

ASSESSMENT REPORT ON
DISABILITY INCLUSIVENESS
IN POLICIES AND
PROGRAMS OF SEXUAL
REPRODUCTIVE HEALTH
PARTNERS

Best Practices and Gaps on the
Inclusion of Women and Girls
With Disabilities Issues in
Partners' Sexual and
Reproductive Health policy
and Programs.

National Union of Women
with Disabilities of
Uganda(NUWODU)

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ACRONYMS

SRH	Sexual Reproductive Health
RHU	Reproductive Health Uganda
STFU	Straight Talk Foundation Uganda
UHMG	Uganda Health Marketing Group
PWDs	Persons with Disabilities
SRHR	Sexual Reproductive Health Rights

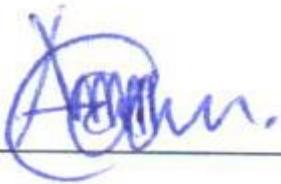
ACKNOWLEDGEMENT

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We extend our sincere gratitude to the Disabled Peoples Organization of Denmark (DPOD) for the financial contribution made towards the production of the report without which, this would not have been possible.

I therefore, appeal to our partners and other Disabled Peoples Organizations in the Disability fraternity to make full use of this report and utilize it in their organizations to pave way for disability inclusion in their programing and work.



Jolly Acen
Executive Secretary

EXECUTIVE SUMMARY

National Union of Women with Disabilities of Uganda (NUWODU) is a women-led Disabled People's Organization legally registered in Uganda with the National NGO Board (Reg. Number S.5914/3785). It was established in 1999 by a group of women and youth with Disabilities at a national conference held in Kampala-Uganda. It is an umbrella organization which brings together all categories of Women and Girls with Disabilities to have a stronger voice to advocate for their rights and equal opportunities within women rights movement, the disability movement, Government and all other development partners nationally and internationally.

NUWODU has conducted an analysis of policies and programs of the different Sexual Reproductive Health(SRH) partners to ascertain disability inclusiveness in their programming and work in general. The partners assessed included; Reproductive Health Uganda, Sexual Reproductive Health Rights Alliance, Reach a Hand, Straight Talk Foundation Uganda (STFU), Uganda Health Marketing Group (UHMG), and ISIS WICCE among others. The study in particular analyzed how the SRH partners mainstream and include issues of Women and Girls with Disabilities in the programs and policies. Therefore, the report documents the best practices and gaps in inclusion issues of Women and Girls with Disabilities in the programs and policies of the partners studied. The report suggests the recommendations to undertake to replicate the best practices and address the gaps identified.

Key Findings

Generally, some partners' staff demonstrated awareness and knowledge of key issues that affect Women and Girls with Disabilities in areas of access to SRH services and information.

In organizations like RHU there are good efforts to include disability concerns in SRH programs, plans, policy papers, reports and publications, while other organizations continue to design programs, plans, policy papers, reports and publication which do not reflect any disability dimension.

There are no disability specific indicators in the partners monitoring and evaluation systems. The methods of data collection, analysis and synthesis within organizations do not specify disability/sex/gender disaggregated data and analysis.

In most partners visited, It was observed physical inaccessibility is still a challenge as there were no existence of ramps /elevators to enable PWDs access the organizations and even though some had ramps, service providers noted that sometimes they can't communicate well with the clients that have hearing impairments and no sign language interpreters in their premises hence affecting the deaf in equally accessing the SRH services and information.

Though most organizations have a few disability specific interventions, these are mostly mixed with other cross cutting issues so it is difficult to ascertain what interventions and what budget is allocated on disability.

Therefore we can say that disability inclusion in particular focusing on Women and Girls with disabilities in most partner policies and programs over the whole planning and implementation cycle is incomplete and it is not yet systematic and consistent across SRH policies, programs, research, projects and activities.

Highlighting Good Practices

Some organizations indicated disability awareness and top level management commitment on the need to strengthen its own knowledge on disability issues and capacity for disability inclusion. For instance; RHU have included disability sessions in their training manuals for health service providers on sexuality education that they usually use when training SRH Service providers. Straight Talk Board of Directors has a board member who is a PWD though a male, RHU also has some staff with disabilities.

Some organizations have been implementing specific SRH interventions targeting youth with disabilities including girls and young women for instance; RHU which has organized various camps targeting youth with disabilities. ISIS-WICCE is implementing a project focusing on women and SRHR in Northern Uganda. Other organizations such as UHMG also reported that they have designed proposals on SRH focusing on PWDs and are likely to be funded.

Some organization's policies are disability sensitive and require budgets that are disability responsive targeting the needs of Girls and Women with Disabilities.

NUWODU engages development partners and interests them in networking and collaborative ventures with Agencies/organizations that advocate for the rights of PWDs.

Main Recommendations

These findings call for NUWODU and all partners assessed to replicate the best practices and address the gaps identified. The following are some of the key recommendations;

1. There is need to sensitize service providers on SRH needs of Women/Girls with Disabilities for better support and for all stakeholders to enforce the provision of PWDs friendly SHR services and information.
2. All the partners in SRH work should develop organization disability inclusion policy guidelines for disability inclusion in particular, focusing on Women and Girls with Disabilities to equally access SRH services and information. It should indicate that all organizational planning processes and documents at all levels provide for the collection and inclusion of data disaggregated by disability/ sex and gender, disability analysis of disability specific issues and the identification of specific disability indicators, interventions, outputs and budgets. The guidelines should also provide for monitoring and evaluation systems at all levels to capture and report on disability outcomes; **or** To increase accountability and capacity of partners staff, design and implement an internal disability policy and a disability inclusion strategy should be put in place.
3. Development partners implementing SRH projects/programs should develop and implement an Action Plan to promote disability inclusion and taking into consideration of gender dimensions of disability in all spheres and at all stages of project /program design, planning and management.
4. Ensure that all partners' policy documents and advocacy materials are gender and disability sensitive in terms of disability content, language and images.
5. Improve on accessibility in terms of physical accessibility to the services and access to information, use of sign language interpreters, large prints, brailled information or tactile.
6. Ensure that partners' staff, including project staff has the capacity to carry out disability and gender analysis and ensure disability analysis is done in the planning, implementation, and monitoring and evaluation processes.
7. Develop a capacity building plan on disability with a given timeframe. This should have a strong focus on disability/gender analysis and planning, disability indicators and budgeting as well as tailored training in relation to specific advocacy/communications for staff.
8. Boosting expertise and cooperation on disability issues through ongoing partnerships should continue as part of a long-term strategy.

1.0 BACK GROUND AND INTRODUCTION

NUWODU has a strong focus on rights issues of Girls and Women with Disabilities. Its work is to build on the legitimacy of economic, social, cultural and political rights gained through the International, regional and national laws and policies. NUWODU as an umbrella organization has the mandate to promote the right for equal access to sexual and reproductive health information and services for all Girls and Women with Disabilities in Uganda. To achieve this, it engages different actors both public and private to promote inclusiveness for issues pertaining to Girls and Women with Disabilities.

It's against this background that NUWODU conducted an analysis of policies and programs of the different Sexual Reproductive Health(SRH) partners to ascertain disability inclusiveness in their programming and work in general. The partners assessed included; Reproductive Health Uganda, Sexual Reproductive Health Rights Alliance, Reach a Hand, Straight Talk Foundation Uganda (STFU), Uganda Health Marketing Group (UHMG), and ISIS WICCE among others. The study in particular analyzed how the SRH partners mainstream and include issues of Women and Girls with Disabilities in their programs and policies. Therefore, the report documents the best practices and gaps in inclusion issues of Women and Girls with Disabilities in the programs and policies of the partners studied. The report suggests the recommendations to undertake to replicate the best practices and address the gaps identified.

2.0 PURPOSE AND OBJECTIVES OF THE STUDY

2.1 Purpose of the Assignment

The overall purpose of the study was to conduct a desk analysis of partners' policies and programs to ascertain disability inclusiveness in their programming to enable NUWODU get recommendations to influence inclusion of issues of Women and Girls with Disabilities in the different Civil Society Organizations providing SRH services for equal access to sexual and reproductive health information and services.

The findings will inform NUWODU and other service providers to lobby, advocate and create awareness campaigns on the need to mainstream issues of Girls and Women with Disabilities among SRH partners and other Civil Society Organizations and advocate for access to Sexual Reproductive Health services.

2.2 Specific objectives

The specific objectives of the study were the following;

- a. To conduct an analysis of the SRH partner policies and programs relating to equal access to sexual and reproductive health information and services to all including Women and Girls with Disabilities.
- b. To identify information and service gaps on SRH partner policies. Specifically, the study will seek to analyze the information and service gaps on Partners SRH policies and programs.
- c. To generate findings that will inform SRH partners and other Civil Society Organization the need to mainstream Women and Girls with Disabilities in the provision of health information and services in Uganda.
- d. To provide recommendations on how SRH partners can mainstream Women and Girls with Disabilities SRH issues in their work .

3.0 METHODOLOGY AND APPROACH

The analysis targeted the policies and programs of Sexual and Reproductive Health partners. The partners assessed included; Reproductive Health Uganda, Sexual Reproductive Health Rights Alliance, Reach a Hand, Straight Talk Foundation Uganda (STFU), UHMG, and ISIS WICCE among others. This entailed use of information from both secondary and primary sources and involved key stakeholders. Secondary information collection involved a review of relevant organizational program and policy documents like the strategic plan, policies, program documents, and reports.

The study took a four step process including the preparatory stage, review of organizational related documents, consultations with key staff and other partners, analysis and final report writing;

The consultant held preliminary consultations with NUWODU to get a deeper understanding of the assignment and operations and management in order to;

- (i) Identify key issues to be addressed
- (ii) Roles and responsibilities of the stakeholders that will be involved in the entire process
- (iii) Confirm the timeline for deliverables
- (iv) Agree on the scope of work, tools and materials to be used; and agree on key themes of the inception report.

Within this period, internal consultations were held to agree on the tools and planned methods for use during the entire process among other things.

Step 2: Document Review

The document review was undertaken and a checklist to guide document review was developed and used (See Annex I for details). The documents reviewed included: project documents, activity reports, policies and strategic plans. The purpose of the review was to deepen the understanding of partners SRH activities, the extent to which the policies and plans on SRH activities are inclusive of Women and Girls with Disabilities. The consultant identified key best practices for follow-up in further consultations with the selected stakeholders.

Step 3: Organizational Assessment

Though the assignment mainly focused on the document review, the team used an organizational assessment checklist as a quick way to assess the capacity of partner organizations to deepen the understanding of partners SRH activities, the extent to which the policies, operations and programs on SRH activities are inclusive of Women and Girls with Disabilities. Disability inclusion can only be reasonably expected when organizations provide a supportive environment for staff to do so. A unique feature of the checklist is that it draws attention to four different aspects of an organization's capacity and readiness for disability and gender inclusion.

The study process used a framework and theory of change called the Gender Integration Framework (GIF) extracted from Inter action Aid Tool for Organizational Self-Assessment and Transformation that was customized to disability inclusion which suggests that transformation can only occur when four organizational dimensions are ready for disability and gender integration. These four elements are political will, technical capacity, accountability and organizational culture.

Political Will: The study assessed ways in which leaders (board of governors/members of the studied organizations) use their position of power to communicate and demonstrate their support, leadership, enthusiasm for and commitment to working toward disability inclusion and gender equality in the organization.

Technical Capacity: This assessed the level of ability and skills individuals in an organization have and need to carry out the practical aspects of disability and gender inclusion for enhanced program quality, and level of institutionalization of disability inclusion and gender equitable organizational processes.

Accountability: This looked at mechanisms by which an organization determines the extent to which it is "walking the talk" in terms of disability and gender inclusion in its programs and organizational structures.

Organizational Culture: This analyzed the norms, customs, beliefs and codes of behavior in an organization that support or undermine disability inclusion and gender equality.

The observation methodology was also used to ascertain best practices and gaps in areas of physical accessibility of women and to different services and information such as existence of ramps, accessible walk ways, wide door entries, elevators at office premises among others.

Step 4: Analysis and Compilation

The data collected was analyzed and compiled to generate conclusions on the best practices and gaps as well as recommendations. A draft report was submitted and a feedback meeting was organized and comments that arose were used to improve on the draft to make final report.

4.0 FINDINGS

4.1 Technical Capacity

Under technical capacity, the study assessed the level of ability and skills of individuals in an organization that they have or need to carry out the practical aspects of gender integration for enhanced program quality, and level of institutionalization of disability inclusion and gender equitable organizational processes.

Table1: Summary of the Key Findings in the area of Technical Capacity per Organization

S/n	Organization	Summary of the Key Findings
1	RHU	<ul style="list-style-type: none"> • Staff demonstrated awareness and knowledge of key issues that affect Women and Girls with Disabilities in areas of access to SRH services and information. • They have trained their service providers to have necessary knowledge and skills to carry out their work with disability awareness, plans, budgets, accessibility. • One of the senior managers and 3 peer educators are Persons with Disabilities though the manager is a male and 2 peer educators are female.

		<ul style="list-style-type: none"> • A cross-cutting Life Span training manual for the health service providers on sexuality education was developed and includes a module on disability. • Disability analysis to a small degree is built into the organization's programs/projects planning, implementation and evaluation procedures. Most of the projects implemented have not been disability inclusive
2	STFU	<ul style="list-style-type: none"> • To a good degree staff demonstrated awareness and knowledge of key issues that affect Women and Girls with Disabilities in areas of access to SRH services and information. • Have board members and senior managers who are Persons with Disabilities who are male. • Disability analysis to a small degree is built into the organization's programs/projects planning, implementation and evaluation procedures. Most of the projects implemented have not been disability inclusive
3	ISS-WICCE	<ul style="list-style-type: none"> • To a good degree staff demonstrated awareness and knowledge of key issues that affect Women and Girls with Disabilities in areas of access to SRH services and information. This is a women based International organisation that advocates for the rights of women without discrimination. • Staff have been trained in disability inclusion and have necessary knowledge and skills to carry out their work with disability awareness in plans, budgets and are accessible • Disability analysis to a small degree is built into the organization's programs/projects planning, implementation and evaluation procedures. Most of the projects implemented have not been disability inclusive
4	Reach A Hand	<ul style="list-style-type: none"> • To a small degree staff have been trained in disability inclusion from the principle of non-discrimination • Disability analysis to a small degree is built into the organization's

		<p>programs/projects planning, implementation and evaluation procedures.</p> <ul style="list-style-type: none"> • Most of the projects implemented have not been disability inclusive
5	Sexual Reproductive Health Rights Alliance	<ul style="list-style-type: none"> • To a small degree staff have been trained in disability inclusion focusing on the non-discrimination approach • Disability analysis to a small degree is built into the organization's programs/projects planning, implementation and evaluation procedures. • Most of the projects implemented have not been disability inclusive.
6	UHMG	<ul style="list-style-type: none"> • To a small degree staff has been trained in disability inclusion focusing on the non-discrimination approach. • Disability analysis to a very small degree is built into the organization's programs/projects planning, implementation and evaluation procedures. • Most of the projects implemented have not been disability inclusive

Generally; some partners' staff demonstrated awareness and knowledge of key issues that affect Women and Girls with Disabilities in areas of access to SRH services and information. The study noted that only two partners RHU and ISIS-WICCE to a good degree have trained their staff and service providers to have the necessary knowledge and skills to carry out their work with disability awareness. RHU developed Across Life Span training manual for the health service providers on sexuality education and this training manual includes a module on disability in collaboration with NUWODU.

It was also reported by ISIS-WICCE that it organized training for all staff on disability awareness before they started to implement their project on capacity building on governance and SRH rights with emphasis on PWDs in Northern Uganda.

Other partners also reported that the staff is disability sensitive in that when they are training, in case among the participants there are PWDs, especially those with hearing impairments, they usually get Sign Language Interpreters to assist, and use pictorials and visual images. While for those with sight challenges, they give materials to responsible partners such as schools to translate materials to Braille.

Though it was found out that there is no specific desk or Focal Point Person/officer for spearheading the disability inclusion in all organizations assessed, some organizations have board members and senior managers who are Persons with Disabilities who are male. This implied that some organizations are committed to include PWDs in their workforce and a step to advocate for disability inclusion. These organizations include Straight Talk Foundation, RHU and Reach Hand Uganda.

It was found out that disability analysis to a small degree is built into organization's programs/projects planning, implementation and evaluation procedures. Most of the projects implemented have not been disability inclusive.

On technical capacity; it was concluded that some organizations are moving in the right direction when it comes to disability inclusion in particular; focusing on Women and Girls with Disabilities but need to strengthen the abilities and skills of individuals in an organization, have or need to carry out the practical aspects of disability and gender inclusion for enhanced program quality, and level of institutionalization of disability inclusion and gender equitable organizational processes.

4.2 Organizational Culture

This assessed the projects/Programs /specific interventions that these organizations have to support or undermine disability inclusion and gender equality.

Table2: Highlights of the Key Findings in the area of Organization Culture per Organization assessed

S/n	Organization	Summary of the Key Findings
1	RHU	<ul style="list-style-type: none"> To a good degree RHU is committed to the advancement of rights of Women and Girls with Disabilities. Implements specific interventions targeting youth with Disabilities Non-discrimination and gender equality were found to be crosscutting issues or priority areas thus disability inclusion is mostly mixed with other cross cutting issues
2	STFU	<ul style="list-style-type: none"> To a small degree the organisation is committed to the advancement of rights of Women and Girls with Disabilities Though STFU had no disability specific interventions targeting Women and Girls with Disabilities, according to their 2016 annual report, it indicated they have implemented various SRH interventions targeting young women and girls in general Non-discrimination and gender equality were found to be crosscutting issues or priority areas thus disability inclusion is mostly mixed with other cross cutting issues
3	ISS-WICCE	<ul style="list-style-type: none"> To a great extent the organization is committed to the advancement of rights of Women without discrimination Have initiated a project on capacity building of PWDs in the area of governance and SRH. Non-discrimination and gender equality were found to be crosscutting issues or priority areas thus disability inclusion is mostly mixed with other cross cutting issues
4	Reach A Hand	<ul style="list-style-type: none"> To small degree were committed to the advancement of rights of Women and Girls with Disabilities though they take note of non-discrimination as a guiding principle for all their interventions. No specific Intervention targeting Women and Girls with Disabilities. Non-discrimination and gender equality were found to be crosscutting issues or priority areas thus disability inclusion is mostly mixed with other cross cutting issues
5	Sexual	<ul style="list-style-type: none"> To a small degree were committed to the advancement of rights of

	Reproductive Health Rights Alliance	<p>Women and Girls with Disabilities though they take note of non-discrimination as a guiding principle for all their interventions.</p> <ul style="list-style-type: none"> • Non-discrimination and gender equality were found to be crosscutting issues or priority areas thus disability inclusion is mostly mixed with other cross cutting issues
6	UHMG	<ul style="list-style-type: none"> • To a very small degree organisation was committed to the advancement of rights of Women and Girls with Disabilities though they take note of non-discrimination as a guiding principle for all their interventions. • No specific Intervention targeting Women and Girls with Disabilities. • Non-discrimination and gender equality were found to be crosscutting issues or priority areas thus disability inclusion is mostly mixed with other cross cutting issues

The study found out that organizations were committed to the advancement of rights of Women and Girls with Disabilities to a moderate degree. This was observed in some partners such as RHU and ISIS-WICCE who had disability specific interventions that they are implementing.

To some extent organizations demonstrated a reputation for integrity and competence in disability inclusion amongst leaders in the field of Sexual Reproductive Health. Some organizations such as Straight Talk Foundation, RHU and Reach a Hand Uganda have board members and senior managers who are Persons with Disabilities. Though they are male, it showed the organizations' commitment to the disability inclusion.

Organizations reported an enabling working environment in their organizations for Persons with Disabilities, most especially improved for Women and young Women with Disabilities over the last two years. RHU reported recruitment of two female staff with disabilities as part of the team at regional officers and one being a peer educator with in the communities. It further reported networking and collaboration with Agencies that advocate for the rights of PWDs. The study noted that all partners are networking and collaborating with organizations that promote and advocate for the rights of PWDs in particular NUWODU which has supported the organization to integrate disability issues in their SRH activities.

Lastly, to a moderate degree, organizations reported to have made progress in mainstreaming disability issues in other organizations operations and programs. Non-discrimination and gender equality were found to be crosscutting issues or priority areas thus disability inclusion is mostly mixed with other cross cutting issues so it was difficult to ascertain what interventions and what budget is allocated on disability inclusion. In most partners visited, The study noted physical inaccessibility challenges as there were no existence of ramps /elevators to enable PWDs access the organizations, and even though they had ramps, service providers noted that they had difficulties in communicating well with PWDs especially those that have hearing impairments and no Sign Language Interpreters at their premises hence affecting the PWDs equal access to SRH services and information.

4.3 Accountability

This looked at mechanisms by which an organization determines the extent to which it is "walking the talk" in terms of disability inclusion and gender integration in its programs and organizational structures. Specifically; the study looked at the monitoring, reporting and evaluation systems of SRH projects to determine the extent to which partners' collect, disaggregate data, reporting, and how they measure their project impacts on Women and Girls with Disabilities. It also looked at quality participation of and benefits to Women and Girls with Disabilities. The following were the findings;

Table3: Highlights of the Key Findings in the area of Accountability per Partner assessed

S/n	Organization	Summary of the Key Findings
1	RHU	<ul style="list-style-type: none"> • The methods of data collection, analysis and synthesis within the organization do not specify disability disaggregated data and analysis at all stages of the project (Planning, implementation, monitoring, reporting and evaluation). • There are no disability specific indicators in the partner's monitoring and evaluation systems to enable monitor, measure and evaluate the impact of SRH projects and programs on PWDs in particular on Women and Girls with Disabilities.
2	STFU	<ul style="list-style-type: none"> • The methods of data collection, analysis and synthesis within organizations do not specify disability disaggregated data and analysis at all stages of the project (Planning, implementation, monitoring, reporting and evaluation).

		<ul style="list-style-type: none"> • There are no disability specific indicators in the partner’s monitoring and evaluation systems to enable monitor, measure and evaluate the impact of SRH projects and programs on PWDs in particular on Women and Girls with Disabilities.
3	ISS-WICCE	<ul style="list-style-type: none"> • The methods of data collection, analysis and synthesis within organizations do not specify disability disaggregated data and analysis at all stages of the project (Planning, implementation, monitoring, reporting and evaluation). • There are no disability specific indicators in the partner’s monitoring and evaluation systems to enable monitor, measure and evaluate the impact of SRH projects and programs on PWDs in particular on Women and Girls with Disabilities.
4	Reach A Hand	<ul style="list-style-type: none"> • The methods of data collection, analysis and synthesis within the organization do not specify disability disaggregated data and analysis at all stages of the project (Planning, implementation, monitoring, reporting and evaluation). • There are no disability specific indicators in the partner’s monitoring and evaluation systems to enable monitor, measure and evaluate the impact of SRH projects and programs on PWDs in particular on Women and Girls with Disabilities.
5	Sexual Reproductive Health Rights Alliance	<ul style="list-style-type: none"> • The methods of data collection, analysis and synthesis within the organization do not specify disability disaggregated data and analysis at all stages of the project (Planning, implementation, monitoring, reporting and evaluation). • There are no disability specific indicators in the partner’s monitoring and evaluation systems to enable monitor, measure and evaluate the impact of SRH projects and programs on PWDs in particular on Women and Girls with Disabilities.
6	UHMG	<ul style="list-style-type: none"> • The methods of data collection, analysis and synthesis within organization do not specify disability disaggregated data and

		<p>analysis at all stages of the project (Planning, implementation, monitoring, reporting and evaluation).</p> <ul style="list-style-type: none"> • There are no disability specific indicators in the partner’s monitoring and evaluation systems to enable monitor, measure and evaluate the impact of SRH projects and programs on PWDs in particular on Women and Girls with Disabilities.
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In all partners assessed; there are good efforts to include Disability concerns in SRH programs, plans, policy papers, reports and publications, while others continue to be produced yet do not



Figure 1: a snap shot of the drama showing a deaf girl in a pharmacy

reflect any disability dimension. RHU and ISS-WICCE are implementing specific disability interventions to promote the SRH rights of Persons with Disabilities. RHU uses music, dance and Drama to advocate for Women and Girls to access SRH services and information and one of the dramas is entitled “Out of darkness”. The drama portrays key

messages to the policy makers and Government to address Sexual and Reproductive issues and in one of the scenes shot at a pharmacy, Martha (Joan Nantege) a young deaf girl fails to buy drugs at a store and the attendant could not attend to her well because of the communication barrier.

RHU also organized various camps and outreaches targeting youth with Disabilities including female.



Figure 2: RHU photo taken during the youth camp targeting PWDs

The findings also indicate that some organizations implement interventions and apply the principle of non-discrimination while others are implementing interventions targeting PWDs. However, it was hard to determine the quality of participation from Women and Girls with Disabilities as the activity reports are not disaggregated by disability or telling the number of PWDs reached by sex.

The study found out that in all partners assessed, the methods of data collection, analysis and synthesis within organizations do not specify disability disaggregated data and analysis at all stages of the project (Planning, implementation, monitoring, reporting and evaluation). Though some partners had reasons why they don't disaggregate by disability, for instance; Reach a Hand Uganda noted that they don't disaggregate data by disability as it is likely to stigmatize them more.

In addition to the above, it was found out that there are no disability specific indicators in the partners monitoring and evaluation systems to enable monitor, measure and evaluate the impact of SRH projects and programs on PWDs in particular on Women and Girls with Disabilities.

Political Will

This assessed the ways in which leaders use their position of power to communicate and demonstrate their support, leadership, enthusiasm for and commitment to working towards disability inclusion and gender equality in the organization.

Table 4: Highlights of the Key Findings in the area of Political will per Organization assessed

S/n	Organization	Summary of the Key Findings
1	RHU	<ul style="list-style-type: none"> • To a good degree RHU had written/strategic documents that affirm a commitment to mainstream Women and Girls with Disabilities in SRH. • The organization uses non-discriminative and sensitive language to a good degree. • they transcribe/provide information in accessible format such as visuals, large print, and accessible website but not in Braille • There were ramps at office premises and visuals displaying non-discrimination implying that women and girls easily access the premises physically.
2	STFU	<ul style="list-style-type: none"> • To a moderate degree had written/strategic documents that affirm a commitment to mainstream Women and Girls with Disabilities in SRH. • The organization uses non-discriminative and sensitive language though to a good degree they transcribe/provide information in accessible format such as Braille, large print and accessible website. • There were no ramps but office premises looked accessible implying that women and girls easily access the premises physically.
3	ISS-WICCE	<ul style="list-style-type: none"> • To a good degree had a written/strategic document that affirms a commitment to mainstream Women and Girls with Disabilities in SRH. • The organization uses non-discriminative and sensitive language though to a small degree they transcribe/provide information in accessible format such as Braille, large print and accessible website.

		<ul style="list-style-type: none"> • There were no ramps but office premises looked accessible implying that women and girls easily access the premises physically.
4	Reach A Hand	<ul style="list-style-type: none"> • To a good degree had written/strategic documents that affirm a commitment to mainstream Women and Girls with Disabilities in SRH. • The organization uses non-discriminative and sensitive language though to a small degree they transcribe/provide information in accessible format such as Braille, large print and accessible website. • There were no ramps but office premises looked accessible implying that women and girls easily access the premises physically.
5	Sexual Reproductive Health Rights Alliance	<ul style="list-style-type: none"> • To a moderate degree had written/strategic documents that affirm a commitment to mainstream Women and Girls with Disabilities in SRH. • The organization uses non-discriminative and sensitive language though to a small degree they transcribe/provide information in accessible format such as Braille, large print and accessible website. There were no ramps but office premises looked accessible implying that women and girls easily access the premises physically.
6	UHMG	<ul style="list-style-type: none"> • To a small degree had written/strategic documents that affirm a commitment to mainstream Women and Girls with Disabilities in SRH. • The organization uses non-discriminative and sensitive language though to a small degree they transcribe/provide information in

		<p>accessible format such as Braille, large print and accessible website.</p> <ul style="list-style-type: none"> • There were no ramps but office premises looked accessible implying that women and girls easily access the premises physically.
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The study found out that the integration of Women and Girls with Disabilities in SRH programs and projects to a good degree is mandated in some organizations assessed. In relation to this, some organizations have been implementing specific SRH interventions targeting youth with disabilities including girls and young women for instance RHU has organized various camps targeting youth with disabilities.

It was noted that some organizations to a good degree had written/strategic documents that affirm a commitment to mainstream Women and Girls with Disabilities in SRH. In organizations like RHU there are good efforts to include Disability concerns in SRH programs, plans, policy papers, reports and publications, while others continue to be produced without a reflection of any disability dimension. RHU had a Children Protection Policy; Human rights approach strategy and the vision that promotes non-discrimination.

The study indicated that most organizations, to a moderate extent include disability in their programs with a few disability specific interventions but these are mostly mixed with other cross-cutting issues so it was difficult to ascertain what interventions and budget are allocated to disability. Some organizations' policies are disability sensitive and require budgets that are disability responsive targeting the needs of Girls and Women with Disabilities.

The study indicated that organizations use non-discriminative and sensitive languages though to a smaller extent don't transcribe/provide information in accessible format such as Braille, large print, and accessible website.

5.0 CONCLUSIONS AND RECOMMENDATIONS

The study concludes that disability inclusion, in particular, focusing on Women and Girls with Disabilities in most partner SRH policies and programs over the whole planning and implementation cycle is incomplete and not yet systematic and consistent across SRH policies, programs, research, projects and activities. These findings call for a course of integrated actions.

Recommendations

The following are proposed recommendations for partners and NUWODU to ensure effective inclusion of Women and Girls with Disabilities in the SRH policies and programs;

NUWODU

1. **Advocacy, Lobbying and Awareness Creation Campaigns:** These findings call for a need to sensitize Partners on SRH needs of Women and Girls with Disabilities for better support and for all stakeholders to enforce the provision of PWDs friendly SHR services and information. This can also be done through development of policy briefs and Informational, Educational, communication Materials for awareness campaigns on the SRH rights of Women and girls with Disabilities.
2. **Capacity Development:** NUWODU needs to build and strengthen the capacity of partners' staff, including project staff in order to carry out disability and gender analysis and ensure disability analysis is done in the planning process, implementation, monitoring and evaluation. There is need to develop a capacity building plan on disability with a given timeframe. This should have a strong focus on disability/gender analysis and planning, disability indicators and budgeting as well as tailored training in relation to specific disability sensitive advocacy/communications for staff.
3. **Information and Knowledge management:** There is need to ensure that all partners' policy documents and advocacy materials are gender and disability sensitive in terms of disability content, language and images.
4. **Networking and Partnerships:** Boosting expertise and cooperation on disability issues through ongoing partnerships is usually needed as part of a long-term strategy.

PARTNERS

- I. **Development of organizational Disability inclusion strategies/policy guidelines/Action Plan:** the partners should develop their organization's disability inclusion policy guidelines for disability inclusion in particular focusing on Women and Girls with Disabilities to equally access SRH services and information. **Or** To increase accountability and capacity of Partner staff, design and implement an internal disability policy or a disability inclusion strategy should be put in place. Development of Action Plan should also be prioritized to promote disability inclusion and take into consideration the gender dimensions of disability in all spheres.

- II. **Strengthening of Monitoring, Evaluation and Reporting systems:** There is need to strengthen the organizational planning processes and documents at all levels to provide for the collection and inclusion of data disaggregated by disability/ sex and gender, disability analysis of disability specific issues and the identification of specific disability indicators, interventions, outputs and budgets. The guidelines should also provide for monitoring and evaluation systems at all levels to capture and report on disability outcomes.
- III. **Deliberate efforts on accessibility to SRH services and information:** There is need to improve on accessibility in terms of physical accessibility to the services and access to information, use of interpreters/sign language, Braille etc. to enable Women and Girls with Disabilities to equally access the SRH services and information.
- IV. **Capacity Development:** Ensure that partners' staff, including project staff has the capacity to carry out disability and gender analysis, and ensure disability analysis is done in the planning process. There is need to develop a capacity building plan on disability with a given timeframe. This should have a strong focus on disability/gender analysis and planning, disability indicators and budgeting as well as tailored training in relation to specific disability sensitive advocacy/communications for staff.
- V. **Information and Knowledge management:** There is need to ensure that all partners' policy documents and advocacy materials are gender and disability sensitive in terms of disability content, language and images.
- VI. **Networking and Partnerships:** Boosting expertise and cooperation on disability issues through ongoing partnerships is very important and should be maintained.

ANNEX I: DATA COLLECTION TOOLS

Organizational Women and Girls with Disabilities SRH Assessment Tool

	1	2	3	4	5	
Aspect 1 – Technical capacity	Very small degree	Small degree	Moderate degree	Good degree	Great degree	
There is a person and/or division responsible for Disability in my organization						
Staff has been trained to have the necessary knowledge and skills to carry out their work with Disability awareness						
Program/project planning, implementation, evaluation and advisory teams in my organization consist of members who are Disability sensitive						
Program/project planning, implementation, evaluation and advisory teams in my organization include at least one person with specific expertise and skills in disability issues						
Disability analysis is built into our program planning and implementation procedures						
Disability analysis is built into our program evaluation procedures						TOTAL divide by 6
SUB TOTALS						

	1	2	3	4	5
Aspect 2 – Organizational culture	Very small degree	Small degree	Moderate degree	Good degree	Great degree

Disability issues are taken seriously and discussed openly by men and women in my organization						
My organization has a reputation for integrity and competence in disability issues amongst leaders in the field of Sexual Reproductive Health issues						
The working environment in my organization has improved for Women and Girls with Disabilities over the past two years						
Staff in my organization are committed to the advancement of Women and Girls with Disabilities rights in SRH programs						
My organization has made significant progress in mainstreaming disability issues into our operations and programs						TOTAL divide by 6
SUB TOTALS						
	1	2	3	4	5	
Aspect 3 – Accountability	Very small degree	Small degree	Moderate degree	Good degree	Great degree	
Data collected for programs and projects are disaggregated by disability and gender						
The impact of projects and programs on disability inclusion is monitored and evaluated						
My organization’s programs and projects on SRH ensure quality participation of, and benefit to Women and Girls with Disabilities.						

Disability awareness is included in job descriptions and/or in job performance criteria						TOTAL divide by 4
SUB TOTALS						

	1	2	3	4	5	
Aspect 4 – Political will	Very small degree	Small degree	Moderate degree	Good degree	Great degree	
The integration of Women and Girls with Disabilities in programs/projects is mandated in my organization						
My organization has a written policy/strategic document that affirms a commitment to mainstream Women and Girls with Disabilities in SRH						
Senior management actively support and take responsibility for the implementation of our policy on mainstreaming Women and Girls with Disabilities						
There has been an increase in the representation of Women and Girls with Disabilities in senior management positions in the past few years						
My organization has budgeted adequate financial resources to support our disability integration work						TOTAL divide by 5
SUB TOTALS						

You now have a score for each aspect of Disability inclusion, capacity and readiness (be sure to do the divisions). In other words, you should have four different scores that range from 1 to 5.

This is what your scores mean:

< 2	Your organization has some work to do to improve this aspect of Disability inclusion, capacity and readiness.
2–3	Your organization is moving in the right direction in this aspect of Disability inclusion capacity and readiness, but there remains work to be done.
4	Your organization has achieved a lot in this aspect of Disability inclusion, capacity and readiness, but embedding and sustaining your efforts remain the biggest challenges
5	Your organization demonstrates a genuine commitment to gender capacity and readiness in this aspect of gender capacity and readiness. Congratulations!

CHECKLIST FOR GIRLS AND WOMEN WITH DISABILITIES ANALYSIS

1. Why document analysis?

- a) To determine Disability sensitivity of the documents. This provides evidence of the organization's performance in relation to women and girls with disabilities SRH issues and help to come with recommendations on how to integrate the concerns and voices of Women and Girls with Disabilities into information, documentation, products, projects and programs

2. Types of documents(, Technical, information, and Documentation)

1) Organizational Documents

a) Rules and regulations , personnel policy and procedures

- i. Are there specific regulations, policies, procedures and measures that have been taken to promote reproductive rights of Women and Girls with Disabilities at your workplace?

b) Budget, and projects/programs

- i. Find out if program/project and budget documents clearly indicate disability objectives and indicators E.G does the program/budget address issues of Women and Girls with Disabilities? Do they indicate how Women and Girls with Disabilities will benefit/be affected by the project?
- ii. Does the budget clearly indicate what resources earmarked for gender/disability mainstreaming related work?

2 .Technical Documents

- a) Research publications
- b) Work plans
- c) Minutes and reports of the meeting and training activities
- d) Training materials

Checklist for technical documents

- i. Does it use disability sensitive language?
- ii. Does the document (work plans) outline key areas that serve the interests of Women and Girls with Disabilities equally with other women?
- iii. Does it use and analyses disability disaggregated data/ information?

- iv. Does it treat Women and Girls with Disabilities equality with other women as a central issue not as an add on/ lip service
- v. Does it focus on sex relations of Women and Girls with Disabilities?
- vi. Does the document reflect mechanisms for planning, monitoring and evaluating that are conducive to mainstream Women and Girls with Disabilities?
- vii. Do the list of participants of meetings held by organization's show participation of Women and Girls with Disabilities in their events especially in meetings.

3. Information/ education/Promotion documents inclusiveness

- a) Public relations materials, brochures, posters, leaflets, videos, CDs.
- b) Covers of publications, photographs, graphics
- c) News letters

Checklist for information documents

- i. Do the organization's products give an overview of the work /project the image as Disability sensitive?
- ii. The credible references to issues of Disability inclusion as relating to the organization's work?
- iii. The product consistently uses Disability sensitive language.
- iv. Do the organizations provide information on or create links to other sources of information on Women and Girls with Disabilities issues so as to increase their accessibility?
- v. Do the organizations transcribe/provide information in accessible format(Braille, large print, pictorials, use of sign language interpreters, accessible website)
- vi. Images, photographs and drawings should communicate messages that promote rights of Women and Girls with Disabilities
- vii. Images should portray diversity in sex roles, sensitivity to Women and Girls with disabilities
- viii. Language should be disability sensitive
- ix. Views of Women and Girls with Disabilities should be represented

4. Technical cooperation documents

- a) Project documents if any approved by donor
- b) Project descriptions, reports E.T.C.