DRAFT OIC PLAN OF ACTION ON PEOPLE WITH DISABILITIES

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13 March 2019
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1. INTRODUCTION

More than one billion people experience some form of disability across the globe that 1 out of 7 persons has a disability. According to the estimates of the WHO, due to aging population and widespread chronic diseases, the global prevalence rate of disability increased from 10 per cent in 1970 to 15 per cent in 2011. Around 80 per cent of people with disabilities live in developing countries including OIC countries.

Since the early 2000s, OIC countries and their societies have been experiencing a demographic transition in which the share of old age population has been climbing up thanks to developments in the healthcare sector and effective health policies. On the other hand, the number of conflicts, wars and disasters also continue to stay relatively higher in OIC countries. Because of these factors, the number of people with disabilities in OIC countries tend to go up over time and have started to put a growing pressure on societies.

People with disabilities face persistent inequalities in social, economic, cultural, environmental, and political spheres in many developing countries as well as OIC countries. Discrimination against them just make the situation worse for them. In particular, a country’s economic, legislative, physical, and social environment may create or maintain barriers to the participation of people with disabilities in economic, civic, and social life. Barriers may include from inaccessible buildings to inadequate standards on rehabilitation services.

Because of inequalities and challenges faced by people with disabilities, they are more likely to experience adverse socioeconomic outcomes than people without disabilities, such as less education, worse health outcomes, less employment, and higher poverty rates. All these factors also limit their contribution to the development process of their respective countries.

Against this background, it is timely for OIC countries to come up with a comprehensive plan of action in order to address challenges faced by people with disabilities in socio-economic life and increase their participation into the development of their societies. Policies and initiatives implemented towards this direction would also help to improve the quality of life of people disabilities and lead to more inclusive societies in which all people can enjoy their rights with dignity.

Overview of the OIC Plan of Action

Given the common challenges faced by people with disabilities, this draft OIC Plan of Action is a step forward in creating a much needed conversation on improving the state of disabilities through enhancing intra-OIC cooperation. The draft OIC Plan of Action aims to urge policy-makers to pay specific attention to the demographic transitions in the coming years and to guide them in improving the state of people with disabilities. Moreover, it aims to constitute a roadmap and basis for policy-makers to share knowledge, information and experiences among OIC countries on how to improve the state of people with disabilities.

It is important for OIC member countries to actively involve and follow up other international initiatives on disability such as the World Health Organisation’s Global Disability Action Plan and Sustainable Development Goals (SDGs) of the UN that include several targets on people with disabilities. Over the last decade, the OIC also successfully developed some key documents including the OIC Strategic Health Programme of Action 2014-2023 (OIC-SHPA) in the domain of health and OIC Plan of Action for the Advancement of Women (OPAAW) in the domain of gender equality and women rights with the
involvement of member countries and other international stakeholders. In the light of international initiatives on disability, and by considering SDGs, OIC Ten Year of Programme of Action: 2016-2025, and experiences of the OIC in developing action plans (e.g. OPAAW, OIC-SHPA), the OIC Plan of Action on People with Disabilities would be instrumental to address the needs of people with disabilities.

To enable the realization of the mentioned objectives, the draft Plan of Action identified six main areas of action through reviewing the immediate problems, existing policies and the possible implementation actions to resolve them. These areas are identified as follows: (i) education, (ii) health, (iii) economic integration, (iv) governance, (v) enabling a supportive environment, and (iv) culture and Islam. Under each main area, several strategic goals are identified and a set of action points were listed for the consideration of policy makers in order to provide proper guidance to achieve these strategic goals.

In summary, this Plan of Action aims to stimulate cooperation among member states in addressing the common issues faced by people with disabilities. The proposed outline, six main areas of action, strategic goals and action points are aimed to provide guidance for policy makers on how to incorporate people with disabilities into the labour market, improve their education and health outcomes, better their standards of living without neglecting national experiences, cultural and Islamic values, and international developments in this important area.

This document adopts the UN definition of persons with disabilities including four main types of disabilities namely physical, mental, intellectual or sensory impairments that is defined in the Article 1 of the United Nations Convention on the Rights of Persons with Disabilities (CRPD). The Article 1 states that ‘persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others’.

2. OVERARCHING PRINCIPLES

There are various crosscutting issues and concepts that form the basis of overarching principles that guide each strategic goal and its implementation mentioned in this document. Discussing such issues and concepts before proceeding to present the main areas of action is important to avoid repetition and to be able to present a methodological approach on the issue of disability. This document suggests the following all-inclusive principles which are applicable to all the main areas of action discussed in Section 4.

2.1. Diversity

This action plan uses ‘disability’ as an umbrella term for impairments, activity limitations and participation restrictions which may hinder people with disabilities’ full and effective participation in society on an equal basis with others. Contrary to popular belief, not all disabilities are same or similar. People with disabilities include those who have long-term physical, mental, intellectual or sensory impairments. There is limited data on the various forms of disabilities that affect people in OIC countries. This leads to a gap in policies and programmes aimed at addressing challenges faced by people with various types of disabilities. Therefore, OIC countries should collect accurate information on various types of disabilities to engage with people affected by different types of disabilities.
2.2. Gender-Lens

Women and girls with disabilities are the most disadvantaged group on multiple levels. They are mainly under-represented and often excluded from certain initiatives targeting people with disabilities that they face a set of obstacles in participating in socio-economic life. Consequently, women with disabilities are at a higher risk to be exposed to poverty, violence, and abuse. On the other hand, women are also the main caregivers for people with disabilities in many societies. Given the life-long and extensive nature of care for people with disabilities, women need to spend most of their time on care that affects their quality of life. In particular, working women feel such a heavy burden burdened on their shoulders. In this respect, the specific situation of women needs to be taken into account in the development of disability policies and programmes at all levels. This requires OIC countries to adopt a gender-lens in developing health and social services for people with disabilities to eradicate power imbalances and to promote their rights.

2.3. Life Course Approach

The quality of lives of people with disabilities is heavily dependent on the delivery of extensive life-long care. Disabled persons require different types of care and support for each stage of the lifespan. For instance, during the childhood period they require socially inclusive activities and at older ages they are need of more specific medical attention. Therefore, a life-course approach should be adopted in order to ensure effective provision of life-long care and services for people with disabilities. This requires OIC countries to take account of health and social needs at all stages of the life course, including infancy, childhood, adolescence, adulthood and older age, and produce innovative solutions to meet the age-related changes in the needs of people with disabilities.

2.4. Inclusiveness

People with disabilities is a quite heterogeneous group and the severity of disabilities vary among different segments. On the other hand, factors like age, gender, race, ethnicity, rural versus urban settings, socioeconomic status, income level, employment status, education level, residing with family or at institutions, violations of human rights and exposure to adverse life events (e.g. violence, abuse and neglect) determine the needs and problems of people with disabilities. In particular, children, women, elderly people, minority groups, indigenous populations, immigrants, asylum seekers, persons deprived of liberty, prisoners, people exposed to conflict, natural disasters or other humanitarian emergencies are more vulnerable and marginalized due to disabilities. This requires OIC countries to come up with inclusive disability policies that can address the needs of various segments including vulnerable or marginalized groups.

2.5. Human Dignity

People with disabilities independent from their background, race, age, or gender have the right to have a dignified life. Given the widespread human rights violations and discrimination experienced by people with disabilities, a human rights perspective is essential in developing policies for people with disabilities. This plan of action emphasizes the need for services, policies, legislation, plans, strategies and programmes to protect, promote and respect the inherent dignity and individual autonomy of people with disabilities, including the freedom to make one’s own choices. This requires OIC countries to develop smart policies that respect individual autonomy and the protection of people’s dignity.
2.6. Multi-sectoral Approach

In order to address the problems faced by disabled population, not only a multi-disciplinary but also a multi-sectoral approach is needed. Partnership with multiple public sectors such as health, education, employment, judicial, housing, social and other relevant sectors is required. Furthermore, engaging with private sector, development agencies, academic and research institutions, civil society, faith-based associations, community-based organizations, associations of health care professionals and service providers and people with disabilities themselves will not only assist policy makers to better understanding the problems on the ground but also come up with innovative, fast-track, and cost-efficient solutions. This requires OIC countries to develop mechanisms and avenues to ensure collaboration with various stakeholders in designing and implementing policies for people with disabilities.

3. MAIN CHALLENGES AND ISSUES OF PEOPLE WITH DISABILITIES IN OIC COUNTRIES

People with disabilities face numerous challenges around the world. Nevertheless, the problems they face in the developing world are more significant due to a number of reasons from weak institutional arrangements to limited financial sources allocated for them. OIC countries, as a group, host millions of people with disabilities who have been confronting with a variety of issues ranging from underinvestment into care systems to physical and cultural barriers. Identifying these challenges and devising effective policies will enable OIC countries to take specific actions to enhance the integration, productivity and well-being of people with disabilities. This section provides a brief account of the main challenges and issues faced by people with disabilities in OIC countries. The section groups and discusses main challenges and issues under three categories: social and economic, health and well-being, and culture and values.

3.1 Social and Economic

In many parts of the developing world, including many OIC countries, people with disabilities experience a higher level of unemployment and are more likely to live in poverty compared with people without disabilities. Even when people with disabilities are employed their earnings typically tend to be less than those without disabilities. Due to their impairments, people with disabilities face a number of different forms of economic discrimination in the labour market. Employees are hesitant to employ people with disabilities because of the widespread stereotype that they cannot accomplish the requirements of the job.

In other cases, people with disabilities are overworked, not formally registered or severely mistreated by their employers. Due to the lack of employment or underemployment along with the prevalent economic discrimination toward people with disabilities, social protection systems become ever more important for the social inclusion and active participation of people with disabilities. In many OIC countries, social protection networks and economic opportunities are not well developed and equipped to cater fully to the needs of people with disabilities.
The lack of economic impartiality and opportunity along with the social challenges further exacerbates the well-being of people with disabilities. Economically or socially, excluding people with disabilities is not only detrimental to their own development and integration but it is also harmful for the cohesiveness of societies. The different skills, perspectives and contributions people with disabilities can bring to society are invaluable. It is therefore in the interest of OIC countries to exert more efforts in order to be more inclusive in their practices, policies and systems by paying specific attention to people with disabilities.

Across many OIC countries, people with disabilities are not fully integrated into the social life. This is due to a number of reasons ranging from the lack of physical structures to the limited social integration policies for people with disabilities. As the physical and the social factors mutually reinforce each other, for a successful and inclusive approach both aspects should be addressed conjointly.

Physical barriers such as housing, steps, curbs, transportation and communication, to name a few, seriously hinder people with disabilities’ ability to participate in normal day-to-day activities. The surrounding physical environment needs to be enabling for people with disabilities so that they can become active and productive members of their respective societies. Along with this, the social context also needs to be more inclusive in terms of economic integration, access to education and social protection networks to assist people with disabilities. Although some OIC countries have started to address such challenges, many of them have been still lacking effective, well-functioning and practical policies to support an inclusive social and physical environment for people with disabilities in which they can be economically productive.

3.2 Health and Well-being

It is often a misconception that people with disabilities (mental and physical) are equated with lack of health, incapacity and dependence. In fact, the reality is that with the appropriate access to health care and other forms of well-being services people with disabilities, they can maintain a long, productive and healthy life. However, the World Health Survey indicates that people with disabilities in comparison to people without disabilities are twice as likely to find that health care facilities and providers’ skills are inadequate, three times more likely to be denied health care and four times more likely to be mistreated within the health care system. People with disabilities are also more likely to face financial challenges to cover their required health care.

In many OIC countries quality and affordable health care is a common concern, and when it comes to people with disabilities such a concern emerges as a greater challenge. Insufficient number of trained health professionals along with misconceptions and prejudices harboured within the health care system, people with disabilities tend to face an extreme hardship in access to healthcare and rehabilitation services. As a result, individuals with disabilities in OIC countries usually encounter professionals unwilling or unfit to identify and treat their primary and secondary conditions, and any other health and wellness concerns. The design and construction of medical facilities also pose as a serious barrier for people with disabilities in many cases that the physical structure of many medical facilities is unfit to accommodate them.
The cost of health care for people with disabilities can be much higher than for those without disabilities; and with the lack of economic opportunities, many of these people face financial difficulties. A comprehensive social health care network for people with disabilities is needed in OIC countries to assist them to cover these large medical expenditures (i.e. out-of-pocket expenditures). In terms of the well-being of people with disabilities, both primary care and secondary care are important. In particular, designing complimentary health care systems that have a holistic approach, which includes primary medical treatment as well as community care settings, can be critical to address such challenges.

Overall, it is of importance to establish a strong health care system in which the treatment is affordable and accessible as well as services are provided by well-trained care professionals to support the health and well-being of people with disabilities. In such a setting, medical discrimination and all prejudices toward individuals with disabilities need to be eradicated that they can enjoy provided extensive care services with comfort as well as dignity.

3.3 Culture and Values

A major challenge for people with disabilities is the cultural codes and values ingrained in society regarding their competency, mobility and capacity. In different parts of the world, people with disabilities are sometimes viewed as either intellectually inferior or physically less capable. Even some people may consider them as abnormal due to the cultural setting or misbeliefs. The cultural norms and values serve as an overarching factor that affects how individuals, families, society and policymakers perceive and treat people with disabilities. The negative stereotypes and certain myths that revolve around “disabilities” reinforce the discriminatory practices against people with disabilities. For example, myths about people with disabilities being punished from God or declaring them evil, satanic, are common in some cultures.

Consequently, culture and values in society draw the framework that normalizes other actions and processes. A culture of exclusion combined with misconceptions inherently justifies mistreatment, underemployment, lack of an enabling environment and limited government response or societal support.

In Islam, people with disabilities are seen as proud members of a society and should be treated with respect. Throughout the early history of Islamic civilization, some individuals with certain disabilities assumed important roles in their respective societies both in the public and private sector. However, today in many OIC countries, many members of the society are not fully informed about the true messages of Islam on people with disabilities and their rights. Even some people with disabilities are not aware of their rights. Local cultural codes sometimes are being reflected as part of the religion and therefore people with disabilities face with discrimination, maltreatment and disrespect. In this picture, OIC countries should design policies from education to media strategies to upgrade the level of knowledge of people about the rights of individuals with disabilities. In this way, misperceptions and misbeliefs on people with disabilities can be eradicated and they can acquire the communal support needed to help them to become productive members of the society. As long as the cultural misperceptions and prejudices towards people with disabilities continue, this will have spill over
effects into the realm of health care, policy response, community, employment, education and all other aspects of life. Within this context, OIC countries need to explore all ways and means to create an inclusive cultural atmosphere independent from prejudices and stereotypes with a view to integrating people with disabilities into the socio-economic life.
4. MAIN AREAS OF ACTION

Based on the major challenges and issues discussed in the previous section, this section presents six main areas of action: (i) education, (ii) health, (iii) economic integration, (iv) governance, (v) enabling a supportive environment, and (iv) culture and Islam in order to improve the well-being of people with disabilities living in OIC countries. These areas have been identified through analysing relevant qualitative and quantitative indicators on people with disabilities in OIC countries, evaluating international datasets, and reviewing national, regional as well as international plan of actions and strategies on the topic. Following the brief discussion on the key challenges under each main area of action, a set of strategic goals are being listed for the consideration of policymakers. Moreover, a set of policy actions under each specific strategic goal has been proposed in order to provide a concrete roadmap on how to achieve the relevant strategic goal.

4.1 Education

Many individuals with disabilities are out of school and in comparison with persons without disabilities, they are less likely to complete primary, secondary and tertiary education in developing countries including many OIC countries. As a result, majority of OIC countries need to review their education systems in order to meet growing educational needs of people with disabilities. It is important to equip these people with basic skills as well as to upgrade their existing skills. These efforts would require training human capital in the education sector, to allocate additional financial sources for investments, and to mainstream disability perspective into the education curricula. A relatively higher share of rural population characterizes several of the OIC countries. As the rural conditions reduce accessibility of education services for people with disabilities, it is important to develop special programmes and make necessary arrangements to have more inclusive education systems that can serve people with disabilities living in both rural and urban areas. It is also essential to develop education programmes not only for people with disabilities but also for their families and communities in order to create a more enabling environment in the education sector for people with disabilities.

The following specific strategic goals (SGs) are identified for the improvement of education of people with disabilities in OIC countries:

- **SG 1.1:** Improve accessibility and affordability of education institutions and programmes
- **SG 1.2:** Train service providers and families regarding special needs of people with disabilities in education institutions
- **SG 1.3:** Raise awareness about the importance of education services for people with disabilities
- **SG 1.4:** Invest into rehabilitation and special care services in education institutions
- **SG 1.5:** Ensure access to education in rural and urban areas
- **SG 1.6:** Promote intra-OIC cooperation

**STRATEGIC GOAL 1.1:** Improve accessibility and affordability of education institutions and programmes

OIC countries need to take strategic actions to improve accessibility and affordability of education institutions and programmes in order to meet the needs of people with disabilities. When families of people with disabilities have concerns regarding the physical accessibility of schools and education institutions, they tend to keep their members of family with disabilities at home. Affordability of
education institutions for people with disabilities is another key factor that affects the decisions of people with disabilities to continue or quit education. In this picture, social security systems should be able to provide necessary financial support to encourage people with disabilities to begin and continue their education.

**Actions**

1.1.1 Improve accessibility of education institutions and programmes in order to meet the needs of people with disabilities by making necessary physical investments at schools

1.1.2 Better accessibility of education institutions and programmes by making transport services available and affordable for people with disabilities

1.1.3 Remove physical barriers that reduces accessibility of people with disabilities at education institutions

1.1.4 Increase affordability of education institutions and programmes for people with disabilities by making special arrangements in social security systems

1.1.5 Collaborate with stakeholders to encourage people with disabilities to take part in education programmes including training, vocational education and life-learning programmes

**STRATEGIC GOAL 1.2:** Train service providers and families regarding special needs of people with disabilities in education institutions

As people with disabilities have some special needs in education institutions, service providers as well as families should be trained with a view to facilitating access to education institutions of people with disabilities. This requires designing special courses and programmes for service providers including teachers, school administrators, care-givers as well as families of people disabilities. It is also essential to equip people with disabilities with necessary knowledge to increase their level of cooperation at education institutions. Non-physical barriers for people with disabilities such as discrimination and harassment may discourage them to continue their studies at education institutions, and therefore such barriers should also be removed.

**Actions**

1.2.1 Organize training programmes for service providers as well as families on special needs of people with disabilities at education institutions

1.2.2 Design courses and programmes for people with disabilities to increase their level of cooperation at education institutions

1.2.3 Collaborate with all stakeholders to eliminate non-physical barriers for people with disabilities at education institutions such as discrimination and harassment

**STRATEGIC GOAL 1.3:** Raise awareness about the importance of education services for people with disabilities

In order to equip people with disabilities with necessary skills and train them as members of societies, it is critical to raise awareness about the importance of education services for people with disabilities at all levels. Therefore, such awareness raising campaigns should not only target people with disabilities and their families but also should be inclusive for service providers and representatives of
the private as well as public sector. Such comprehensive efforts are likely to encourage people with disabilities to be part of education institutions.

**Actions**

1.3.1 Organize awareness raising campaigns for people with disabilities, their families and service providers on the importance of education for people with disabilities

1.3.2 Design awareness raising campaigns targeting both the private and public sector on the importance of education for people with disabilities

1.3.3 Collaborate with stakeholders including media to equip society about the contributions of people with disabilities

**STRATEGIC GOAL 1.4: Invest into rehabilitation and special care services in education institutions**

People with disabilities may need some special services throughout their stay in education institutions. Therefore, education institutions should be equipped with some basic facilities such as a rehabilitation room, first-aid kits in classrooms, and rest rooms designed for people with special needs etc. It is also important to have some people who can assist individuals with disabilities at schools. These people may include teachers, family members and trained caregivers. In this regard, OIC countries need to make some investment into rehabilitation and special care services in education institutions in order to provide a more enabling environment for people with disabilities and serve their needs in education institutions.

**Actions**

1.4.1 Provide rehabilitation and special care services in education institutions

1.4.2 Identify minimum standards at education institutions regarding basic services and arrangements available for people with disabilities

1.4.3 Train service providers, families and caregivers to facilitate access of people with special needs to rehabilitation and special care services in education institutions

**STRATEGIC GOAL 1.5: Ensure access to education in rural and urban areas**

Access to education services in rural areas in a number of OIC countries stays a challenge for many people without disabilities. In particular, for people with disabilities it emerges as a greater challenge in rural areas such as due to the limited connectivity and lack of a proper transport infrastructure. Therefore, access to education should be improved in rural areas especially for people with disabilities. On the other hand, some people with disabilities especially living in slums in urban areas also face difficulties in accessing to education institutions. In this context, OIC countries should develop effective policies to improve access to education for people with disabilities in rural and urban areas.

**Actions**

1.5.1 Ensure the accessibility of education institutions in rural areas for people with disabilities by improving infrastructure

1.5.2 Improve the accessibility of education institutions by making transport services available for people with disabilities both in rural and urban areas
1.5.3 Coordinate with local and regional governments as well as city managements to improve the accessibility of education institutions for people with disabilities

**STRATEGIC GOAL 1.6: Promote intra-OIC cooperation**

Improving access to education services for people with disabilities would help many OIC countries to increase the well-being of people with disabilities. As many OIC countries have successful initiatives, national programmes, and best-practices, promoting intra-OIC cooperation on this matter would be important. In this regard, OIC countries need to be encouraged to share their practices and success stories with other OIC countries on ways and means of improving access to education services for people with disabilities.

**Actions**

1.6.1 Promote intra-OIC experience sharing and transfer of knowledge and technology in the domain of education for people with disabilities, and consider developing a knowledge-sharing platform to facilitate the transfer of knowledge and expertise in this context

1.6.2 Facilitate establishment of a network among training institutions, service providers and professional associations for joint planning to address the educational needs of professionals and people with disabilities

1.6.3 Organize capacity building, experience sharing and sensitizing activities to enhance intra-OIC cooperation in the domain of education for people with disabilities

**4.2 Health**

OIC countries need to scale up their health care and well-being services for people with disabilities in terms of both human capital as well as financial sources. In some OIC countries, rural population represents a relatively higher share compared to urban population. In such rural areas and populations, making health and well-being services accessible for people with disabilities is a daunting task. On the other hand, the cost of treatment and rehabilitation services are not affordable for many people in a number of OIC countries. Ineffective social security systems also limit the access of people with disabilities to such services. If possible, prevention of diseases and disabilities is the least costly intervention that can be taken. In this regard, coping with risk factors, increasing awareness on diseases and injuries, and improving access to basic healthcare services would prevent many people to become disabled. On the other hand, extending the scope of rehabilitation and healthcare services would help to improve the well-being of people with disabilities living in OIC countries. Building up medical facilities that are friendly for people for disabilities is another solution that needs to be considered by policy makers in OIC countries.

The following specific strategic goals (SGs) are identified for the improvement of health and well-being of people with disabilities in OIC countries:

- **SG 2.1:** Improve disease and disability prevention
- **SG 2.2:** Invest into rehabilitation and long-term care services
- **SG 2.3:** Improve public mechanisms including social security systems
- **SG 2.4:** Ensure access to health services
- **SG 2.5:** Promote development, production and use of assistive devices
- **SG 2.6:** Promote inter-sectoral and intra-OIC cooperation
STRATEGIC GOAL 2.1: Improve disease and disability prevention

OIC countries need to take strategic actions to prevent or limit the exposure of people to various diseases as well as disabilities that are preventable. It is also essential to provide schemes in order to provide guidance and improve disease prevention for people with disabilities. On a large scale, people with disabilities that are exposed to the use of tobacco, alcohol and follow unhealthy diets are more vulnerable and face usually a greater risk. The people with disabilities need to be educated on the impacts of their unhealthy decisions. Awareness-raising campaigns and incentives need to be provided to make healthier choices that are convenient and affordable. Such strategic actions will decrease the burden on the healthcare systems and improve the health and well-being of people with disabilities.

Actions

2.1.1 Reduce the level of exposure of individuals and populations including people with disabilities to the common risk factors namely, use of tobacco and alcohol, unhealthy diet and physical inactivity for non-communicable diseases

2.1.2 Strengthen the capacity of people with disabilities to make healthier choices and follow lifestyle patterns that foster health preservation and lead them to have a healthier ageing process

2.1.3 Provide education and training programmes to people with disabilities on healthy life style and coping with addictions

2.1.4 Design and implement policies with a view to reducing risk factors contributing to disabilities during old ages both for people with disabilities and without disabilities

2.1.5 Collaborate with stakeholders and families with a view to preventing dementia and other mental diseases that are progressive over time as well as provide guidance to identify them at their early stages

2.1.6 Invest in early detection systems for chronic diseases that has the potential of reducing long-term well-being of people through leading to certain disabilities and improve the network of screening, diagnostic and treatment facilities for the most prevalent communicable and non-communicable diseases in terms of accessibility, affordability and quality

2.1.7 Consider developing mechanisms to move people with disabilities that are more vulnerable out of the crisis region and provide protected shelters during the outbreak of communicable diseases

2.1.8 Increase access to quality health care services of people with disabilities especially for early detection through organizing public awareness raising campaigns

STRATEGIC GOAL 2.2: Invest into rehabilitation and long-term care services

The number of people with disabilities in OIC countries are forecasted to go up rapidly in the coming years. Policies and strategic decisions need to be responsive such demographic changes and should take systematic approaches to the possible challenges that may affect OIC countries. Institutional services for the care and rehabilitation of people with disabilities need to be improved to address major issues and challenges. Along with the institutional arrangements, community-based care and
rehabilitation services can be considered as complimentary support systems for the well-being of people with disabilities.

Actions

2.2.1 Invest in health care and rehabilitation facilities to provide rehabilitation services and proper long-term care services by health professionals for people with disabilities

2.2.2 Review best-practices across the globe and OIC on care and rehabilitation facilities for people with disabilities to improve their effectiveness and strengthen capacities at the national level

2.2.3 Make rehabilitation and long-term care services affordable and inclusive in the social security systems with a view to minimizing out-of-pocket expenditures of people with disabilities and improving their accessibility and coverage

2.2.4 Consider implementing community-based rehabilitation programmes to better understand people with disabilities given their special needs and provide them necessary care services in this way

2.2.5 Improve delivery of quality health care and long-term care services for people with disabilities through an integrated network comprising of health care facilities, community health workers, NGOs and volunteers

2.2.6 Cooperate with community and religious leaders to train and equip generations on the importance of care of people with disabilities in Islam and organize public campaigns to raise awareness in the society in this respect

2.2.7 Promote community-based initiatives to deliver more assistive devices for people with disabilities those in need of such devices

STRATEGIC GOAL 2.3: Improve public mechanisms including social security systems

Allocation of sufficient resources and investing into the rehabilitation and care services for people with disabilities are important ways to improve public mechanism for effective delivery such services. It is also critical to incorporate available services for people with disabilities into the social security mechanisms. Budgetary allocations for the health sector need to be increased in order to provide quality yet up-to-date technological services for people with disabilities in many OIC countries. Health workers need to be equipped with right skills by offering them training programmes that would enhance their capacities to provide effective and high quality services for people with disabilities. Other communal mechanisms (e.g. volunteering) and Islamic instruments (e.g. Zakat and Waqf institutions) should also be used to provide a sense of security for people with disabilities. It is also important to enhance intra-OIC cooperation to encourage knowledge and experience sharing activities among social security institutions of OIC countries.

Actions

2.3.1 Strengthen national regulatory authority with adequate resources and staff to ensure quality, safety and efficacy, and widen its scope to cover all technologies for health care and well-being of people with disabilities including medicines, vaccines, medical devices and diagnostics
2.3.2 Establish and strengthen national bodies to facilitate training, recruitment and management of health workforce across the country in providing health, rehabilitation and long-term care services for people with disabilities

2.3.3 Develop mechanisms on the family practice approach for delivery of health care and long-term care services for people with disabilities

2.3.4 Set up a mechanism for social protection of poor people with disabilities by benefiting experiences of various OIC countries and other countries in the world, and consider benefiting from Islamic instruments such as Zakat, Sadaqah and Waqf as sources of funds to support social protection of these people

2.3.5 Increase the budgetary allocations for health sector and ensure that certain portion of the allocations are being dedicated to be used for health and well-being related needs of people with disabilities

STRATEGIC GOAL 2.4: Ensure access to health services

The high costs of healthcare services and lack of a proper enabling healthcare enabling environment in various OIC countries limit the access of millions of people with disabilities to such services. In this regard, the evolving needs of people with disabilities need to be reformulated to ensure inclusive health care access for people with disabilities. Regulations guiding the physical environments of hospitals and care houses need to be reviewed in line with the needs of people with disabilities. It is essential to develop mechanisms at the national level to include people with disabilities who are not registered within a social security system. In particular, people with disabilities living in rural areas who have not had the chance to register also need to benefit from health care services.

Actions

2.4.1 Ensure physical accessibility to a range of services based on the needs of people with disabilities and ensure continuity of health care services that are being delivered with an integrated approach by a well-trained multidisciplinary team

2.4.2 Involve people with disabilities in needs assessment, priority setting, implementation, monitoring and evaluation of the public health care services to make health related interventions sustainable and impactful

2.4.3 Invest more on self-care capacity building through training with a view to reducing dependency of people with disabilities to others

2.4.4 Develop mechanisms for sustainable health financing for people with disabilities with a view to mitigating inequities in accessing health care throughout their lifespan

2.4.5 Develop national mechanisms and action plans for people with disabilities without any social security registration and income with a view to providing them public health care services and including them into such systems

2.4.6 Enhance inter-sectoral cooperation among stakeholders in order to make health care and long-term care services more affordable and accessible for people with disabilities

2.4.7 Improve the quality, accessibility and sustainability of health care services for people with disabilities
2.4.8 Review and upgrade the current status of the national health information systems and its key elements by taking the evolving needs of people with disabilities into consideration

**STRATEGIC GOAL 2.5:** Promote development, production and use of assistive devices

It is essential for OIC countries to work collaboratively in order to promote development, production and use of assistive devices that are critical for the well-being of people with disabilities. As such devices help improve the quality of life of people with disabilities and enable them to be part of socio-economic life, it is critical to devise policies and implement them to ease access to assistive devices for people with disabilities. Development and production of these devices in OIC countries help to curb associated costs and have potentials to increase their accessibility as well as affordability by people with disabilities.

**Actions**

2.5.1 Formulate policies and laws to support the development, production, distribution and servicing of assistive products

2.5.2 Ensure that assistive products are available and affordable for people with disabilities

2.5.3 Develop incentive schemes regarding research on and the development of assistive technology and consider promoting intra-OIC cooperation in this respect

2.5.4 Enhance capacities of people with disabilities and their families, public officials, and service providers on assistive technology

2.5.5 Invest in the physical environment to optimize the benefits of assistive technology

2.5.6 Support local manufacturers of essential medical products as well as assistive devices for people with disabilities to make them more accessible and affordable

**STRATEGIC GOAL 2.6:** Promote inter-sectoral and intra-OIC cooperation

OIC countries need to work collaboratively to facilitate exchange of policies and mechanisms that are being successful in addressing health and well-being needs of people with disabilities. The promotion of experience sharing among OIC countries and developing structured programmes in this regard would help to facilitate such practices. Capacity building and training programmes offered by some OIC countries in specific areas would further ease the process and help to the implementation of health related interventions targeting people with disabilities in other OIC countries. Mutual recognition of some certificates and diplomas in the area of healthcare can also ease cross-country mobility of experts. Collaborations with international and regional agencies that focus on people with disabilities would also benefit in the attainment of expertise, knowledge and financial contributions.

**Actions**

2.6.1 Encourage inter-sectoral cooperation at the national level for sustainable health development for people with disabilities through strengthening cooperation between health, education, labour, and social services

2.6.2 Promote intra-OIC cooperation on experience sharing and transfer of knowledge and technology in the domain of health care and well-being of people with disabilities, and develop a knowledge-sharing platform to facilitate the transfer of knowledge and expertise in this context
2.6.3 Facilitate establishment of a network among training institutions, health services and professional associations for joint planning to address the needs and profiles of health professionals working in institutions providing care for people with disabilities

2.6.4 Organize capacity building, experience sharing and sensitizing activities to enhance intra-OIC cooperation in the domain of health care and well-being of people with disabilities

2.6.5 Follow up and actively participate into implementation of the OIC Strategic Health Programme of Action 2014-2023 (OIC-SHPA) with a view to improving health systems

2.6.6 Facilitate intra-OIC cooperation on knowledge exchange and coproduction of new technologies and devices with a view to improving health and well-being of people with disabilities such as through developing joint capacity building programmes

2.6.7 Ensure mutual recognition of medical diplomas, healthcare providers’ certificates and degrees across the member states especially specialized on care of people with disabilities

2.6.8 Collaborate with international agencies active on people with disabilities like WHO, UNICEF, UNFPA and World Bank to benefit from their expertise and financial contributions to improve health infrastructure in member states for people with disabilities

2.6.9 Consider supporting public-private partnerships to improve the availability of care houses, rehabilitation centres and specialized hospitals for people with disabilities

4.3 Economic Integration

Stemming from the increased life expectancy and rapid population growth seen in OIC countries, the number of people with disabilities tends to go up over time. In some OIC countries, such a positive trend has started to put a financial pressure on their social security systems. On the other hand, people with disabilities can make a meaningful contribution to the socio-economic development of their countries by being active in the labour market, if proper opportunities are provided to them. Therefore, their active participation into economic life is important both for their material and mental well-being. The active participation of people with disabilities into labour market and their integration into economic life have become more important than ever. Nevertheless, people with disabilities are less likely to be employed than people without disabilities. In this regard, OIC countries need to make some reforms and take policy-actions from labour market regulations to social security systems to address challenges faced by people with disabilities in the work life with a view to enabling them to reach better standards of living as well as maximizing their contribution to the development of their societies.

OIC countries are specifically advised to consider the following six strategic goals (SGs):

- **SG 3.1:** Develop and adopt alternative working systems
- **SG 3.2:** Encourage economic integration of people with disabilities
- **SG 3.3:** Enhance skills development of people with disabilities according to labour market needs
- **SG 3.4:** Promote effective coordination among key stakeholders and enhance intra-OIC cooperation
- **SG 3.5:** Improve the scope and delivery of social security services
- **SG 3.6:** Cope with discrimination at work
STRATEGIC GOAL 3.1: Develop and adopt alternative working systems

Labour market prospects and opportunities are important factors that affect the decisions of people with disabilities to be activate in the labour force. Their activate participation does not only make contribution to the lives of the people with disabilities but also reduces the burden on the social security systems, as they would be able to produce and earn for themselves. However, the existing working agreements and systems are strict enough to discourage many individuals with disabilities. Therefore, alternative working arrangements such as teleworking and flexible working are needed to accommodate for the special conditions of people with disabilities. Alternative arrangements need to be regulated and promoted in OIC countries to ensure that they are effectively considered and implemented by the public and private sector.

Actions

3.1.1 Consider devising alternative working systems including teleworking and flexible working systems in the labour market with a view to easing transition of people with disabilities from home to work

3.1.2 Make required legislative changes to encourage people with disabilities to remain active in the labour market such as through promoting flexible work arrangements including consultative, temporary or part-time positions

3.1.3 Make necessary reforms to eliminate unnecessary steps and high-level of bureaucracy in hiring people with disabilities

3.1.4 Develop new frameworks and regulations to benefit from the experience of people with disabilities as consultants and advisors in both the public and private sector

3.1.5 Consider developing alternative working systems with a view to optimizing work-life balance that would allow people with disabilities to fulfil their family responsibilities as well as meet their healthcare needs

3.1.6 Promote the supportive employment modality for people with disabilities that means extending additional support to be able to find, secure and retain a job

STRATEGIC GOAL 3.2: Encourage economic integration of people with disabilities

OIC countries need to encourage people with disabilities to partake in the economic productivity. Various forms of incentives and awareness campaigns aimed at attracting people with disabilities into the labour force would lead to have societies that are more inclusive. Encouraging people with disabilities to integrate into the economic system would help to have socially healthier and economically less dependent populations. With the growing number of people with disabilities in OIC countries and increasing pressure on social security systems, encouraging people with disabilities to participate in the labour force would provide a foundation of self-sufficiency as well as help to increase the overall well-being in OIC countries.

Actions

3.2.1 Develop financial and non-financial incentive mechanisms and tax schemes to motivate people with disabilities to stay active in the labour market
3.2.2 Find out major challenges faced by people with disabilities that motivate them to be inactive in the labour market and prepare a roadmap to address such challenges faced by them.

3.2.3 Identify among existing statistical indicators and develop new ones in order to measure and review the progress in dealing with factors that discourage people with disabilities to be active in labour market.

3.2.4 Organise awareness-raising and promotion programmes for people with disabilities to equip them about the importance of labour force participation and encourage them to stay economically active in the market.

3.2.5 Develop modalities for recognising and validating skills and competences acquired outside formal education.

3.2.6 Consider introducing special employment quotas for job seekers with disabilities.

3.2.7 Develop standards on reasonable accommodation, including assistive technology for people with disabilities at the workplace.

3.2.8 Include people with disabilities into entrepreneurship development training programmes and microfinance schemes.

**STRATEGIC GOAL 3.3: Enhance skills development of people with disabilities according to labour market needs.**

Many OIC countries suffer from skill mismatch, which translates into structural unemployment and lower economic growth and productivity. In order to contribute to the elimination of market inefficiencies and foster the employment of people with disabilities in a productive manner, the skills of people with disabilities should be developed to meet the needs of certain sectors of the economy. Different strategic actions as outlined below can serve to upgrade the skill-sets of people with disabilities that could positively contribute to the public and private sectors.

**Actions**

3.3.1 Empower people with disabilities into economic activities through promoting life-long education and vocational training with a view to equipping them with necessary skills.

3.3.2 Improve the employability of people with disabilities by adjusting workplace environments to the physical and mental capacities of these people.

3.3.3 Conduct diagnostic studies to assess the profile of the inactive people with disabilities and understand the needs for skills development according to labour market needs.

3.3.4 Strengthen the capacity of the social partners to contribute to dynamic life-long learning programmes.

3.3.5 Upscale investments into the technical and vocational education and training system (TVET) for inactive people with disabilities that are motivated for work.

3.3.6 Improve the technical and vocational education and training system (TVET) and ensure that it caters to the needs of people with disabilities as well as employers.
3.3.7 Ensure good quality data on the respective employment possibilities and related gains associated with different qualification levels for people with disabilities

3.3.8 Develop a Skill Recognition System (SRS) to identify and verify prior skills and experiences gained at work over years, which could enable the shift to new jobs easy and comfortable as well as facilitate the move from informal to formal economy

3.3.9 Improve dialogue with representatives of the private sector to provide people with disabilities on-the-job training with a view to facilitating transfer of knowledge

3.3.10 Develop inclusive policies and mechanisms to ensure all interested people with disabilities can reach labour market services provided by relevant public institutions both in rural and urban areas such as through easing their accessibility to employment agencies

3.3.11 Design and implement targeted education programmes to improve skills of people with disabilities living especially in rural areas

3.3.12 Develop key performance indicators to better monitor inactivity rates among people with disabilities especially living in rural areas

3.3.13 Develop mechanisms to monitor and assess the challenges faced by people with disabilities in obtaining necessary skills and qualifications needed for their employment

3.3.14 Improve data and monitoring capacities with a view to regularly monitoring the education and employment status of people with disabilities

**STRATEGIC GOAL 3.4: Promote effective coordination among key stakeholders and enhance intra-OIC cooperation**

To improve the labour market and economic integration of people with disabilities in OIC countries various actors in the private and public sector need to coordinate in an effective manner. Health care institutions, various ministries and the private sector stakeholders should work to create effective mechanisms that would contribute to the integration of people with disabilities into the economy. The different experiences, good practices and knowledge of OIC countries can be shared amongst each other to improve the policies, skills and institutional arrangements for the well-being of people with disabilities across member states.

**Actions**

3.4.1 Enhance coordination among key stakeholders (e.g. Ministry of Social Affairs, Ministry of Labour, and Ministry of Health) to improve labour market prospects for people with disabilities

3.4.2 Promote and ensure a successful cooperation between national employment centres and health institutions to improve employability of people with disabilities by taking their healthcare needs into consideration

3.4.3 Raise awareness among employers about the potentials of people with disabilities at work in coordination with representatives of the public and private sector

3.4.4 Review best-practices and policies implemented in OIC countries in encouraging people with disabilities to be active in the labour market
3.4.5 Promote sharing and transferring country experiences regarding improving skills set of people with disabilities among OIC countries

3.4.6 Encourage the coordination mechanisms among key stakeholders in enhancing local skill solutions and customized employment services for people with disabilities

3.4.7 Ensure that labour market institutions develop and maintain a database and disseminate timely information on jobs, skills, learning and training opportunities for people with disabilities

3.4.8 Monitor trends in indicators on workforce with disabilities to prepare better policy-responses in a timely manner

STRATEGIC GOAL 3.5: Improve the scope and delivery of social security services

Social security services need to go beyond providing some basic healthcare services for people with disabilities where they should have schemes that are aimed at encouraging and supporting them to stay active in the job market. New regulations in social security services that enable privileges and awards designed for people with disabilities could create new incentives for them to enter the workforce; consequently, decreasing the burden on the social security system while giving opportunities for them to reach better standards of living.

Actions

3.5.1 Enhance comprehensive social security schemes and other social protection mechanisms for people with disabilities

3.5.2 Consider providing incentives for people with disabilities in social security services to promote the idea of being active in the labour market

3.5.3 Devise and implement both online and offline job search assistance programmes with a view to improving match between employer and employee, and reducing time and cost for job search and providing training for people with disabilities on these programmes

3.5.4 Promote community-based rehabilitation programmes to assist people with disabilities in their inclusion and integration into work life

3.5.5 Take measures to address tax evasion and avoidance of social contributions, labour laws and regulations that lead to higher informality among workforce with disabilities

3.5.6 Benefit from the potentials of unique instruments available in OIC countries such as Zakat, Sadaqah, Waqf and volunteerism to scale up scope and delivery of social security services particularly for people with disabilities

3.5.7 Develop policies that facilitate job retention and return to work for persons who acquire a disability, including for persons with mental health conditions

STRATEGIC GOAL 3.6: Cope with discrimination at work

Many people with disabilities have some concerns while going into the labour market due to disability based discrimination and unfair treatment. Such biases and maltreatment in the work atmosphere need to be addressed to create a safe, comfortable and discrimination-free workplace environment for people with disabilities. Private and public sector employers need to be trained to overcome the
preordained prejudices and biases against people with disabilities. Rules and regulations of the labour market in many OIC countries need to be reviewed in a manner that prevent disability-based discrimination. Increasing cultural and social awareness that promotes social norms that are free of biases towards people with disabilities would also help overcome such challenges.

**Actions**

3.6.1 Respect, promote and realize equality of work opportunity and treatment for people with disabilities without any discrimination

3.6.2 Combat discrimination, prejudice and hatred on the basis, disability, age, gender or any other grounds in the labour market

3.6.3 Encourage employers to be more inclusive by hiring people with diverse backgrounds including people with disabilities as long as they have basic skills to carry out their duties

3.6.4 Develop mechanisms to discourage employers for implementing any disability-based discrimination in hiring processes

3.6.5 Strengthen the national capacity of labour inspection systems and dispute resolution mechanisms to monitor and implement the legislations related to non-discrimination at work based on disability

3.6.6 Take all practicable measures to foster public understanding and acceptance of the principles of non-discrimination at work based on disability

3.6.7 Cooperate with civil society organisations that are specialized on skills development of people with disabilities and employment issues

3.6.8 Review social security measures with a view to providing rights of people with disabilities in labour markets at international standards

3.6.9 Review existing rules and regulations in labour markets from a disability-based discrimination perspective and revise them, if necessary, to fight with disability-based discrimination at workplace

3.6.10 Provide training to employers and employees to cope with disability-based discrimination at workplace

3.6.11 Raise awareness in the society and among employers to overcome some challenges such as social norms and misbeliefs that hinders employment of people with disabilities

**4.4 Governance**

Governance refers to different programs, policies and systems employed to deliver services to individuals at the local, national or international level. Governance structures play an important role to improve the well-being of people with disabilities. With the effective programs and initiatives, it is also possible to increase the participation of people with disabilities into the socio-economic life. Although some OIC countries have in place various types of governance structures and programmes to assist individuals with disabilities, many are lacking specific and targeted services specially designed to cater to the needs of them. In this regard, OIC countries need to create inclusive and directed policies and programs that would improve the state of people with disabilities in all walks of life. These
initiatives need to enable people with disabilities to reach a higher standard of living and maximize their productive role in their respective societies.

The following specific strategic goals (SGs) are identified to improve governance initiatives for people with disabilities:

- **SG 4.1**: Review social security schemes
- **SG 4.2**: Increase participation of people with disabilities in political processes
- **SG 4.3**: Strengthen and create organizations operated by and for people with disabilities
- **SG 4.4**: Increase budgetary allocations specifically for initiatives and programs aimed at people with disabilities

### STRATEGIC GOAL 4.1: Review social security schemes

Having strong social security networks would protect people with disabilities and help them to meet their basic needs. Many people with disabilities also have a difficult time meeting their extensive medical costs and other possible equipment that may be required for them to function normally. Comprehensive social security arrangements would decrease the burden on people with disabilities and help them to become productive members of the society. Across OIC countries, social security networks are underdeveloped when compared to developed countries and do not specifically target people with disabilities who require different provisions compared to people without disabilities. Therefore, it is vital to review existing social security schemes with a view to improving their scope, effectiveness and outcomes.

#### Actions

4.1.1 Undertake all-inclusive research to identify the specific needs of people with disabilities to restructure the foundation of social security structures

4.1.2 Make necessary legislative changes that will allow for the creation of effective and inclusive social security networks for people with disabilities

4.1.3 Consider reviewing the necessary and feasible budgeting requirements for developing new social security schemes for people with disabilities

4.1.4 Raise awareness on the existence of a social security programme for people with disabilities

4.1.5 Ease application and registration processes for people with disabilities to benefit from social security schemes

4.1.6 Monitor and evaluate the impact of existing social security schemes targeting people with disabilities in order to alter or continue with such schemes

4.1.6 Organize knowledge and experience sharing programmes among OIC countries to find out best practices and learn from each other’s strengths and weaknesses regarding social security schemes

### STRATEGIC GOAL 4.2: Increase participation of people with disabilities in political processes

People with disabilities tend to be excluded from political processes that also have an impact on their lives. Across OIC countries, some prevailing stereotypes serve as barriers to people with disabilities right to vote, right to partake in political action or other political practices such as to assume political leadership. To strengthen inclusiveness and increase the level of participation, the involvement of
people with disabilities in the political processes would play a key role. This would also help people with disabilities to feel more incorporated and integrated into the political and social life.

**Actions**

4.2.1 Ensure accessibility in political processes and elections by providing physical, linguistic, informational and infrastructural arrangements for people with disabilities

4.2.2 Remove legal and administrative barriers (such as restriction on legal capacity) to become more inclusive

4.2.3 Increase representation of people with disabilities at the local and national level and consider implementing quota schemes allocated for people with disabilities

4.2.4 Provide funding to accommodate the participation of people with disabilities

4.2.5 Raise awareness in the society to combat against stereotypes and prejudices that restrict people with disabilities participation in political processes

4.2.6 Provide education to people with disabilities on their rights and processes of participation into political processes

**STRATEGIC GOAL 4.3: Strengthen and create organizations operated by and for people with disabilities**

Although there are organizations in various OIC countries that work for people with disabilities, there is a need to increase the number of organizations that are operated by and for people with disabilities. People with disabilities are not a homogenous group and different organizations that work various types of disabilities play critical roles in many OIC countries. Not only these types of organizations provide employment, productivity and self-satisfaction for people with disabilities, but also, they bring individuals together that have common experiences and help them to find solutions to issues they mutually face. As part of the governance, organizations in OIC countries need to consider and create local and national establishments that are run by and for people with disabilities.

**Actions**

4.3.1 Provide incentives and monetary support for the establishment organizations by and for people with disabilities

4.3.2 Provide training to various groups (physical, mental, emotional etc.) of people with disabilities in organizational operations

4.3.3 Create cooperation links between local/national NGOs and people with disabilities to share knowledge and expertise

4.3.4 Ease establishment processes for organizations serving to people with disabilities

4.3.5 Provide infrastructural support in the form of office allocation for organizations established by people with disabilities

4.3.6 Facilitate intra-OIC cooperation to enable interaction of organizations located in various OIC countries that are targeting people with disabilities
STRATEGIC GOAL 4.4: Increase budgetary allocations specifically for initiatives and programs aimed at people with disabilities

Governance structures, programs and incentives that are targeting people with disabilities all require budgetary allocations in their execution phases. Moreover, in order to provide such services in good quality the required budgetary allocations need to be scaled up. For example, many OIC countries are lagging behind the world average in terms of the share of allocated budget on health spending. As a result, many people with disabilities are not able fully benefit from provided health services. In this respect, OIC countries need to review their budgeting practices to make them more aligned for the needs of people with disabilities.

Actions

4.5.1 Increase budgetary allocations on people with disabilities

4.5.2 Consider having private sector partnerships to fund programs and initiatives that will serve both people with disabilities and the private sector

4.4.3 Utilize possible funding opportunities from international organizations in support of people with disabilities.

4.4.4 Employ Islamic funding mechanisms such as Sadaqah, Waqf and charitable volunteerism to ensure financial support for different programme for people with disabilities

4.4.5 Develop intra-OIC funding mechanisms to enhance financial assistance to relatively underdeveloped OIC countries with a view to supporting their programs regarding individuals with disabilities

4.4.6 Consider establishing a OIC-level Waqf and/or dedicated Fund to support programmes and initiatives for people with disabilities with the support of member countries and relevant OIC institutions including the Islamic Development Bank

4.5 Enabling a Supportive Environment

Environments – physical, social and attitudinal – play an important role in either disabling people with impairments or fostering their productive potential, participation and inclusion. Enabling a supportive environment includes important interventions in the area of roads, buildings, transportation, information and communication. These different domains are interconnected and without the proper infrastructural adjustments, accommodating people with disabilities becomes extremely difficult. Many of OIC countries are lacking the physical and social infrastructure to enable a supportive environment for people with disabilities.

The following set of strategic goals have been identified to enhance both the physical and social conditions that are important for people with disabilities in OIC countries.

- SG 5.1: Develop effective policies and regulations to ensure an enabling environment for people with disabilities
- SG 5.2: Address barriers in the physical environment including buildings and roads to ease the mobility of people with disabilities
- SG 5.3: Promote the use of technologies and methods that are accommodating to the needs of persons with disabilities in public and private settings
- **SG 5.4**: Support a socially enabling environment for people with disabilities to function in their daily lives without stereotypes, discrimination or prejudices

**STRATEGIC GOAL 5.1**: Develop effective policies and regulations to ensure an enabling environment for the people with disabilities

People with disabilities require various forms of particular arrangements for their surrounding environment to become enabling. An important aspect of this is the development of policies and regulations that reinforce an environment where people with disabilities can function normally without hardships in their daily lives. The below action points would be important to build the policy and regulative framework in OIC countries to develop an enabling supportive environment for people with disabilities.

**Actions**

5.1.1 Develop regulatory frameworks that set minimum standards for the incorporation of physical structure that are accommodating to people with various disabilities

5.1.2 Enact and implement legislative policy that protects the rights of people with disabilities in terms of their mobility rights, access rights and information rights

5.1.3 Ensure that regulations and policies target not only people with disabilities in cities but also ones in rural areas

5.1.4 Develop policies and regulations that support the housing and health needs of people with disabilities

5.1.5 Enact strong regulatory frameworks that prohibit all forms of discrimination and mistreatment of individuals who have any form of impairment

**STRATEGIC GOAL 5.2**: Address barriers in the physical environment including buildings and roads to ease the mobility of people with disabilities

The physical infrastructure are very friendly for many people with disabilities in the developing world. Many OIC countries also face with the challenge that limits the mobility of people with disabilities. Due to the weak planning and the lack of disability approach in the construction phases, most often infrastructures are not able to meet the expectations of people with disabilities. In order to build an enabling environment for people with disabilities certain critical gaps between policies and enforcement mechanisms in OIC countries need to be addressed.

**Actions**

5.2.1 Develop follow-up and enforcement mechanisms that adhere to regulations that support of individuals with disabilities infrastructural necessities

5.2.2 Raise awareness by providing training for engineers and technical persons regarding the needs and expectations of people with disabilities in physical environments

5.2.3 Device policies that enhance accessibility of transportation facilities including roads and sidewalks for people with disabilities such as visual impairment sidewalk guides, voice-recognition crosses at traffic lights and other assistive tools to make the life of people with disabilities easier
5.2.4 Set the standards for releasing budget allocations for infrastructure projects in order to ensure that they are also capable of serving the needs of people with disabilities

**STRATEGIC GOAL 5.3:** Promote the use of technologies and methods that are accommodating to the needs of persons with disabilities in public and private settings

In many OIC countries people with disabilities face with various challenges in their daily lives. It is not only stemming from the lack of proper infrastructure but also due to lack of proper knowledge and technologies to benefit from existing arrangements. In many OIC countries, people with and without disabilities need to be provided basic training and information on how people with disabilities can benefit from public and private services including banking, government, and education.

**Actions**

5.3.1 Provide training programmes on technological and other tools that can facilitate lives of people with disabilities in their daily lives

5.3.2 Make sure that certain important institutions for daily use are accommodative to people with disabilities such as banking and transportation

5.3.3 Provide platforms in government services need to specifically address the needs of people with disabilities. These may include advisory staff who are trained to deal with people with disabilities and/or automated technological platforms that will assist people with various impairments.

5.3.4 Benefit from technological tools to assist people with disabilities participate in different public events, campaigns and community level participation

**STRATEGIC GOAL 5.4:** Support a socially enabling environment for people with disabilities to function in their daily lives without stereotypes, discrimination or prejudices

The physical structures and policies are crucial to have an enabling environment for people with disabilities. Nevertheless, it is also essential to create a socially enabling environment to compliment these structures. Raising awareness amongst the public along with professionals, employers, schools and other institutions is important to provide a socially enabling environment. Due to stereotypes and prejudices about people with disabilities, the social environment sometimes can become a barrier for individuals with impairments. In this picture, OIC countries need to take action to transform the social context to be more welcoming and neutral towards people with disabilities so that they can practice their rights in a safe and secure environment with comfort.

**Actions**

5.4.1 Organize public awareness campaigns that provide information on people with disabilities to increase public knowledge on them and their needs

5.4.2 Organize awareness raising campaigns and training for specific sectors such as health officials, families, employers, government social workers

5.4.3 Provide counselling to people with disabilities facing hardships (emotional distress, depression, feelings of exclusion), and to the other members of society living or working with individuals with impairments
4.6 Culture and Islam

A critical dimension that needs to be included into the policy agenda to provide a better quality of life for people with disabilities is the culture and Islam. The policies in this area can play important role to fight against discrimination towards people with disabilities and to promote solidarity in society to empower people with disabilities. In this context, policies on how to combat negative stereotypes and violence directed at people with disabilities, strengthen and promote caregivers and, promote and facilitate the spirit of solidarity and mutually beneficial relations would help to improve the state of people with disabilities in OIC countries.

The following specific strategic goals (SG) can be used to address the challenges faced at the cultural front for people with disabilities in OIC countries:

- **SG 6.1:** Combat stigma and discrimination towards people with disabilities in society at large and promote positive images of people with disabilities
- **SG 6.2:** Strengthen the spirit of solidarity in society
- **SG 6.3:** Eliminate violence and abuse against people with disabilities
- **SG 6.4:** Support and strengthen caregiving families and institutions

**STRATEGIC GOAL 6.1:** Combat stigma and discrimination towards people with disabilities in society at large and promote positive images of people with disabilities

Exposure to negative attitudes in the social life has serious impacts on the mental health and well-being of people with disabilities such as by leading less economic participation, higher rates of poverty, restricted participation and exclusion. Organizing wide spread campaigns about people with disabilities will be useful in not only changing the perspective towards people with disabilities but also promoting respect for them. Moreover, carrying out research would help policy makers to identify perceptions of society and reveal the areas that need greater awareness raising and promotion to combat with discrimination and stigmatization towards people with disabilities.

**Actions**

6.1.1 Raise awareness about disability and promote respect for people with disabilities through media, public opinion makers, information programmes and campaigns to change cultural attitudes

6.1.2 Cope with misbeliefs and prejudices on disability and encourage full participation of people with disabilities in society especially through promoting cultural events and festivals

6.1.3 Promote and inform the society at large about Islam’s positive attitudes towards people with disabilities and specific injunctions regarding how they should be treated through mobilizing religious leaders, mosques, and faith-based organizations

6.1.4 Reinforce Islamic values and teachings of charity, respect, care and tolerance in society through campaigns and different platforms

6.1.5 Encourage the use of favorable traditional practices for embracing people with disabilities

6.1.6 Conduct research on how disability has been perceived in OIC countries and identify cultural practices
STRATEGIC GOAL 6.2: Strengthen the spirit of solidarity in society

Strengthening solidarity and cohesiveness in the society would not only benefit people with disabilities but also the society at large. In this respect, capacities of local and national institutions can be improved, and different platforms for easing communication and fighting against discrimination may be employed to increase the spirit of solidarity. Greater solidarity, mutual respect, and effective communication will function to decrease the negative impact and biases aimed at people with disabilities while allowing different segments of society to learn and communicate with each other.

Actions

6.2.1 Raise through public education an awareness on contributions of people with disabilities to family and communities

6.2.2 Promote examples of disabled men and women who have significantly contributed to society, development, or community from different sectors (private sector, civil activism, politics, religion, etc.) to fight against negative stereotypes through media and cultural events

6.2.3 Benefit from prominent cultural leaders to foster greater knowledge among people with disabilities of their rights and how to exercise them

6.2.4 Train and sensitize policy-makers on disability and stereotyping to enable them to recognize prejudicial cultural attitudes in existing disability related policies and institutional practices

6.2.5 Develop public platforms and cultural spaces to facilitate communication, connection, and activities in all walks of life for people with disabilities, and fight against segregation or exclusion based on disabilities

6.2.6 Establish alliances between public institutions and civil society to strengthen the family institution that is an important to caregiver institution for people with disabilities

6.2.7 Take appropriate measures to ensure the participation of people with disabilities in cultural activities and associations to develop and utilise their intellectual, spiritual and creative potential for their own benefit and that of their communities

6.2.8 Promote an environment where people with disabilities could participate on an equal footing in civil society

6.2.9 Support the creation and strengthening of associations and organizations of people with disabilities as well as families and caregivers, and their integration into existing disability organizations, and facilitate dialogue among such groups

6.2.10 Involve people with disabilities in all stages of the design, development, implementation, monitoring and evaluation of disability policies and programs at the cultural front

6.2.11 Improve data and monitoring capacities of public institutions such as municipalities to regularly monitor the participation and inclusion of people with disabilities in social life
STRATEGIC GOAL 6.3: Eliminate violence and abuse against people with disabilities

In many societies, violence and neglect against people with disabilities, whether it be at the home, work or in a public area, is a growing concern. In order to eliminate violence and neglect against people with disabilities, OIC countries should introduce policies that penalize all forms of violence, neglect and abuse of the people with disabilities. Role models in society along with community and religious leaders must advocate for eradication of violence against the people with disabilities. Islamic values and teaching on the respect and care for the people with disabilities must be disseminated amongst the public. Professionals should have proper training and awareness of the special attention that the people with disabilities might require.

**Actions**

6.3.1 Eliminate all forms of neglect, abuse and violence of persons with disabilities in social life.

6.3.2 Implement programmes with community leaders to prevent and address domestic violence towards people with disabilities.

6.3.3 Carry out nation-wide campaigns in collaboration with religious leaders against abuse and neglect towards persons with disabilities and raise awareness in society to work together to prevent abuse and neglect.

6.3.4 Improve coordination among different public institutions to prevent harmful traditional practices particularly in rural areas aimed at people with disabilities.

6.3.5 Provide services (legal assistance, counselling and psychological support) and programmes to people with disabilities who have experienced violence, abuse and neglect to promote recovery and avoid trauma.

6.3.6 Develop policies specific to women with disabilities since they face greater risk of physical and psychological abuse.

6.3.7 Establish monitoring mechanisms to undertake investigations and issue reports on violence against people with disabilities, especially women with disabilities.

6.3.8 Improve data collection and monitoring mechanisms at the intra-OIC level on the various forms of violence and their impact on people with disabilities.

6.3.9 Develop training programs for medical personnel and informal caregivers on how to recognize and deal with victims of domestic violence effectively.

STRATEGIC GOAL 6.4: Support and strengthen caregiving families and institutions

Considering the vital role they play, caregiving families and institutions need to be supported and strengthened for a better life for both people with disabilities and their caregivers. Families need to be educated about family-oriented values and the need to benefit from Islamic values and teachings with a view to promoting the idea of caregiving for people with disabilities. The importance of caregiving to
people with disabilities needs to be widely recognized in the society. Campaigns and training programmes on volunteer caregiving would play a key role to widespread this practice.

**Actions**

6.4.1 Empower parents, family members, and caregivers of people with disabilities through information, training and mobilizing financial, legislative, and cultural means

6.4.2 Implement policies and programs that strengthen families that are inclusive of people with disabilities

6.4.3 Enhance the caregiving abilities of families through the provision of long-term support and services

6.4.4 Consider the views and experiences of caregivers while developing policies for people with disabilities

6.4.5 Learn from traditional values and norms to inform legislation about family values and the care of people with disabilities

6.4.6 Identify, support and strengthen traditional support systems to enhance the ability of families and communities to care for disabled family members

6.4.7 Support the creation and strengthening of associations and organizations of caregivers to strengthen solidarity among them

6.4.8 Develop community-based health and social care services for the continuity of care between different care providers and layers of the care system

6.4.9 Encourage effective collaboration between formal and informal caregivers such as families, religious leaders, school teachers, public officers and local organizations

6.4.10 Collaborate with the public and private sectors to ensure appropriate support is provided for informal caregivers, especially for women

6.4.11 Carry out research and identify best practices to reduce deficiencies in the care system for people with disabilities

6.4.12 Implement interventions to address family crises in which people with disabilities exist, and provide counselling and support to families and care providers under such circumstances

6.4.13 Provide services and other facilities (e.g. day centres, cultural centres, self-expression groups) to provide support for people with disabilities and their families

6.4.14 Benefit from Islamic values and teachings with a view to promoting and encouraging people and families on the importance of caregiving for people with disabilities
6.4.15 Take steps to ensure the provision of assistance to people with disabilities in cases where informal support is unavailable, has been lost, or is not desired

6.4.16 Develop a human resource strategy for disability, including the identification of gaps, specification of needs, training requirements and core competencies for families, care givers and officials
People with disabilities have made great contributions to the development of their countries in various forms throughout their life span. Given their potentials, the prevailing level of their contributions and participation into socio-economic life is very limited in OIC countries due to a number of reasons from weak institutional arrangements to underinvested physical infrastructure. As a result, the untapped potentials of people with disabilities in developing countries including OIC countries emerge as an important developmental challenge.

On the other hand, as the official statistics reveal, the number of people with disabilities in OIC countries has been on the rise over the last decades. This positive trend has started to put a pressure on policy-makers on how to best address this daunting task and continue to provide good quality services for the growing number of people with disabilities that they can sustain their life in comfort. In order to ensure best living standards and improve the well-being of people with disabilities, OIC countries need to take actions and implement a set of policies both at the national as well as intra-OIC cooperation levels.

This requires OIC countries to make a commitment by taking significant steps in policy-making on people with disabilities. Such commitment should involve utilization of concerted action frameworks including experience sharing and transfer of knowledge that would lead to development of constructive cooperation among the relevant fields of capacity building, education, rehabilitation and care services. Moreover, national strategies on people with disabilities need to be aligned to contemporary needs and developments to enhance their strategic capabilities and capacities both for the short- and long-terms.

While developing and implementing such a Plan of Action, it is highly important to benefit from the experiences, instruments, and mechanisms of regional and international institutions (e.g. UN, WHO, World Bank) as well as national-level initiatives of OIC member countries. In this picture, it is also imperative to benefit from the experiences of civil society organizations active in this domain.

On the other hand, improving the state of people with disabilities in OIC countries require establishment of effective coordination mechanisms among stakeholders at the national level. It is also critical to develop such coordination mechanisms at the intra-OIC level with the participation of relevant OIC institutions as well as OIC Member States under the coordination of the OIC General Secretariat for the betterment of people with disabilities.

The concerted efforts need to be formulated in a way to implement policy-actions on people with disabilities in a timely and coordinated manner. The coordination mechanism should be coupled with a reporting system in order to collect up-to-date information about planned and completed activities/policies undertaken by OIC countries as well as relevant OIC institutions. OIC countries should also develop their capacities to collect, collate and report disaggregated data on people with disabilities that would allow to monitor discrepancies such as female versus male, rural versus urban, and youth versus elderly populations.

People with disabilities have great potential to help achieve sustainable development in OIC countries given their stock of knowledge, experience and skillset. By neglecting such a significant segment of a society and without addressing challenges faced by them, it is not likely that member countries will achieve sustainable development. It is therefore essential to design strategies and take policy actions immediately to improve their status. The OIC General Secretariat, relevant OIC Institutions and
member countries need to develop, adopt and implement a Plan of Action at the OIC level in order to provide a proper guidance and list action points with a view to improving the well-being of people with disabilities living in OIC countries as quick as possible. It is hoped that this draft version of the OIC Plan of Action on People with Disabilities would be considered and adopted at a relevant OIC fora to be implemented immediately by OIC countries with a view to addressing the current and emerging challenges related to people with disabilities.