



**PROJECT ON NATIONAL PROGRAMME FOR DISABLED COMMUNITY  
IN SRI LANKA  
( BREAK THE BARRIER OF DISABILITY )**

IMPLEMENTING PARTNER : HUMANITARIAN FOUNDATION SRI LANKA

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DIRECTOR PROGRAMME

PROJECT DURATION 60 MONTHS

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PROJECT BUDGET 10 Million Euro/ Usd

**BANKING DETAILS**

BANK NAME HUMANITARIAN FOUNDATION

BANK NAME D.F.C.C.BANK – KOCHIKADE BRANCH

ACCOUNT NO 089115003769

SWIFT CODE DFCCLKLX

## Introduction

Affirm that disability is a human rights issue and that people with disabilities have the same inalienable rights to life and welfare, education and work, access to all community facilities, self-determination, independent living and active participation in all aspects of society as all other human beings;

Young people with disabilities are among the poorest and most marginalized of the world's youth. Estimates suggest that there are between 180 and 220 million youth with disabilities worldwide, and nearly 80 percent of them live in developing countries.

People with disability in Sri Lanka are frequently subject to treatment that may constitute torture, or cruel, inhuman or degrading treatment or punishment (ill-treatment), including persistent and severe violence and abuse, forced or coerced non-therapeutic sterilization, long-term neglect of basic human needs, and painful and degrading behavior modification techniques or 'restrictive practices'<sup>1</sup>. The UN Special Rapporteur on Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (the Special Rapporteur on Torture) has expressed concern that, "in many cases such practices, when perpetrated against persons with disabilities, remain invisible or are being justified, and are not recognized as torture or other cruel, inhuman or degrading treatment or punishment".<sup>2</sup>

When a child is born or develops a disability, it is often seen as a tragic event by his or her family and community. In many countries, there are certain traditional beliefs associated with the causes of disability, such as curses and contagion, which results in these children and their mothers being shunned and isolated. Moreover, families tend not to prioritize the needs of children with disabilities, which is shown by higher levels of malnutrition, lower rates of immunization, and higher rates of infection and communicable disease among children with disabilities.

All of the issues that affect young people, such as access to education, employment, health care and social services, also affect youth with disabilities, but in a far more complex way. Attitudes and discrimination linked to disability make it much more difficult for them to go to school, to find work or to participate in local activities. In many communities, both rural and urban, the environment is immensely challenging with physical and communication barriers that make it hard for them to participate in social life.

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Disability is a cross cutting issue relevant to the implementation of all human rights conventions. As this submission clearly illustrates people with disability have an increased vulnerability to ill-treatment and experience it in ways that are often justified by discriminatory practices and hidden from view

Persons with Disabilities are an integral component of the population. The 2011 census carried out by the Department of Census and Statistics (DCS) records indicate that 8.7% of the total population are Persons with Disabilities. However, there were serious concerns regarding the definition and criteria for identifying a Person with Disability during the census. Under Section 18 of the Protection of Persons with Disabilities Act no. 28 of 1996, a disabled person is defined as 'anyone, as a result of any deficiency in their physical or mental capabilities, whether congenital or not, is unable by themselves to ensure, wholly or partly, the necessities of life'. Even though disability is an evolving concept, the legislative definition of Persons with Disabilities emphasizes their dependency and highlighting insensitivity towards disability. Thus, policy pronouncements notwithstanding, persons with intellectual disabilities and those with severe disabilities are frequently denied their most fundamental human rights and participation in society.

Persons with Disabilities have been consistently marginalized in Sri Lanka and are often denied opportunities to participate effectively in the public realm. This denial stems from the idyllic view of the able-bodied common man which has led to the state allocating its resources and revamping the existing structure. However, viewing from the lens of an average disabled person, this necessarily amounts to the denial of fundamental rights of Persons with Disabilities; alluding to archaic cultures and attitudes that perceive disability as a penance for past sins and a burden. This thought has influenced dominant charity-based discourses on matters relating to Persons with Disabilities. The attitudinal barriers play a major role in stagnation of policies and regulations. They further frustrate the accessibility, inclusivity and participation of Persons with Disabilities in different spheres such as employment.

Despite Sri Lanka recognizing that every person has a right to earn a living, this also includes persons with difficulties. Several policies and legislation to support persons with disabilities have been enacted or adapted in the last 25 years. These include: Rehabilitation of the Visually Handicapped Trust Fund, Act No.9 of 1992, Rights of Persons with Disabilities Act, No.28 of 1996; and the National Policy on Disability for Sri Lanka of 2003. Additionally, the supreme source of the law Sri Lankan Constitution Under Article 12 that deals with fundamental rights, in the anti-discrimination Clauses (2) and (3), people with disabilities are not mentioned as a separate group. They are recognized as being within clause (1), which states that "All persons are equal before the law and are entitled to the equal protection of the Law In addition, Clause (4) allows for "special provision being made by law, subordinate legislation or executive action, for the advancement of women, children or disabled persons".

## **Project Goal**

Goal: to promote an inclusive, barrier-free and rights-based society for people with disabilities

The project aims to improve the status of children/ Youth with disabilities in Sri Lanka through timely community engagement.

The specific objectives of the project are

### **Objective 1.**

To develop systems for early identification and screening of children with disabilities in the 25 Districts of Sri Lanka. To have a data base of all the disabled children and Youth the County

### **Objective 2.**

To promote inclusive education by developing a conducive school environment for the children with disabilities and to educate the Youth in Technology and Training for their future carrier.

### **Objective 3.**

To improve the lives of children and the Youth with disabilities through a community based rehabilitation program and make them live and independent and peaceful life.

#### **▪ Project Benefits**

- The project will benefit the children with disabilities to continue their basic education and the youth with disabilities to train themselves for their future guidance through the vocational training programme

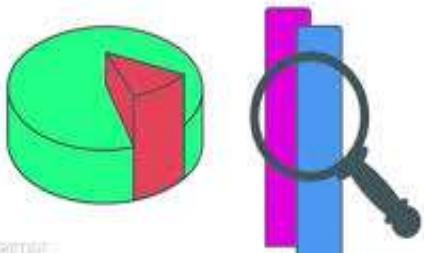
#### **▪ Project Implementation**

#### **Objective 1. To develop systems for early identification and screening of children with disabilities in the all 25 Districts of Sri Lanka**

##### **Survey of the area to identify the children with disabilities:**

We shall undertake an in depth study of the project site to identify the children with disabilities. We will gather the necessary information from the government records and statistical department on disability, or staff members, volunteers through the G.S. of the area. We will develop a software on Claude based system store all the information received to create a correct data base of the Disabled children and youth in the County.

# **STATISTICS**



We shall be using special survey tools, to identify the disability and also develop individual profiles of the children with disabilities. We shall conduct the survey both at the household level to identify the children with disability below the age of 4 years and in schools to identify the children who are above the age of 4 years and are enrolled in schools. We shall categories the collected data into age, type of disability, severity, distance from the nearest school, illiterate/literate, literacy level of parents, income of parents, support from government etc. The data will be compiled, analyzed and disseminated to all the stakeholders in the form of a situation analysis report.

### **Awareness of teachers and parents:**

We will also conduct a comprehensive awareness drive for teachers and parents for the early detection and prevention of disability amongst children. We shall be organizing

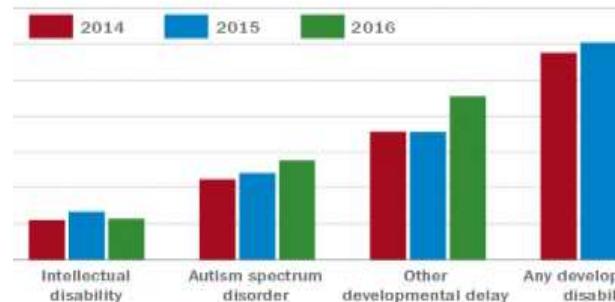
workshops and special help camps to shed light on the topic and make the masses aware of the types of disabilities and their symptoms so that they are identified as soon as possible at home by the parents and outside (schools etc.). Moreover, enlightening people to create an environment that is socially inclusive and empathetic towards people with special needs and readily available to lend a hand for help when required.



### **Disability Screening:**

Disability screening helps to assess the slightest probable disability a child might have, more accurately, thereby nipping it in the bud before it grows bigger. It is usually conducted in the form of targeted individual medical assessment of a child or administration of a brief

#### **in with diagnosed developmental disability**



id on data for children aged 3-17 years from the National Health Interview Survey. National Center for Health Statistics

questionnaire to parents without the child even being present but the idea is to make screenings more economical and readily available to all. Screening tools that measure different types of functioning accurately have good reliability are open-source or inexpensive (accessible to all) and could be administered by adults with basic training rather than medical or developmental specialists (as specialists in many low- or middle-income contexts are in short supply). These are better than the assessments based on self-reports or caregiver or teacher perceptions of a child's functioning, which may or may not accurately reflect a child's ability.

**Objective 2. To promote inclusive education by developing a conducive school environment for the children with disabilities.**

- To improve the overall growth of children, it is important for them to attend school. It has been often seen that schools do not have a conducive environment for CWDs and as a result many specially abled children do not attend school. Towards improving the environment in schools and classes, we would undertake the following into account
- **Mapping the existing educational facility:** We will undertake an assessment of the existing infrastructure of schools. We shall look at the following facilities and behaviour:
  - distance from the road side
  - walking distance
  - ramp for disabled
  - toilet for disabled children
  - support staff for taking care of children with disabilities
  - recreational activities for children with disabilities
  - place for parents to sit, while their children study
  - pick van for disabled children
  - furniture to suit the requirement of special children
  - attitude of teachers towards special children
  - attitude of other students towards special children
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- **Recommendations for developing a conducive environment for children:** Based on the results of the mapping exercise we shall give our recommendations to make the school conducive for the special children. Our experts will work with the school authorities to improve their infrastructure by adopting simple tools to make it more convenient for special children.
- **Training of teachers:** Our experts will also provide training sessions to staff members to make them aware about the needs of CWDs and also on ways to deal with CWDs in school. This would help in making the school enjoyable and convenient for the CWDs. .
- **Awareness of children:** We shall also conduct awareness sessions for the children to understand the concept of disability and make them more accommodative towards special children. Along with screening documentaries, talk shows and sessions from experts, we will also organize inclusive school competitions like debate, sports, painting , quiz, etc. to involve CWDs in these events.

**Objective 3. To improve the lives of children with disabilities through a community based rehabilitation program.**

Community Based Rehabilitation is a strategy that is implemented through the combined efforts of people with disabilities, their families and communities, and relevant government and non-government health, education, vocational, social and other services(WHO). To ensure that special children have improved lives, we shall include all the community members to participate in the project and make the project a success. The following activities have been envisaged to involve the community:

- Stakeholder consultations
- Fostering partnerships with local authorities and community
- Networking with hospitals and clinics
- Awareness sessions
- Health camps
- Distribution of necessary medicines, equipment for special children
- Advocacy efforts with stakeholders
- Vocational training for disabled youth
- Organising community events etc.

With the support from parents, teachers, community, local authorities and local hospitals, we will facilitate an ecosystem to improve the lives of CWDs.

Skill development and vocational trainings for disabled Youth .



## **MONITORING**

- State the indicators (timing and methodology) you will use in order to monitor during and at the end of the project.

Monitoring has to be carried out based on the planned objectives and indicators.

The project will be monitored by different people at different levels:

### **9.1. Monitoring by the field office:**

The project coordinator will prepare a quarterly monitoring/ progress report with his/her observations, comments and recommendations and forward it to the Programme Director (PD).

### **9.2. Monitoring from the headquarters' level:**

A team from the H.F Co-coordinating Secretariat will visit the project areas once in a month and conduct a project review with the project team and visits project areas on random basis and submit their report to Managing Trustee Programme/ PD. PD will take necessary action to keep the Donor informed about the progress of the project.

## **10. Evaluation:**

### **10.1. Mid-term evaluation:**

This will be conducted by the H.F Programme Unit at the Coordinating Secretariat (CS) by the middle of the project implementation to find out as whether the project is being implemented effectively and the results are achieved as expected for the period or not? And if there are any shortcomings, the evaluation team will identify the causes and make suitable recommendations to overcome them and draw the implementation plan for the rest of the activities.

### **10.2. Output evaluation:**

This evaluation will be done by the Consultants of H.F just after the completion of the project. They will pay field visits to the project sites and conduct interviews etc. and analyze whether the project has produced results as expected. At the end of the evaluation they will submit a report to H.F for necessary action. A copy of the evaluation report will be sent to the Donor.

This will be done after few months of the project completion by outside consultants appointed by the Donor or H.F or by both parties. These consultants will do their independent evaluation to see the project impact and submit a comprehensive report to the Donor with a copy to H.F .

However, the Donor has the right to appoint anybody to do any evaluation at any time with the consent of H.F. Fullest co-operation will be given by H.F. for this purpose.

### **Reporting:**

H.F. will receive quarterly progress reports (performance + financial) from the Field office. Reports will be submitted to the Donor by H.F. as agreed in the project agreement. Reports of any other surveys or studies carried out by H.F. in during the project period will also be forwarded to the Donor for information.

- Describe the financial management system, including internal financial control. The finance is handled by the Finance unit of H.F. and district level finance officer is responsible for all types of transactions. All the source documents will be maintained and made available in the field office. In addition to this H.F. internal audit team will check all transactions and provide the recommendations to the management for further action
- Please state shortly the experience and capacity of your organisation with implementing this type and this size of projects

H.F. has relevant capacity and experience on emergency projects over several years from 1993 onwards. We actively took part in various emergency operations in the past both man made disaster and natural disaster also. We have maintained a very good relationship with the Donors and implemented several emergency related projects such as Muthor displacement, flooding in Mannar Muthoor, Eastern parts of the Island etc.

H.F. have very good track record in construction of temporary shelters, toilets, cleaning of wells and digging wells. Our team members are very much capable and skilful to handle the above tasks. The experience which H.F. has gained by the implementation of the Swarnapoory Project, Housing project in Kalmunai is an added advantage for the implementation of this new project.

During our past and present experience we are much focus on health awareness and Psycho social counselling. Our team members are much more committed and knowledge full for working in this areas.

### **Description of the NGO**

Humanitarian Foundation is a non-government, non-political and non-religious, non governmental organization working in Sri Lanka for the vulnerable/marginalized economically poor, internally displaced and victimized people of war, religious and ethnic minorities to improve their basic facilities for a peaceful life through

participatory community oriented rehabilitation and development, human rights and humanitarian activities

Humanitarian Foundation is legally registered under the Department of Social Services in Sri Lanka as a non-government, non-religious and non-profit making organization

**Vision:**

Humanitarian Foundation strives towards the realization of a society in which justice, equality and human rights respected and people lead peaceful life in spite of various differences.

**Mission:**

Humanitarian Foundation the grievances of all human beings irrespective of caste, religion, ethnicity and nationality and creates opportunities for the development of affected and underprivileged people”

**Mohamed Zuhuri**  
**Program Director**  
**Humanitarian Foundation**  
**Colombo – Sri Lanka**