



MINISTRY OF LABOUR AND SOCIAL PROTECTION

PERSONS WITH DISABILITIES NATIONAL POLICY

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LIST OF ACRONYMS

| | |
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| AGPO | Access to Government Procurement Opportunities |
| AIDS | Acquired Immuno Deficiency Syndrome |
| AMREF | African Medical and Research Foundation |
| AU | African Union |
| CBR | Community Based Rehabilitation |
| CRPD | Convention on the Rights of Persons with Disabilities |
| EAC | East Africa Community |
| EARS | Educational Assessment and Resource Services |
| FBOs | Faith Based Organizations |
| HIV | Human Immuno Deficiency Virus |
| ICT | Information Communication and Technology |
| IPRS | Integrated Population and Registration Systems |
| IYDP | International Year for Disabled Persons |
| MDAs | Ministries, Departments and Agencies |
| MDCAs | Ministries, Departments, Counties and Agencies |
| NCD | Non-Communicable Disease |
| NGAAF | National Government Affirmative Action Fund |
| OPDs | Organization of and for Persons with Disabilities |
| SDGs | Sustainable Development Goals |
| TVET | Technical Vocational Education and Training |
| UDPK | United Disabled Persons of Kenya |
| UN | United Nations |
| UNCRPD | United Nations Convention on the Rights of Persons with Disabilities |
| VCT | Voluntary Counselling and Testing |

DEFINITION OF TERMS

Accessible Transport is modified and affordable means of movement to enable persons with disabilities to use it with ease e.g. buses and taxis with ramps and space.

Affirmative Action is an active effort to favour persons with disabilities who experience discrimination especially in relation to employment or education.

Assistive devices include implements, tools, equipment, taped texts, audio, visual and pictorial recording, braille equipment and materials, tactile equipment, orthopedic appliances and other devices and machines of whatever kind for sociocultural, economic, civil, and political well-being of persons with disabilities.

Assistive technology is an umbrella term covering the systems and services related to the delivery of products and services.

Accessible Process are steps taken to make facilities and services readily usable by persons with disabilities by eliminating barriers that inhibit their rights and inclusion in development such as registration.

Cash Transfer Programme is a social protection system through which regular cash stipend is given to families with targeted vulnerable members to cushion them from adverse risks and poverty.

Discrimination is any direct or indirect distinction, exclusion, or restriction on the basis of disability which has the purpose or effect of nullifying the recognition, enjoyment or exercise of all human rights and fundamental freedoms in the political economic, social, cultural, civil or any other fields. It includes all forms of discrimination including denial of reasonable accommodation.

Disability includes any physical, sensory, mental, psychological, or other impairments, condition or illness that has, or is perceived by significant sectors of the community to have, a substantial or long- term effect on an individual's ability to carry out ordinary day-to-day activities (e.g. feeding, toiletry, movement, grooming)

Disability mainstreaming means a strategy through which concerns, needs and experiences of persons with disabilities are made an integral part or dimension of the design, budgetary allocation, implementation, monitoring, and evaluation, and reporting

of policies and programmes in all political, economic, and societal spheres so that persons with disabilities benefit equally and inequality is not perpetuated.

Habilitation refers to support services that help a person with disabilities keep, learn, or improve skills and functioning for daily living. These habilitative services may include physical and occupational therapy, physiotherapy, speech-language therapy, assistive devices and technology, and other services for persons with disabilities.

Inclusive education means an approach where learners and trainees with disabilities are provided with appropriate educational interventions within regular institutions of learning with reasonable accommodation and support.

Impairment is any loss or disfunction of psychological, physiological, or anatomical structure.

Legal capacity means the ability to hold rights and duties under the law and to exercise these rights and duties.

Organizations for Persons with Disabilities means associations, groups, non-governmental organizations, or societies formed for the purposes of rendering services to persons with disabilities.

Organizations of Persons with Disabilities means associations, societies or other membership groups led and controlled by persons with disabilities to represent the rights and interests of persons with disabilities.

Persons with disabilities means 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.

Persons with high support needs means individuals who require support to perform tasks of daily living such as selfcare and qualify for cash transfer.

Prosthetic is an artificial part of the body, e.g. Limb,

Reasonable accommodation means necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden where needed in a particular case to ensure persons with disabilities exercise and enjoy on an equal basis fundamental right and freedoms.

Rehabilitative services are healthcare services that help a person regain physical and cognitive (thinking and learning) abilities that have been lost or impaired because of disease, injury, or treatment.

Respite Services are services provided in a facility or by volunteers to offer short term relief for primary caregivers. It can be arranged for just an afternoon or for several days or weeks.

Specific measures mean legislative, policies and practices, including outreach or support programmes, allocation, or reallocation of resources; preferential treatment; targeted recruitment, hiring and promotion; numerical goals connected with time frames in order to fulfil equal enjoyment of rights of persons with disabilities.

Support services includes support provided by aides, sign language interpreters, Government or other institutional services and other personal support specifically provided to enable persons with disabilities to fully and meaningfully participate in society and community life.

Technical and vocational education and training aspects of the educational process involving in addition to general education, the study of technologies and related sciences and the acquisition of practical skill, attitudes, understanding, and knowledge relating to occupants in various sectors of economic and social life.

Universal design means the outline or plan of products, environments, programmes, and services to be used by all people to the greatest extent possible without the need for adaptation or specialized design.

FOREWORD

In the year 2006, the government embarked on an intensive consultative process to prepare a policy framework towards development and implementation of programmes and projects aimed at improving the welfare of persons with disabilities. Following the various developments in the sector, key among them ratification of the UNCRPD by Kenya in 2008 and the promulgation of the Constitution of Kenya in 2010, a need to arise to align the policy with these instruments in order to protect the rights and dignity of persons with disabilities. It was also informed by the recent initiatives of the African Union disability agenda and the East Africa Community (EAC) Policy on Persons with Disabilities, 2012.

The Policy has been prepared on a background of various challenges affecting the persons with disabilities in Kenya while recognizing an expanded understanding of disability and how it affects all sectors of mankind by considering disability among the children, youth, women, and older persons. The policy also recognizes that persons with disabilities have a lot of potential in terms of skills, knowledge and experiences that can be tapped for the benefit and development of the entire nation, hence the need for promoting inclusion.

The Policy therefore addresses challenges encountered by persons with disabilities in Kenya and also provides a broad-based framework for implementation through strategies that will enable persons with disabilities engage in meaningful participation in development processes.

The goal of the Policy is to promote the inclusion and participation of persons with disabilities in all societal activities towards achievement of national development targets. It emphasizes the recognition of the persons with disabilities as part of the national population and whose rights should be respected. The vision and guiding principles of this Policy are aligned to the Kenya Vision 2030 and the EAC Policy on Persons with Disabilities, 2012.

This Policy is also a commitment by the government to provide services and protection to persons with disabilities while according to them an environment conducive for the enjoyment of their freedoms, liberties, and pursuit of happiness.

The support of various stakeholders in the implementation of this Policy is indeed critical in ensuring maximum benefits to persons with disabilities. The corresponding instruments including UNCRPD 2008, the Constitution of Kenya 2010 and the Persons with Disabilities Act 2003 provide an enabling environment to support and fast track its full implementation.

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EXECUTIVE SUMMARY

The World population currently is estimated to be eight billion persons, out of which fifteen percent (15%) is estimated to be persons with disabilities. According to the ([WHO] and World Bank, 2011). Persons with disabilities constitute 20% of the world poorest people, with the number of women with disabilities being higher than that of men, further, 80% of persons with disabilities live in developing countries.

According to the Kenya Population and Housing Census of 2019 persons with disabilities account for 2.2% (0.918 million) of the general population. The Kenya National Bureau of statistics indicates that 90% of Kenya population is affected by disability directly or indirectly.

The institutionalization of disability mainstreaming in the public sector through the Public Service Reforms and Results Based Management initiatives has ensured a higher visibility of the disability matters in the Country. Beginning 2009/2010 financial year, disability mainstreaming was made a key target for performance contracting and in all sector policies and programmes whereby all Ministries, Departments and Agencies (MDAs) were expected to mainstream disability in their sector plans and programmes.

These government efforts, complimented by other interventions by different stakeholders have been very instrumental in getting disability to be at the core of National Development aimed at ensuring that persons with disabilities live in dignity and enjoy their human rights and barriers that exclude them from full and equal participation in society are addressed.

In light of the foregoing, Government of Kenya recognizes the need for a policy on persons with disabilities as a commitment towards addressing the rights, dignity, and protection of this vulnerable category of the society.

This policy document recognizes the challenges and barriers in relation to disability and is organized in three chapters.

Chapter one provides the definition of disability and highlights some of the historical initiatives on disability, the situational analysis, and the legal framework in place.

Chapter two is organized in twenty six (26) thematic areas namely; Early identification and intervention, awareness and public education, habilitation and rehabilitation, education, training, employment and economic empowerment, culture sports and recreation, health, Non-Communicable diseases and Communicable diseases, social protection, participation and representation, transport, registration, land housing and property, information and communication, legal capacity, access to justice,

organization of and for person with disabilities, assistive devices, technology and support services, research, women and girls with disabilities, older persons with disabilities, children with disabilities, youth with disabilities, deinstitutionalization of children and adults with disabilities, disaster risk management and humanitarian emergency response. The document further highlights the critical areas of concern, policy statements, objectives, and key interventions.

Chapter three highlights the institutional framework and implementation framework, as well as the coordination structure and the roles of state and non-state actors and the Organizations of and for Persons with Disabilities.

This policy is broad based, and its implementation will involve wide sector cooperation amongst Persons with disabilities, Public Private Partnerships, communities, and development partners. It is anticipated that the implementation of this Policy will enhance inclusion and disability mainstreaming in decision making and development processes.

CHAPTER ONE: INTRODUCTION

The development of the Persons with Disabilities National Policy was informed by a number of developments key among them being the signing and ratification of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), the promulgation of the Constitution of Kenya, 2010, the Kenya Vision 2030 and the ratification of the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Persons with Disabilities in Africa respectively. It has also benefited from the recent initiatives of the African Union disability agenda and the East Africa Community (EAC) Disability Policy.

The Persons with Disabilities National Policy is a commitment by the National Government to provide policy direction, services, and programmes for persons with disabilities while according to them an inclusive environment conducive for the enjoyment of their right to life, freedoms, liberties, and pursuit of happiness. It is a result of several years of intense, expansive, and exhaustive consultations involving Ministries, Departments, Agencies, persons with disabilities and their representative organizations, parent's support groups and other stakeholders. It has drawn heavily from the national, regional, and international experiences by government and various other stakeholders.

Definition of disability: The CRPD has defined persons with disabilities as 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. However, the Constitution, under Article 260 defines disability to include "any physical, sensory, mental, psychological, or other impairment, condition or illness that has, or is perceived by significant sectors of the community to have, a substantial or long-term effect on an individual's ability to carry out ordinary day to day activities".

1.1 BACKGROUND

The Government acknowledges disability as a phenomenon that cuts across all spheres of society, and which requires support from all actors. It continues to provide services, grants and at the same time providing enabling environment for input and initiatives by different players in the sphere of disability. Kenya's earliest recorded initiative for organized care and provision of services to persons with disabilities goes back to the missionary era. In 1946, the Salvation Army Church established a programme to rehabilitate men blinded during the Second World War. The programme later became the country's first school for the blind marking the commencement of provision of formal education for blind children in Kenya and East Africa. The mainstream churches: Catholic, Presbyterian, Anglican and Methodist followed this example by establishing schools and institutions for children with visual, hearing, mental and physical disabilities in various parts of the Country where they had their

missions. The Government supported these efforts by providing an enabling environment as well as practical support. As time went by, the Government progressively increased its support in providing teachers and financial grants eventually taking over the management of these institutions.

Among other service providers who have contributed to the betterment of persons with disabilities alongside the government over time are; the Kenya Society for the Blind, the Association for the Physically Disabled of Kenya, the Kenya Society for the Mentally Handicapped and the Kenya Society for Deaf Children. These have in the recent past been joined by others specializing in specific disabilities and mainstream organizations offering services to persons with disabilities alongside their co-business. Examples of the latter include AMREF and Voluntary Service Overseas (VSO), Handicap International, Christian Blind Mission (CBM), Leonard Cheshire among others.

Other players in this sector are the Organizations of and for Persons with Disabilities (OPDs). These are national associations and community-based groups formed and managed by persons with disabilities to advocate and to pressurize for services and participation in national development. Basically, they create awareness; act as representatives of voices of persons with disabilities and press for service provisions.

The oldest among them is the Kenya Union of the Blind (KUB) established in 1959. Others who have been in operation for sometimes, include The Kenya Society for Mentally Handicapped (1960s), the Kenya Society of the Physically Handicapped (KSPH) (1986), The Kenya National Association of the Deaf (KNAD) (1987). In 1989, these national organizations alongside other smaller district and community ones came together to form The United Disabled Persons of Kenya (UDPK). UDPK became an umbrella body with a stronger voice and negotiation capacity to champion disability advocacy work. It has worked very closely with the Government in raising awareness, identifying needs and services for persons with disabilities, and organizing such events as the UN International day for persons with disabilities. Parent associations and support groups have also in the recent past made useful contribution in respect to children and adults with disabilities.

1.1.1 POST INDEPENDENCE INITIATIVES

The first post-independence education and manpower-training enquiry, the Ominde Commission of 1964, recognized the need for education and training in the disability sector. It recommended measures to address the Government's role in the coordination and improvement of service quality and delivery strategies and transition from school to employment world. The recommendations resulted in the Parliamentary Sessional Paper number 5 of 1968 which set the pace for Government leadership in the provision and coordination of services for persons with disabilities. The docket of disability was placed in the Ministry of Culture and Social Services. The Ministry

implemented the recommendation of the Ominde Commission by establishing the Vocational Rehabilitation Division in the Department of Social Services. The first initiative from this effort was the establishment of the Industrial Rehabilitation Centre in Nairobi in 1971. Ten rural vocational rehabilitation centres were subsequently established countrywide to offer artisan courses such as carpentry, dressmaking, and leatherwork.

In 1975, the special education section was set up within the Ministry of Education to coordinate education for children with special needs. Independent sections with specialized staff responsible for every disability category were later established within the inspectorate and curriculum development arms of the Ministry of Education.

The Government declared 1980 the National Year for Persons with Disabilities ahead of the 1981 United Nations International Year of the Disabled Persons. Aggressive awareness campaigns on disabilities and the need for collaborative efforts were launched during that year. These efforts continued during the UN International Year, 1981. This is when the National Fund for the Disabled of Kenya was also set up as a Trust. By providing direct assistance to both individuals and institutions, the Fund continues to supplement efforts by the Government and other service providers.

Community Based Rehabilitation (CBR) strategy was introduced during this period of great awareness drive. It was considered a suitable approach to actively involve communities in the change of attitudes and acceptance of persons with disabilities. The existing institutionalized rehabilitation services were inadequate in meeting the growing needs and CBR proved a solution to the expansion of service provision. Early initiatives for this strategy were through the Ministry of Health, but the idea was taken up by other service providers and remains an important feature of service delivery to persons with disabilities.

In 1984, the Ministry of Education introduced the Educational Assessment and Resource Services (EARS) which has greatly improved the growth and quality of educational services for children with special educational needs. EARS centres were initially opened in 22 districts and were closely linked to District Education Offices. EARS embraced a multi-sectoral approach by different professionals such as teachers, social workers, and medical workers. It involved the community in the early identification, assessment, intervention, and placement in educational services. EARS has enhanced the inclusive education delivery strategy which promotes placing of children with disabilities in integrated programmes. This has subsequently increased educational placements for slow learners or those with multiple disabilities.

In the early days, training of special needs teachers was conducted on the job within respective institutions for either the blind or the deaf. The first specialized training was that of the deaf at Kamwenja Teachers Training College in the early 1970's. Teachers for the blind and the mentally handicapped were later trained in Highbridge Teachers

College in early 1980's. In 1987, all special education teachers training were consolidated at the Kenya Institute of Special Education. In addition to the three special areas of the visually impaired, hearing impaired and persons with psychosocial disabilities, the education for the physically handicapped (Physical Disability) was introduced. The Kenya Institute of Special Education provides specialized training at Diploma level to teachers already trained to teach ordinary schools but with interest in special education. It also introduced short-term certificate courses for teachers in special schools, units, and integrated programmes. It has recently introduced distant-learning programmes with a current enrolment of more than seven thousand. Special education is also now offered by public universities.

Another remarkable progress in addressing the disability concerns came in 1993 when the Hon. Amos Wako, the Attorney General appointed a Task Force Chaired by Justice Aganyanya to review laws relating to persons with disabilities. The Task Force went round the country collecting views from the public and persons with disabilities. It completed its assignment within three years and presented a report and a draft Bill to the Attorney General in 1997. Thereafter, there was a period of aggressive lobbying for enactment of the Bill into law by the disability fraternity and it was signed into law on 31st December 2003 as Persons with Disabilities Act No.14 of 2003.

The Persons with Disabilities Act of 2003 came into effect in June 2004. Its key provision was the establishment of a National Council for Persons with Disabilities whose mandate is to champion the rights and equalization of opportunities of persons with disabilities. The Minister responsible appointed the Council, which coordinates provision of services and advises the Minister accordingly.

The Kenya Vision 2030 of 2008 recognizes disability mainstreaming as one of the flagship projects under the social pillar. The first medium term plan of Vision established the National Development Fund for Persons with Disabilities, the Cash Transfers to Persons with Severe Disabilities and compliance of the 5 per cent provision for persons with disabilities in employment.

The Constitution of Kenya 2010, at Article 27(4) and (5) acknowledges marginalization of persons with disabilities. The Constitution therefore entrenches the principle of non-discrimination and affirmative action to remedy historical marginalization, as a result, the Government introduced a target in the annual performance contracting in the public service on Disability Mainstreaming. All Ministries and State Corporations were expected to have annual targets to mainstream disability issues.

1.1.2 DISABILITY AND DEVELOPMENT

The Government recognizes that Human Rights and Development are rights for all its citizens without discrimination. In this respect, the Government recognizes disability as a development issue. Consequently, this policy acknowledges the rights of persons

with disabilities to development and the need to address factors that push them into absolute poverty. The Government will develop strategies to empower persons with disabilities with the aim of alleviating poverty levels and make them self-reliant and able to participate in national development.

The Government will harmonize the provisions of all other policies, sessional papers, legislations, and development plans to embrace the needs and concerns of persons with disabilities as enshrined in Article 43 of the Constitution on Economic and Social Rights. The Government will encourage the development of disability sensitive programmes at the national and county levels and will facilitate participation of non-state actors in this endeavor by providing an enabling environment. The Government will periodically review policies and laws that affect the lives of persons with disabilities.

1.2 GLOBAL PLAYERS

Advocacy by early players influenced the United Nations to take interest in disability as a human rights concern. The entry of the UN has meant greater interaction and attraction of more players in the disability discourse. Although the human rights charter promulgated in 1948 and its subsequent versions clearly indicates that its provisions are meant for all human beings, the unique circumstances of persons with disabilities have called for special focus. Numerous important UN instruments have been developed to reflect the growing understanding of these special circumstances. The first was the 1971 UN Declaration of the Rights of the Mentally Handicapped which called for the recognition of people with mental disability as human beings. It calls upon the world community to consider them for all the rights, privileges, and entitlements of other human beings. It specifies concerns unique to the mentally handicapped and gives guidelines on how to address them. The Declaration set pace for more activities at the UN in respect to other disabilities.

The 1975 UN Declaration on the Rights of persons with disabilities expanded the space for persons with disabilities. It borrowed heavily from the Bill of Rights requiring that persons with disabilities be accorded respect, opportunity for rehabilitation, education, employment, human dignity, and enjoyment of life.

The global awareness created during the 1981 International Year for Disabled Persons (IYDP) expanded social participation and equality for disabled persons, then came the 1983-1992 UN Decade for Persons with Disabilities. To ensure the decade had desired impact, a comprehensive document entitled World Programme of Action Concerning Disabled Persons was developed and adopted through a UN resolution in 1982. The document provided guidelines on effective measures for the realization of full participation of persons with disabilities in social life, development, and equality. UN agencies were encouraged to globally implement the document in accordance with their areas of specialization.

The International Labour Organization (ILO) formulated the first ever-enforceable document for its members. The Vocational Rehabilitation and Employment (Disabled Persons) Convention 159 of 1983, ensures that appropriate vocational rehabilitation measures are made available to all categories of disabled persons. It also promotes the employment of disabled persons in the open labour market.

A World Programme of Action panel of experts revealed that the decade programme was not getting the intended response. Something more binding or convincing was necessary. Persons with disabilities were thus involved in the development of a new document known as the UN Standard Rules on Equalization of Opportunities for Persons with Disabilities.

This document, with twenty-two rules on the behaviour of states, was the most comprehensive ever. The rules were divided into four categories. The first category included four rules, which address preconditions for equalization of opportunities. These include awareness raising, medical care, rehabilitation, and support services. The second and most important covered Rules 5 to 12 on target areas of equalization of opportunities. These are accessibility, education, employment, income maintenance and social security, family life and personal integrity, culture, recreation and sports and religion. The last ten rules were on measures of implementation and mechanism for monitoring. The document was presented to the UN Assembly and adopted in December 1993.

Although the Rules were guidelines that were not binding to Governments, the level of awareness built around them had greater influence than the World Programme of Action. The early years after their adoption saw a lot of Organizations of and for Persons with Disabilities established in many parts of the World. More disability legislations and policies were put in place in more countries.

Seven years later, it became clear that good will was not enough to change the lives of persons with disabilities. More pressure through enforceable instruments was required to impact heavily on countries to provide conducive social environment. Efforts to increase cooperation, integration, and awareness on disability issues by governments and relevant organizations remained insufficient in promoting full and effective participation and equal opportunities for persons with disabilities in economic, social, cultural, and political life. There was still need for a more comprehensive and binding instrument to promote and protect the rights and dignity of persons with disabilities. The Convention on the Rights of Persons with Disabilities was discussed and adopted in 2006 and opened for signature by member states in 2007.

1.2.1 THE CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES

The international community in recognition of the human rights for persons with disabilities development an international treaty referred to as the United Nation Convention on the Rights of Persons with Disabilities (CRPD) which was adopted on 13 December 2006. Kenya signed the CRPD on 30th March 2007 and ratified it on 19th May 2008. The CPRD recognizes the following general principles:

- (a) Respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons.
- (b) Non-discrimination.
- (c) Full and effective participation and inclusion in society.
- (d) Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity.
- (e) Equality of opportunity.
- (f) Accessibility.
- (g) Equality between men and women.
- (h) Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.
- (i) Inalienable rights of all members of the human family as the foundation of freedom, justice, and peace in the world.

The Convention tasks the Government to put in place appropriate policies and programmes and initiatives for the benefit of persons with disabilities, including change people's attitudes from viewing persons with disabilities as "objects" of charity, medical treatment and social protection towards viewing persons with disabilities as "subjects" with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of Society.

In affirming this Convention, the people of Kenya adopted the Constitution of Kenya 2010 which among other things entrenched the right of persons with disabilities. Article two (5) and (6) recognize general rules of International Law, any Treaty or Convention ratified by Kenya including the CRPD form part of the laws of Kenya. Articles 54 and 100(b) of the Constitution are specific underpinnings of the rights and interests of persons with disabilities in inclusive development and representation.

1.2.2 SUSTAINABLE DEVELOPMENT GOALS VIS-A-VIS DISABILITY

Another International initiative that has deep-rooted impact on the rights of persons with disabilities is the beyond 2015 development Framework commonly known as the 2030 Agenda for Sustainable Development (SDG's). Persons with

disabilities through their organizations were involved all through in the development of the 17 goals.

The SDG's framework process reaffirmed the need to be guided by the purposes and principles of the Charter of the United Nations, with full respect for international law and its principles. It reaffirmed the importance of freedom, peace and security, respect for all human rights, including the right to development and the right to an adequate standard of living, including the right to food and water, the rule of law, good governance, gender equality, women's empowerment, and the overall commitment to just and democratic societies for development. It also reaffirmed the importance of the Universal Declaration of Human Rights, as well as other international instruments relating to human rights and international law.

The 17 Sustainable Development Goals are all applicable to persons with disabilities but there are those which specifically mention disability and have disability in their targets. These includes:

- SDG 4.5 By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities.
- SDG 8.5 By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value.
- SDG 10.2 By 2030, empower and promote the social, economic, and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.
- SGD 11.2 By 2030, provide access to safe, affordable, accessible, and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons.
- SDG 11.7 By 2030, provide universal access to safe, inclusive, and accessible, green, and public spaces, in particular for women and children, older persons and persons with disabilities.
- SDG 17.18 By 2020, enhance capacity-building support to developing countries, including for least developed countries and small island developing States, to significantly increase the availability of high-quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location, and other characteristics relevant in national contexts.

1.3 REGIONAL PLAYERS

The African Union and East African Community obligates the State Parties to formulate policies towards the protection of the rights, privileges, and entitlements of persons with disabilities. The AU adopted the Protocol to the African Charter on Human and People's Rights on the Rights of Persons with Disabilities in Africa on 29th January 2018 to which Kenya ratified in February 2022 in line with Article 44 of CRPD.

The East African Community adopted an East African Disability Policy 2012 which forms the framework to guide all matters of disability and legislation in the region.

1.4 SITUATION ANALYSIS

The World Health Organization (WHO) estimates about 15% of the world's population are persons with disabilities. According to the Kenya National Housing and Population Census of 2019 that used the Washington Group of Short Questions, there are 918,270 persons with disabilities aged 5 years and above. The gender composition of persons with disabilities is (523,883) females than (394,330) males. A total of 9,729 persons had albinism. Data provided by the census is vital for the government, private sector and civil society to design and target disability-inclusive budgeting, policies, and programming. According to the census (2019) report disability prevalence is 2.6% in rural areas as compared to urban areas who have 1.4% of the 918,270. The statistics vary from County to County due to the diverse socio-economic status.

It is therefore necessary to confirm the magnitude of the population with disabilities and to determine the actual extent of each disability for purposes of planning and service provision. It is noted that persons with disabilities are not a homogeneous group but are varied in terms of the nature of their disability and their mental, physical, and social needs. Despite the absence of accurate data, the Government and other stakeholders have continued to offer a wide range of services to persons with disabilities.

The Government, however, acknowledges that these services have reached only a small percentage of persons with disabilities and are unequally distributed between and among various disabilities. This policy seeks to eliminate disparities in service provision and ensure that services are available to all persons with disabilities, including children, women, youth, men, and older persons without discrimination.

1.5 CHALLENGES AND BARRIERS IN RELATION TO DISABILITY

Disability as a cross-cutting issue impacts all aspects of society. Failure to address disability related barriers and challenges limits participation of persons with disabilities in socio economical activities thus minimizing their contribution to national development.

Some of the challenges and barriers in relation to disability include the following:

- (a) Environmental and Attitudinal barriers
- (b) Limitation in attainment of education for all.
- (c) Hindrance to participation in socio- economic development.
- (d) Inadequate access to assistive technology, devices, and rehabilitative services
- (e) Limited psychosocial support in families.
- (f) Low awareness on available services
- (g) The combined effect of disability, NCDs, HIV and AIDS
- (h) Inaccessibility to information, communication, and technology
- (i) Specific challenges of children with disabilities
- (j) Specific challenges youth persons with disabilities
- (k) Specific challenges of women and girls with disabilities
- (l) Specific challenges older persons with disabilities

1.5.1 ENVIRONMENTAL AND ATTITUDINAL BARRIERS

Various barriers ranging from accessibility, environmental, communication, social, economic limited legal capacity, attitudinal and institutional prevent persons with disabilities from attaining acceptable quality of life.

The construction and built environments pose many difficulties in physically accessing public buildings, roads, and other infrastructure to persons with physical disabilities. Building codes, physical planning laws and standards are unresponsive to the needs of persons with disabilities. Despite having laws and regulations on accessible public transport, there has been nonadherence of this policy provisions, therefore there need to enact these legal provisions in statutes to make them enforceable.

Attitudes and practices embedded in cultural beliefs, taboos, rites of passage, and religion create near insurmountable obstacles to the participation of persons with disabilities in social and cultural activities. Attitude is the societal belief that persons with disabilities are lesser beings or inferior to others. This negative attitude ultimately results in suffering and marginalization for persons with disabilities. Hence, with a positive attitude towards persons with disabilities, they will be visualized as persons with disabilities and not the disability, laying emphasis on their personhood rather than their disability. It is necessary therefore, to overcome these barriers through aggressive and effective public sensitization, rehabilitation, and habitation programmes hence, with a positive attitude towards persons with disabilities.

1.5.2 LIMITATION IN ATTAINMENT OF EDUCATION FOR ALL

Education is the most important tool for participation of persons with disabilities in the socio-economic life. It helps develop positive attitudes and competence towards the importance of work and self-reliance while sharpening skills necessary for inclusion

into social and national affairs. It is imperative that access to education for persons with disabilities is given due attention.

Attainment of education for persons with disabilities can be hindered by various limitations which may include inaccessibility to learning institutions, home based learning, discrimination, environmental factors, lack of support systems and high cost of specialized education. There is a need for a multisectoral approach in addressing the barriers to education.

1.5.3 HINDRANCE TO PARTICIPATION INTO SOCIO-ECONOMIC DEVELOPMENT.

Social inclusion is the process of improving the terms on which individuals and groups take part in society by improving the ability, opportunity, and dignity of those disadvantages on the basis of their identity.

Persons with disabilities are excluded from various social events in communities, and this leads to stigmatization and disenfranchisement of persons with disabilities. This barrier is exacerbated by discrimination, lower economic productivity, poor education levels and low awareness in the society.

Different categories of persons with disabilities must be empowered to achieve skills that would enable them to participate in gainful employment. Economic barriers prevent persons with disabilities from fully participating in employment, commerce, and economic empowerment programmes. Poverty alleviation programmes normally fail to specifically identify persons with disabilities as a target group and even when identified, such persons still face many obstacles. Many are condemned to live in extreme poverty. These barriers can be overcome by empowering persons with disabilities into economically productive members of society through adequate training and economic empowerment programmes.

1.5.4 INADEQUATE ACCESS TO ASSISTIVE TECHNOLOGY, DEVICES, HABILITATIVE AND REHABILITATIVE SERVICES

Barriers in access to assistive devices, assistive technology, devices, and rehabilitative services means that persons with disabilities cannot meaningfully and effectively gain access to essential services for example banking, health, employment, and social media platforms. Persons with disabilities are excluded from mainstream society.

Addressing this barrier will enhance independence, communication, and full participation of persons with disabilities. It will also promote inclusivity and mainstreaming of persons with disabilities in the society.

1.5.5 LOW AWARENESS ON AVAILABLE SERVICES

Services that are available to persons with disabilities include tax exemption, registration of persons with disabilities, access financial programs, access to procurement opportunities (AGPO) and provision of assistive devices among others. Lack of awareness of existing services offered to persons with disabilities means that they are limited and cannot participate fully participate in the society.

Increased sensitization on the available services will lead to participation, improved quality of life, and improved public perception.

1.5.6 THE COMBINED EFFECT OF DISABILITY, NCDS AND, HIV AND AIDS

Although the extent to which HIV and AIDS has infected or affected persons with disabilities has not been determined yet, they suffer the same level of prevalence as the rest of the population. The combined effects of HIV and AIDS and Disability on a person or group of persons, present the Government with a situation of extreme challenge bearing the fact that existing programmes on HIV and AIDS in both the Government and private sector do not include access to inadequate strategies towards persons with disabilities.

1.5.7 INACCESSIBILITY TO INFORMATION, COMMUNICATION AND TECHNOLOGY

Whereas the advancement in the information superhighway has revolutionized the world, related technology remains largely inaccessible to persons with disabilities in terms of affordability, availability, accessibility, quality, design, and training for its use taking cognizance of adaptation of individualized category of disability. Electronic, print media and other modes of communication are generally inaccessible to people with visual, hearing, or intellectual disabilities. This prevents them from participating or benefiting from information in these channels. To overcome these communication barriers, it is imperative to introduce modes accessible by persons with disabilities. These include brailing of printed information, Kenyan sign language interpretation, eye-catching simplified messages, well-illustrated and easily repeatable information among others.

1.5.8 SPECIFIC CHALLENGES OF CHILDREN WITH DISABILITIES

As enshrined in Article 53 of the Constitution of Kenya, the Children's Act 2022, and other provision of law all children are entitled to equal treatment. This policy recognizes the high vulnerability of children with disability because of culture, stigmatization, exploitation, abuse, and myths and that the Government needs to take special

measures to protect them. The Government recognizes the challenges faced by children in marginalized regions and those needing special care and protection and that their needs should be addressed.

1.5.9 SPECIFIC CHALLENGES OF YOUTH WITH DISABILITIES

Article 260 of the Constitution of Kenya defines a youth to mean the collectivity of an individual who have attained the age of eighteen (18) years but not more than thirty-five (35) years.

The Government recognizes the challenges faced by youths with disabilities i.e. employment opportunities, health, access to higher learning and access to technology amongst others. This policy is committed to addressing these challenges by mainstreaming disability in all public and private sectors.

1.5.10 SPECIFIC CHALLENGES OF GIRLS AND WOMEN WITH DISABILITIES

Women and girls with disabilities face multiple discrimination based on gender, disability, and culture. This has resulted in extreme difficulties in their effort for self-realization. They are further relegated to the periphery in women and disability movements.

1.5.11 SPECIFIC CHALLENGES OF OLDER PERSONS WITH DISABILITIES

Article 260 of the Constitution of Kenya defines older member of society as person who has attained the age of 60 years. When persons grow older, they become vulnerable to impairment conditions and chronic illnesses that have significant long-term effects on their ability to carry out day-to-day activities. This may result in them being older persons with disabilities. On the contrary, there are those persons who had disabilities throughout their lifetime whose conditions are intensified by old age. In implementation of this policy the Government in collaboration with other stakeholders shall ensure that all the rights of older persons with disabilities are fully protected by taking policy, legislative measures.

1.6 PURPOSE, MISSION AND VISSION

PURPOSE

The purpose of this policy is to inform and provide guidelines for planning budgeting, implementation, monitoring and evaluation of policies, legislations, programmes and special measures for mainstreaming disability and empowering persons with disabilities.

VISION

An inclusive society where persons with disabilities enjoy their rights and fundamental freedoms.

MISSION

To promote, protect, and fulfill the rights and fundamental freedoms of persons with disabilities through accessibility, inclusion, transparency, accountability, and meaningful participation.

1.7 JUSTIFICATION

The Government recognizes that a significant proportion of the country's population is living with disability. The prevalence of disability is markedly higher among the vulnerable section of society, including children from poor households, women, older persons, and those from ethnic minority groups. This situation is compounded by the existence of disabling barriers that contribute to the disadvantages experienced by people with disabilities and result in poorer health, lower education, and less economic participation, all leading to higher rates of poverty and increased dependency, restricted participation, and exclusion. The implication for the country is clear. To address this situation, there is need to improve accessibility and equality of opportunity; promote participation and inclusion; and increase respect for the autonomy and dignity of persons with disabilities.

1.8 GUIDING PRINCIPLES AND VALUES

Seven principles guided the process of development of this policy and are crucial in the planning, implementation, and monitoring of the policy. The principles are anchored in the Constitution of Kenya specifically Article 10 Chapter four and twelve: Article 27. These are:

- **Equalization of opportunities:** Persons with disabilities have throughout history been disadvantaged by limitations imposed by their impairments. They have not benefited from available opportunities like the rest of society. Although it is difficult to fully compensate their lost capacities, measures provided in the policy ensure that they are accorded opportunities on equal basis through affirmative action.
- **Human rights-based approach to the disability agenda:** Underlying this process is the conscious departure from the ethos of charity to human rights and development approach to disability concerns. Whereas humanitarian intervention cannot be ruled out from time to time, human rights approach

demands that disability be considered as a planning tool in our development agenda and not be left to charity. The approach provides for protection from discrimination based on real or apparent grounds.

- **Mainstreaming:** Persons with disabilities are part and parcel of the society. They should be fully included in all aspects of life and their special needs be met within their communities instead of being isolated by institutional service delivery approaches.
- **Accessibility:** The provisions of this policy call for consideration of accessibility as a cross cutting concern. Accessibility should remain an underlying consideration in the built environment, information, and services.
- **Gender:** the provision of This policy is inclusive and address the unique needs of children women, youth, men, and older persons with disabilities taking cognisance of gender and disability.
- **Disability responsive budgeting:** This is where all Ministries, Departments and Agencies cater for issues and programmes for persons with disabilities. Previously budgeting for disability issues was left to the line Ministry.
- **Equality and non-discrimination**

CHAPTER TWO: POLICY FRAMEWORK

The consultative stages in preparing this policy identified 26 policy thematic areas as dealt within 2.1 to 2.26 of this chapter. To address the challenges faced by persons with disabilities the government identifies the following critical areas, objectives, and strategies.

2.1 EARLY IDENTIFICATION AND INTERVENTION

Early identification refers to the capacity and process to recognize any disability so as to understand the need for early intervention. Interventions refers to efforts meant to minimize progression of disability, its impact and to provide timely and appropriate support.

2.1.1 CRITICAL ISSUES AND CONCERNS

Effective early identification and intervention strategies are based on multidisciplinary approaches which include teams of professionals, accurate assessment of disabilities and clear referral systems.

Early identification and intervention efforts are meant to address disability support and requirements and to manage its impact in adulthood. However, only a small percentage of disabilities in children are detected. Early identification is limited due to lack of data, inadequate human resources, capacity, referrals, and linkages.

Such strategies should ensure the full participation of persons with disabilities and their families.

2.1.2 POLICY STATEMENT

The Government shall ensure early identification of disability and effective intervention measures. This entails multidisciplinary approaches, teams of professionals, accurate assessment of disabilities, accurate and updated data, clear referral systems and full participation of persons with disabilities, their families, and communities.

2.1.3 OBJECTIVE

To put in place a well-coordinated system for timely identification and intervention.

2.1.4 KEY INTERVENTIONS

- (a) To develop early identification and invention mechanism.
- (b) Ensure that infants and children with disabilities have access to medical care.
- (c) Enhance maternal and childcare for early identification of congenital conditions.

- (d) Develop appropriate and functional screening tools for identification and reporting of disabilities.
- (e) Build capacity and improve availability of personnel to implement timely identification and intervention.
- (f) Enhance training and empowerment of Community Health Promoters (CHPs) to enable them to participate in identification of impairments, the provision of primary assistance and referral to appropriate services.

2.1.5 POLICY OUTCOME

Prompt and timely management of disabilities based on identification and intervention services.

2.1.6 POLICY IMPACT

Early identification and intervention of disability.

2.2 AWARENESS AND PUBLIC EDUCATION

Awareness raising is a process of imparting the right information on a particular issue. In respect to this policy Awareness raising is used to change and influence attitude including those of professionals, employers, justice systems, government agencies, and service providers, on the rights of persons with disabilities.

2.2.1 CRITICAL ISSUES AND CONCERNS

Lack of awareness is largely responsible for the stigmatization, marginalization, and exclusion of persons with disabilities from the social, economic, and political development. The marginalization is largely founded on misconceptions, stereotype, myths, negative cultural practices, beliefs, and attitudes, which lead to prejudice and at times downright discrimination.

Additionally, retrogressive cultural practices come with problems like poor hygiene, concealment, and mistreatment of children with disabilities. Another challenge for persons with disabilities, which is closely related to lack of awareness, is the ignorance of society on the availability of medical, rehabilitation, training, and educational services.

2.2.2 POLICY STATEMENT

The Government shall conduct awareness campaigns in collaboration with Organizations of and for Persons with Disabilities, parents' groups, and other service providers.

2.2.3 OBJECTIVE

To increase the level of public awareness and information on the rights, obligations, needs, aspirations, and capacities of persons with disabilities.

2.2.4 KEY INTERVENTIONS

- (a) To organize activities in consultation with Organizations of and for Persons with Disabilities on public education in the society at large to mainstream disability issues in public and private sector policies and programmes.
- (b) Work with OPDs in influencing positive media portrayal as well as ensuring positive coverage of persons with disabilities, and their activities.
- (c) Conduct public education targeting persons with disabilities to transform them into independent individuals capable of participating in development at all levels and caring for their personal needs.
- (d) Initiate and support campaigns on policies, programmes, opportunities, information, and services for and concerning persons with disabilities.
- (e) Make disability mainstreaming compulsory in all education and training curricula including in teacher training, justice system personnel, health care personnel.

2.2.5 POLICY OUTCOME

A society that is informed on and respects the rights of persons with disabilities.

2.2.6 POLICY IMPACT

Inclusion, participation, and respect of persons with disabilities.

2.3 HABILITATION AND REHABILITATION

Habilitation refers to support services that help a person with disabilities keep, learn, or improve skills and function for daily living. These habilitative services may include physical and occupational therapy, physiotherapy, speech-language therapy, assistive devices and technology, and other services for persons with disabilities. These services are offered to persons with disabilities to enhance their ability to function effectively.

The term rehabilitation as used in this policy refers to a process of providing skills, knowledge and assistive devices and technology to enable children and adults with disabilities reach optimum mental, physical, and social functional levels.

Habilitation and Rehabilitation are lifelong processes that begin at birth or on the onset of disability. They involve interventions, training and retraining at all stages of life to help a person with disabilities adjust to different situations and circumstances in life.

2.3.1 CRITICAL ISSUES AND CONCERNS

Habilitation and Rehabilitation services vary in types and purposes depending on respective disabilities and should be provided depending on needs and circumstances of the service recipients.

There are very many forms of disabilities requiring a wide range of interventions. However, few persons with disabilities can afford, or have access to any form of habilitation and rehabilitation services. Where these services are available, they may be either inappropriate or inadequate.

2.3.2 POLICY STATEMENT

The Government shall ensure implementation of habilitation and rehabilitation policies, regulations and programmes based on the individual needs of persons with disabilities. This will enhance their full participation and equity in society.

2.3.3 OBJECTIVE

To promote habilitation and rehabilitation services and delivery strategies to accommodate all persons with disabilities.

2.3.4 KEY INTERVENTIONS

- (a) Develop appropriate habilitation and rehabilitation policies, regulations, and programmes, which accommodate the needs of all categories of persons with disabilities.
- (b) Collaborate with public and private service providers to avail habilitation and rehabilitation services within the community.
- (c) Increase and build capacity of professionals in habilitation and rehabilitation services.
- (d) Facilitate local production and availability of quality, appropriate and affordable assistive devices, and technologies.
- (e) Provide home-based habilitation and rehabilitation support.
- (f) Improve participation of persons with disabilities and their families in design and delivery of rehabilitation services.
- (g) Include cost of habitation and rehabilitation services be included in the social health insurance.

2.3.5. POLICY OUTCOMES

Improved Habilitation and Rehabilitation services to persons with disabilities.

2.3.6. POLICY IMPACT

Independence, inclusion, and full participation of persons with disabilities in all aspects of life.

2.4 EDUCATION

Education is a crucial service that persons with disabilities require to extricate themselves from marginalization, exclusion, and discrimination. Inclusive education at all levels enables them to effectively participate in the affairs of the society on equal basis.

2.4.1 CRITICAL ISSUES AND CONCERNS

As noted in the Sessional Paper Number 1 of 2005 on Education, education for learners with disabilities has for a long time been provided in special schools and special units attached to regular schools. Kenya has made a commitment to adopt inclusive education in line with the UNCRPD. However, although the sector policy for learners and trainees with disabilities recognizes inclusive education, it also provides for continuation of provision of education for persons with disabilities in special schools and units.

Inclusive education calls for the inclusion of children with disabilities in regular schools with the necessary support. It is concerning that many children with deaf and hard of hearing, visual, intellectual, or physical disabilities continue to remain in special schools and units.

There are inadequate comprehensive programmes for other areas of educational needs such as, psychosocial disability, autism spectrum disorder, down syndrome, cerebral palsy, albinism, deafblind, albinism, multiple, specific learning, and communication Disabilities.

At the same time, some children with disabilities are not identified for educational placement until it is too late in their adult life, this sadly results into lifelong illiteracy and abject poverty. Data on children with disabilities within the inclusive setting is largely unavailable.

2.4.2 POLICY STATEMENT

The Government is committed to ensuring that all the school age going children, irrespective of the type of their disabilities have access to appropriate education. It is also committed to quality inclusive education with the necessary support.

All appropriate measures shall be taken towards early identification, assessment, and placement. A collaborative effort with other service providers and experts will be sought to achieve this.

2.4.3 OBJECTIVES

- I. To provide free and compulsory basic education in inclusive setting to all children with disabilities considering their varied requirements reasonable accommodation and learning environments.
- II. To ensure accessibility and inclusion of persons with disabilities in tertiary and higher education institutions and ensure reasonable accommodation.

2.4.4 KEY INTERVENTIONS

- (a) Ensure early identification, educational assessment, and appropriate placement of learners with disabilities.
- (b) Provision of inclusive educational support such as, learner support assistants, Sign Language Interpreter Services, and psychosocial support.
- (c) Make all schools accessible to all learners irrespective of their disabilities.
- (d) Train and retraining of teachers in all schools on inclusive education.
- (e) Intensify monitoring, supervision, and quality control in all schools to ensure that learners with disabilities are provided for without discrimination.
- (f) Expand educational services to cater for categories of children and youth with disabilities not currently reached.
- (g) Promote the designing and development of appropriate technologies, assistive devices and learning materials for learners with disabilities.
- (h) Continuous review of curricular and reform examination systems in close collaboration with persons with disabilities through their representative organizations to provide the necessary adaptations to cater for the learning requirements of learners with all forms of disabilities at all levels.
- (i) Adapt and adopt information communication systems appropriate for learners with disabilities in all centres of learning.
- (j) Incorporate inclusive education in all teacher- training curriculum.
- (k) Promote and strengthen educational assessment and resource centres and services throughout the country.
- (l) Ensure the youth with disabilities in secondary, tertiary and university education are supported through affirmative action including in admission, examination, full financial support, and reasonable accommodation.
- (m) Establish and promote continuing and adult education for learners with disabilities.
- (n) Increase budgetary provision including adequate capitation for learners with disabilities to cater for all necessary support services and equipment's.

- (o) Ensure safety and security of all learners with disabilities within their learning environment.
- (p) Strengthen gender responsiveness to improve education for women and girls with disabilities.
- (q) Recognize and provide certificates to all learners with disabilities according to the level of education attained.

2.4.5 POLICY OUTCOMES

Increased number of persons with disabilities who have received quality education to prepare them for life.

2.4.6 POLICY IMPACT

Well-prepared citizens who are economically independent, self-reliant, socially integrated, participating in all aspects of life in society.

2.5 TRAINING

Training is a process of imparting appropriate skills and knowledge. Persons with disabilities require market driven training to empower and enable them to participate in socio-economic activities.

2.5.1 CRITICAL ISSUES AND CONCERNS

Majority of persons with disabilities lack sufficient skills to make them economically productive. Institutions offering training to persons with disabilities are few, scattered, lack requisite capacity and personnel, and often rely on traditional skills rather than market driven skills.

The government is putting a lot of emphasis on the development of technical and vocational training, however the TVETs are yet to embrace inclusion of persons with disabilities in order to have them trained in the market driven skills. The ministry of labour and social protection has been implementing vocational rehabilitative programme through 13 vocational rehabilitation centres which have been inadequately funded and have been offering skills training that are not quite compatible with the current labour market.

Consequently, majority of persons with disabilities lack appropriate skills to participate in the open labour market.

2.5.2 POLICY STATEMENT

The government shall ensure that training institutions are inclusive, accessible, and adequately equipped to offer appropriate skills training to persons with disabilities. All

public and private training institutions shall be required to comply with regulations issued by the government on service delivery to persons with disabilities.

2.5.3 OBJECTIVES

- I. To increase access to technical, vocational, entrepreneurial, and professional training opportunities for persons with disabilities
- II. To enhance the capacity of training institutions including technical vocational educational training centres (TVETs), Industrial training institutions and Vocational Rehabilitation Centres (VRCs) on skills-training to persons with disabilities.

2.5.4 KEY INTERVENTIONS

- (a) Develop programmes to train and retrain Instructors in the TVETs and industrial institutions on disability inclusion.
- (b) Facilitate adaptation of and provision of support mechanisms to technical, industrial, and vocational training institutions to make them inclusive and responsive to the needs of all trainees.
- (c) Facilitate the adaptation of the norms and standards of training, testing and certification to accommodate the needs of all trainees with all types of disabilities.
- (d) To transfer all vocational training services to the relevant department that deal with technical and vocational training.
- (e) Support training to parents, caregivers and volunteers working with learners with high support needs.

2.5.5 POLICY OUTCOMES

Well trained persons with disabilities able to fit in the labour market.

2.5.6 POLICY IMPACT

Empowered persons with disabilities fully participating in socio-economic development.

2.6 EMPLOYMENT AND ECONOMIC EMPOWERMENT

Economic empowerment is the process of enabling persons with disabilities to attain sustainable livelihood. Meaningful work and employment are essential to a person's economic security, physical and mental health, personal well-being, and sense of identity. At international level, the Convention on the Rights of Persons with Disabilities (CRPD) to which Kenya has acceded, in Article 27 provides for the recognition of the right to work and employment for all persons with disabilities. In its

first review by the UN Committee of Experts on the Rights of Persons with Disabilities, it was recommended that Kenya take all possible measures to ensure that the right to work for persons with disabilities are not only respected but also promoted, protected, and fulfilled.

The Constitution of Kenya underpins the Rights of Economic Empowerment of all persons in Articles 41 on labour relations and 43 on social and economic rights. More particularly section 54 (2) provides specifically for appointment of persons with disabilities in appointive and elective positions. Further Article 232(1) (i) (iii) provides for adequate and equal opportunities for appointment, training, and advancement at all levels of public service for persons with disabilities. Closely related to this at the National level are the provisions of the Persons with Disabilities Act 2003 Sections 12 to 17 which, among other things, provide for affirmative action in job placement and in securing employment. It also provides incentives to those who employ and adapt workplaces to accommodate the needs of employees with disabilities.

Section 32 of the Act establishes the National Development Fund for Persons with Disabilities as a permanent fund which is used for the benefit of persons with disabilities in Kenya. This is beside the National Fund for the Disabled of Kenya, a Trust Fund established in 1981.

The Employment Act 2007 recognizes disability and outlaws' discrimination on grounds of disability in employment both in public and private sectors. The Public Officers' Ethics Act 2003 expressly states that persons with disabilities should not be discriminated against in employment in public services.

Further, in the Public Procurement and Disposal Act of 2005 and Regulations made there under (2006), the Government reserves thirty percent of public procurement for women, youth, and persons with disabilities as a means of empowering these categories of marginalized sections of society.

The code on mainstreaming disability in Public Service obligates public entities to reasonably accommodate the needs of persons with disabilities in public service by retaining, retraining, and deploying public servants who acquire disabilities in the course of duty.

2.6.1 CRITICAL ISSUES AND CONCERNS

Despite the many legal framework highlighted above, People with disabilities are not accessing employment. There is a low level of compliance with the law with regard to their employment.

There exists stiff competition in the open labour market to the disadvantage of persons with disabilities with limited education and training. Persons with disabilities have not

taken active part in labour relations rights. Many persons with disabilities need both specific measures and reasonable accommodation in the formal and informal sectors.

2.6.2 POLICY STATEMENT

The Government is obligated to implement National and International standards on employment, economic empowerment, and observance of employment and labour relations rights for persons with disabilities in public and private sectors.

2.6.3 OBJECTIVE

To protect, promote and ensure access to employment and economic empowerment of persons with disabilities in public and private sectors.

2.6.4 KEY INTERVENTIONS

- (a) Establish a mechanism to implement the 5% constitutional and legal requirement of employment of persons with disabilities as provided in article 54(2) and Article 232(1) (i) (iii) of the constitution of Kenya 2010 and sections 12-16 of the persons with disabilities act of 2003 as well as the CRPD article 27.
- (b) Prohibit discrimination on the basis of disabilities with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuous of employment, career advancement and safe and healthy working conditions.
- (c) Ensure that persons with disabilities can exercise their labour and trade union rights on an equal basis with others.
- (d) Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training.
- (e) Promote vocational and professional rehabilitation, job retention and return to work programmes for persons who acquire disability while in service.
- (f) Make budgetary allocation in collaboration with stakeholders to ensure persons with disabilities access, tools, and start-up capital for self-employment.
- (g) Ensure at least 5% allocation of the self-enterprise funds including but not limited to the UWEZO WEF, NGAAF, YEDF
- (h) Ensure that at least 5% of Government Procurement budget is set aside for businesses owned by persons with disabilities under the AGPO.
- (i) Ensure compliance with the principle of reasonable accommodation in the workplaces.
- (j) Maintain a data base on job seekers with disabilities disaggregated by education, training, experience, sex, disability, age, and locality with a view to matching them to job opportunities to facilitate increased employment and economic empowerment of persons with disabilities.

- (k) Promote the participation of entrepreneurs with disabilities in national and international trade fairs and markets for goods and services.

2.6.5 POLICY OUTCOMES

Persons with disabilities participating in decent, gainful, and sustainable livelihoods.

2.6.6 POLICY IMPACT

Persons with disabilities who enjoy the right to economic security, physical and mental health, personal well-being, and sense of identity.

2.7 CULTURE, SPORTS, AND RECREATION

Persons with disabilities are entitled to participate in cultural, sports and recreation activities at county, national, regional, and international levels. In accordance with the Persons with Disabilities Act 2003, Section 28, persons with disabilities are entitled to the use of public facilities in cultural, sporting, or recreational activities to promote their talents free of charge. The Constitution under Article 7(b) promotes the diversity of indigenous languages of the people of Kenya including the Kenyan Sign Language. The State is also obliged to promote all forms of national and cultural expression as articulated in Article 11.

The government has put emphasis on the development of the creative industry through initiatives such as “talanta hela.”

2.7.1 CRITICAL ISSUES AND CONCERNS

In the recent past, attempts have been made to include persons with disabilities in sporting and recreation activities. Notable among this is the participation of Kenya’s persons with disabilities in the Paralympics games, special Olympics, including national and international games. However, more potential for participation by persons with disabilities is still untapped.

Equipment that aids sporting activities such as prosthetic fittings are insufficient and where available they are unaffordable to persons with disabilities. On the other hand, institutions for persons with disabilities have for long organized inter-school competitions but there exists a disconnect between the school events and what happens when participants leave school. Persons in the inclusive and integrated settings, unlike those in residential special schools, lack opportunities to engage in sports.

Efforts has not been given to the development and promotion of talents of persons with disabilities in the creative industry.

In so far as culture and recreation are concerned, not many persons with disabilities turn up for such events because recreational places are not accessible or friendly. Although the law provides for free access to recreational and sports facilities, in practice this does not happen.

Persons with disabilities are made to participate in cultural practices which are harmful and retrogressive. Some cultural practice perpetuates abuse of persons of disabilities for instance infanticide. In addition, in some cultures, persons with albinism are maimed and killed in practice of retrogressive cultural beliefs.

2.7.2 POLICY STATEMENT

The Government shall facilitate inclusion in cultural, sporting, and recreational activities for persons with disabilities across the country and outlaw retrogressive practices that are harmful and dehumanizing.

2.7.3 OBJECTIVES

- I. To promote the development, participation, and inclusion of persons with disabilities in sporting, recreational and cultural activities and to promote creative potential of persons with disabilities.
- II. To ensure accessibility of all infrastructural facilities and equipment for sporting, cultural and recreation activities for persons with disabilities.
- III. To recruit, train, motivate and retain specialists in sporting, recreation, and culture.

2.7.4 KEY INTERVENTIONS

- (a) Guarantee and monitor that all categories of persons with disabilities have opportunities to utilize their potential and to receive training, resources, and support.
- (b) Enforce the persons with disability Act section 28 that provides for free access to sporting cultural and recreational facilities, cultural performances, theatres, museums, cinemas, libraries, hospitality industry, monuments, and sites of national cultural importance.
- (c) Develop inclusive, regulations, and programmes to ensure that persons with disabilities participate in cultural, sporting, and recreational activities.
- (d) Provide incentives to private facility owners to enable them to offer their services to persons with disabilities for free.
- (e) Facilitate cultural, sports and recreation associations to include persons with disabilities at all levels of management, operations, and activities.

- (f) Facilitate the availability of adequate number of competent instructors and trainers in sporting, recreation, and culture for persons with disabilities.
- (g) Encourage and promote the participation, of persons with disabilities in mainstream sporting activities at county, national, regional, and international levels.
- (h) Ensure that persons with disabilities have an opportunity to organize, develop and participate in disability specific sporting and recreational activities and to this end encourage the provision of appropriate instruction, training, and resources.
- (i) Guarantee that children with disabilities have equal access to participating in cultural, sporting, and recreational activities within the education system.
- (j) Provide equal opportunities for persons with disabilities to develop and utilize their creative, artistic, and intellectual potential, not only for their own benefit, but also for the enrichment of their community.
- (k) Facilitate persons with disabilities to enjoy literature and other cultural materials in all accessible formats, including electronic, Easy Read, text, Kenyan Sign Language, Braille, audio, and multi-media.
- (l) Recognize and support specific cultural and linguistic identities of persons with disabilities including Kenyan Sign Language and deaf culture.

2.7.5 POLICY OUTCOME

Cultural, sporting, and recreational facilities are open and accessible to persons with disabilities.

2.7.6 POLICY IMPACT

Persons with disabilities utilize their cultural identity, creativity, exploit their sporting potential and access recreational facilities in society.

2.8 HEALTH

The Right to Health is a fundamental right as enshrined in the Constitution of Kenya. Article 43 (1) (a) guarantees each Kenyan citizen the right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care.

Reproductive Health is a state of complete physical, mental, and social wellbeing in all matters related to the reproductive system and all stages of life. This may include the right to plan a family, use birth control receive sex education and gain access to reproductive health services. Persons with disabilities have the right to the enjoyment of the highest attainable standards of health without discrimination on the basis of disabilities. This should cover all health issues that are specific to disabilities such as chronic situations that require continuous medication.

2.8.1 CRITICAL ISSUES AND CONCERNS

Most persons with disabilities have challenges accessing health facilities and services largely due to distance, terrain and a situation that is worsened by the fact that transportation of persons with disabilities is costly and unavailable. Due to the high poverty levels among persons with disabilities and their families, majority of them cannot afford healthcare services. In addition, persons with disabilities lack adequate information on available health care services.

Stereotypes and prejudices of health personnel remain a serious barrier to the realization to the right to health of persons with disabilities there are also challenges associated with the professional healthcare providers including their inability to communicate effectively with various categories of persons with disabilities. Consequently, health cases of persons with disabilities are not taken seriously.

Medical interventions aimed at correcting disabilities are carried out without free and informed consent of the concerned persons with disabilities and at times sterilization is carried out under the assumption that they do not have the right to have children. Reproductive health and related services are generally inaccessible to most persons with disabilities since they are assumed that not able to make their own decisions.

2.8.2 POLICY STATEMENT

The Government shall put in place measures that ensure health services are quality, adequate, affordable, and accessible to persons with disabilities.

2.8.3 OBJECTIVE

To ensure that persons with disabilities access quality health care services.

2.8.4 KEY INTERVENTIONS

- (a) Require health professionals to provide care of the same quality to persons with disabilities as to others, including based on free and informed consent by, among others, raising awareness of the human rights dignity, autonomy and needs of persons with disabilities through training at the promulgation of ethical standards for public and private health care.
- (b) Appropriately equip health care facilities to effectively provide health care services to persons with disabilities and ensure that health facilities are accessible.
- (c) Ensure provision of regular medication to persons with disabilities to preserve or improve their level of functioning.
- (d) Create awareness to persons with disabilities on their health rights.
- (e) Educate persons with disabilities and their caregivers on their health conditions to enable them to make informed decisions.

- (f) Provide social health insurance cover to support free or affordable health care services including assistive devices and technologies, commodities, medication, and other services specific to persons with various disabilities.
- (g) Provide timely and prompt medical attention. Ensure that persons with disabilities are given expedited attention at medical facilities.
- (h) Ensure access to accurate and comprehensive sexual and reproductive health information and services for all women and girls with disabilities especially those in rural areas.

2.8.5 POLICY OUTCOMES

Improved access to quality health care services to persons with disabilities

2.8.6 POLICY IMPACT

Persons with disabilities living a healthy and fulfilled life.

2.9 NON-COMMUNICABLE DISEASES, HIV AND AIDS

Persons with disabilities are infected and affected by HIV and AIDS like other members of society. They are excluded from the many awareness-raising programmes available to the general population on the bases of assumptions about their sexuality, communication barriers and information in inaccessible formats. Persons with disabilities are at a higher risk of developing NCDs because of their sedentary life.

2.9.1 CRITICAL ISSUES AND CONCERNS

Accessibility is a major challenge to persons with disabilities in accessing information and services related to HIV and AIDS. Communication for the Deaf is a major barrier to accessing the information that is available to the general population. Written information on HIV and AIDS is equally not accessible to persons with visual impairment, while those with intellectual disability are in a worse situation because information is not in formats accessible to them. This has resulted to lack of awareness and information on available services in relation to HIV and AIDS transmission and treatment.

Persons with disabilities who have HIV and AIDS may lack the personal support and financial support to access the necessary treatment. In addition, some of the treatment may result in certain persons with various categories acquiring non communicable diseases.

2.9.2 POLICY STATEMENT

The Government shall ensure equal access to information services and programmes on NCDs, HIV and AIDS.

2.9.3 OBJECTIVE

To promote access to awareness, prevention, rehabilitation management services on NCDs, HIV and AIDS among persons with disabilities

2.9.4 KEY INTERVENTIONS

- (a) Ensure information and health communication materials on NCDs, HIV and AIDS and are available in accessible formats to all persons with various categories of disabilities.
- (b) Promote access to NCDs, HIV and AIDS awareness programmes, prevention, treatment rehabilitation and management services for all persons with disabilities.
- (c) Ensure inclusion of persons with disabilities in implementation of existing NCDs, HIV and AIDS policies, legislation, and programmes.
- (d) In partnership with Organization of Persons with Disabilities (OPDs) disseminate information about NCDs, HIV and AIDS to persons with disabilities.
- (e) Encourage persons with disabilities to get tested and make Voluntary Counselling and Testing (VCT) services available to persons with disabilities.

2.9.5 POLICY OUTCOME

NCDs, HIV and AIDS programmes responsive to the needs of all persons with disabilities

2.9.6 POLICY IMPACT

Persons with disabilities provided necessary information and services in regard to NCDs, HIV and AIDS

2.10 SOCIAL PROTECTION

Article 28 of the Convention on the Rights of Persons with Disabilities obligates the State to ensure an adequate standard of living for all persons with disabilities. Article 43 of the Constitution expressly guarantees all Kenyans their economic, social, and cultural (ESC) rights. It explicitly asserts the right of every person to social security and binds the State in Article 43(3) to “provide appropriate social security to persons who are unable to support themselves and their dependents.” Therefore, Social Protection interventions should consider the disability related costs incurred by

persons with disabilities and their families and develop adequate support and care systems that ensure their full inclusion and participation in society.

In Kenya, social protection is defined as "A set of policies, programmes, interventions, and legislative measures aimed at cushioning all Kenyans against poverty, vulnerability, exclusion, risks, contingencies, and shocks throughout their life cycle, and promoting the realization of economic and social rights. The Government has put in place a National Safety Net Programme which comprises the Hunger Safety Net, Orphan and Vulnerable Children, Older Persons, and Persons with Severe Disabilities Programmes.

2.10.1 CRITICAL ISSUES AND CONCERNS

Even with the best measures for equalization of opportunities, there will be persons with disabilities who will not be able to secure or engage in any gainful economic activity. This may be the case either because of the nature of disability, high support needs, lack of necessary infrastructural support or simply lack of opportunity due to the general economic conditions of the country. Such persons will require social protection and the full-time services of a caregiver who in most cases does not engage in gainful economic.

2.10.2 POLICY STATEMENT

The Government shall offer social protection to persons with disabilities and engage with other stakeholders including the communities in which they live to support programmes and activities meant to empower them.

2.10.3 OBJECTIVES

- I. To facilitate and ensure that persons with disabilities have a basic means of livelihood.
- II. To provide social assistance, psycho-social and moral support to households of persons with disabilities.
- III. To provide community support and care systems that promote disability inclusion of persons with disabilities and their families while reducing unpaid care.

2.10.4 KEY INTERVENTIONS

- (a) Provide persons with disabilities who are unable to engage in gainful economic activities with regular cash transfer to meet their basic needs.
- (b) Provide provision of tax reliefs and exemptions to persons with disabilities.

- (c) Facilitate pro conditional social security, tax reliefs and exemptions to individuals who care for persons with high support needs.
- (d) Create awareness and incentives to private sector organizations to increase opportunities for employment of persons with disabilities.
- (e) Provide health insurance.to persons with disabilities who are not able to make their own contribution.
- (f) Put in place measures to sensitize persons with disabilities in informal sectors including those under the National Safety Net Programmes to save in the existing social security regimes for purposes of securing their livelihoods in old age.
- (g) Provide reasonable accommodation to persons with disabilities who require personal support services to meaningfully engage in society.
- (h) Establish databases on all social security and assistance schemes and make the information available in accessible formats.
- (i) Strengthen and enhance peer support and counselling among persons with disabilities and their caregivers and enlist and empower community-based volunteers to support these families.
- (j) Establish respite community services to offer support to caregivers of persons with disabilities.
- (k) Facilitate Organizations of and for Persons with Disabilities and parents' organizations to establish contacts and partnerships with mainstream social security and assistance service.
- (l) Establish support measures for all persons with disabilities including intellectual psychosocial and developmental disabilities including crisis and recovery supports, assertive outreach care and a comprehensive range of relevant medical, psychological, and social therapies.

2.10.5 POLICY OUTCOMES

- I. Secure livelihoods for persons with disabilities.
- II. Empowered and socially secured livelihoods for persons with disabilities.

2.10.6 POLICY IMPACT

Inherent and dignified life to persons with disabilities

2.11 PARTICIPATION AND REPRESENTATION

Participation and representation are important principles of governance in both public and private sectors. In this respect, persons with disabilities should have the opportunity to meaningfully participate and be represented in key decision-making processes and bodies. These principles are expressed in the Article 3 of the CRPD and are further entrenched in the Constitution of Kenya Articles 10, 27, 54, 56,100 and

232 and extend to participation and representation of persons with disabilities in all sectors of life.

2.11.1 CRITICAL ISSUES AND CONCERNS

Despite the appropriate legal framework indicated above to ensure that persons with disabilities and their representative organizations meaningfully participate and are represented in governance and key decision-making processes, persons with disabilities continue to be marginalized and excluded. Whenever they are considered, it is in a manner of afterthought, charity, or tokenism. Their views and concerns are usually ignored when decisions affecting them are made, leading to further paternalization.

It is also noted that among persons with disabilities women, children and older persons experience multiple and intersecting marginalization.

2.11.2 POLICY STATEMENT

The Government shall put in place policies, legislation, and programmes to ensure that persons with disabilities, regardless of type of disability, age, and sex, effectively participate and are represented in decision making processes at all levels.

2.11.3 OBJECTIVE

To promote effective participation and representation of persons with disabilities at all levels of development and decision making.

2.11.4 KEY INTERVENTIONS

- (a) Mainstream the principles of equal opportunity to enhance the participation and representation of persons with disabilities at all spheres of life including governance and decision making.
- (b) Enforce the provision of reservation of at least five percent opportunities for persons with disabilities in both elective and appointive positions at all governance decision making levels.
- (c) Promote involvement of persons with disabilities, their families, caregivers, and Organization of and for Persons with Disabilities in community programmes and in provision of services.
- (d) Establish mechanisms to increase participation and representation of persons with disabilities at all levels of elective and appointive positions.
- (e) Promote opportunities for persons with disabilities to develop self-confidence for self-expression, representation, and participation.
- (f) Conduct awareness creation campaigns and programmes to eliminate social-cultural barriers which hinder full participation and representation of persons with disabilities.

2.11.5 POLICY OUTCOMES

Increased participation and representation of persons with disabilities and their representative organizations at all levels of governance and decision making.

2.11.6 POLICY IMPACT

Effective and inclusive participation and representation of persons with disabilities and their representative organizations at all levels of decision-making.

2.12 TRANSPORT

Persons with disabilities require access on an equal basis with others to physical environment and transportation. An accessible, inclusive public transport system therefore it is a key component to the realization of the right of movement of persons with disabilities.

2.12.1 CRITICAL ISSUES AND CONCERNS

Despite the legal provisions in the country, accessibility in the transport sector for persons with disabilities has remained a challenge due to lack of implementation and enforcement. Public transport systems are largely inaccessible and the operators insensitive to the needs of persons with disabilities. The transport infrastructure is rarely designed to accommodate the various needs of persons with disabilities.

2.12.2 POLICY STATEMENT

The Government shall ensure that all transport systems are accessible, available, and inclusive to persons with disabilities.

2.12.3 OBJECTIVE

To identify and eliminate barriers in the transport sector to ensure accessibility, availability, and inclusivity of persons with disabilities.

2.12.4 KEY INTERVENTIONS

- (a) Enforce legislation and implement policies on universal design of public transport facilities that are convenient, inclusive, and easily accessible to persons with disabilities.
- (b) Support innovative designs of modes of transport for use by persons with disabilities.

- (c) Make accessible, available, and inclusive travel information, signage, symbols, and warning signals for all persons with disabilities.
- (d) Undertake sustained awareness campaigns among transport operators on the needs and challenges of persons with disabilities.
- (e) Provide appropriate and adequate road safety measures.
- (f) Allocate appropriate, accessible, and adequate parking lots for persons with disabilities in public and private car parks.
- (g) Facilitate persons with disabilities to receive appropriate training to enable them to use motorized equipment.
- (h) Facilitate access by persons with disabilities to quality mobility aids, assistive devices, and technologies at subsidized costs.

2.12.5 POLICY OUTCOMES

A transport system that is inclusive and accessible to persons with disabilities.

2.12.6 POLICY IMPACT

Persons with disabilities are able to use the transport system.

2.13 REGISTRATION

Registration of persons with disabilities is a continuous process that captures their data disaggregated by the type of disability, support needs and services, age, geographical location, sex, and education level for purposes of national planning and service delivery. Similarly, institutions and Organizations of and for Persons with Disabilities should be registered to facilitate regulation and monitoring of the services they offer.

2.13.1 CRITICAL ISSUES AND CONCERNS

In spite of the continuous registration of persons with disabilities and their organizations as provided for by the Law, many persons with disabilities and their organizations remain unregistered.

This scenario implies that the available data is inadequate thus possessing a challenge in programme design and implementation. To mitigate this and increase registration, there is need to provide for awareness creation, digital literacy, and accessibility of digital platforms for persons with disabilities.

2.13.2 POLICY STATEMENT

The Government shall put in place policies and programmes that will ensure that all persons with disabilities and their organizations are duly registered by the National Council for Persons with Disabilities for the purposes of planning and service delivery.

2.13.3 OBJECTIVE

To register all persons with disabilities, Organizations of and for Persons with Disabilities for purposes of gathering evidence-based data for national planning, programming, and service delivery.

2.13.4 KEY INTERVENTIONS

- (a) Strengthen the capacity of the National Council for Persons with Disabilities with adequate administrative structures, financial and human resources to enable it to discharge its functions efficiently and effectively.
- (b) The National Council for Persons with Disabilities to build the capacities of persons with disabilities to access digital services.
- (c) Improve the central database on persons with disabilities and link it to the National Social Protection Enhanced Single Registry and any other applicable Government Management Information Systems.
- (d) Review processes for identification and registration of persons with disabilities, organizations and connected institutions as provided for by the existing legal framework.

2.13.5 POLICY OUTCOMES

Evidence informed national plans, programmes, and service delivery to persons with disabilities.

2.13.6 POLICY IMPACT

Quality and efficient service delivery to persons with disabilities

2.14 LAND, HOUSING AND PROPERTY

Ownership of land, housing and property is a fundamental human right for persons with disabilities as a means of realizing their security, livelihood, self-reliance, and security on an equal basis with others. Land is an asset controlled by the Government by way of demarcation, mapping, subdivision, and registration. On the other hand, housing and property are acquired through individual effort.

2.14.1 CRITICAL ISSUES AND CONCERNS

Access to and ownership of land remains a challenge to many Kenyans due to the high costs associated with land acquisition. In the case of persons with disabilities, the situation is compounded further by societal prejudices regarding their ownership and inheritance of land.

Decent and affordable housing remains a dream for many Kenyans and especially persons with disabilities who are disadvantaged due to society's negative attitudes regarding property ownership and inheritance by them.

The violation of the rights of persons with disabilities regarding ownership of land, housing and property are hardly reported and where reported are not taken seriously. In instances where such cases are taken to court, they take too long to be determined. This is further exacerbated by the fact that the courts are inaccessible, and the language of court proceedings is unaccommodating to various categories of persons with disabilities. For instance, persons with intellectual and psychosocial disabilities are deemed to lack the requisite legal capacity to institute or defend a suit. These factors result in delay and denial of access and dispensation of justice by persons with disabilities on an equal basis with others.

2.14.2 POLICY STATEMENT

The Government shall put in place policies, legislation, and programmes to ensure that persons with disabilities access and own land, housing, and property on an equal basis with others.

2.14.3 OBJECTIVE

To promote and facilitate access to land, adequate housing, and property by persons with disabilities.

2.14.4 KEY INTERVENTIONS

- (a) Establish mechanisms and structures to eliminate barriers which hinder persons with disabilities from acquiring and owning land, housing, and property.
- (b) Ensure that there is reservation of at least five percent of affordable and accessible houses to persons with disabilities in all-housing schemes.
- (c) Ensure architectural design in all housing schemes are in conformity with the provisions of the Building Codes.
- (d) Promote inclusive financial and credit services targeting persons with disabilities to acquire land, housing, and property.

2.14.5 POLICY OUTCOME

Enhanced ownership of land, house, and property by persons with disabilities.

2.14.6 POLICY IMPACT

Adequate standard of living for persons with disabilities and their families.

2.15 INFORMATION AND COMMUNICATION

According to Articles 33 (1) (a) and 35 of the Constitution of Kenya, every citizen, including persons with disabilities, have the right to access to information and freedom of expression which includes, the freedom to seek, receive or impart information or ideas. Information is important for the purposes of claiming and exercising the fundamental rights and making appropriate decisions thereof. Article 21 of the CRPD states all appropriate measures to be undertaken to ensure that persons with disabilities can exercise the right to freedom of expression, opinion, and access to information.

On the other hand, communication is the process of transmitting information and ideas in different forms and through various media for purposes of human interaction and development. Given that there exist various types of disabilities, it follows that there are diverse needs for accessible information and communication formats.

2.15.1 CRITICAL ISSUES AND CONCERNS

The Rights to information and communication are largely inaccessible to the majority of persons with disabilities and where some can access the costs are exorbitant. The available formats, channels and technologies rarely suit the various needs of persons with disabilities. The additional costs of skills, equipment and adaptive services make access to these rights extremely expensive for both persons with disabilities and service providers.

The Government recognizes the above concerns and the fact that different disabilities require specific approaches. Through this policy, it aims at creating an accessible environment that enables stakeholders in the information and communication sector function effectively and efficiently in provision of ICT materials and devices that are affordable and disability compliant.

2.15.2 POLICY STATEMENT

The Government shall develop appropriate and inclusive policies, legislation, and programmes to ensure that all categories of persons with disabilities effectively access their rights to information and communication.

2.15.3 OBJECTIVE

To improve access to information and communication by persons with disabilities.

2.15.4 KEY INTERVENTIONS

- (a) Enforce legislation on disability friendly languages for use by individuals, public and service providers.
- (b) Develop and promote use of accessible and augmentative communication systems for persons with communication difficulties.
- (c) Promote and enhance the use of Kenya Sign Language, Braille, and any other accessible means of communication.
- (d) Exemption from duties, taxes and other levies on equipment and materials and services used in the production of information in accessible formats for persons with disabilities.
- (e) Provide incentives to service providers such as public and private broadcasters, media outlets, and institutions of learning, research institutions and libraries which provide accessible information to persons with disabilities. Provide innovative, improved, and accessible technology to enhance efficient communication for persons with disabilities.
- (f) Encourage educators and employers to provide assistive communication equipment such as screen reading software's digital braille and video relay services to learners and employees with disabilities according to their needs.
- (g) Facilitate access to public and private information and communication service points to persons with disabilities.
- (h) Ensure that public agencies provide information in the public domain to persons with disabilities in accessible formats.
- (i) Provide incentives to authors and publishers to allow the production and reproduction of their work in accessible formats for use by persons with disabilities.
- (j) Ensure service providers avail internet services in formats which are accessible to and usable by various categories of persons with disabilities.

2.15.5 POLICY OUTCOME

Improved access to information and communication by persons with disabilities.

2.15.6 POLICY IMPACT

Informed and empowered persons with disabilities to communicate and participate effectively in all spheres of life.

2.16 LEGAL CAPACITY

Legal capacity is a person's ability to be recognized everywhere as a person before the law. This enables them to make their decisions and exercise their rights on an equal basis with others. It also enhances their independence and enjoyment of legal rights through the application of appropriate measures.

2.16.1 CRITICAL ISSUES AND CONCERNS

Legal capacity is the fulcrum of all other human rights including the right to access and meaningful participation in claiming the same. More often than not, persons with intellectual and psychosocial disabilities in Kenya are denied their right to exercise legal capacity in many areas of social-economic, political, and cultural aspect of their lives. Subsequently, this leads to discrimination against this category of persons.

Various discriminatory laws and practices permit guardianship Orders to be issued against persons with disabilities, medical treatment without their consent, deny right to marriage, right to enter contract and deny them access to the justice and political participation on account of 'unsoundness of mind' among others. Other general practices that deny persons with disabilities the right to legal capacity include disinheritance of property, forced sterilization of women and lack of reasonable accommodation in all spheres of life.

2.16.2 POLICY STATEMENT

The government shall develop policies, enact legislations, and implement programmes to promote and actualize the right to legal capacity for persons with disabilities.

2.16.3 OBJECTIVE

- I. To ensure that persons with disabilities are recognized as having legal capacity.
- II. To ensure full enforcement of legal rights for persons with disabilities.

2.16.4 KEY INTERVENTIONS

- (a) Develop a comprehensive policy on legal capacity and put in place supported decision-making programmes.
- (b) Review legislation that undermines the legal capacity of persons with disabilities which include: the Mental Health Act cap 248, the Marriage Act No 4 of 2015, the elections Act No 24 of 2011, among others.
- (c) Establish legislative framework that provides sanctions to deter persons from infringing on the rights of persons with disabilities.
- (d) With the support of the Chief Registrar of Judiciary in conjunction with Directorate of Children Services, establish a database of persons with disabilities who are under guardianship.
- (e) Conduct awareness with the aim of changing attitudes and ensuring that communities are accommodative to persons with disabilities.
- (f) Sensitize persons with disabilities on their legal rights.

- (g) Build capacity of professionals in all sectors on legal rights for persons with disabilities
- (h) Provide adequate, accessible, acceptable, and affordable quality mental health care psychosocial support and alternative therapies.
- (i) Establish effective safeguards to ensure that the measures relating to the exercise of legal rights are not abused.
- (j) Improve mainstreaming of persons with disabilities matters in planning, budgeting, and programmes by the government.

2.16.5 POLICY OUTCOME

Persons with disabilities enjoying and exercising their right to legal capacity in all aspects of life.

2.16.6 POLICY IMPACT

Increased number of persons with disabilities making their own decisions either independently or with support services, and such decisions accorded equal recognition and respected.

2.17 ACCESS TO JUSTICE

Access to justice is the process of reporting, investigating, adjudicating, and determining a matter before a properly constituted institution in compliance with the rule of law. It may also be through alternative forms dispute resolution mechanisms, mediation, negotiation, arbitration, and traditional dispute mechanisms.

Persons with disabilities as consumers of justice are entitled to access speedy and fair adjudication process as captured in article 13 of UNCRPD and Constitution of Kenya in Articles 10, 20, 21, 22, 23, 47, 48, 49, 50, 51 and 54.

2.17.1 CRITICAL ISSUES OF CONCERN

It is noted that the processes of accessing justice in Kenya are out of reach for many, especially persons with disabilities. This is due to various lack of awareness and negative attitudes on the part of personnel in the justice system about the unique nature of the needs of persons with disabilities, the cumbersome and rigorous reporting processes, inaccessible information and communication formats, procedural and evidentiary methods used in the judicial institutions and the cost of hiring lawyers is exorbitant for majority of persons with disabilities. Schemes offering legal aid are yet to conceptualize and fully embrace the unique legal needs of persons with disabilities.

The concept of legal capacity, use of intermediaries and sign language interpreters are yet to be understood and fully incorporated in the judicial system in Kenya. Further the built environment does not conform to the standards of accessibility for persons with disabilities. In addition, persons with disabilities face barriers in e-filing system and accessing virtual court are due to lack of or limited ICT skills.

The majority of persons with disabilities, caregivers and intermediaries are unaware of the existence of various legislations on their rights and obligations.

2.17.2 POLICY STATEMENT

The Government shall put in place policies, legislation, and programmes to ensure that persons with disabilities access justice.

2.17.3 OBJECTIVE

To mainstream disability in the law enforcement agencies and legal systems

2.17.4 KEY INTERVENTIONS

- (a) Sensitize persons with disabilities, caregivers, and intermediaries on how to access the judicial systems.
- (b) Protect persons with disabilities, especially children, women, older persons, and persons with mental disabilities from all forms of neglect, abuse, and violence.
- (c) Promote disability sensitive research into the laws of Kenya and ensure legal literacy amongst persons with disabilities.
- (d) Train legal practitioners, administrators, law enforcement officials, medical personnel and other stakeholders on handling cases involving persons with disabilities.
- (e) Enforce the existing legal framework on the rights of persons with disabilities.

2.17.5 POLICY OUTCOME

Accessible judicial system to persons with disabilities

2.17.6 POLICY IMPACT

Persons with disabilities enjoy their rights.

2.18 ORGANIZATIONS OF AND FOR PERSONS WITH DISABILITIES

Organizations of and for Persons with Disabilities include associations or societies formed by persons with disabilities for their welfare, protection, participation, and self-representation. These organizations include but are not limited to associations and

societies and self-help groups formed by parents, caregivers and guardians representing persons with disabilities.

Organizations of and for Persons with Disabilities provide advancement rights and provision of services to persons with disabilities including assistive devices, economic empowerment, awareness raising and advocacy.

Organizations of and for Persons with Disabilities include Non-Government Organizations, Faith Based Organizations, Community Based Organizations formed for the purposes of rendering services for empowerment of persons with disabilities.

These organizations identify needs and priorities, resource mobilization, provision of support services and assistive devices, creating public awareness and advocating for change. In addition, they participate in planning, implementation, monitoring and evaluation of programmes and services.

2.18.1 CRITICAL ISSUES OF CONCERN

Some Organizations of and for Persons with Disabilities that affect their performance in advancement and protection of disability rights. These challenges include weak organizational and technical capacity, inadequate financial base, disjointed voices within the disability fraternity leading to inability to command substantial county, national, regional, and international influence.

2.18.2 POLICY STATEMENT

The government shall continue to create a conducive operational environment for Organizations of and for Persons with Disabilities to enhance full and meaningful participation of persons with disabilities in all spheres of life.

2.18.3 OBJECTIVES

- I. To recognize and involve Organizations of and for Persons with Disabilities in National and county development processes putting into consideration gender equality and disability diversity.
- II. To strengthen Organizations of and for Persons with Disabilities by building their organizational and technical capacities and providing financial support for programme implementation, including monitoring and evaluation.

2.18.4 KEY INTERVENTIONS

- (a) Coordinate and harmonise continuous registration and profiling of organisation of and for persons with disabilities within the existing registration frameworks.

- (b) Lobby the Government to develop and adopt policies, legislations and programmes that advance the interest and rights of persons with disabilities.
- (c) Promote equitable and effective representation of Organizations of and for Persons with Disabilities in key decision-making bodies.
- (d) Facilitate coordination and harmonization of programmes by various Government Ministries, Counties, Departments, agencies, stakeholders, and development partners involved in the provision of services to persons with disabilities.
- (e) Support inclusive planning, budgeting, and implementation of programmes to enhance resource allocation.
- (f) Support institutional, technical, and financial capacity building of Organizations of and for Persons with Disabilities through structured processes.

2.18.5 POLICY OUTCOMES

- I. Empowered, cohesive, inclusive, equitable and gender responsive sector of Organizations of and for Persons with Disabilities.
- II. Effective, efficient, and accountable internal governance in OPDs.

2.18.6 POLICY IMPACT

- I. Strengthened governance of Organizations of and for Persons with Disabilities.
- II. Enhanced Capacity to meaningfully participation in all spheres of life.

2.19 ASSISTIVE DEVICES. TECHNOLOGIES AND SUPPORT SERVICES.

Persons with disabilities require various types of assistive devices, technologies and support services to help them navigate comfortably the environment where they live. Assistive devices and support services enable persons with disabilities to increase their level of independence in carrying out their daily living activities as well as participating in socioeconomic activities.

2.19.1 CRITICAL ISSUES AND CONCERNS

The assistive devices, technologies, and support services requirements for persons with disabilities are expensive, insufficient, inadequate, obsolete, which hinder them from effective participation in society and access to essential services and goods. The assistive devices and support services require skilled maintenance and trained instructors to facilitate their use.

Individuals and families of persons with disabilities are unable to afford specialised services and are thus overwhelmed by the care demands. These specialists remain few, take long to train and are expensive to retain.

2.19.2 POLICY STATEMENT

The Government shall develop policies and programmes to facilitate the provision of affordable and quality assistive devices, technologies, and support services to persons with disabilities.

2.19.3 OBJECTIVES

To ensure that persons with disabilities have access to affordable assistive devices, technologies, and support services to facilitate mobility, accessibility, equalisation of opportunities and inclusion in society.

2.19.4 KEY INTERVENTIONS

- (a) Facilitate provision of assistive devices, technologies, and support services to persons with disabilities.
- (b) Expedite exemption from taxes, duties and other levies on vehicles, motorized wheelchairs, and assistive devices, imported or manufactured locally, intended for use by persons with disabilities and Organizations of and for Persons with Disabilities.
- (c) Promote and facilitate standardization, production, fabrication, adaptation, repair, and maintenance of assistive devices in the country.
- (d) Train and avail specialized courses on support services to service providers.
- (e) Train persons with disabilities and their assistants on the use of assistive devices.
- (f) Subsidize the cost of assistive devices, sunscreen lotion and support services and, where necessary provide them free of charge.
- (g) Encourage and support innovations in appropriate technologies in assistive devices and support services for different categories of persons with disabilities.
- (h) Develop policies and laws to facilitate easy access for persons with disabilities to services in both public and private institutions, including banking, insurance, transport, hotels and restaurants, postal and telephone services.

2.19.5 POLICY OUTCOMES

Enhanced mobility and increased availability, affordability, and accessibility of assistive devices technologies and support services for persons with disabilities

2.19.6 POLICY IMPACT

Persons with disabilities living independently and fully participating in all aspects of life.

2.20 RESEARCH

Research plays a critical role in development of National and International policy and legal instruments in responding to disability matters. To this extent, the national and county governments are committed to collect and analyze data and disaggregated statistics. This information will aid in the formulation and implementation of policies, programmes, and support innovation. Lack of a harmonized and coordinated approach to research on disabilities matters has led to a situation where there is no synergy, inadequate planning, and occasional use of unsatisfactory approaches in tackling disability related issues and concerns.

2.20.1 CRITICAL ISSUES AND CONCERNS

Critical issues and concerns on research include inadequate disaggregated data on disability to support policies and programmes, limitations in transfer of innovative technologies, limited capacity in conducting research and inadequate resources. This is compounded by lack of formal institution dedicated to conduct research on disability and assistive technologies.

2.20.2 POLICY STATEMENT

The national and county Governments are committed to put in place policies, legislations, and programmes to facilitate research on matters related to disability.

2.20.3 OBJECTIVES

- I. To collect, analyse, disaggregate, and disseminate appropriate information, statistical and research data to inform and guide in the formulation of policies and programmes geared towards the welfare of persons with disabilities.
- II. To comply with established standards on data protection, confidentiality privacy and other legal provisions.
- III. To comply with values and principles on human rights and fundamental freedoms and ethical use of information and use of correct data on persons with disabilities.
- IV. To ensure research carried out takes note of the underrepresented groups such as persons with intellectual, psychosocial, and autism spectrum disorder.

2.20.4 KEY INTERVENTIONS

- (a) Facilitate the inclusion of disability component/ indicator in all national data collection survey instruments.
- (b) Facilitate availability of financial and technical assistance to stakeholders, universities, Organizations of and for Persons with Disabilities and other research institutions to conduct disability responsive research and develop appropriate technologies.
- (c) Disseminate necessary disaggregated data and information in accessible format to influence policy and programming decisions.
- (d) Establish a national research database and depository on persons with disabilities for use by the public and service providers.
- (e) Implement provisions of national, regional, and international policies and laws on research pertaining to persons with disabilities.

2.20.5 POLICY OUTCOME

Disability inclusive research

2.20.6 POLICY IMPACT

Evidenced based disability policies, programmes, and interventions.

2.21 WOMEN AND GIRLS WITH DISABILITIES

Women and girls with disabilities are vulnerable and exposed to multiple and intersecting discrimination in the society. This is especially so for those from ethnic minority and marginalized communities. They therefore require specific measures and protection through county, national, regional, and international legal framework. This policy seeks to ensure that women and girls with disabilities exercise and enjoy their human rights and fundamental freedoms as set out in these instruments.

2.21.1 CRITICAL ISSUES AND CONCERNS

Critical issues and concerns confronting Women and girls with disabilities include harmful cultural practices, neglect or overprotection, abandonment, abuse, inaccessible sexual and reproductive health services, forced sterilization and abortion, separation from their children and family members and sexual and gender-based violence. In addition, they are also faced with marginalization, abject poverty, restriction, and exclusion in social, economic, cultural, and political spheres of life. These are further worsened by illiteracy and disinheritance of property.

2.21.2 POLICY STATEMENT

The Government shall take measures to ensure their protection full development, advancement and empowerment of women and girls with disabilities and to guarantee them the exercise and enjoyment of their human rights and fundamental freedoms as set out in the county, national, regional, and international legal instruments.

2.21.3 OBJECTIVES

- I. To empower women and girls with disabilities in all spheres of life.
- II. To build confidence and self-esteem in women and girls with disabilities

2.21.4 KEY INTERVENTIONS

- (a) To mainstream issues of women and girls with disabilities in all legislation that address women and girls.
- (b) Inclusion of women and girls with disabilities in all programmes that target women, for instance WEF, nomination of women in parliament or in county assemblies, appointment to board.
- (c) Access to justice on women who are discriminated.
- (d) Protection against all forms of discrimination including but not limited to intersectional discrimination, discrimination in employment.
- (e) Protection of the rights of women and girls to sexual and reproductive health services.
- (f) Put in place measures to ensure that referral and follow up systems for SGBV are accessible to all women and girls with disabilities including gender violence recovery centres.

2.21.5 POLICY OUTCOME

A society where women and girls with disabilities are empowered and confident in life.

2.21.6 POLICY IMPACT

Women and girls with disabilities e enjoying and exercising their fundamental rights and freedoms.

2.22 OLDER PERSONS WITH DISABILITIES

According to Kenya Population and Housing Census of 2019, the population of older person was approximately 2.7 million or 6% of the total population. Due to improved living standards, people are living longer but at the same time there are lifestyle diseases that result in disabilities. There is therefore the need to address the condition

of the older population and more particularly, those who transit to be older persons while they are also persons with disabilities.

2.22.1 CRITICAL ISSUES AND CONCERNS

Older persons with disabilities are likely to experience challenges related to old age and disability. Older persons are more likely to experience challenges in access to healthcare services, loss of income, access to housing, personal mobility, inaccessible social protection and social security, isolation, abuse and violence, neglect, poor nutrition, and access to finance.

Extended family support systems have broken down. This has made it difficult for older persons with disabilities to receive care and support within the family.

2.22.2 POLICY STATEMENT

The Government shall take appropriate measures to ensure that the rights of older persons with disabilities are fully protected.

2.22.3 OBJECTIVES

- I. To enable older persons with disabilities effectively participate in the affairs of the society, pursue their personal developments, live in dignity, respect and be free from abuse.
- II. To enable older persons with disabilities, receive personal care and assistance within the community.

2.22.4 KEY INTERVENTIONS

- (a) Promote the participation and inclusion of older persons with disabilities in development and decision-making processes and to live in dignity.
- (b) Protect older persons with disabilities from violence, abuse, neglect, isolation, and exploitation.
- (c) Ensure that older persons with disabilities have access to appropriate services that respond to their need within the community.
- (d) Streamline the implementation of the Pensions Act and schemes to ensure ease and timely payment of pension to older persons with disabilities.
- (e) Provide financial support in form of social assistance for all older persons with disabilities that can support adequate standards of living.
- (f) Ensure full coverage of health care services for all older persons including lifestyle and old age diseases through the social health insurance.

2.22.5 POLICY OUTCOMES

The rights and fundamental freedoms of older persons with disabilities upheld and respected.

2.22.6 POLICY IMPACT

Older persons with disabilities receiving necessary support to enjoy and exercise their rights within the society.

2.23 CHILDREN WITH DISABILITIES

Kenya is a signatory to various international and regional conventions on safeguarding the rights of children with disabilities. Article 7 of the CRPD requires State Parties to put necessary measures to ensure that children with disabilities enjoy all the human rights and fundamental freedoms on an equal basis with other children and that in all matters concerning the best interest of the child is put into consideration. The Convention on the Rights of the Child requires State Parties to take appropriate measures to ensure that children are protected from all forms of discrimination irrespective of various attributes including disability.

Article 28 of the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Persons with Disabilities in Africa emphasis that State Parties shall ensure that children with disabilities fully enjoy human and peoples' rights on an equal basis just like their peers.

The Constitution of Kenya 2010, under Article 53 makes provision for the rights of children including children with disabilities pertaining to name, nationality from birth, free and compulsory basic education, basic nutrition, and healthcare and to be protected from abuse, neglect and harmful cultural practices, all forms of violence, inhuman treatment, and punishment, hazardous or exploitative labor.

The Children's Act 2022, provides for safeguarding the rights and interest of the child and puts an emphasis on parental responsibility. It also provides for the child parental care protection which includes equal responsibility of mother and father not to be detained and for the best interest of the child in every matter concerning that child. This Policy recognizes the high vulnerability of children with disabilities

2.23.1 CRITICAL ISSUES AND CONCERNS

Critical issues and concerns confronting children with disabilities include concealment, violence, abuse, neglect, child labour, denial of basic education and training, discrimination, sexual abuse and exploitation, child trafficking, access to appropriate health, rehabilitation and habilitation services, access to affordable and appropriate assistive devices, equipment, adaptive technology and services and dehumanizing treatment.

They are also faced with negative socio-cultural practices, denial of registration and identification documents, forced sterilization, denial of inheritance, stigmatization, lack of involvement and participation in decision-making processes that affect their lives.

The Government recognizes these challenges and seeks to address them in this policy.

2.23.2 POLICY STATEMENT

The Government shall in collaboration with other stakeholders ensure that the rights of children with disabilities are fully protected by adopting specific measures in policy, legislation, and programmes in order to enhance the full enjoyment of all human rights and fundamental freedoms by children with disabilities on an equal basis as their peers.

2.23.3 OBJECTIVES

- I. To ensure children with disabilities enjoy all human rights and fundamental freedoms on an equal basis with others.
- II. To enable children with disabilities, express their views freely on matters affecting them either independently or through their guardians.
- III. To ensure that in all actions concerning children with disabilities the best interest of the child is given primary consideration.

2.23.4 KEY INTERVENTIONS

- (a) Put in place affirmative actions on registration and issuance of identification documents for children with disabilities.
- (b) Develop a Framework on national registration and provision of identification documents for children with disabilities in line with Section 7 of the Children's Act 2022.
- (c) Ensure that children with disabilities are protected from any work that is hazardous or interferes with the child's education, health, physical, mental, spiritual, moral, or social development.
- (d) Ensure children with disabilities have access to basic services and needs including food, clothing, shelter, health care, education, habilitation, and rehabilitation services in a manner conducive to the child achieving the fullest possible social integration and individual development.
- (e) Protect children with disabilities from discrimination, abuse, and violence.
- (f) Take measures to ensure that men who have children with women with disabilities take responsibility in the upbringing and development of the child.
- (g) Put in place measures that ensure children with disabilities are not excluded from free and compulsory primary and secondary education on the basis of disability.

2.23.5 POLICY OUTCOME

Increased participation, access to basic needs, services, protection, and recognition of children with disabilities.

2.23.6 POLICY IMPACT

Empowered children with disabilities

2.24 YOUTH WITH DISABILITIES

The Constitution of Kenya 2010, Article 260 defines a youth to mean the collectivity of an individual who have attained the age of eighteen (18) years but not more than thirty-five (35) years.

Article 55 of the Constitution of Kenya 2010, provides that the state shall take appropriate measures to ensure that the youth, including those with disabilities have access to relevant education and training, employment and participate in all spheres of life and protected from harmful cultural practices and exploitations.

2.24.1 CRITICAL ISSUE AND CONCERNS

Youth with disabilities encounter challenges that include limited access to education, training, accessible sports facilities, and access to employment, association, representation, and participation in political, social, and other spheres of life.

Further, this category of youth is faced with harmful cultural practices, abuse and exploitation, drug and substance abuse, low self-esteem, limited and poor housing, access to information, communication, and sexual exploitation.

2.24.2 POLICY STATEMENT

The government shall take policy, legislative, administrative, and affirmative action measures to ensure that youth with disabilities enjoy their rights and fundamental freedoms on an equal basis with others.

2.24.3 OBJECTIVES

- I. Ensure youth with disabilities enjoy their human rights and fundamental freedoms on an equal basis with their peers.
- II. Promote effective participation and involvement of youth with disabilities on matters affecting them.

2.24.4 KEY INTERVENTIONS

- (a) Facilitate youth with disabilities access education, training, internship, and employment opportunities.
- (b) Promote the inclusion of youth with disabilities in youth organizations and programmes.

- (c) Promote training and access to Information, Communication and Technology for youth with disabilities.
- (d) Develop programmes to address social and economic isolation, by removing systemic barriers that hinder or discriminate against the participation of youth with disabilities in society and the labour market.
- (e) Facilitate access to credit facilities for youth with disabilities.
- (f) Develop and implement affirmative action programmes to facilitate full and equal participation of youth with disabilities in sports, culture, science, and technology.
- (g) Promote inclusion of youth with disabilities to participate and be involved on matters affecting them.

2.24.5 POLICY OUTCOME

Increased participation of youth with disabilities in development processes

2.24.6 POLICY IMPACT

Empowered youth with disabilities.

2.25 DEINSTITUTIONALIZATION OF CHILDREN AND ADULTS WITH DISABILITIES

Persons with disabilities across the country enter into institutions as children and continue living there throughout their adult life. Institutionalization constitutes detention and deprivation of liberty based on impairment. Disability-specific detention typically occurs in institutions that include, but are not limited to, social care institutions, psychiatric institutions, long-stay hospitals, rehabilitation centres and special boarding schools.

Notwithstanding obligations under international law, children and adults with disabilities worldwide continue to be placed in institutions under life-threatening conditions hence the need for a clear policy framework of de-institutionalization.

The legal framework in Kenya recognizes the need to de-institutionalize children and adults with disabilities in order for them to realize the right to live independently and be included in the community on an equal basis with others as enshrined in Article 19 of the CRPD.

Section 63 sub-section 2 of the Childrens Act 2022 further stipulates that the child shall only be accommodated in a children rescue Centre for a period not exceeding six months which is also in line with the deinstitutionalization guidelines by the Committee on the Rights of Persons with Disabilities (CRPD).

2.25.1 CRITICAL ISSUES AND CONCERNS

Children and adults with disabilities who live in institutions are faced with violence, neglect, discrimination, lack of access to play & recreation, abuse, ill-treatment, and torture, including chemical, mechanical, and physical restraints. They are denied their right to legal capacity and ability to make decisions on where to live, work or the medical care to receive.

Institutionalization may expose children and adults with disabilities to administration of drugs, forced confinement and other medical procedures without their free, prior, and informed consent infringing articles 15, 16, 17 and 25 of the CRPD. The Government recognizes the need to deinstitutionalize in accordance with Article 19 of the CRPD.

2.25.2 POLICY STATEMENT

The Government shall, in collaboration with other stakeholders through a participatory process ensure that measures are put in place to abolish all forms of institutionalization.

2.25.3 OBJECTIVES

- I. To ensure children and adults with disabilities enjoy all human rights and fundamental freedoms on an equal basis with others.
- II. Establish community-based services that ensure children and adults with disabilities are supported to live with their families, or in the community setting.

2.25.4 KEY INTERVENTIONS

- (a) Develop and implement policy guidelines and mechanisms to support and fund de-institutionalization.
- (b) Strengthen capacity on autonomy, choice and control to children and adults with disabilities through de-institutionalization.
- (c) Develop family support services, and community-based care and alternative family care to eradicate institutional care.

2.25.5 POLICY OUTCOME

De-institutionalization of children and adults with disabilities.

2.25.6 POLICY IMPACT

Inclusion of de-institutionalized children and adults with disabilities in the community.

2.26 DISASTER RISK MANAGEMENT AND HUMANITARIAN EMERGENCY RESPONSE

Kenya has experiences in natural and human-made disaster risk situations which include floods, climate change, pandemics, drought, terrorism, accidents, and political conflicts resulting in internal displacement. The Convention on the Rights of Persons with Disabilities under Article 11 obligates State Parties to take all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk including situations of armed conflict, humanitarian emergencies, and the occurrence of natural disasters.

2.26.1 CRITICAL ISSUES AND CONCERNS

In situations of risks and humanitarian emergencies resulting from natural disasters, armed conflict, and other humanitarian crises, it is important to ensure protection and safety of persons with disabilities who are among the most disproportionately affected. Such situations often result in an increase in the number of persons acquiring disabilities and worsening the situations of those already having disabilities. For those who incur injuries, the situations are often exacerbated by delays in obtaining emergency health care and long-term rehabilitation.

Persons with disabilities and their representative organizations are neither involved in planning, implementation nor monitoring disaster risk response including evacuation, recovery, and resettlement. Rarely are persons with disabilities reached with information and early interventions regarding situations of risks. The data on persons with disabilities in situations of risks is largely unavailable making it difficult to provide specific intervention.

2.26.2 POLICY STATEMENT

The Government shall take all necessary measures to ensure the safety of persons with disabilities in disaster risk situations including floods, climate change, pandemics, drought, terrorism, accidents, and political conflicts that result in internal displacement.

2.26.3 OBJECTIVES

To enhance the safety of persons with disabilities in situations of risk and emergency.

2.26.4 KEY INTERVENTIONS

- (a) Sensitize persons with disabilities on preparedness in risk and emergency situations.
- (b) Take measures to ensure that persons with disabilities and their representative organizations are meaningfully and actively consulted and involved in all steps of disaster risk and humanitarian emergencies.

- (c) Collect and disseminate disability disaggregated data in situations of risks for planning purposes.
- (d) Build the capacity of humanitarian workers and train rescue teams on the rights of persons with disabilities in situations of risk and humanitarian emergencies.
- (e) Ensure the protection and safety of persons with disabilities in situations of risk, through the provision of the necessary assistive devices and technologies, accessible shelters, relief, and facilities.
- (f) Provide information in accessible formats on situations of risk and humanitarian emergency to persons with disabilities, especially to persons with visual, hearing, intellectual and psychosocial disabilities.
- (g) Take measures to ensure that post-emergency rehabilitation, resettlement, reconstruction, and rebuilding processes are inclusive and accessible to persons with disabilities through the application of universal design principles.

2.26.5 POLICY OUTCOMES

Intervention measures in place for the protection and safety of persons with disabilities in situations of risks, disaster management and humanitarian emergency response.

2.26.6 POLICY IMPACT

Ensure safety of persons with disabilities during situations of risk, disaster, and humanitarian emergencies.

CHAPTER THREE: POLICY IMPLEMENTATION

Implementation of this policy will be done within a ten-year period through a five (5) year roll out of a National Action Plan which a review will be undertaken. Successful implementation and realization of its objectives shall require strong administrative structures, adequate resources, review of existing programmes, formulation of new programmes, enhanced county, national, regional, and international cooperation, as well as and effective monitoring and evaluation.

The Ministry through the State Department responsible for disability affairs and the National Council for Persons with Disabilities are mandated to implement, coordinate, and oversee policies and programmes pertaining to persons with disabilities. These activities are undertaken in collaboration and consultation with other stakeholders. Among them are, all Ministries, Counties, Departments and Agencies, Judiciary, Parliament, Constitutional Commissions, Organizations of and for Persons with Disabilities, Private Sector, Faith-Based Organizations, international and local Non-Governmental Organizations, Community-Based Organizations, and other Development Partners. Participation and inclusion of persons with disabilities and their representative organizations in the implementation of this policy shall be meaningful, systematic, timely and open.

The Ministry responsible for matters disability through its State Department in charge of disability affairs and the National Council for Persons with Disabilities shall spear head the implementation of this Policy in collaboration with other Ministries, Counties, Departments, independent commissions and Agencies, Organizations of and for Persons with Disabilities, the Private Sector, Faith-Based Organizations, and other Development Partners.

3.1 THE ENGAGEMENT OF PERSONS WITH DISABILITIES AND THEIR REPRESENTATIVE ORGANISATIONS

Persons with disabilities and their representative organizations, parents, guardians, caregivers, and communities shall be meaningfully included, consulted, and engaged in implementation of this Policy. Adequate financial support and facilitation to Organizations of and for Persons with Disabilities will be necessary to enable them to play a role in the implementation of this policy.

Meaningful participation entails respects, and values, the unique role and perspective of Organizations of and for Persons with Disabilities as representing the diversity of persons with disabilities. It facilitates their effective engagement by ensuring equal opportunities to contribute to decision making.

3.2 INSTITUTIONAL FRAMEWORK AND COORDINATION

This policy will enhance coordination to ensure harmonized provision of services. Its implementation will be decentralized both at the national and county levels to ensure its realization. This policy will enhance coordination to ensure harmonized provision of services. Its implementation will be decentralized both at the national and county levels to ensure its realization.

In this coordination, the Ministry responsible for disability affairs will continue to influence and coordinate other Ministries, Counties, Departments and Agencies on the implementation of the policy.

At the national level, the Ministry in charge of disability will be responsible for the overall facilitation, coordination, and implementation of this Policy. The National Council for Persons with Disabilities will provide oversight and advice on the issues of persons with disabilities. The Ministries, Departments and Agencies, Organizations of and for Persons with Disabilities, Private Sector, Faith-Based Organizations, and other Development Partners will mobilize resources and complement implementation of this policy at both national and county levels.

The Inter Agency Advisory Committee will monitor implementation of the Policy and provide technical support to County Disability Committees. The Committee will comprise of the Ministry in charge of disability affairs, all ministries, representatives of Organizations of and for Persons with Disabilities, representatives of Constitutional Commissions, Civil Society Organizations and Private sector.

At the County, Sub County and Ward levels, the National Council for Persons with Disabilities in collaboration with the County Government shall implement and coordinate issues of disability in respect to County Departments and other stakeholders in the disability sector.

3.3 CO-ORDINATION FRAMEWORK STRUCTURE

3.3.1 ROLES OF NATIONAL GOVERNMENT

The policy will be implemented at the National and County level. The following institutions listed will perform specific functions to enable the implementation of the Policy.

MINISTRY IN CHARGE OF DISABILITY

- (a) Development of policy and guidelines to actualize the provision of the policy.
- (b) Coordinate stakeholders in the implementation of the policy.
- (c) Mobilize resources for the implementation of the policy.
- (d) Provide technical and advisory roles toward the implementation of the policy.

- (e) Monitoring and evaluation on the implementation of the policy
- (f) Develop the Implementation plan in collaboration with the National Council for Persons with Disabilities.
- (g) Collaboration with National and international bodies on matters concerning of persons with disabilities and their families.
- (h) Research on matters pertaining to persons with disabilities.

NATIONAL COUNCIL FOR PERSONS WITH DISABILITIES

- (a) Responsible for the Implementation of the policy
- (b) Regulation of the policy thematic areas
- (c) Registration of persons with disabilities
- (d) Building capacity of Institutions
- (e) Monitoring Disability Mainstreaming targets and indicators for all sectors.
- (f) Mobilize Resources for the implementation of the policy.
- (g) Creating awareness for persons with disabilities.

INDEPENDENT BODIES/ CONSTITUTIONAL COMMISSIONS

- (a) Monitoring and reporting on the implementation of the policy.
- (b) Oversight and audit.
- (c) Awareness raising
- (d) Building capacities of Institutions
- (e) Collaboration with national and international bodies on concerns of persons with disabilities.
- (f) Provide technical and advisory roles.

MINISTRIES, DEPARTMENTS AND AGENCIES

- (a) Developing policies and guidelines for persons with disabilities
- (b) Implementation of various interventions in the policy
- (c) Mainstream disability in their respective programs
- (d) Research and Data Collection

COUNTY GOVERNMENT

- (a) Adopt and domestication of the Policy.
- (b) Mobilize resources for the implementation of programs for persons with disabilities at the county level.
- (c) Capacity Building
- (d) Awareness creation on matters pertaining to persons with disabilities.
- (e) Research and Data Collection

INTER-AGENCY COORDINATING ADVISORY COMMITTEE

- (a) Coordinate effective implementation of the disability agenda in the Country.
- (b) Resource Mobilization by leveraging on common agenda while controlling duplication of resource utilization.

3.3.2 ROLE OF NON-STATE ACTORS

The following non-state actors listed below will perform specific functions to enable the implementation of the Policy.

CIVIL SOCIETY ORGANIZATIONS /FAITH BASED ORGANIZATIONS

- (a) Identification and awareness creation on the disability rights
- (b) Complement Government efforts through implementation of Disability programmes.
- (c) Mobilization of resources
- (d) Provide technical support in developing legislation frameworks.
- (e) Social accountability to ensure quality assurance for disability services.
- (f) Lobbying and advocacy on the rights of persons with disabilities
- (g) Capacity building persons with disabilities
- (h) Support in research and development.
- (i) Strengthen disability networks through partnerships and collaborations.
- (j) Provide linkages to service provisions.

PRIVATE SECTOR

- (a) Facilitate and provide inclusive employment services.
- (b) Support implementation of disability programmes through cooperate social responsibility.
- (c) Promote innovative technology to address disability related challenges.
- (d) Implement disability mainstreaming to persons with disabilities.
- (e) Offer services through public-private partnerships.

DEVELOPMENT PARTNERS

- (a) Provide technical and financial support.
- (b) Facilitate research and documentation of disability programmes.
- (c) Promote partnerships and linkages.
- (d) Facilitate exchange programmes for learning and replication of good practices.

3.3.3 ROLE OF ORGANISATIONS OF AND FOR PERSONS WITH DISABILITIES

In line with this policy Organizations of and for Persons with Disabilities shall support in implementation by;

- (a) Representing the interest of persons with disabilities in the implementation process of the Policy
- (b) Raising awareness and advocate for implementation of the policy
- (c) Support rehabilitation and habilitation services.
- (d) Support Data collection on persons with disabilities.
- (e) Mobilize persons with disabilities towards the implementation of the Policy.
- (f) Support empowerment of persons with disabilities.
- (g) Support capacity building of individuals and organisations.
- (h) Provide linkages with local, regional, and international organisations.
- (i) Participate in Monitoring the implementation of the Policy.

3.4 RESOURCE MOBILIZATION

To realize policy commitment, the government shall provide adequate human and financial resources. It will ensure proper utilization of administrative structures in the implementation of this Policy and realization of its objectives.

These sources of funding will include all funds established by the government for the socioeconomic empowerment of Kenyans. The government shall allocate adequate funds annually. The Government will collaborate with development partners in mobilization of resources towards the realization of the objectives of this policy.

The Government will employ the following strategies:

- (a) Establish a national resource coordination and mobilization framework for adoption by MDCAs and stakeholders.
- (b) Provide funds to all Ministries and Agencies for disability mainstreaming.
- (c) Embrace public private partnerships in policy formulation and implementation.
- (d) Establish methods for harnessing and using these funds in the most effective, efficient, and accountable manner through joint planning, resource pooling, allocation, monitoring, and evaluation,
- (e) Recruit, deploy, train, and retain staff to facilitate implementation of this policy.
- (f) Make periodic resource analysis to identify gaps and sources of funding and develop strategies for effective resource mobilization.
- (g) Include targets identified in this Policy in all Government strategic plans.

3.4.1 RESOURCE UTILIZATION

To facilitate the implementation of the Policy and setting up of the necessary structures, resources including those outlined below will be required.

- (a) Human
- (b) Financial
- (c) Infrastructure including office space, transport, ICT, and equipment.

3.5 LEGISLATIVE AND ADMINISTRATIVE MEASURES

The Constitution of Kenya 2010, Kenya Vision 2030, and international instruments guide the development and review of this Policy on the rights of persons with disabilities. In view of this, the government shall ensure that all existing and new policies, laws, and regulations are aligned towards this Policy.

The Government directs shall ensure that all Ministries, Departments and Agencies to mainstream disability inclusion address issues of persons with disabilities by having them inculcated in their plans, policies, legislation and programmes and activities. The Government shall ensure coordination between both levels of government through the inter-governmental coordination committee.

The Government shall ensure that all ministries, departments, and agencies collect disability data for all the purpose of planning and programmes.

3.6 PARTNERSHIP AND COLLABORATION

In implementing this policy, the government will partner and collaborate with Organizations of and for Persons with Disabilities and other stakeholders.

The Government shall partner with umbrella organizations of various categories of disabilities in order to enhance strong networking and collaboration in the implementation of this policy and programmes for the benefit of persons with disabilities.

3.7 INTERNATIONAL AND REGIONAL COOPERATION

In the context of this policy, international and regional cooperation means working together with other states and international organizations for the realization of the government's commitments under Conventions, treaties, Optional Protocols on the Rights of persons with disabilities. This cooperation will include capacity building, sharing of information, experiences and best practices, training research and

innovation technical knowledge, financial assistance, and transfer of knowledge on assistive technologies.

To this extent, the government shall -

- (a) Explore and expand opportunities for international and regional cooperation for purposes of influencing decisions on issues that impact on persons with disabilities.
- (b) Identify a focal point for gathering information, coordination, dissemination and implementation of international, and regional Treaties, Conventions and Optional Protocols.
- (c) Host international and regional events as guided by Treaties, Conventions, and Optional Protocols.
- (d) Through the relevant ministries and Organizations of and for Persons with Disabilities deliberately seek membership to international and regional bodies and representation of persons with disabilities within those bodies.
- (e) Plan for and allocate resources for participation in international and regional forums on persons with disabilities.

3.8 POLICY MONITORING, EVALUATION, REPORTING AND REVIEW

Due to the diverse nature and players involved in the implementation of this policy, the ministry responsible for disability matter in collaboration with other actors in the disability sector shall prepare a five-year plan of action on the implementation of the Persons with Disabilities National Policy. The implementation plan will run concurrently with Medium Term Plans as well as MDAs strategic plans in order to ensure harmonization of priorities and financial resource allocation.

The implementation plan will have a timeframe with clear indicators, outputs, outcomes, and impact of the planned interventions. Monitoring, Evaluation and Learning (MEL) is an essential component for effective policy implementation. In consultation with partners and stakeholders, the Directorate of Social Development will put in place a Monitoring, Evaluation and Learning framework to facilitate information gathering, analysis, dissemination, and feedback on the policy.

The implementation of this policy will be monitored on a continuous basis by the Ministry responsible for disability affairs. It will be evaluated every 5 years to determine the progress towards realization of rights of persons with disabilities. The findings on the evaluation will inform subsequent plans, resource allocation and strategies towards the realization of desired goals. The reports generated will also guide reporting as per the CRPD (Article 34).

The Persons with Disabilities National Policy shall be reviewed from time to time to bring on board Pertinent and Contemporary Issues (PCIs) and new ideas.