for a common good' (ibid.). For example, the 'BRICS' countries, namely Brazil, Russia, India, China and South Africa, are rapidly growing their economies and have started providing ODA to other majority-world countries, while still receiving ODA from minority-world countries (except Russia) (OECD 2011). BRICS are not among the richest countries, but they collaborate with the majority world for development cooperation in line with the above concept. Thus, to reflect current trends, the term 'development cooperation' and its concepts will be employed throughout this dissertation. Furthermore, when it is necessary to emphasise such development cooperation as officially

conducted by state governments, the term 'ODA' will be used. However, this is not to deny the above employed concepts of development cooperation.

'Disability':

'Disability' could be perceived as a 'complex, dynamic, multidimensional, and contested' issue (WHO and World Bank 2011 p.3). Defining disability is difficult (Riddell 2010), since disabled people are regarded as a *heterogeneous* group (Miller and albert 2006; Guernsey et al. 2007; Grech 2009; Palmer 2011). Although often mistaken as a homogeneous group in many studies (Palmer 2011), disabled people are not all of the same nature since their impairments and functional capacities can be perceived in different ways in various social, ethnic and religious contexts (Guernsey et al. 2007; Grech 2009; Palmer 2011).

In order to understand and explain what disability is, various models of disability have been suggested; for instance, the individual model, the social model and the biopsychosocial model.

The individual model regards disability as 'attributed to individual pathology' (Barnes and Mercer 2003 p.12), while the social model illustrates disability as 'the outcome of social barriers and power relations, rather than inescapable biological destiny' (ibid.). The biopsychosocial model of disability attempts to incorporate rights aspects of both the individual and social model of disability through the International Classification of Functioning, Disability and Health (ICF) posited by WHO (WHO 2002; Oliver and Sapey 2006). ICF aims to understand disability with a new approach to classification 'through the three domains of body functions and structures, activities and participation and environmental factors' (Hurst 2005 p.70; WHO 2011 n.p.) where disability is regarded as socially created (WHO 2011).

Throughout this dissertation, the social model of disability will be employed as an epistemological baseline, in order to frame the analysis on social barriers, which may disturb disability mainstreaming in development cooperation. The model also underpins extracting disability from the 'special needs ghetto', and pushing 'for the mainstreaming of disability concerns in all development policies and practices' (Hurst and Albert 2006 p.26).

It should be noted that some state development agencies also employ the social model, as will be explained later in this dissertation. However, difficulties in applying the model in the majority-world context are also highlighted (Grech 2009), and this will be examined in Chapter Two.

1-5. Structure of the Dissertation

This dissertation is divided into six chapters. Following this introductory chapter, Chapter Two will review the theoretical aspect of issues related to development and disability, to analyse the current situation of development and disability in a majority-world context. Chapter Three will describe the process of development and disability mainstreaming, focusing on the practical aspect of issues related to development and disability. Chapter Four will explain the methodology employed in this dissertation; namely, the qualitative research and framework approach. Chapter Five will seek the answer of the research question, 'How and in what way do state development agencies address disability issues in a majority-world context?', by analysing and discussing policies, methods and

approaches of state development agencies to both development and

disability. The approaches of the United States Agency for

International Development (USAID), the UK Department for

International Development (DFID), and JICA are compared through

two analyses. The first will explore how state development agencies

conceptualise disability and development by using models of

disability and approaches of development cooperation. The second

will analyse how state development agencies address the

mainstreaming of disability via disability-specific projects, the twin-

track approach, and mainstreaming disability in development

cooperation. It will also examine the effectiveness and limitations of

these. Finally, Chapter Six will summarise the discussion and

provide some recommendations.

2. Development and disability

This chapter will explain the theoretical aspects of issues related to development and disability. First, it will illustrate the close relationship between poverty and disability. Second, the paradigm shift in development cooperation will be elaborated, with reference to several approaches.

2-1. Poverty and Disability

It is reasonable to start by explaining 'poverty' as a concept, since this issue covers broad topics such as development, the majority world, disability, etc.

2-1-1. Poverty

Poverty can be regarded as one of the most important issues to be remedied in the development agenda, since more than half the world's population is living in poverty (UNDP 2011a). The United Nations (UN) (2001) defines poverty as:

A human condition characterized by the sustained or chronic deprivation of the resources, capabilities, choices, security and power necessary for the enjoyment of an adequate standard of living and other civil, cultural, economic, political and social rights' (n.p).

Therefore, poverty can be regarded as a state of deprivation. It involves not only lack of income and productive resources to maintain lives, but also a wide range of issues such as hunger, malnutrition, limited education opportunities, and segregation and social exclusion associated with the lack of opportunity to participate in decision-making (UN n.d.). However, it should be noted that poverty conditions in some majority-world countries are more severer than the above definition indicates. Some people are forced to live in 'absolute poverty', without 'basic human needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information', where access to social services is also significantly limited (UN 1995 n.p.).

Efforts have been made by various organisations to eradicate poverty. For example, the UN outlined the MDGs in 2000 to reduce extreme poverty, hunger, disease, etc. by 2015 (UN 2012). *The Millennium Development Goals Report 2012* illustrates some positive forecasts, including halving the proportion of people in absolute poverty by 2015, in line with the corresponding goal (ibid.). However, the UN admits that it is facing difficulty with respect to meeting expectations to reduce hunger, decrease the population in slums (which is in fact growing), and decrease gender disparity in education, none of which have been dramatically improved (ibid.). All of these factors also hinder further poverty reduction.

Poverty cannot be overlooked when discussing disability and disabled people in majority world. People with impairments are often poor because they are excluded 'from the productive process, from education, access to appropriate support, the mainstream life of the community, etc.' (Finkelstein 1980; Hurst 1999; Sheldon 2010 p.5). Additionally, the extra costs of living with impairment constrain disabled people (Sheldon 2010; WHO 2011), and a link between poverty, impairment and disability could be recognised as a 'vicious circle', as Yeo (2001) describes:

Chronic poverty often leads to higher risk of impairment.

The impairment can then lead to more marginalisation

and exclusion, resulting in disability, more exclusion, loss

of income and further poverty. Many elements of this

cycle are inevitably inter-linked (p.16).

This suggests that poverty is interrelated with other development

issues such as disability, and should be tackled using broader

strategies.

2-1-2. Conceptualising Disability in a Majority-World Context

Since the late 1960s, disability movements by disabled people have

been widespread as political activities to tackle social exclusion and

oppression which disabled people face (Barnes and Mercer 2003).

Along with the emergence of disability studies in the late 1960s,

disability issues have been discussed in terms of politics, economy

and the cultural deprivation faced by disabled people (Barnes and

Sheldon 2010). Such efforts have resulted in some remarkable

paradigm shifts, for example from the individual model to the social

model of disability (Oliver and Sapey 2006).

On the other hand, although Western theories and tools of disability could be also expected to improve the quality of life for disabled people throughout the world, such theories and tools often seem to understand disability within the Western context, and less attention has been paid to the majority world (Stone 1999; Priestley 2001; Barnes and Sheldon 2010). Consequently, Western perspectives do not appear to have contributed sufficiently to addressing the problems, such as poverty, faced by disabled people in the majority world (Priestley 2001). This is because Western perspectives on disability basically serve to challenge disabling barriers within the rich and technologically advanced West, while there is less attention to both barriers to disabled people *and* barriers to limit access to essential resources for leading life in the majority world (Coleridge 1993).

For example, difficulties can be noted with respect to exporting the social model of disability from the minority world to the majority world (Grech 2009), because it tends to ignore the issue of impairment, identity and other social divisions such as race and gender (Oliver 2004) which significantly exist in the majority world. Moreover, ignorance of cultural differences in this model is also

recognised when applying the social model to the majority world

(Hurst and Albert 2006), since the model tends to focus solely on

disability as a social issue (Kuno and Seddon 2003), addressing

less about the relation between disability and other important factors

mentioned above. Furthermore, as the social model of disability

could be seen as conceptualistic, it might require further time to be

brought into practice; there is a possibility that it would be regarded

less practical for disabled people living in severe poverty, as Flood

(2005) describes, and an explanation of the social model might be

'irrelevant because it is not the quick fix solution many desperately

want' (p.191). However, refutations against such criticisms

emphasise that the social model rather aims to remedy common

negative issues such as the discrimination, exclusion and

medicalisation of disabled people throughout the world, by shifting

the perspective from disabled individuals to society (Flood 2005;

Hurst and Albert 2006). In this sense, the model might be applicable

universally, but the above-mentioned limitations should be

recognised.

In addition, conceptualising disability in the majority-world context

would require further understanding that disabled people in the

majority world face various issues – such as inadequate health care services, exclusion from education, gender inequality, etc. – as well as poverty. (Kuno and Seddon 2003; Kuno 2007). For example, disabled people, especially those who live in the majority world, are often described as 'marginalised' (Yeo 2001), as it is claimed that they are left without the means to meet basic needs (UN 2007; Grech 2009). According to the UN (2007):

> Persons with disabilities make up the world's largest and most disadvantaged minority. The numbers are damning: an estimated 20 per cent of the world's poorest persons are those with disabilities; 98 per cent of children with disabilities in developing countries do not attend school; an estimated 30 per cent of the world's street children live with disabilities; and the literacy rate for adults with disabilities is as low as 3 per cent – and, in some countries, down to 1 per cent for women with disabilities (p.1).

Furthermore, in India, 65 to 80% of its 60 million disabled people live in rural areas and urban slums, with very limited access to drinking

water, sanitation and electricity (Ghai 2001). Thus, it could be said disabled people in the majority world are forced to live in severe circumstances.

Throughout this section, significance has been placed on recognising that 'neither poverty nor disability are isolated phenomena' (Yeo and Moore 2003 p.577), and that there is a close relationship between disability and other development issues such as health and gender, etc. When addressing disability in the majority-world context, it is necessary to take into account such related issues to understand disability more accurately.

2-2. Paradigm Shift in Development Approaches

As described above, disability, poverty and other development issues entwine and influence each other. This section will illustrate how the approaches of development cooperation have shifted to address development issues in the majority world.

2-2-1. Development and the Majority World

Various organizations, including international organisations, state governments, NGOs and private companies, provide development cooperation to majority-world countries (JICA 2012). At country level, 'state development agencies' often work as providers of ODA to enable development cooperation with the majority world on behalf of their governments. State development agencies are basically one of the governmental agencies or departments such as USAID and DFID, while JICA is an 'independent administrative institution' which is not a governmental ministry but rather a Japanese ODA executing agency (JICA 2012 n.p.).

From a traditional economic perspective, the term 'development' means 'achieving sustained rates of growth of income per capita to enable a nation to expand its output at a rate faster than the growth rate of its population' (Todaro and Smith 2011 p.14).

In the 1950s and 1960s, development cooperation was mainly conducted for economic growth (Todaro and Smith 2011). Aiming for industrialisation for economic growth, social infrastructure development was conducted to build ports, roads, electric power

stations, water supply and sewerage systems, etc. (Yamaguchi 1999). However, even these efforts could not improve the lives of people in the majority world, since the majority-world countries did not have enough transport facilities or well-trained workers (Todaro and Smith 2011).

Due to the limited improvement of the situation in the majority world, the economic growth development approach had to be reviewed. In the 1970s, economic development had to be redefined so that poverty reduction could be promoted and 'inequality and unemployment within the context of a growing economy' could be solved (Todaro and Smith 2011 p.15). Furthermore, the International Labour Organisation (ILO) advocated meeting the basic human needs of poor people (Yamaguchi 1999).

However, since the 1980s, neoliberalism has expanded throughout the world. The definition of neoliberalism is elusive (Harvey 2005), however, Harvey (2005) regards neoliberalism as:

> A theory of political economic practices that proposes that human well-being can best be advanced by liberating individual entrepreneurial

freedoms and skills within an institutional framework characterized by strong private property rights, free markets and free trade (p.2).

Neoliberalism tends to aim to expand economic integration, and argues that the increased mobility of capital leads to 'the supplanting of national economies by a genuinely single global market' (Holden and Beresford 2002 pp.191-192). It is theoretically believed such economic activities would remedy poverty in the developing world by facilitating economic growth and redistributing the wealth generated by that growth (Oxfam 2004). To achieve such growth, 'globalisation' is considered to play a significant role. Globalisation could be referred to as 'the increasing integration of national economies into expanding international markets' (Todaro and Smith 2011 p.11). The positive aspect of globalisation is that it allows for the expansion of circumstances which allow further effective economic activities by developing science and technology which might greatly benefit the world as a whole. Thus, advocated by neoliberalism, globalisation has been widely expanded throughout the world, providing people with opportunities to pursue further profits in a free market with increased capital mobility (Holden and Beresford 2002). For

example, China and India, two of the biggest countries in the majority world, are considered to have achieved massive economic growth and contributed to poverty reduction by liberalising markets since the 1980s and 1990s, respectively (Sen 1999; Dollar and Kraay 2004).

In the context of development cooperation, the concept of neoliberalism has been reflected in the policy of the World Bank and IMF, wherein a Structure Adjustment Programme (SAP) was introduced in the 1980s as a borrowing conditionality for those majority countries in debt (Grech 2009).

On the other hand, poverty remains in China and India on a large scale; in particular, India accounts for over half of the combined population of deprived people in South Asia and sub-Saharan Africa (Sen 1999). With the drastic expansion of globalisation, the inequality between the minority world and the majority world has also increased (Wade and Wolf 2002). Furthermore, many majority-world countries experienced an increase in inequality regarding income and other forms during the 1980s and 1990s caused by neoliberal economic policies as a part of SAP (Crawford and Abdulai 2012). After criticisms of it emerged, SAP was replaced by PRSP,

where the initiatives of majority-world countries are respected to eradicate poverty (Todaro and Smith 2011). However, PRSP is also criticised, as it seems to maintain the neoliberal approach and has the characteristic of *de facto* conditionality, despite national governments considering it to lead the creative process of PRSP (Grech 2009).

Criticisms also emerge of globalisation for being a form of exploitation of the majority world due to the highly unbalanced economy (Wade and Wolf 2002; Oxfam 2004; Kiely 2007), creating a situation where winners become richer and losers remain poor (Oxfam 2004; Sachs 2005).

Considering the above arguments, neoliberalism and globalisation might expand the economy but also serve to enlarge inequality, which leads to an adverse result for poor people in the majority world.

Contrary to the neoliberal agenda, in the 1980s the United Nations Development Programme (UNDP) introduced the concept of human development, which aims to be a more holistic approach to understanding well-being (UNDP 2011b). The human development

approach is defined as 'a process of enlarging people's choices and enhancing human capabilities, the range of things people can be and do, and freedoms' and aims to create 'an environment in which people can develop their full potential and lead productive, creative lives in accordance with their needs and interests' (ibid. n.p.). In addition, this approach defines development as 'expanding the choices people have to lead lives that they value […] it is thus about much more than economic growth' and incorporates building 'human capabilities as the range of things that people can do or be in life' (ibid. n.p.).

Such concepts of human development stand on the 'Capability Approach', which incorporates human life to evaluate and understand people's well-being, quality of life, and poverty (Sen 1992, 1999a) from various perspectives such as health, education, life standards, and disability. Therefore, it could help to provide a clearer understand of the deprived situations of people in the majority world. It contrasts with the mainstream theory of gaining well-being and better quality of life via economic growth, and also presents a different perspective from utilitarianism, which tends to focus on individual happiness or pleasure to assess a person's

advantages (Sen 1992, 1999a, 2010; Nussbaum 2000; Burchardt 2004).

The important concepts of this approach are 'capability', which is 'the opportunities to lead a life one has reason to value' (Grech 2009 p.779) and 'functionings', which incorporates 'beings and doings' (Sen 1992 p.39), or what people are able to do and to be. Under the capability approach, disability could be regarded as a 'capability deprivation' like poverty (Burchardt 2004; Mitra 2006; Terzi 2010). In this regard, the Capability Approach can contribute to bridging the disciplines of different issues, such as poverty and disability (Grech 2009). As disability tends to be marginalised, linking it to other issues using the Capability Approach would be useful to explain the potential tie between poverty and disability.

The findings in Chapters Two indicate how theoretical aspects of issues related to development and disability have shifted. Poverty, as a state of deprivation, influences both disability and development, and in particular a close link between poverty and disability was

illustrated. Development approaches have been shifted from

economic-oriented to more human-oriented.

3. Process of Development Cooperation and Disability Mainstreaming

The concept of 'development' has been changing over time, and this has influenced how disability issues are allocated/perceived in the context of development (Kuno 2007).This chapter provides an explanation of how disability has begun to be recognised in the development approach, and mainstreamed after being marginalised for a long time. First, it reviews the efforts by the UN and state development agencies, and their policy implications. Second, it considers why disability has been seen as specialist issue. Third, the process of mainstreaming disability will be elaborated with some rationales. Forth, the process of gender mainstreaming in development cooperation, which has been a footstep for disability mainstreaming, will be illustrated. Fifth, the so-called 'twin-track' approach is explained to clarify its usefulness regarding mainstreaming disability and empowering disabled people in one approach.

3-1. Policy Implications in terms of Disability and Development

Traditionally, little attention has been paid to disability by UN organisations and state development agencies (Mitra 2006). Stone (1999) claims that only a few professionals are willing to work with disabled people, and they are also marginalised from the mainstream of development cooperation. Indeed, disability does not seem to be a '"sexy" subject' (ibid. p.9) in development cooperation.

Historically, disabled people have been excluded from modernisation and the economic growth process as they were thought not to be able to contribute to it; rather, they were treated by charity or care (Kuno 2007). Under the SAP in the context of neoliberalism, even such charity and care has been minimised as it might disturb the efficiency of development cooperation (ibid.). This illustrates that disabled people, who are often described as 'among the poorest of the poor' (Stone 2001 p.51), are also affected by this neoliberal agenda. However, the purpose of development has gradually shifted from economic growth to tackling poverty, human rights, democracy and quality of life issues via human development, for instance (Kuno 2007). This paradigm shift has contributed to

recognising disability as a cross-cutting issue on a par with gender (ibid.).

Influenced by disability movements in the late 1960s which aimed to tackle social exclusion and oppression (Barnes and Mercer 2003), UN organisations and development agencies have also started making efforts to address the needs of disabled people in the majority world using their cooperation programmes (Edmonds 2005). Most recent policy implication is the UN Convention of the Rights of the Persons with Disabilities (CRPD), which was adopted in 2006. It aims to 'promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity' (UN 2006 n.p).

State development agencies have also changed their policies on disability. During the 1990s, several state development agencies added disability issues to their development programmes for the majority world to address (Lord et al. 2010). Some of these have already issued disability policy papers or thematic guidelines to mainstream disability issues in development cooperation, such as USAID, DFID, JICA, etc. (Coleridge et al. 2010; Lord et al. 2010).

Thus, disability has been gradually recognised as a development issue. As it is far beyond the capacity of this dissertation to discuss the policies of all of the above agencies, the approaches of JICA, DFID and USAID will be selected, and these will be elaborated in Chapter Five.

3-2. Disability as a 'Special' Issue in Development Cooperation

As described above, circumstances surrounding disability issues seem to have been improved by the policy implications of UN organisations, state development agencies and NGOs in terms of mainstreaming disability. However, although they have already introduced such policies, practical implementations have largely yet to be seen (Jones 1999; Albert et al. 2006; Yeo 2006). The Economic and Social Council (ECOSOC 2008) also express concerns that:

> There is a risk of "mainstreaming fatigue" on the part of donors, particularly as the theory of mainstreaming is easily promoted; however, the

practicalities of how to operationalize it may be

perceived as more complicated (p.9).

This applies not only to UN organisations, but also to other state

development agencies that are trying to mainstream disability.

Albert et al. (2006) denounce the idea that institutional support has

not been strong enough to mainstream disability; practical guidance

to mainstream disability was lacking at DFID and guidance was very

complicated at the Norwegian Agency for Development Cooperation

(NORAD). Moreover, a misunderstanding, or at least a narrow

understanding, of the concept of mainstreaming is pointed out; for

example, an educational project could be regarded as disability-

mainstreaming if a disability aspect is included in it somewhere, and

this represents a very narrow understanding of mainstreaming of

disability (Albert et al. 2006). What are the problems behind this?

First, disabled people and disability issues are still excluded from

mainstream development programmes since they are seen as

'special', with a need to be treated by specialists (Jones 1999; Hurst

1999; Miller and Albert 2006), especially medical specialists due to

the assumption that disability is a problem of medicine and

rehabilitation (Miller and Albert 2006). Moreover, many disabled people have been treated as charity cases, as they are seen as less productive within industrial society (Finkelstein 1980; Coleridge 1993; Yeo 2006). These views are based on the attitude that disabled people cannot participate in 'mainstream life' (Hurst 1999 p.33). Simultaneously, these views illustrate the social barriers which *prevent* disabled people from participating in it (ibid.). The language used in development agencies does seem to have been changing in line with the social model of disability; however, their behaviour has not changed. This implies that the social model has not been understood by development agencies, and the individual model is still perpetuated (Cordeiro et al. 2006).

Second, development programmes are often required to pay attention to a variety of marginalised groups, such as women, children and ethnic minorities, as well as disabled people (Jones 1999); this makes disability issues inconspicuous unless they are made a higher priority (Albert et al. 2006). However, as described above, disability can be regarded as a cross-cutting issue which interrelates with other development issues. Leaving disability unaddressed would be problematic, if the intention of development

agencies is to tackle the full range of development issues. In particular, poverty reduction cannot be achieved if disabled people are not included, since the majority of disabled people are impoverished (Yeo 2001, 2006; Barnes and Sheldon 2010).

Third, staff of development agencies are not sufficiently aware of the significance of disability in the development agenda, or the need for it to be mainstreamed (Yeo 2003). For example, 'lack of information on disability for DFID staff and limited impact of the 2000 Issues Paper *Disability, Poverty and Development*' (Thomas 2004 p.9) implies that such information was not shared among staff. Gender mainstreaming, however, seems to have met with more success; at least, the staff of development agencies understand the necessity of this, even though it has not yet met expectations in terms of empowerment and inclusion of women (Miller and Albert 2006). However, as described above, the embedded assumption that disability is a specialist matter makes the mainstreaming of disability more difficult than that of gender (ibid.). Although such a view has been almost replaced at policy level, staff attitudes may require fundamental changes to be made (ibid.). Such a lack of awareness will be perpetuated unless proper training is delivered to ensure staff

understand disability more adequately; for example, disability equality training (DET) aims to change societal attitudes on the disabled to incorporate 'full participation and equality for disabled people' (Kuno 2009 n.p.).

All of the above facts interrelate, and prevent disability from being mainstreamed. Major international institutions are no exceptions in terms of the failure to include disabled people's perspectives. For example, the MDGs were outlined by the UN in 2000 to reduce extreme poverty, disease, and deprivation by 2015 (UN Enable 2009). However, despite the fact that poverty and disability are closely related, as addressed above, the MDGs do not clearly include disability issues (Albert 2005; Ingstad and Eide 2011). Possibly thanks to the influence of the UN Convention on the Rights of Persons with Disabilities in 2006 (Ingstad and Eide 2011), the UN has included a view on disability and poverty in the monitoring of the MDGs' implementation, and admits that the MDGs' policies and programmes do not sufficiently cover issues of disability and disabled people (UN Enable 2009; Ingstad and Eide 2011).

Therefore, it could be said that disability remains a special issue, and that mainstreaming disability in development cooperation is still to be achieved.

3-3. Mainstreaming Disability in Development Cooperation

Mainstreaming disability in development cooperation has been attempted by UN organisations, state governments, NGOs and international NGOs, motivated by the disability movement (Albert et al. 2006). The definition of mainstreaming disability in development cooperation has been reworked from the UN ECOSOC's definition of gender mainstreaming (ECOSOC 1997):

> Mainstreaming disability into development cooperation is the process of assessing the implications for disabled people of any planned action, including legislation, policies and programmes, in all areas and at all levels. It is a strategy for making disabled people's concerns and experiences an integral dimension of the design, implementation, monitoring and

evaluation of policies and programmes in all political, economic and societal spheres so that disabled people benefit equally and inequality is not perpetuated. The ultimate goal is to achieve disability equality (Albert et al. 2006 p.59).

This is one of the important concepts of the twin-track approach which will be introduced in the following section. In reference to this concept, Albert (2005) argues that 'disability needs to be mainstreamed, promoted explicitly and officially as a cross-cutting issue' (p.143). The reasons for this are as follows.

First, disability can be regarded as an (in)equality issue. As described above, disabled people are often regarded as marginalised, and disability relates to poverty and other correlated issues, such as education, health and gender, in which inequalities can be seen with respect to disabled people (Yeo 2006).

Second, mainstreaming disability in development cooperation will make the current development agenda more 'inclusive', where everyone, including disabled people, can be participants and beneficiaries of development cooperation (Heumann 2007; Stubbs

2007, cited in Barron and Amerena 2007 p.7). If disabled people are

not included in this process, it will be impossible to achieve

development goals such as the MDGs (Barron and Amerena 2007).

Thus, disability should be mainstreamed in development

cooperation as a cross-cutting issue, so that disabled people in the

majority world can be involved in mitigating inequalities in various

fields. Furthermore, development agencies are requested by

disabled people's organisations to improve development

cooperation, to be more inclusive by mainstreaming disability (Grech

2009).

3-4. The Twin-Track Approach

The twin-track approach was introduced to pursue women's equality

in development by DFID, and has been applied to disability as well

(DFID 2000). According to DFID (2000), this approach:

> Entails the inclusion of an active consideration of
> disability issues in the mainstream of
> development co-operation work, and looking for
> opportunities to support more focused activities,

including direct support to organisations of disabled people and to initiatives aimed specifically at enhancing the empowerment of people with disabilities (P.11).

Thus, this approach jointly employs two factors: one is to include disability in development cooperation as *mainstreaming disability*, and the other is to implement direct support to disabled people, for example via disability-specific projects to *empower disabled people*. 'Empowerment' in a broader sense can be defined as:

A multi-dimensional social process that helps people gain control over their own lives. It is a process that fosters power in people for use in their own lives, their communities and in their society, by acting on issues they define as important (Page and Czuba 1999 n.p.).

When applying this concept to disabled people, it is closely related to promoting their rights by empowering themselves. Based on the recognition that disabled people's rights can be enhanced the most by disabled people themselves (DFID 2000), DFID and other

development agencies emphasise the importance of empowering disabled people. In practice, the empowerment of disabled people can be seen in the development of DPOs, independent-living programmes, and disabled people's leadership training, etc. (Kuno and Seddon 2003).

This approach has been employed by other development agencies and utilised in terms of disability mainstreaming (Kuno and Seddon 2003). It can also be noted that mainstreaming and empowerment of disabled people have a mutually complementary relationship; however, it is more important within mainstreaming to include disability perspectives in every aspect of development, including education, health, gender equality, peace building and so on, since disabled people and their needs should not be regarded as special or purely medical; rather, it should be acknowledged that they face difficulties akin to those faced by non-disabled people (JICA 2009b).

Chapter three explored how disability has not been recognised as an important issue in development cooperation, and how disability should be mainstreamed. Indeed, disability issues should be

regarded as significant in development cooperation; if disability

issues are not addressed, the MDGs will not be achieved. The twin-

track approach would be helpful to improve current situation.

4. Methodology

This chapter will, first of all, describe the research methodology used in this dissertation. Second, it will outline the methods selected by the author therein. Third, the sampling strategy will be explained to show which targets were selected for analysis. Fourth, it will elaborate the method of analysis used to deal with the information gained. Fifth, the ethical implications will be given.

4-1. Research Methodology

For social research, it is necessary to understand the following:

> How we think the social world is constructed, or what we think it is (our ontology), shapes how we think we can know about it, but conversely how we look (epistemology and methods we use) shapes what we can see (Mason 2002 p.59).

To conduct a scrutiny on our ontology and epistemology, a methodology would be required which 'refers to a tradition of enquiry concerned primarily with meaning and interpretation' (Barnes 1992 p.115). In line with this idea and the aim of this study which requires

to analyse phenomena such as disability mainstreaming and development cooperation, the most suitable methodology for this research is qualitative research, which is defined as:

> An approach that allows you to examine people's experiences in detail, by using a specific set of research methods such as in-depth interviews, focus group discussions, observation, content analysis, visual methods and life histories or biographies (Hennink et al. 2011 pp.8-9).

Qualitative research is often compared with quantitative research which focuses more on statistics, however, differences between these two are elusive (Barnes 1992).

4-2. Choice of Methods

The research was elaborated based on the secondary research method with the analysis of documentary sources, which is considered 'a major method of social research' (Mason 2002 p.103). Sources analysed included books, journals, research publications/reports and information on the Internet. To collect

specific information relating to keywords such as 'disability and

development' and 'mainstreaming disability in development

cooperation', keyword searches were conducted on the University of

Leeds library website, Google/Yahoo and Google Scholar. Websites

of state development agencies, UN organisations and the World

Bank also provided informative sources to investigate disability and

the development and mainstreaming of disability. In addition, the

author's own experiences of working at JICA informed this

dissertation. Interviews with state development agencies were not

conducted, due to the limited time available.

4-3. Sampling Strategy

Although it would be desirable to compare challenges faced by all

state development agencies or government ministries which have

disability policies or guidelines, in doing so there is a possibility of

making the analysis overly vague due to the word limitation. Thus,

three agencies were selected for a comparison of their policies and

approaches, namely USAID, DFID and JICA. These were chosen

because their countries are regarded as top donors among rich

countries; according to the net ODA in 2010, the US spent 30,154

million USD, the UK spent 13,763 million USD, and Japan spent 11,045 million USD (OECD 2011). Individually, USAID has been promoting disability mainstreaming in development cooperation since adopting the USAID disability policy in 1997, which is relatively earlier than other state development agencies. In addition, the US is the top donor country. For DFID, the paper *Disability, Poverty and Development* in 2000 is known as advocating a twin-track approach to disability mainstreaming. However, DFID seems to have been struggling to mainstream disability in development cooperation, as Albert et al. (2005) suggest: 'there seemed little to learn about the process from an organisation [DFID] which does not mainstream disability' (p.29). In turn, this may provide an opportunity to see how DFID has made efforts towards mainstreaming since then. The author works at JICA, and thus analysing its efforts on disability mainstreaming by comparing it with the other two agencies is of personal interest.

4-4. Analysis

The analysis in this study was conducted by comparing the policies/guidelines, methods and approaches of state development

agencies towards disability and development using the framework

approach (Pope et al. 2000). This approach makes it possible to

analyse a social phenomenon by 'familiarization; identifying a

thematic framework; indexing; charting and mapping; and

interpretation' (ibid. p.116). Research questions were the primary

means of creating the framework.

4-5. Dissemination

The results of this research will be disseminated at least within JICA

to promote disability mainstreaming, and should be shared with

colleagues of other state development agencies. In either case, the

target will be 'ordinary staff', rather than in charge of disability or

who already have some knowledge of it. It will also be possible to

conduct briefings/lectures using the output of this dissertation.

4-6. Ethical Implications

As Mason (2002) claims, '[q]ualitative research should be conducted

as *a moral practice*' (p.9, emphasis in original). The British

Sociological Association (BSA) (2002) also highlights that social

researchers should 'have a responsibility both to safeguard the

proper interests of those involved or affected by their work, and to report their findings accurately and truthfully' (p.2). This has been borne in mind throughout the research, and the results are not intended to be in favour or any one organisation or person's interests. Additionally, no personal or confidential information was used in this research.

Chapter 4 described the methodology employed in this study. It explained about qualitative research and framework analysis as employed method. Various sources informed this study, and made analysis possible. Dissemination would be done for further information sharing with colleagues in JICA and elsewhere, and ethics is strictly respected.

5. Policies, Methods and Approaches of State Development Agencies in Disability and Development

This chapter will seek to answer the research question by analysing and discussing policies, methods and approaches of state development agencies in terms of both development and disability. First, to understand the selected agencies themselves, an outline of each will be given. Second, the secondary research questions will be discussed to understand how state development agencies conceptualise disability and development, respectively, and what approaches they employ to address mainstreaming disability – that is, disability-specific projects, the twin-track approach and mainstreaming disability development cooperation. Third, the main research question, 'How and in what way do state development agencies address disability issues in a majority-world context?' will be explored by analysing the answers to the secondary research questions.

5-1. Outline of Each Agency

Established in 1961, USAID is an independent federal government agency in the US that provides development cooperation to majority-world countries (USAID 2012a,). In line with US foreign policy, which promotes sustainable economic growth in the majority world, USAID work covers agriculture; democracy, human rights and good governance; economic growth and trade; education; environment; gender equality; health; water and sanitation (USAID 2012b n.p.).

DFID was established in 1997 as a UK Government department in charge of development cooperation with the majority world, by succeeding the role from the Overseas Development Administration of the Foreign and Commonwealth Office (DFID 2012a). DFID considers poverty elimination as its first priority. Thus, it commits to successful achievement of the MDGs (Thomas 2004), which contrasts with the UK's earlier efforts towards economic development (DFID 2012b).DFID tackles development issues such as 'education; health; economic growth and the private sector; governance and conflict; climate and environment; water and sanitation; food and nutrition; humanitarian disasters and emergencies' (ibid. n.p.).

In 1974, JICA was established as a state development agency of Japan to provide technical cooperation to majority-world countries (JICA 2012). In 2003, JICA's organisational status changed from a 'special public institution of the government' to an 'independent administrative institution', which enabled JICA to implement operations and management autonomously, with less supervision from the government (ibid.). After merging with the Economic Cooperation Operations of the Japan Bank for International Cooperation (JBIC) in 2008, in addition to technical cooperation, JICA's work began to cover yen loan programmes and part of a grant aid programme which donates facility construction, equipment, etc. (ibid.).

Standing on its vision for development cooperation – 'Inclusive and dynamic development' – JICA aims towards 'addressing the global agenda; Reducing poverty through equitable growth; Improving governance; Achieving human security' (ibid. n.p.). JICA tackles 'thematic issues' to improve situations in the majority world such as education; health; water resources; governance; social security; transportation; private sector development; agriculture; gender and development; poverty reduction; environmental management, etc.

(ibid. n.p.). Disability issues here fall into the category of 'social security'.

5-2. Policy Aspect: Conceptualisation of Disability and Development

In line with the secondary research question, 'How do state development agencies conceptualise development and disability?', this section will consider how state development agencies conceptualise disability and development by using 1) disability policy, as well as models of disability, *to conceptualise disability*, and 2) approaches of development cooperation *to conceptualise development*.

5-2-1. Disability Policy and Models of Disability

In the 1990s, critical reports to USAID by the US Government Accounting Office and the US National Council on Disability (NCD) stated that USAID did not attempt to include disability in development cooperation (Lord et al. 2010). Reflecting such criticisms and recommendations, the *USAID Disability Policy Paper*

was established in 1997 alongside the *USAID Disability Plan of Action* to:

> Avoid discrimination against people with disabilities in programs which USAID funds and to stimulate an engagement of host country counterparts [...in promoting a climate of nondiscrimination against and equal opportunity for people with disabilities (USAID 1997 p.2).

and to 'promote the inclusion of people with disabilities both within USAID programs and in host countries where USAID has programs' (ibid.).

Notably, the Americans with Disability Act (ADA), an anti-discrimination act for disabled people adopted in 1990, could be regarded as a backbone of USAID disability policy (Lord et al. 2010). This policy intends to 'extend the spirit of the ADA in areas beyond the jurisdiction of US law' to those who benefit from USAID programmes in the majority world (USAID 1997 p.2). This policy defines disability as 'physical or cognitive impairment that affects a major life function, consistent with the definition of the Rehabilitation

Act' (USAID 1997 p.2), which can be regarded as being based on a medical perspective (Albert 2005).

However, the 1997 policy paper is not compulsory (USAID 1997; Lord et al. 2010); it 'encourages, but does not require, all USAID Washington and field missions to develop disability action plans' (Coleridge et al. 2010 p.126). For example, the USAID reporting system encourages reports on inclusion of disability action plans, however under 25% of USAID field missions successfully create a plan, as of 2010 (Coleridge et al. 2010).

A twin-track approach is employed by USAID (USAID 2009b; Coleridge et al. 2010) for '[p]romoting full inclusion in programs and operations [and] building capacity of DPOs' (USAID 2009b n.p.), as presented at the UN Commission for Social Development in 2009. However, this concept does not clearly appear in USAID policy and other related documents.

In terms of models of disability, USAID documents do not clearly state what kind of model it employs. While its 1997 policy on disability defines disability from a medical perspective, the purpose of the policy seems to be mainstreaming disability 'more in the

traditional antidiscrimination mode which characterises the Americans with Disabilities Act and other civil rights legislation in the US' (Albert 2005 p.137).

Thus, USAID does not seem to work based on models of disability, nor articulate any relations to specific issues such as economic growth and poverty; rather, it aims to work in line with ADA at policy level. In this regard, going beyond its disregard for models of disability, USAID may conceptualise disability as a target which should be freed from discrimination and included in development cooperation.

In 2000, DFID launched an issues paper entitled *Disability, Poverty and Development,* which reflects the social model of disability and employs a twin-track approach (DFID 2000). In line with the social model, DFID regards disability as a phenomenon that 'results from […] attitudinal and physical barriers that lead to […] exclusion from society', and that is 'about discrimination and exclusion' which DFID seeks to eliminate (DFID 2007 p.3). Furthermore, DFID explicitly states that disability should not be left to specialists (ibid.), which is regarded as essential for mainstreaming disability.

However, this paper does not seem to sufficiently appeal to its own organisation, since few DFID staff knew about the document even though it was widely recognised at international level (Thomas 2004). Moreover, this document is not a policy (Thomas 2004; Albert et al. 2005), and therefore may have a less influential status. Consequently, there was little move to mainstream disability in the development process in DFID (Thomas 2004; Albert et al. 2006). This could be because disability issues do not appear in the MDGs, which DFID commits to achieve, and thus tends to be left behind (Thomas 2004; Albert et al. 2006). In 2005, a policy paper entitled *Reducing Poverty by Tackling Social Exclusion* was established (DFID 2005); however, it does not stress disability issues sufficiently, despite dealing with socially marginalised people.

DFID issued a practice paper in 2007 entitled *How to Note: Working on Disability in Country Programmes*, which articulates the importance of prioritising disability mainstreaming in development cooperation, where the link between poverty and disability is underlined. It also stresses that achieving the MDGs would be impossible without including disability issues (DFID 2007; Coleridge et al. 2010; Lord et al. 2010).

Regarding poverty, DFID recognises that disability can be 'both a cause and a consequence of poverty' (DFID 2007 p.1), which is the main target DFID's cooperation intends to eradicate. Thus, DFID seems to conceptualise disability as a social oppression in line with the social model of disability, and recognises its close relation to poverty.

Although JICA does not have a policy on disability, it issued its *Thematic Guidelines on Disability* in 2003, which seek to establish the full participation and equality of disabled people through empowerment and mainstreaming activities, wherein a twin-track approach is employed (JICA 2009b). After being revised in 2009, the guidelines now provide broader information including country profiles on disability, outlines of major concepts such as various models of disability, etc. (ibid.). Poverty is also regarded as an important issue by which to understand disability (ibid.).

The *Guidelines on Disability* regard the social model of disability as an important concept (ibid.), however, no models of disability are explicitly employed. However, in practice, the social model has influenced projects like the Asia-Pacific Development Center on Disability (APCD) Project, which aims to eliminate disabling barriers

in society (ibid.). When it comes to medical rehabilitation projects for disabled people, the individual model has rather an influential perspective (ibid.).

Disability is not defined in the *Guidelines on Disability*; however, derivative concepts such as 'assistance for persons with disabilities' is defined as 'empowerment and mainstreaming of persons with disabilities to achieve their "full participation and equality"' (ibid. p.5), and for '[m]ainstreaming of assistance for persons with disabilities in JICA projects' it is necessary that 'a disability viewpoint shall be included in every cooperation scheme, project cycle, and sector' (ibid.).

Thus, it could be said that JICA conceptualises disability as an issue which should be included or mainstreamed in development cooperation via the participation and empowerment of disabled people. While it is based on a twin-track approach, it does not explicitly stand on a specific model of disability.

5-2-2. Approaches of Development Cooperation

The overall aim of development cooperation for USAID is economic growth in the majority world (USAID 2012b). Moreover:

> Our assistance develops the markets of the future; […] USAID is developing partnerships with countries committed to enabling the private sector investment that is the basis of sustained economic growth to open new markets for American goods, promote trade overseas, and create jobs here at home (ibid. n.p.).

From this statement, it is explicit that USAID intends to expand markets in the majority world in line with the neoliberal concept, from which the US can demonstrate its economic power. Importantly, it could be noted from the discussion in previous chapters that there is a difficulty that much attention must be paid to disability issues under such an economy-oriented approach.

Thus, USAID conceptualises development cooperation as a tool to enhance economic growth not only of the majority world, but also of the US.

The 1997 white paper *Eliminating World Poverty: A Challenge for the 21st Century* articulates the UK government's commitment to reduce poverty; this was reaffirmed by the 2006 white paper *Eliminating World Poverty: Making Governance Work for the Poor.* The 2006 paper states that the government will enhance opportunities for poor people globally, and underlines the MDGs as the DFID's main task (Lord et al. 2010 p.27).

DFID thus intends to provide development cooperation to eliminate poverty, rather than focusing solely on economic development. Therefore, its commitment to the MDGs is necessary to achieve its aim. DFID can thus be seen to conceptualise development cooperation mainly as an approach to eradicate poverty. However, while DFID is aware of the link between disability and poverty, the MDGs do not clearly address disability. This could represent a problem for DFID, in terms of keeping their MDGs in line with their development policy *and* addressing disability issues at the same time. DFID faces additional problems with respect to focusing on disability: to achieve MDGs, DFID has committed to delivering its ODA through PRSPs with direct budgetary support; however, national governments may not always pay attention to disability,

even though DFID is willing to cooperate on this issue (Thomas 2004).

Although JICA emphasises the importance of economic policy improvement, it does not aim to expand the market via its development cooperation (JICA 2012). Rather, its vision of 'Inclusive and dynamic development' could be regarded as its development approach. For JICA, 'inclusive development' is:

> An approach to development that encourages all people to recognize the development issues they themselves face, participate in addressing them, and enjoy the fruits of such endeavors (ibid. n.p.).

JICA states that all people, including disabled people and other marginalised groups, should not only be beneficiaries but participants in the development cooperation process. Thus, it could be said that JICA conceptualises development cooperation as inclusive, where everyone can participate to make a better future.

5-3. Practical Aspect: Addressing mainstreaming disability

This section addresses the secondary research question 'How do state development agencies address mainstreaming disability?'. In order to do so, it will review the approaches employed – that is, disability-specific projects, the twin-track approach and mainstreaming disability in development cooperation – and examine their effectiveness and limitations. Case studies will support the discussion.

5-3-1. Disability-Specific Projects

According to *the Fifth Report on the Implementation of the USAID Disability Policy* (USAID 2008), the number of disability-specific projects is increasing. Physical rehabilitation projects have been implemented in Angola, Afghanistan, Lebanon, Pakistan, South Africa, Sri Lanka and elsewhere; projects for making roads and buildings accessible for disabled people are also recognised in Burkina Faso, Ecuador, Kosovo, etc. (ibid.).

USAID often supports DPOs to meet disabled people's needs; for instance, it works together with Handicap International in the

Philippines to produce customised wheelchairs (USAID 2008).
However, since USAID aims to include disabled people in its
programmes, its efforts are more visible in the following sections
about mainstreaming.

DFID's disability-specific projects support DPOs and government
counterparts to enhance disabled people's accessibility to services
and assets (Lord et al. 2010). In addition, DFID aims to influence the
legal and policy frameworks and discriminating attitude in the
majority world which prevent disabled people from participating in a
more accessible society (ibid.). An example of such an effort can be
seen in a research programme with the Southern African Federation
of the Disabled (SAFOD), to 'build capacity in SAFOD to support
[DPOs] to undertake research and use its findings to influence policy
and practice that is responsive to the needs of disabled peoples in
Southern Africa' (DFID 2012c n.p.).

One interesting issue within DFID as of 2004 is that some projects
on the prevention of disabling diseases such as polio, malaria,
tuberculosis and HIV/AIDS were not regarded as disability-specific
projects; it also excludes projects on mine action unless it contains
rehabilitation (Thomas 2004). In line with the social model of

disability, such projects are categorised as 'not so much disability focused but impairment focused, i.e. their aim is the prevention of impairments' (ibid. p.18). The above projects could have been included as disability-related projects, which would have helped to make disability issues more visible. The above implies that a strict categorisation using one model to understand disability could in fact cause adverse effects on mainstreaming disability.

Since the 1980s, JICA has provided various types of development cooperation for empowering disabled people by implementing disability-specific projects, training, and dispatching volunteers throughout the world (JICA 2009b). Notably, medical assistance projects are mainly disability specific-projects, which have included physical rehabilitation, for instance in Chile, China, Bosnia and Herzegovina, etc. (ibid.). In addition, national rehabilitation centres were constructed in Uzbekistan and Peru by Japan's ODA (ibid.). As far as the author is aware, physical rehabilitation projects were managed by the Medical Cooperation Division in JICA for a long time. This illustrates that these projects were implemented exclusively under the concept of the individual model of disability to incorporate disabled people into society; almost all persons involved

were medical professionals, and disabled persons were rarely included. However, JICA transferred almost all of its disability-related projects from various departments to the Social Security Division of Human Development Department, when it was established in 2004 (JICA 2005). This organisational restructuring could be seen as a turning point, from which rehabilitation projects have begun to be recognised as based more on the social model, rather than solely recognised as medical projects.

It should also be noted that JICA implements leadership training for DPOs in order to empower them and to facilitate partnerships with them (JICA 2009b; Coleridge et al. 2010), where lectures and workshops are mainly conducted by Japanese disabled people to transfer their knowledge and experience.

By illustrating the disability-specific projects of each agency, this approach seems to speak directly to disabled people's needs. However, some projects are based on a medical perspective, where the individual model of disability dominates. The European Disability Forum (EDF) insists that this can lead to perpetuating segregation and focusing on solely elite groups (EDF 2002). Thus, there would be a limitation when addressing mainstreaming disability using this

approach exclusively. To mitigate such potential segregation, a balanced approach, namely the twin-track approach, will be examined in the following section.

5-3-2. Twin-Track Approach

The author of this study faced difficulty in finding projects explicitly employing a twin-track approach, despite the fact that all three agencies in this study do adopt it. This may be because empowerment and mainstreaming disability cannot be clearly separated (Kuno and Seddon 2003; JICA 2009b), and because 'few have developed institutional structures' to use this approach (Miller and Albert 2006 p.45). However, several good practices can be seen to demonstrate the twin-track method, even without explicitly stating its use.

USAID has several pilot projects which aim to increase opportunities for the involvement of disabled people, including; improving programme design and its implementation of basic education quality in Pakistan; improving democracy and governance for further equitable participation in Mexico; and finding ways to combat the

spread of HIV/AIDS in Zambia. The projects also include designing and running workshops for USAID staff and its counterparts 'to foster a greater understanding of the strategies needed to advance inclusive development' (Lord et al. 2010 p.30).

JICA has twin-tracked projects in Malaysia aimed at empowering disabled people and mainstreaming them in society by improving employment policies, where 'job coaches' work with disabled people to develop their working skills at the job site. In Thailand, the APCD project is being implemented in order to empower disabled people by providing leadership training, etc., and thereby realise a barrier-free society, which could be also regarded as mainstreaming.

When it comes to DFID, notably, the term 'twin-track' could not be found in the DFID practice paper from 2007 (DFID 2007), despite its aim to help its staff understand how they can better mainstream disability. While the 2000 issues paper (DFID 2000) did use this approach in reference to disability and development, this might show that DFID considers the approach so fundamental that it does not have to mention it anymore, or that the concept is no longer used.

Regardless projects employ the twin-track approach explicitly, there are notable projects proceeding both empowerment and mainstreaming. As long as both approaches of empowerment and mainstreaming disability are used in practice, the spirit of the approach remains. DFID's, JICA's and USAID's efforts towards mainstreaming will be explained in the following section.

5-3-3. Mainstreaming Disability in Development Cooperation

USAID provides a successful example with its Ecuadorian counterparts to mainstream disability in its development cooperation, including; sensitising staff on inclusive practices by providing the USAID e-learning course 'Inclusive Development'; hiring a disabled person as a senior officer; breaking down barriers so that disabled people can equally access USAID programmes such as democracy and governance, employment, and the environment (USAID 2008; Lord et al. 2010). USAID also works in Vietnam on 'legal and regulatory reforms, educational mainstreaming, and increased economic opportunities' for mainstreaming disabled people's needs in its development cooperation on legal policy (USAID 2008 p.1). It

supports the Vietnamese Government to develop new laws on disabilities, and has also helped to establish programmes on the inclusive education of disabled children, vocational training, and innovative job placement (ibid.).

DFID promotes the mainstreaming of disability via programmes such as 'budget support, education, health, water and sanitation, social protection, civil society programs, and humanitarian and conflict settings' (Lord et al. 2010 p.28). In India, disability-specific indicators have been introduced in the primary education and reproductive and child health sectors (ibid.). In Malawi, the Federation of Disability Organizations, supported by DFID, has included disabled people in HIV/AIDS policies and provided them with equal information access (ibid.). In Mali, disabled people have been provided with enhanced access to water from new wells by Water Aid and Sight Savers International, who work as DFID partners (ibid.).

In addition to constructing preschool education facilities in Senegal, as described in Chapter 1, a unique attempt by JICA towards mainstreaming disability has been to dispatch disabled people to majority-world countries as experts and volunteers who transfer their knowledge and experiences to their counterparts (JICA 2009a, b).

For example, a blind person taught his acupuncture skill to his counterparts in Malaysia; persons with muscular dystrophy, who live independently, conducted several peer counselling sessions in Thailand for disabled people; and persons with learning difficulties have shared their experiences when developing a peer group with Thai disabled people (ibid.). These can be noted as efforts to mainstream disability; however, up to now disabled people have been dispatched to disability-specific projects only (JICA 2009b). Thus, disabled people should be incorporated into projects in other fields, such as poverty reduction, where they could highlight their needs for better implementation of projects (ibid.).

At headquarters, staff training to raise awareness of disability issues are important for mainstreaming disability. USAID provides an e-learning course entitled 'Inclusive Development', which enables staff to enhance their knowledge of disability issues and inclusive development (USAID 2008; Lord et al. 2010). This is managed by the Disability Team, which was established in the Bureau for Policy and Program Coordination as the focal point of disability issues (Lord et al 2010). Additionally, a Federal Advisory Committee on Persons with Disabilities was established in 2004. This provides

advice in association with the US Secretary of State and the USAID Administrator to reflect disabled people's interests regarding how to formulate and implement US foreign policy and foreign assistance (Lord et al 2010). This committee is expected to contribute to disability mainstreaming.

DFID provides many DET sessions for staff in its Human Resource Division, Business Solutions Divisions, Health and Safety Team and Office Services (DFID 2010). Additionally, In 2004, DFID has established the Exclusion, Rights and Justice team within its Policy Division with responsibility for focal point for disability issues (Thomas 2005). While it is not an external committee, DFID has developed a forum 'for learning and sharing experiences on disability among DPOs, mainstream development organizations and aid agencies' (Coleridge et al. 2010 p.70).

At JICA, DET sessions are held once or twice a year for JICA staff who wish to learn about disability issues in development cooperation (JICA 2009b). This not only disseminates the concept of disability equality, but is also held to encourage staff to elaborate project plans related to disability issues (Matsumoto 2012). Furthermore, obligatory briefings in terms of disabled people's needs are given to

staff who are going to work at overseas offices (ibid.). However, DET sessions are voluntary (JICA 2009b); it could be made obligatory, since training those who are not aware of the necessity of disability mainstreaming is most important. In addition to the Social Security Division as the focal point in headquarters, JICA has also established an advisory committee on support for disabled people, wherein disabled people from DPOs, universities and institutes participate to advise JICA on its activities (JICA 2009b; Coleridge et al. 2010).

As a common issue among these agencies, appropriate funding for working on disability issues cannot be overlooked (EDF 2002). In USAID and DFID, specific budgets are allocated for disability issues so that they can keep an eye on how they spend on disability-specific projects, rather than mainstreaming itself (Coleridge et al. 2010), while JICA does not have such a budget line (JICA 2011). Ideally, however, a budget for mainstreaming disability should also be allocated.

5-4. How and in what way do State Development Agencies address Disability Issues in a Majority-World Context?

By analysing two secondary research questions with reference to the cases of USAID, DFID and JICA, several effective approaches and limitations have been found to address disability issues in the majority world.

First, in terms of the concept of disability, which varies among each agency, the agencies have established disability policies to tackle disability issues across their whole organisation. This contributes to raising awareness of disability issues in development cooperation. However, as disability policies and guidelines are not compulsory, their influences remain limited.

Second, in terms of conceptualising development cooperation, USAID stress the importance of economic growth; DFID emphasises poverty reduction, due to its strong commitment to the MDGs; and JICA focuses more on inclusivity. If seeingWhen their development cooperation policies are considered from a strict point of view, USAID and DFID may haveface difficulties toin expressing disability issues as one of the main objects in their policies; USAID's

economic growth-oriented policy may not sufficiently include disabled people sufficiently under the neoliberal agenda; DFID's MDGs-committed policy might decrease the work on disability, which is not on the agenda,, despite the fact that DFID understands that poverty and disability interrelate.

Third, disability-specific projects make it possible to provide direct support to address the specific needs of disabled people. However, a limitation arises when this approach is conducted exclusively from a medical or individual perspective, where disability is an attribute of individual disabled persons.

Fourth, as a concept, the twin-track approach seems to work effectively in those agencies to enable the empowerment of disabled people and mainstreaming disability simultaneously. The three agencies considered utilise this approach effectively to contribute to addressing disability issues both via disability-specific projects and mainstreaming disability. Conceptually, this approach can be seen to have an advantage as it successfully articulates the importance of the simultaneous implementation of empowerment and mainstreaming; however, how to use this approach in practice has not been clearly explained. Notably, DFID seems to reduce

emphasis on this approach, judging from its documents. If they plan to advocate this approach, agencies may be required to elaborate it to make it more practical.

Finally, mainstreaming disability can be seen as an effective method of including disability in the process of development cooperation. Capacity development of agencies, such as staff training in mainstreaming disability, could be helpful; however, its impact would remain limited unless it becomes compulsory. The important actors for mainstreaming disability are those staff who are not familiar with the issue or who think disability is not a primary subject in development cooperation. Staff of state development agencies should not maintain an attitude of indifference, which may result in barriers preventing disability from being adequately perceived. State development agencies should provide their staff with tools to understand disability, in line with the social model (Albert et al. 2006).

In this study, it was not clearly identified how the models of disability contribute to conceptualising disability in the three agencies studied, except in the case DFID, which adopts the social model. Since the social model is helpful in pursuing the mainstreaming of disability, as discussed previously, it would be highly positive if the social model

was also used to contribute to the conceptualisation of disability in USAID and JICA. However, an alternative could be if policies and activities to tackle disability are conducted in line with the *spirit* of the social model, rather than strictly labelling the approach as such.

Chapter Five analysed the policies, methods and approaches of state development agencies in terms of both development and disability in order to answer to the research question. While it found similarities and diversities among the concepts of disability and development of those three agencies, all of them have made continuous efforts to tackle disability issues by disability-specific projects, the twin-track approach and mainstreaming disability. However, to mainstream disability more effectively, it found robust involvement of staff of state development agencies to reduce an attitude of indifference which tend to create barriers.

6. Conclusion

This study analysed how disability mainstreaming by state development agencies can be improved in development cooperation. While disability should be regarded as a cross-cutting issue that is interrelated to other development issues, it has been seen as a 'special' issue which should be particularly addressed by medical specialists, due to the assumption that disability is a medical and rehabilitation problem. Utilising concepts such as the 'majority world', 'development cooperation' and 'disability', in line with the social model of disability, the study explored development cooperation on disability issues by selected state development agencies, namely USAID, DFID and JICA, in the context of the majority world.

The findings in Chapters Two and Three indicate how theoretical and practical aspects of issues related to development and disability have shifted. Poverty, as a state of deprivation, influences both disability and development, and in particular a close link between poverty and disability was illustrated. Development cooperation aims to eradicate poverty via the MDGs, etc., however the MDGs do not clearly address disability. In conceptualising disability in a majority-world context, Western theories and tools of disability have been

found to be unhelpful in addressing disability in the majority world. The study illustrated that the social model of disability tends to ignore certain aspects of culture, race, gender, etc., which significantly matter in the majority world; however, the model remains important, as it aims to remedy common negative issues such as discrimination, exclusion and medicalisation of disabled people through the world by shifting the perspective from disabled individuals to society. Indeed, conceptualising disability in the majority-world context requires further understanding that disabled people in the majority world face various issues – such as inadequate health care services, exclusion from education, gender inequality, etc. – in addition to poverty.

Development cooperation has shifted from being economic growth-oriented to focusing on inequalities. Standing on the Capability Approach, the human development approach could be noted for its aim to expand well-being. The Capability Approach can be expected to bridge the disciplines relating to different issues, such as poverty and disability, through the concepts of functionings and capability, through which clearer understanding of deprived situations in the majority world can be gained, regardless of the issues. However,

neoliberalism currently has the power to enhance the free market, in which further inequalities can be observed.

The study then elaborated on the process of development and disability mainstreaming, focusing on the practical aspects of issues related to development and disability. The efforts by the UN, and state development agencies and their policy implications, are notable, and have raised awareness of disability issues in development cooperation. However, even though such challenges have been recognised, disability is still seen as a specialist issue, and mainstreaming disability has not been adequately addressed. In this regard, potential problems in state development agencies were found, such as disability having a low priority due to the lack of available information on it. However, the twin-track approach has been identified as a tool to contribute to promoting the empowerment of disabled people and mainstreaming disability simultaneously.

Employing qualitative research as its methodology, the analysis in this study was conducted by comparing the policies/guidelines, methods and approaches of USAID, DFID, and JICA towards

disability and development using the framework approach (Pope et al. 2000).

Chapter Five sought to answer the research question, 'How and in what way do state development agencies address disability issues in a majority-world context?', by analysing and discussing how state development agencies conceptualise disability and development using models of disability and approaches of development cooperation, and how state development agencies address the mainstreaming of disability via disability-specific projects, the twin-track approach, and mainstreaming disability in development cooperation.

In terms of the discussion in this study as a whole, some 'hints and tips' can be extracted by which to improve the mainstreaming of disability. First, institutional support by state development agencies can be strengthened so that their staff can enhance their understanding of disability mainstreaming to demonstrate their knowledge in practice.

Second, disability could be re-conceptualised as a cross-cutting issue, to make its relation to other issues clear. For this, the

Capability Approach would be helpful to understand disability and other development issues within one framework; it would make it possible to analyse those issues through functionings and capability, where clearer understanding of the deprived situations of people in the majority world can be analysed, regardless of the issues in question.

Third, it is often difficult to maintain a broad or non-biased vision when an agency adopts a certain model or approaches to disability and development cooperation. Depending exclusively on one model of disability could narrow the scale of the programme, as seen in DFID's case where the social model perspective screens out medical projects, thereby preventing disabling diseases from being considered part of disability-related issues, and instead relating them to 'impairment' (Thomas 2004). Moreover, relying solely on the MDGs as a development cooperation approach could lead to ignoring important issues like disability, which is not included clearly in the MDGs (Albert et al. 2005). DFID's constraints with PRSP could be also noted in this context.

Forth, a budget line not only for disability-specific projects, but also for disability mainstreaming, could be allocated.

Fifth, state development agencies' partnerships with DPOs and other NGOs is increasing, but could be expanded further to reflect disabled people's perspectives for more inclusive development. Advisory committees including DPOs for state development agencies are expected to facilitate further partnerships and contribute disability mainstreaming.

Finally, but most importantly, disability remains a 'special' issue, which hinders the mainstreaming of it. Individual staff of state development agencies, like the author, should realise that if the failure to eliminate this embedded attitude as a social barrier in such organisations continues, disability mainstreaming in the majority world will not be possible.

7. References

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