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Editorial

Liebe Leser*innen,

weltweit leben mehr als eine Milliarde Menschen mit Behinderungen – viele von ihnen werden in Entwicklungsstrategien und politischen Maßnahmen nach wie vor übersehen. Fehlende Barrierefreiheit, nicht angepasste Kommunikation und gesellschaftliche Vorurteile verhindern ihre volle Teilhabe an Bildung, Arbeit und gesellschaftlichem Leben. Die UN-Behindertenrechtskonvention (UN-BRK) und die UN-Agenda 2030 mit ihren Sustainable Development Goals (SDGs) setzen genau hier an: Sie sind zentrale politische Instrumente, um die Rechte von Menschen mit Behinderungen zu stärken und ihre soziale, wirtschaftliche und politische Teilhabe zu fördern. Während die UN-BRK speziell die Achtung und den Schutz der Rechte von Menschen mit Behinderungen fokussiert, widmen sich die SDGs der umfassenden nachhaltigen Entwicklung, wobei mehrere Ziele explizit oder zumindest implizit auf Menschen mit Behinderungen ausgerichtet sind. Aufgrund solcher Überschneidungen sind die beiden Rahmenwerke entscheidende Bezugspunkte für Politik und Entwicklungszusammenarbeit.

Die vorliegende Zeitschrift richtet ihren Fokus auf Asien und Lateinmerika, um Chancen und Herausforderungen bei der Umsetzung von UN-BRK und SDGs auf den beiden Kontinenten zu beleuchten. Die vorherige Ausgabe hatte Afrika in den Blick genommen, um ein globales Bild der inklusiven Umsetzung von Menschenrechten und nachhaltiger Entwicklung zu zeichnen. In dieser Ausgabe nimmt uns Vibhu Sharma mit auf eine Reise in den asiatischen Raum und zeigt auf, wie sich die globale Umsetzung ausgewählter zentraler SDGs im asiatischen Kontext spiegelt. In ihrer Analyse kommt sie zu dem Schluss, dass Inklusion von Menschen mit Behinderungen nicht nur ein Menschenrecht, sondern auch zentral für nachhaltige Entwicklung in allen gesellschaftlichen Bereichen ist. Teresa Sprenger and Marisol Moreno-Angarita berichten am Beispiel Kolumbiens von der intersektionalen Verschränkung zwischen geographischer Lage, Armut und Behinderung. Sie betonen die wichtige Rolle von Gemeinwesen und städtischen Netzwerken und zeigen auf, wie partizipative Ansätze qualitativer Forschung helfen können, den Stimmen von Menschen mit Behinderungen Gehör zu verschaffen. Ramiro Nochez McNutt beleuchtet den Stand der Umsetzung der UN-BRK und SDGs in Guatemala. Der Artikel gibt Einblicke in die Ergebnisse seiner eigenen Forschung und in einen Abgleich der erhobenen Daten mit Erkenntnissen aus offiziellen Berichten und nationalen Statistiken.

Die Beiträge dieser Ausgabe verdeutlichen einmal mehr, dass die Umsetzung der UN-BRK und die inklusive Berücksichtigung von Menschen mit Behinderungen innerhalb der SDGs noch immer mit zahlreichen Herausforderungen verbunden sind, gleichzeitig aber enorme Chancen bieten, um ein gerechteres und nachhaltigeres Asien und Lateinamerika zu gestalten. Wir wünschen Ihnen eine aufschlussreiche und inspirierende Lektüre!

Ihr Redaktionsteam

Dear readers,

more than one billion people worldwide live with disabilities – many of whom continue to be overlooked in development strategies and political measures. A lack of accessibility, inadequate communication and social prejudices prevent them from participating fully in education, work and social life. The UN Convention on the Rights of Persons with Disabilities (UN CRPD) and the UN Agenda 2030 with its Sustainable Development Goals (SDGs) address precisely this issue: they are political key instruments for strengthening the rights of persons with disabilities and promoting their social, economic and political participation. While the UNCRPD focuses specifically on respecting and protecting the rights of persons with disabilities, the SDGs are dedicated to comprehensive sustainable development, with several goals explicitly or at least implicitly targeting persons with disabilities. Due to the overlaps between these two frameworks they are crucial points of reference for policy and development cooperation.

The presented journal focuses on Asia and Latin America to highlight opportunities and challenges in implementing the UN CRPD and SDGs on both continents. The previous issue looked at Africa to paint a global picture of the inclusive implementation of human rights and sustainable development. In this issue, Vibhu Sharma takes us on a journey to Asia and shows how the global implementation of selected key SDGs is reflected in the Asian context. In her analysis she concludes that the inclusion of people with disabilities is not only a human right, but also central to sustainable development in all societal areas. Teresa Sprenger and Marisol Moreno-Angarita use Colombia as an example to report on the intersections of geographical location, poverty, and disability. They emphasize the role of the community and of urban networks and show how participatory approaches to qualitative research can help give a voice to people with disabilities. Ramiro Nochez McNutt examines the status of implementation of the UN CRPD and SDGs in Guatemala. The article provides insights into the results of his own research and a comparison of the data collected with findings from official reports and national statistics.

The articles in this issue illustrate that the implementation of the UN CRPD and the inclusive consideration of persons with disabilities within the SDGs still faces numerous challenges, but at the same time offers enormous opportunities to create a more equitable and sustainable Asia and Latin-America. We hope you find this issue insightful and inspiring!

Your editorial team

Beyond the Goals: The Intersections and Imperatives of Disability, Development, and Global Commitments

Vibhu Sharma

This article demonstrates how gaps in disability inclusion within the SDGs create cascading impacts in development outcomes. Failures in one domain such as poverty (goal 1), hunger (Goal 2), or education (goal 4) reinforce exclusion in others deepening inequality and undermining CRPD obligations art(s) 24, 25, 27, 31, and 32, to name a few. The interconnectedness of the SDGs becomes evident where limited progress on one goal impedes another. For instance, the systemic denial of health insurance to persons with disabilities not only results in poor health outcomes, but also traps individuals in poverty (Goal 1), highlighting how inequities in health systems reverberate across other goals. While exclusion from education (Goal 4) limits access to employment (Goal 8). Goal 10, although centered on inclusion, is hindered not by design, but by weak implementation across other goals. Holistic, intersectional interventions anchored in rights-based budgeting, disaggregated data and regional equity are essential to "leave no one behind."

Introduction

Over one billion people, or 15% of the global population, are persons with disabilities (WHO & World Bank, 2011), and approximately 80% live in low- and middle-income countries (LMICs) (WHO, 2022). The UN Convention on the Rights of Persons with Disabilities (CRPD, 2006) – a legally binding instrument, and the first human-rights instrument of the twenty-first century, affirms that disability should not be a basis for discrimination and provides a comprehensive framework for disability inclusion across all sectors[1].

Disability often intersects[2] with existing inequalities based on gender, geography, socioeconomic status, ethnicity (Wickenden, 2023). Recognizing these overlapping barriers, the 2030 Agenda marked a deliberate shift: by embedding the principle of "leaving no one behind," to redress historical exclusion of persons with disabilities (UN DESA, 2018).

Yet, persons with disabilities continue to be disproportionately left behind across multiple Sustainable Development Goals (SDGs), including health, education, employment, and participation (UNDP, 2023; WHO, 2022). This paper analyzes how disability is (or is not) integrated into the implementation of SDGs 1, 2, 3, 4, 5, 8, 10, and 17, through the CRPD lens. It identifies persistent gaps, intersectional themes, and policy imperatives, and concludes with focused recommendations for a more inclusive and accountable approach to development.

Disability exclusion in one SDG domain – whether health, education, or employment – invariably undermines progress across other goals, underscoring the imperative for integrated, cross-sectoral inclusion.

Goal 1: No Poverty

The Disability–Poverty Cycle

Poverty and disability are mutually reinforcing (Rohwerder, 2015). Poverty increases the risk of illness, injury, and malnutrition (Goal 2), leading to health consequences such as impairments and

even disability (Goal 3), while also reducing access to education (Goal 4) and employment (Goal 8) (World Bank, 2025), thereby, perpetuating a multidimensional cycle of disadvantage. Women with disabilities often face compounded disadvantages (Goal 5).

Poverty and Situation in Asia

In the Global South, persons with disabilities are "among the poorest of the poor" (Grech et al., 2023). Many lack access to basic livelihood assets (land, credit, education) and face higher costs of living for health care and assistive devices. SDG 1's targets (e.g., social protection) do not explicitly name disability, risking further exclusion.

Social Protection and Inclusion

CRPD Art. 28 obliges states to ensure adequate living standards and social protection. Yet, persons with disabilities are often excluded from poverty surveys and safety nets. SDG 1 Target 1.3 mandates national social protection systems, but without disability-inclusive planning, these programmes fall short. In many LMICs, disability is neither identified nor prioritized in poverty surveys or social welfare schemes. Consequently, persons with disabilities remain invisible in policy design and social safety nets implementation.

The persistence of the disability-poverty cycle underscores that poverty reduction strategies cannot be effective unless they integrate disability inclusion at every stage – from data collection to programme design – transforming persons with disabilities from passive recipients of aid into active agents of economic development. Consequently, aligning efforts with the CRPD means explicitly recognizing persons with disabilities as a vulnerable group and tailoring support accordingly.

Goal 2: Zero Hunger

Nutrition and Disability

Persons with disabilities are at heightened risk of hunger and malnutrition, a consequence of poverty (Goal 1), unemployment (Goal 8) and poor health (Goal 3). Feeding challenges, stigma, and the exclusion of persons with disabilities from mainstream nutrition programmes exacerbate their vulnerability to undernutrition. Yet SDG 2 omits disabilities. The CRPD (Art. 28) affirms the right to an adequate standard of living, including food and nutrition. Evidence shows that children with disabilities are more likely to have malnutrition. A multi-country analysis[3] found that children with disabilities are significantly more likely to be stunted, wasted, or underweight than children without disabilities. Rotenberg *et al.* (2023) concludes that ending malnutrition is "not achievable without a focus on disability. A *twin-track* approach[4] is therefore needed to ensure that children with disabilities are not left behind in nutrition programmes.

Disability and Food Insecurity in the Global South

In many countries across the Global South, persons with disabilities are often excluded from food distribution systems, particularly in rural and crisis-affected areas. School feeding programs are inaccessible or unavailable to children with disabilities, many of who are out of school due to physical, social, or systemic barriers. Inclusive design and disability-disaggregated data are essential to making food systems truly equitable. This means, addressing hunger among persons with disabilities requires embedding accessibility and inclusion into food systems – from agricultural livelihoods to household nutrition – so that disability is treated not as a residual category but as integral to achieving food security for all.

Goal 3: Good Health and Well-Being

Healthcare Access and Quality

SDG 3 aims to "ensure healthy lives and promote well-being for all." CRPD Art 25 affirms the right to quality health care for persons with disabilities. In practice, persons with disabilities are absent in global health planning. The term "disability" appears only once in the SDG 3 targets (on maternal mortality). Persons with disabilities encounter numerous barriers: inaccessible facilities, unaffordable assistive technologies, lack of provider training, and discriminatory attitudes. Women with disabilities are frequently excluded from maternal and reproductive health services (UN Women, 2017); those with psychosocial disabilities face stigma; and rehabilitation is scarce.

Poor health reduces opportunities for education (Goal 4), earn a living (Goal 8), and fuels poverty and hunger (Goals 1 and 2). While this is neither to juxtapose disability and health issues, nor suggest disability to be a part of the medical model[5], it underscores the discrimination that persons with disabilities face in health systems – which remains a critical barrier to achieving health equity for all.

Structural Health Inequities in the Global South

In LMICs in the global south, persons with disabilities face intensified structural barriers. Health services are often scarce, unaffordable, or fragmented – with limited access to diagnostics, chronic care, or assistive technology. WHO and UNICEF (2022) report that 1 billion people – mostly in LMICs – lack access to necessary assistive technologies. Services are often delivered without informed consent, particularly for women and persons with psychosocial or intellectual disabilities.

Disability exclusion in one SDG domain – whether health, education, or employment – invariably undermines progress across other goals, underscoring the imperative for integrated, cross-sectoral inclusion.

In emergencies, disability is routinely deprioritized. CRPD Articles 11 and 31 call for inclusive emergency preparedness and disaggregated data. Integrating disability into all levels of healthcare is critical.

Additionally, financial barriers are profound: many persons with disabilities face catastrophic out-of-pocket health expenditures (UNDP, 2023) and are often denied health insurance coverage based on disability, further reinforcing poverty and exclusion.

It is therefore essential that disability-responsive services are integrated into all levels of healthcare – from primary to tertiary – particularly in resource-constrained settings (WHO, 2023). Achieving SDG 3 in the Global South requires that health systems embrace universal design and explicitly address disability through inclusive budgeting. Otherwise, the realization of the Universal Health Coverage (UHC) and SDG 3 will continue to remain elusive (Hogan, 2020). Thus, inclusive health systems must go beyond medical provisions to challenge the structural inequities and attitudinal barriers that deny persons with disabilities their right to health. Integrating disability into UHC metrics and financing frameworks can transform SDG3 from aspiration to measurable progress.

Goal 4: Quality Education

Inclusive Learning Environments

Education is a fundamental right, the greatest equalizer, and a key driver of sustainable development. SDG target 4.5 calls for „equal access to all levels of education and vocational training for persons with disabilities." CRPD Art. 24 guarantees an „inclusive, quality, and free primary and secondary education on an equal basis with others," and mandates reasonable accommodations, individualized support, and accessible learning environments to foster participation in learning. Yet children and adults with disabilities face extreme exclusion.

Even when enrolled, they face in-school challenges such as inaccessible buildings, inflexible curricula, lack of assistive technology, stigma, and untrained teachers. Compared to their peers, children with disabilities are 25% less likely to attend early childhood education; 47% more likely to be out of primary school, 33% more likely to miss lower-secondary, and 27% more likely to miss upper-secondary education. Nearly 49% have never attended school at all, and 42% are less likely to have foundational reading and numeracy skills (UNICEF, 2021). UNESCO (2025) reports that a child with a sensory, physical, or learning disability is more than two-and-a-half times as likely to never attend school as a child without disability. Without education, access to employment (Goal 8) shrinks, reinforcing poverty (Goal 1), hunger (Goal 2), and poor health (Goal 3). Girls with disabilities face compounded exclusion, often pulled out of school during crises, and are more vulnerable to violence, directly impacting the achievement of Goal 5.

Regional Inequities in Asia

Asia is home to 108 million children with disabilities (UNICEF, 2025). They are disproportionately out of school or fail to achieve foundational literacy and numeracy. Many are not formally identified as having disabilities due to weak screening systems, limited teacher training, and stigma within communities, and therefore receive no tailored support. While several initiatives across the region aim to improve access to education and demonstrate promising steps toward inclusive learning, these efforts remain fragmented and under-resourced. Overall, across diverse Asian contexts, critical implementation gaps lie in disability identification, teacher competencies in inclusive education, and systemic resourcing. Arguably then, true inclusion in education demands reforms not only of school infrastructures, but also that of pedagogy, assessments, and accountability systems. Embedding disability perspectives into teacher training and national curricula is essential for SDG4 to move from enrolment to genuine learning outcomes.

Goal 5: Gender Equality

Women and Girls with Disabilities

Globally, around 20% of persons with disabilities are women (UN Women, 2017) – meaning one in five women (IDA, 2022). They face intersecting discrimination – ableism and sexism – resulting in higher

rates of barriers to education (Goal 4) and employment (Goal 8) pushing them into poverty (Goal 1) and food insecurity (Goal 2). Additionally, they encounter restricted access to reproductive health services, resulting in lower personal autonomy and unaddressed maternal health needs (Goal 3) and are more exposed to significantly higher rates of violence (UNFPA, 2023). CRPD Art. 6 emphasizes the specific rights of women with disabilities, yet SDG 5 does not explicitly reference them, resulting in their exclusion from mainstream gender programmes.

Regional Trends in Asia

Asia is home to around 350 million women and girls with disabilities, alongside millions more uncounted – yet their needs are often obscured in SDG planning. They are ten times more likely to experience violence and seven times more likely to lack healthcare, often due to physical, attitudinal, financial, or information barriers.

In countries such as India and Viet Nam, infrastructural inaccessibility and inadequate policy implementation result in significantly lower school attendance rates, negligible representation in decision-making, and exclusion from vocational training programs. Such barriers force many girls with disabilities into unpaid or unstable work, further perpetuating cycles of poverty and social marginalization (ESCAP, 2021).

Without gender-disability inclusive policy, exclusion from SDGs 1–4 and 8 continues. Achieving SDG5 requires more than intersectional rhetoric – it requires that gender equality agendas explicitly include and budget for women and girls with disabilities, ensuring their leadership in programme design and implementation rather than treating them as beneficiaries.

Goal 8: Decent Work and Economic Growth

Employment Disparities

ILO (2024) data shows only about 30% of persons with disabilities are active in the labor force, verses nearly 50% of others. Wages are lower: Persons with disabilities earn on average 12% less per hour than their peers without disabilities , a gap reaching 26% in LMICs. Half of this disparity is unexplained by education, age, or occupational differences, indicating discrimination and structural inequities.

CRPD Art. 27 mandates the right to work for persons with disabilities. However, widespread inaccessibility in transport, discriminatory hiring practices, insufficient workplace accommodations, inadequate vocational training, low education, all contribute to high unemployment and underemployment in the disability community, and highlight the inequities and a failure to uphold the rights to work and economic inclusion.

Regional Inequities in Asia

Asia has approximately 472 million working-age persons with disabilities. Data from the region indicates that they are 2 to 6 times less likely to be employed and often confined to low-paying informal work or self-employment (ESCAP, 2021); quota systems, for example in India[6], are under-enforced. Inclusive vocational training and accessible jobs are rare. Inability to access decent work directly fuel poverty (Goal 1), hunger (Goal 2), and poor health (Goal 3). While unemployment itself can result from a lack of education, without income, individuals face barriers to continuing education (Goal 4) and participating in society (Goal 10). Thus, inclusive employment is not only a right but a cornerstone of inclusive development. Therefore, inclusive employment policies must be linked with education, health, and social protection systems, ensuring that persons with disabilities can both access and sustain livelihoods. Investment in assistive technologies, accessible workplaces and entrepreneurship support can directly expand economic participation.

Goal 10: Reduced Inequalities

Equality and Non-Discrimination

SDG 10 promotes inclusion and explicitly lists disability (Target 10.2) (UN, 2015). Yet discriminatory practices and inadequate legal protection[7] such as laws restricting marriage or inheritance rights for persons with disabilities – together with social stigmatization that limits education (Goal 4), and employment (Goal 8), result in the systematic exclusion of persons with disabilities, pushing them toward poverty (Goal 1), hunger (Goal 2), and poor health (Goal 3). CRPD Art. 5 mandates equality and non-discrimination, while Art. 8 requires awareness-raising to combat harmful attitudes and stereotypes. However, discrimination persists at multiple levels. The achievement of Goal 10 is hindered, not because of a policy deficit or because of dereliction of persons with disabilities from its framing, but because of the shortfall, or lack of implementation of, what is needed to achieve other goals.

Data and Policy Disaggregation

Goal 10's implementation is undermined by a chronic lack of disability-disaggregated data. Target 17.18 and CRPD Art. 31 emphasize the importance of collecting reliable data to monitor progress. Yet, most countries fail to disaggregate key indicators like education, income, and employment (DDI, 2023). Without such data, persons with disabilities remain invisible in policy design and SDG reporting.

Inequalities in Asia

ESCAP (2018) reports that over 690 million people in Asia-Pacific – or 1 in 6 – are persons with disabilities. Yet, most are excluded from employment, social protection, and decision-making.

Only a few of the Asian countries[8] have collected or plan to collect data on poverty or income – crucial for measuring SDG 10.2 progress, in their census or household surveys. According to a study undertaken by UNFPA Asia Pacific, only five countries (Cambodia, India, Pakistan, Fiji, and Kiribati), were able to produce the disaggregated indicator on the proportion of people living below 50 per cent of median income, by sex, age, and disability status. Moreover, even when data is collected, it is not analyzed to understand the challenges of persons with disabilities. The lack of data, or its analysis, means that these people remain invisible, resulting in extremely limited opportunities to influence governmental policies and programmes.

Consequently, persons with disabilities in Asia are overrepresented among the poorest and most vulnerable due to a lack of legal protections, weak enforcement, and discriminatory social norms. ESCAP (2018) highlights that enabling the full participation of persons with disabilities can potentially boost GDP by 1–7% across the region, yet current exclusion incurs both developmental and social costs (Crosta and Sanders, 2021). Realizing SDG10 then demands moving from symbolic inclusion to measurable accountability. Disability equality must be institutionalized through inclusive budgeting, anti-discrimination enforcement, and participation of persons with disabilities in policy making at all levels.

Goal 17: Partnerships for the Goals

Global Cooperation and CRPD Art. 32

SDG 17 underscores partnerships. CRPD Art 32 mandates that aid and cooperation include persons with disabilities. Yet inclusion remains siloed, underfunded, and disconnected from mainstream programmes. Organizations of persons with disabilities (OPDs) are often excluded from development planning and aid decision-making.

Finance, Data, and Capacity

Targets 17.1-17.3 (Finance), 17.6-17.9 (Technology), 17.8 (Data) are key to implementation. However, disability is rarely mainstreamed across these. CRPD Art. 31 aligns with target 17.18, yet data gaps persists, making persons with disabilities invisible in SGD implementation (DDI, 2023). Donors and governments must align funding, data, and capacity-building with disability inclusion.

Asia and Partnerships

Asia-pacific has a vast potential for inclusive and transformative partnerships. Yet coordination is weak. According to (ESCAP, 2021), key challenges include fragmented aid pipelines, exclusion of OPDs from governance, and poor integration of disability into climate, health, and education financing. Strengthening collaboration with OPDs, aligning SDG financing with CRPD commitments, and adopting disability-inclusive procurement and monitoring frameworks are urgent priorities.

Cross-SDG Impact

The weak implementation of goal 17 shows up in the delivery for other goals. Lack of partnerships shows up in goal 8 on employment, the lack of which results in poverty (goal 1). Partnerships also influence health (Goal 3) and education (Goal 4). Disaggregated data via partnerships strengthens equity and legal inclusion (Goal 10).

Notably then, realizing the SDGs for persons with disabilities depends on building strong international and cross-sector partnerships that integrate disability rights and expertise at every step. At the same time, building transformative partnerships means institutionalizing the participation of OPDs not just as consultees but as equal partners in decision-making, monitoring, and evaluation. This ensures that global cooperation truly reflects the principle of "nothing about us without us."

Conclusion

The SDGs and CRPD collectively offer a transformative framework to build inclusive societies. Yet, this potential remains unrealized due to fragmented implementation, insufficient data, and marginalization of persons with disabilities across multiple sectors.

This critical, intersectional review reveals how exclusion in one domain – be it in health, education, or employment, cascades across other SDGs, compounding inequalities. The analysis confirms that disability inclusion is not only a human rights imperative but also essential to sustainable development. To fulfill the 2030 agenda, governments, donors, and institutions must act on the interlinkages and intersectional barriers and not treat them in silos. Translating these findings into action requires a combination of systemic reforms and targeted investments. Governments should mainstream disability across all poverty reduction, health, education, and gender policies, while donors and international partners must embed disability inclusion in aid and cooperation frameworks (Goals 1, 3, 4, 5, 17). Strengthening disability-disaggregated

data (Goals 10 and 17) and enforcing employment quotas, inclusive vocational training, and accessible infrastructure (Goal 8) remain essential to ensure economic inclusion. Gender-responsive planning should explicitly recognize and fund the leadership of women with disabilities in programme design and monitoring (Goal 5). Embedding universal design in public services and prohibiting disability-based insurance exclusions would also help advance equitable access to health care (Goal 3). Collectively, these actions can move the SDGs from commitment to implementation, ensuring that persons with disabilities are not only included but also empowered as agents of change.

Without decisive, cross-sectoral action, the promise to "leave no one behind" will remain unfulfilled.

NOTES

1 The social model of disability (implicit in the CRPD) distinguishes between impairments (individual health conditions) and disability (the societal barriers people face). Under this model, "disability" results largely from inaccessible environments and discriminatory attitudes, not the impairment itself (Wickenden, 2023).

2 Intersectionality refers to the concept that individuals can experience multiple overlapping forms of discrimination (e.g. gender plus disability) that compound disadvantage. The term was first coined by Kimberlé Crenshaw in 1989 and is now widely used in social justice analyses (Wickenden, 2023).

3 Compared with children without disabilities, children with disabilities are 34% more likely to be stunted; and25% more likely to be wasted, underscoring a systemic failure to reach this group through mainstream nutrition interventions. Seen, Counted, Included: Using data to shed light on the well-being of children with disabilities. https://data.unicef.org/resources/children-with-disabilities-report-2021/

4 This means that mainstream nutrition initiatives must include children with disabilities, and there must also be targeted, specialized interventions, that address their additional and unique feeding and support needs.

5 The medical model of disability views disability primarily as a problem inherent to the individual, caused by illness, injury, or a physical or mental condition that needs to be cured, fixed, or managed. Under this model, interventions often focus on clinical treatment or rehabilitation, rather than addressing the environmental and social barriers that exclude people with disabilities from full participation in society (Shakespeare, 2013).

6 For instance, the Rights of Persons with Disabilities (RPWD) Act of 2016 in India reserves 5% of government jobs – yet private-sector inclusion and implementation lag behind.

7 For e.g. even when anti-discrimination laws exist, workplace and education discrimination remains pervasive. Moreover, persons with disabilities often lack adequate social protection, health insurance, and legal aid – elements that reinforce inequality.

8 16 out of 20 respondent countries have collected information on disability or plan to do so in their next census. Bhutan, Cambodia, Fiji, India, Indonesia, Kiribati, Lao PDR, Mongolia, Nepal, Philippines, Sri Lanka, Thailand and Timor-Leste collected information on disability in their most recent census. Bangladesh, Pakistan and Papua New Guinea reported that they will include information on disability in their upcoming census. Viet Nam conducted a national survey on persons with disabilities in 2016. Iran included questions on disability in the 2011 census but not in the 2016 census. In China, the second and the most recent national survey on the population of persons with disabilities was conducted in 2006. The implementation of a census or other household surveys in Afghanistan is unknown at the time of publication of this report. (UNFPA Asia and the Pacific | Disability Data – Findings: https://asiapacific.unfpa.org/en/disability-data-findings?utm_source=chatgpt.com)

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ZUSAMMENFASSUNG

Dieser Artikel zeigt auf, wie Lücken bei der Inklusion von Menschen mit Behinderungen innerhalb der SDGs kaskadenartige Auswirkungen auf die Entwicklungsergebnisse haben. Misserfolge in einem Bereich wie Armut (Ziel 1), Hunger (Ziel 2) oder Bildung (Ziel 4) verstärken die Ausgrenzung in anderen Bereichen, vertiefen die Ungleichheit und untergraben die Verpflichtungen aus den Artikeln 24, 25, 27, 31 und 32 der CRPD, um nur einige zu nennen. Die Vernetzung der SDGs wird deutlich, wenn begrenzte Fortschritte bei einem Ziel ein anderes behindern. So führt beispielsweise die systematische Verweigerung der Krankenversicherung für Menschen mit Behinderungen nicht nur zu schlechten Gesundheitsergebnissen, sondern hält die Betroffenen auch in Armut gefangen (Ziel 1), was verdeutlicht, wie sich Ungleichheiten im Gesundheitswesen auf andere Ziele auswirken. Der Ausschluss von Bildung (Ziel 4) schränkt den Zugang zu Beschäftigung (Ziel 8) ein. Ziel 10 konzentriert sich zwar auf Inklusion, wird jedoch nicht durch seine Ausgestaltung, sondern durch eine schwache Umsetzung anderer Ziele behindert. Ganzheitliche, intersektionale Maßnahmen, die auf einer rechtsbasierten Haushaltsplanung, disaggregierten Daten und regionaler Gerechtigkeit beruhen, sind unerlässlich, um „niemanden zurückzulassen".

RÉSUMÉ

Cet article montre comment les lacunes en matière d'inclusion des personnes handicapées dans les ODD ont des répercussions en cascade sur les résultats en matière de développement. Les échecs dans un domaine tel que la pauvreté (objectif 1), la faim (objectif 2) ou l'éducation (objectif 4) renforcent l'exclusion dans d'autres domaines, aggravant les inégalités et compromettant les obligations prévues par les articles 24, 25, 27, 31 et 32 de la CDPH, pour n'en citer que quelques-uns. L'interdépendance des ODD devient évidente lorsque les progrès limités réalisés pour un objectif entravent la réalisation d'un autre. Par exemple, le refus systématique d'accorder une assurance maladie aux personnes handicapées entraîne non seulement de mauvais résultats en matière de santé, mais piège également ces personnes dans la pauvreté (objectif 1), soulignant ainsi la manière dont les inégalités dans les systèmes de santé se répercutent sur les autres objectifs. Alors que l'exclusion de

l'éducation (objectif 4) limite l'accès à l'emploi (objectif 8). L'objectif 10, bien que centré sur l'inclusion, est entravé non pas par sa conception, mais par une mise en œuvre insuffisante des autres objectifs. Des interventions holistiques et intersectionnelles, fondées sur une budgétisation axée sur les droits, des données ventilées et l'équité régionale, sont essentielles pour « ne laisser personne de côté ».

RESUMEN

Este artículo demuestra cómo las deficiencias en la inclusión de las personas con discapacidad en los ODS generan un efecto dominó en los resultados de desarrollo. Los fracasos en un ámbito, como la pobreza (objetivo 1), el hambre (objetivo 2) o la educación (objetivo 4), refuerzan la exclusión en otros, lo que agrava la desigualdad y socava las obligaciones del Convenio sobre los Derechos de las Personas con Discapacidad (CDPD), en particular los artículos 24, 25, 27, 31 y 32, por nombrar algunos. La interconexión de los ODS se hace evidente cuando el progreso limitado en un objetivo impide el avance en otro. Por ejemplo, la denegación sistemática del seguro médico a las personas con discapacidad no solo da lugar a malos resultados en materia de salud, sino que también atrapa a las personas en la pobreza (objetivo 1), lo que pone de relieve cómo las desigualdades en los sistemas de salud repercuten en otros objetivos. Mientras que la exclusión de la educación (Objetivo 4) limita el acceso al empleo (Objetivo 8). El Objetivo 10, aunque centrado en la inclusión, se ve obstaculizado no por su diseño, sino por la débil implementación de los demás objetivos. Las intervenciones holísticas e intersectoriales basadas en presupuestos basados en los derechos, datos desglosados y equidad regional son esenciales para «no dejar a nadie atrás».

Author: Miss Vibhu Sharma has worked with several international organizations on assistive technologies, gender-equitable, disability-inclusive education, Sexual and Reproductive Health and Rights (SRHR) education for girls with disabilities and inclusive and accessible communications for persons with disabilities. She also has led a research on assistive technologies for young persons with disabilities in Low and Middle Income Countries (LMICs). Besides specializing in disability inclusion, Miss Sharma also specializes in diversity, equity and inclusion, and has also worked on inclusive human resources among others. She is recognized *Legends Honoree* for mentoring youth with and without disabilities, and is Reed Smith's *Rising Star* awardee for her commitment and work on inclusion for persons with disabilities.

Contact: Follow Vibhu LinkedIn: linkedin.com/in/vibhu-sharma-5bab9998 Twitter/X: @vibhusharma_11

Rural Realities: Navigating Structural and Social Challenges to the Participation of People with Disabilities in Colombia

Teresa Sprenger/Marisol Moreno-Angarita

The intersection between geographical location, poverty, and disability is empirically evidenced. However, few studies have been conducted on local contexts and structures to promote social change and inclusion of people with disabilities on a small scale. The article aims to contribute to a better understanding of challenges and opportunities in implementing the UN CRPD in Colombian remote areas. We emphasize the central role of community dynamics and illustrate the impact of commitment in a small, rural network, providing an empirical example from an ongoing study. Finally, we explore the opportunities inherent in participatory approaches within qualitative research, when the voices and perspectives of people with disabilities are prioritized.

Legal Framework – Country No. One Hundred

In May 2011, Colombia ratified the UN Convention on the Rights of Persons with Disabilities (CRPD), becoming the 100th country to do so (Human Rights Watch 2011). In the years since, the government has demonstrated a strong legal commitment to fulfilling the obligations outlined in this international treaty.

According to Montoya et al. (2017), Colombia's unique legal system provides a robust mechanism for the implementation of international human rights law. The country's jurisprudential principle of the constitutional block incorporates the CRPD and other human rights treaties into the core of its 1991 Constitution. The CRPD possesses broad normative force and can be directly applied in judicial decisions, including those related to fundamental rights protection. This legal standing is crucial for guaranteeing the rights of people with disabilities in the country.

The Global Disability Inclusion Report (UNICEF 2025) states that Colombia ranks among the most advanced countries in Latin America with respect to legal adaptations. A central milestone is Law 1996 of 2019, which reinstates the legal capacity of people with disabilities. By introducing a framework of supported decision-making, the law abolishes the practice of interdiction, a mechanism that systematically excluded persons with disabilities from legal decision-making.

As noted in the latest National Census (Dirección de Censos y Demografía 2018), Colombia's population includes over three million people with disabilities, representing more than 7 % of the total population. The data also shows a significant disparity between urban and rural areas, with rates of 49 % and 65 % respectively, underscoring a heightened level of marginalization in rural settings (Fundación Saldarriaga Concha 2021). Despite extensive legislative efforts of the Colombian Government, the majority of persons with disabilities remain excluded from access to services and experience

limited levels of achievement in multiple dimensions of life (Pinilla-Roncancio/Cedeño-Ocampo 2023). So, data reveals that marginalization becomes particularly pronounced when disability intersects with other categories of disadvantage.

The contradiction between legal reforms and the persistent social exclusion of people with disabilities in remote areas raises a fundamental question regarding the implementation of laws. How can legal frameworks be adopted into meaningful practice using resources, institutional capacities and raising society's commitment and awareness to recognize the right of participation for everyone. The following section focuses on the strength and potential of community structures valuing steps towards an inclusive society within local contexts.

The Potential of Rural Community Strengths

The Convention on the Rights of Persons with Disabilities is the formal representation of a paradigm shift towards a rights-based model of disability. Whereas the social model provides an explanation of the social construction of disability, focusing on interaction, the rights-based model emphasizes the *universal and non-negotiable value of Human Rights* for everyone. This approach recognizes disability as an aspect of human diversity (Degener 2015).

Processes of development and social change in rural communities are often viewed as less advanced or less progressive. Fleming et al. (2018) challenge this imbalanced perspective in the discourse on urban versus rural areas by focusing on *rural resilience*. According to the authors this resilience is based on „social capital (the quality of relationships between members of the community), values of kinship, and pride" (ibid 2018: 118). Drivers for social change can therefore initially build on these defined strengths of rural communities. Relationships among persons with disabilities, families and other relevant actors are often shaped through shared experiences (Moreno-Angarita, Cardenas-Jimenez 2017). The crucial next step is to transform these experiences into collective advocacy for participation in local decision-making. Buitrago goes beyond collaboration, arguing for the development of community participation as a process of „intervening in decision-making processes, acquiring power, or creating awareness" (2013: 211, own translation). However, the challenge remains for individuals to explore possibilities for collective action by defining shared priorities in order to establish a presence in political discourse.

The rights-based approach demands participation and offers a pathway to institutionalize co-creation and shared decision-making across all relevant areas while also providing mechanisms to coordinate and evaluate different strategies of support, bringing into focus the role of allies and gatekeepers.

Agents for Social Change

Structural deficiencies and the resulting limited opportunities for people with disabilities are a well-researched topic, particularly in low- and middle-income countries facing wide social divides and a high incidence of disability linked to conflict and displacement. The Disability-Poverty-Cycle, outlined by Banks et al. (2017), substantiates that impoverished conditions increase the likelihood of acquiring a disability. In turn, a person living in poverty faces limited opportunities to overcome deprivation due to restricted access to resources like education or healthcare.

Our discussion now turns towards the dynamics in rural settings, where the interaction patterns between individuals of different social standing have a decisive influence, shaping social realities.

To illustrate this dynamic, we present an example from a rural community, the field of study of one of the co-authors of this article. Our analysis shows that local gatekeepers, such as administrative officials, often guided by a medical perspective, tend to perceive community members with disabilities primarily as individuals in need of care. This interpretation frequently translates into charity-based practices. When publicly staged, charity events are perceived positively not only by people with disabilities and their families but also by the broader local community. In contrast, the complex task of ensuring the full inclusion of people with disabilities in all areas of life is challenging to implement, especially within a top-down political framework that lacks the perspective of those directly affected. In an effort to deconstruct inequality, Reygadas refers to the impact of hierarchical relationships as the „construction of inequities in face-to-face interactions within small communities" (2008: 36). But the relationship between those socially constructed as superior and those who experience themselves as dependent also holds the potential for transformation, when given the opportunity to leave cemented patterns.

Our example is based on data from a yet-unpublished Participatory Action Research (PAR) study conducted in a rural community in Colombia. Data, consisting of field notes, protocols, videos, and photographs, were systematically organized and coded

The aspired paradigm shift requires the joint efforts of all actors, who must critically interrogate their own roles in sustaining inequality and contribute to building flexible systems that recognize disability as an integral dimension of human diversity.

using MAXQDA software. Emphasizing on political participation of people with disabilities and their relatives a focus group was established, which continued to function as an advocacy body beyond the 11-month main data collection period. The focus group met on a monthly basis with varying participation from 6 to 21 individuals. The active involvement of the community was crucial for selecting the discussion topics and subsequently determining the strategic priorities. Participants were assigned to one of the following four groups. Persons with disabilities and their relatives as core members, allies from the local NGO sector, invited experts and local administrative staff. While initial meetings were led by administrative staff, the community soon opted for internal dialogue. Consequently, viewpoints and demands were communicated to the administration only after the meetings, often via flyers, handouts, or letters, with rotating group members taking responsibility for the handover. This shift in interaction resulted in a substantial transformation over one year, signaling a paradigm shift. As a direct result of equitable dialogue, the community's highest-priority need was integrated into the development plan of the newly elected municipal administration another year later.

Allies, primarily from the local NGO sector, played a crucial role in accompanying this shift. Their function as bridging agents can be characterized by two key features. On the one hand, they maintain a close relationship with families, knowing about daily experiences of exclusion, on the other hand, they operate independently of the local administration, being valued as interlocutors due to their supportive engagement with the community.

To understand the influence of power dynamics, the *coin model of privilege and critical allyships*, introduced by Nixon (2019) provides important insights. Allies not only need to act from their perspective but to critically reflect on their own position of power in order to „learn from the expertise of, and work in solidarity with, historically marginalized groups" (ibid. 13). The aspired paradigm shift requires the joint efforts of all actors, who must critically interrogate their own roles in sustaining inequality and contribute to building flexible systems that recognize disability as an integral dimension of human diversity.

Inclusion as a Multidimensional and Participatory Task

In Colombia, significant policy reforms have been made to ensure the full inclusion of persons with disabilities, in accordance with an international legal framework (Unterwood et al. 2020). However, the challenge of translating a human rights-based concept of disability into practice can only be addressed through the active participation of people with disabilities. Local collaboration among self-advocacy organizations, NGOs, and political actors is therefore essential for developing effective strategies.

Further research should aim to overcome the clinical perspective that often dominates public and private entities. Issues related to disability are still largely confined to health institutions, such as the Ministry of Health and Social Protection, and to medical rehabilitation and care systems. While the importance of these services is not to be diminished, this clinical focus tends to overshadow other crucial aspects of everyday life. Legal reforms alone are insufficient without complementary measures to transform social norms, ensure accessibility, and foster inclusive practices across public and private spheres.

Critical research can make a decisive contribution in this context. A qualitative approach that takes into account specific local structures can provide insights and reveal interconnections that statistical data alone cannot capture. As del Oviedo-Cáceres et al. argue, beyond public policies, it is the „actions that are carried out from day to day, in the exercise of citizenship, to contribute to the construction of inclusive, fair, and less inequitable societies" (2023: 192) that hold greater significance.

To go beyond simply documenting the lived realities of individuals and groups facing intersectional disadvantages and to actively promote change, participatory methods are particularly valuable. In the 1980s, the Colombian sociologist Fals-Borda already emphasized the importance of *Participatory Action Research (PAR)* as a method linking theory and action, adapted to regional contexts in order to visualize the interests of marginalized groups and to facilitate change on a local level (1987).

Regarding inclusion of people with disabilities affected by poverty, participatory methods are not merely *an* option, but the necessary approach for implementing sustainable change and ensuring permanent, equitable access across all levels of society. This methodological perspective requires an appreciation of the community's inherent strengths and resources, including their adaptive capacities developed to survive and navigate conditions of poverty (Grech 2023). Mertens (2021) adds an ethical dimension to this methodological approach, highlighting a *transformative commitment* for researchers to design studies that promote social, economic, and environmental justice.

In this regard, we encourage researchers and activists to navigate uncharted paths, analysing their responsible position to contribute to the transformation of the social imaginary of disability. The interinstitutional and interdisciplinary task consists of co-creating strategies under the leadership of people with disabilities.

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ZUSAMMENFASSUNG

Der Zusammenhang zwischen geografischer Lage, Armut und Behinderung ist empirisch belegt. Allerdings gibt es nur wenige Studien, die sich mit lokalen Kontexten und Strukturen befassen, um sozialen Wandel und die Inklusion von Menschen mit Behinderungen in kleinem Maßstab zu fördern. Der Artikel soll zu einem besseren Verständnis der Herausforderungen und Chancen bei der Umsetzung der UN-Behindertenrechtskonvention in abgelegenen Gebieten Kolumbiens beitragen. Wir betonen die zentrale Rolle der Dynamik innerhalb der Gemeinschaft und veranschaulichen die Auswirkungen des Engagements in einem kleinen, ländlichen Netzwerk anhand eines empirischen Beispiels aus einer laufenden Studie. Schließlich untersuchen wir die Chancen, die partizipative Ansätze in der qualitativen Forschung bieten, wenn die Stimmen und Perspektiven von Menschen mit Behinderungen im Vordergrund stehen.

RÉSUMÉ

Le lien entre la situation géographique, la pauvreté et le handicap est empiriquement prouvé. Cependant, peu d'études ont été menées sur les contextes et les structures locaux afin de promouvoir le changement social et l'inclusion des personnes handicapées à petite échelle. Cet article vise à contribuer à une meilleure compréhension des défis et des opportunités liés à la mise en œuvre de la Convention des Nations Unies relative aux droits des personnes handicapées dans les régions reculées de Colombie. Nous soulignons le rôle central de la dynamique communautaire et illustrons l'impact de l'engagement dans un petit réseau rural, en fournissant un exemple empirique tiré d'une étude en cours. Enfin, nous explorons les opportunités inhérentes aux approches participatives dans le cadre de la recherche qualitative, lorsque la voix et les perspectives des personnes handicapées sont prioritaires.

RESUMEN

La intersección entre la ubicación geográfica, la pobreza y la discapacidad está demostrada empíricamente. Sin embargo, se han realizado pocos estudios sobre los contextos y estructuras locales para promover el cambio social y la inclusión de las personas con discapacidad a pequeña escala. El artículo tiene como objetivo contribuir a una mejor comprensión de los retos y oportunidades que plantea la aplicación de la Convención de las Naciones Unidas sobre los Derechos de las Personas con Discapacidad (CDPD) en las zonas remotas de Colombia. Hacemos hincapié en el papel central de la dinámica comunitaria e ilustramos el impacto del compromiso en una pequeña red rural, proporcionando un ejemplo empírico de un estudio en curso. Por último, exploramos las oportunidades inherentes a los enfoques participativos dentro de la investigación cualitativa, cuando se da prioridad a las voces y perspectivas de las personas con discapacidad.

Author: Teresa Sprenger is a doctoral student and lecturer at Technische Universität Dortmund. Her research centers on the inclusion of women with intellectual disabilities through community-based approaches. She is based in Colombia and Germany. Marisol Moreno-Angarita is an independent Consulter and retired Professor at Universidad Nacional de Colombia. Marisol does research on policies related to people with disabilities in health, educational, and labour settings. She is also an Early Childhood Researcher. She does advocacy at local, national, and international levels. She also conducts Qualitative Social Research.

Contact: teresa.sprenger@tu-dortmund.de
marisolmorenoa@gmail.com

Report on the Implementation of the Convention on the Rights of Persons with Disabilities and its Inclusion in the Sustainable Development Goals in Guatemala (as of July 2025)

Ramiro Nochez McNutt

This document critically analyzes Guatemala's progress in implementing the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the inclusion of persons with disabilities within the framework of the Sustainable Development Goals (SDGs). Despite having ratified the CRPD in 2008 and formally adopting the 2030 Agenda for Sustainable Development, Guatemala shows a persistent gap between its international commitments and the reality of persons with disabilities.

The study presented in this article is based on official reports, national statistics, and recent research conducted by the author to assess the situation in key sectors such as employment, education, health, accessibility, political participation, and access to justice. The findings reveal serious institutional and structural weaknesses, including outdated legislation, lack of implementation of national policies, insufficient budgetary allocations, and a generalized absence of political will. The article concludes with a set of concrete recommendations aligned with international best practices for structural reforms and inclusive governance.

Introduction: Commitments Made and National Reality

Guatemala signed the Convention on the Rights of Persons with Disabilities (CRPD) in 2007, and ratified it through Decree 59-2008. From that moment, the State assumed the legal obligation to adopt legislative, administrative, and other measures to guarantee the full and equal exercise of human rights and fundamental freedoms by all persons with disabilities. In 2015, adhered to the 2030 Agenda of Sustainable Development Goals (SDGs) that promotes a universal and transformative approach, with the motto „leave no one behind". In theory, the ratification of the CRPD and adherence to the SDGs place Guatemala among the States committed to respecting and guaranteeing the human rights of persons with disabilities. However, in practice, there is a persistent gap between the international norms that Guatemala has ratified and their effective implementation in the country. More than 15 years after the ratification of the CRPD and almost a decade since the adoption of the SDGs, progress in terms of inclusion and equity remains marginal, fragmented, and, in many cases, merely rhetorical.

Available data (UNPRPD, 2021; ODHAG, 2021) show that the population with disabilities in Guatemala continues to face multiple forms of exclusion and structural discrimination. Reports from recognized entities consistently indicate that the rights to education, health, employment, accessibility, participation, and justice are not guaranteed in most cases. According to these reports, one of the main challenges is the „lack of mainstreaming of disability in development plans and policies" (UNDP, 2024) as well as the absence of systematic

accountability mechanisms and specific budgets to ensure their fulfillment. Similarly, the research conducted by the author on the National Diagnosis of Disability in Guatemala (Nochez, 2024) identified substantive coincidences with the findings of these reports. All highlight the weakness of state structures responsible for implementing inclusion policies, the lack of disaggregated data by disability, and the limited participation of representative organizations in decision-making processes.

Research Questions

- What progress and setbacks has Guatemala made in the implementation of the CRPD and inclusion in the SDGs?
- What are the main structural and institutional obstacles that prevent the effective guarantee of the rights of persons with disabilities in Guatemala?
- What international best practices could serve as a reference for a structural reform of the national approach to disability?

Methodology

A comprehensive review of literature and official documents was combined with a critical analysis of the institutional and sectoral situation. To complement this information, expert interviews were conducted to obtain qualitative perceptions of the challenges and progress. Primary sources include government reports, national laws, and decrees. Secondary sources comprise recent studies and research from international organizations, civil society organizations, and academic publications. Additionally, data provided by national entities and international agencies in their statistical reports were used.

For the semi-structured interviews, five professionals with extensive experience, representativeness, and deep knowledge in the field of disability rights in Guatemala were selected. The criteria included their experience in academia, civil society, international consulting, and their participation in political advocacy processes. A web questionnaire with ten open-ended questions was used, designed to explore in depth the progress, obstacles, recommendations, and critical assessments regarding the implementation of the CRPD and the inclusion of disability in the SDGs.

The information collected from the interviews and documentary review was subjected to a thematic analysis by axes. Recurrent categories were identified in the experts' responses, and this information was triangulated with the findings of official documents and previous research, allowing for a comprehensive and contrasted vision of the situation.

This study recognizes certain limitations, such as the lack of disaggregated statistical data in some specific sectors, which hinders a deeper quantitative analysis. Likewise, the availability and access to updated governmental information on the implementation of certain policies were limited, which could restrict comprehensiveness in some areas. Additionally, there is no national public consultation monitoring system, where progress in the implementation of both the Convention and the SDGs can be determined and established.

National and International Legal Framework: Critical Analysis of Decree 135-96, Initiative 5125, and the National Disability Policy

Guatemala has a normative framework that formally recognizes the rights of persons with disabilities, although in practice it presents serious limitations for its effective implementation. The main national instrument is Decree 135-96, Law for the Care of Persons with Disabilities, approved before the entry into force of the Convention on the Rights of Persons with Disabilities (CRPD). This law, although it represented an advance at the time, has become outdated compared to the human rights approach established by the CRPD, especially concerning autonomy, accessibility, participation, and reasonable accommodation.

Aware of this outdatedness, various sectors promoted Legislative Initiative 5125, presented to the Congress with the aim of harmonizing the national normative framework with international standards. This initiative, however, has remained stalled for years, without advancing to third reading, reflecting the lack of political will on the part of the legislative branch to prioritize the rights of persons with disabilities.

In parallel, organizations of persons with disabilities have worked on a new bill, called Legislative Initiative 6571, which seeks to integrate the contributions accumulated by civil society. Although it has already been formally submitted to Congress, at the time of this publication; the Disability Commission of that body has not shown substantive interest in analyzing or promoting the proposal. Therefore, at the initiative of another deputy and the President of Congress, it has begun to be disseminated on social media that both would be promoting its approval and the document would have already been registered in the legislative directorate, which is the technical body responsible for receiving bills and provides technical,

... there is a persistent gap between the international norms that Guatemala has ratified and their effective implementation in the country.

legal, and technological support to Congress.

On the other hand, the National Disability Policy of Guatemala and its Action Plan, formulated in 2005 and formally approved on February 19, 2008, through Decree No. 16-2008 of the Congress of the Republic, as an instrument of state guidance, lacked from its creation a clear mechanism for evaluation, monitoring, and impact indicators. In 2017, the action plan to operationalize this policy was finally drawn up, but it was never implemented or received budgetary support, except for some technical meetings held without any effect or action. The lack of follow-up and the absence of strong institutions to lead its execution reflect a weak and disjointed governance structure regarding disability.

However, at the time of this writing, there are no public documents or widely disseminated consultation spaces, which raises doubts about the transparency of the process and its participatory legitimacy, especially in a pre-election context. This situation aggravates the normative and strategic planning backlog that the country has in this matter.

Despite the existence of multiple complementary regulations – such as Decrees 3-2020 on the Guatemalan Sign Language, 6-2024 on the Biopsychosocial Disability Certification Law (still not implemented to date), and the recognition of the Marrakesh Treaty through Decree 07-2016 – their application remains partial, fragmented, and poorly articulated among sectors. The lack of a comprehensive framework law, accompanied by a modern, participatory, and funded state policy, continues to be a historical debt to the population with disabilities.

Sectoral Situation: Employment, Education, Health, Accessibility, Political Participation, and Access to Justice

The sectoral analysis allows observing with greater precision the areas in which the implementation of the Convention and the SDGs has failed in Guatemala. Inclusion gaps are clearly manifested in fundamental areas of human development, affecting the living conditions, autonomy, and full participation of persons with disabilities.

Employment: The majority of persons with disabilities in Guatemala do not have real employment opportunities. Only a small percentage accesses formal jobs, and most depend on informal work, family support, or conditional transfers that do not generate autonomy. The absence of a national inclusive employment policy, the lack of reasonable accommodation in the work environment, the absence of tax incentives for hiring persons with disabilities, and persistent discrimination prevent the full exercise of the right to work. Likewise, widespread structural exclusion is observed in institutions and by the private sector, with very little outreach and limited participation (Nochez, 2025).

Education: In the educational sphere, structural obstacles persist that prevent thousands of girls, boys, and young people with disabilities from accessing, remaining, and graduating from the school system. Recent reports indicate that "the educational centers lack basic accessibility conditions, adapted materials, and trained personnel". More than 28% of persons with disabilities in certain departments cannot read or write (CONADI, 2024). This gap is accentuated among women, indigenous populations, and persons with multiple disabilities. SDG 4 on inclusive education remains an intangible reality. At the university level, the reality is even more dramatic, and exclusionary practices persist.

Health: The health system has not systematically incorporated the disability approach. Despite normative advances such as Decree 6-2024 on the Biopsychosocial Disability Certification, as of the date of this report, said certification has not been implemented. Persons with disabilities continue to face the non-existence of care protocols, physical, attitudinal, and economic barriers to access medical services, primary care, rehabilitation, and medicines (Nochez, 2024). There are serious deficiencies in access to technical aids, therapies, and personal support, especially in rural areas. Mental health care for persons with psychosocial disabilities in Guatemala is virtually non-existent, and the admission of a complaint to the Inter-American Commission on Human Rights for

alleged violations of rights at the Federico Mora National Mental Health Hospital marks a historic precedent. The Inter-American Commission on Human Rights -IACHR-will address allegations of forced institutionalization, physical and sexual abuse, undue isolation, and prolonged deprivation of liberty without medical or legal justification, evidencing a structural pattern of negligence towards persons with disabilities. The case seeks not only justice and comprehensive reparation for the victims but also urgent legislative reforms and a mental health system based on dignified conditions, community support, and respect for human rights.

Accessibility: The lack of physical, communication, and digital accessibility remains one of the clearest expressions of structural exclusion. Although Guatemala has adopted certain international commitments, there are no mandatory national technical standards or effective oversight mechanisms. Accessibility to public transportation, government buildings, educational centers, and community spaces is limited or non-existent. In the digital sphere, most institutional portals lack web accessibility, hindering access to public information and services. This includes the legislative body itself – even though the law is mandatory and ignorance cannot be argued – Congress continues to issue and publish laws in inaccessible formats for persons with certain disability conditions, which results in a great legal contradiction (Nochez, 2024).

Political Participation and Access to Justice: The political representation of persons with disabilities is marginal. Although the legal framework recognizes equal political rights, the material conditions for exercising them are not guaranteed. Barriers to participating as voters, candidates, or members of political organizations still exist. Furthermore, the justice system lacks trained personnel and accessible means (such as sign language interpreters, accessible formats, or reasonable accommodation in hearings), which restricts access to mechanisms for complaints, defense, and legal protection (Nochez, 2024).

Living Conditions and Poverty: Disability in Guatemala is directly associated with higher levels of poverty. Households with persons with disabilities have the highest levels of Unsatisfied Basic Needs (UBN), especially in the areas of housing, education, and access to services. The population with disabilities faces additional obstacles to accessing social programs, not due to lack of need, but due to lack of records, architectural barriers, social stigma, and institutional ignorance. The collection of disaggregated data remains insufficient. Although certain institutions have begun to systematize information on disability, this is not yet reflected in public planning systems or linked to specific SDG targets. The lack of reliable and permanent data directly affects the State‘s capacity to design inclusive public policies and perpetuates the statistical invisibility of millions of people (Nochez, 2024). In short, the sectoral rights of persons with disabilities in Guatemala continue to be violated. The country lacks a comprehensive and sustainable state policy that addresses the issue with the depth and urgency it requires.

Institutional and Budgetary Analysis: Structures, Mainstreaming, and Insufficient Funding: The implementation of the CRPD and the effective incorporation of disability into the 2030 Agenda require not only political will but also solid institutions, intersectoral coordination mechanisms, and adequate budgetary allocation. In the case of Guatemala, the institutional framework responsible for disability issues is characterized by its fragility, dispersion, and limited influence in decision-making (Nochez, 2024)

CONADI, has a limited mandate and lacks binding legal tools to monitor compliance with the rights of persons with disabilities. Its role has been essentially consultative, and its resolutions do not oblige other state entities. Furthermore, CONADI does not effectively participate in the processes of formulating, executing, and evaluating public policies, nor in budgetary allocation mechanisms. Although there have been advances such as its inclusion in the Development Councils System, these have not yet translated into greater institutional incidence.

The disability approach is not mainstreamed in national planning instruments, and public budgets allocated to this issue are minimal, unsustainable, or totally non-existent. Most ministries and secretariats lack technical units with personnel trained in the rights of persons with disabilities, which results in fragmented, uncoordinated policies with little results orientation. The diagnosis prepared by the author coincides with these findings and also highlights the lack of effective monitoring and evaluation mechanisms for disability-related programs (Nochez, 2024). The absence of specific indicators in institutional strategic plans and the lack of accountability further hinder the measurement of compliance with the CRPDisabilities and the SDGs.

Likewise, organizations of persons with disabilities have denounced the common practice of using inclusive discourse in public events and formal planning, but without allocating real resources for their implementation. In the same vein, it has been highlighted that budgetary frameworks in Guatemala do not include guidelines for the inclusion of persons with

disabilities or indicators for measuring public spending aimed at guaranteeing their rights. The lack of systematization in the use of statistical data, the lack of knowledge about the situation of this population, and the limited articulation between institutions prevent evidence-based planning (Nochez, 2024).

In summary, the Guatemalan institutional apparatus responsible for disability policy operates with deep structural limitations that prevent progress towards inclusive, articulated, and evidence-based public management. This institutional weakness is one of the main obstacles to transforming international commitments into sustained actions in favor of persons with disabilities.

Expert Voices: Key Perceptions on the Implementation of the CRPD and the SDGs in Guatemala

In order to enrich the institutional, legal, and sectoral analysis presented in the previous chapters, this chapter presents a thematic systematization of the perceptions of five key references in the disability agenda in Guatemala: Interviewee 1, Interviewee 2, Interviewee 3, Interviewee 4, and Interviewee 5. Through a structured questionnaire with ten open questions, progress, obstacles, recommendations, and critical assessments regarding the implementation of the Convention on the Rights of Persons with Disabilities (CRPD) and inclusion in the Sustainable Development Goals (SDGs) were explored.

Main Progress Since the Ratification of the CRPD (2008): From Interviewee 1's perspective, Guatemala has stagnated in basic knowledge of the CRPD, and no indicators have been developed to measure real progress. At most, the issue has been incorporated into political discourse, and some civil society organizations have promoted legislative proposals. Interviewee 2 agrees that the main gain has been the greater dissemination of the Convention's content, which has allowed for an expansion of available information, but without this translating into structural changes. For her part, Interviewee 3 offers a more detailed and critical view. She highlights certain legislative achievements such as the approval of the Law of the Marrakesh Treaty (Decree 9-2023) and the Law recognizing Guatemalan Sign Language (Decree 3-2020), which represent advances in access to information and cultural recognition of historically excluded communities. However, she warns that the implementation of these laws has been deficient, and that a structural mismatch between the normative and the operational persists: "these normatives have had a limited or null regulatory and implementation development". She adds that the Accessibility Manual promoted by CONADI lacks legal force and sanctioning mechanisms. Interviewee 4 agrees in describing the advances as "limited," emphasizing that the first state report to the CRPD Committee (2016) reflected this reality, as it was accompanied by an alternative report from civil society that evidenced the backlog. He also points out that legislative initiatives related to the CRPD have not reached their final approval, and that state action remains anchored in awareness workshops, without real impact. Interviewee 5 adds that while awareness among persons with disabilities themselves has grown, institutional progress has been minimal. She recognizes some legislative efforts but stresses that rights continue to not materialize and that persons with disabilities continue to face exclusion at all levels.

Structural and Political Barriers to Implementing the CRPD: Interviewee 1 identifies several key factors: the lack of legal tools, the absence of persons with disabilities in decision-making spaces, and the non-existence of disability indicators in programs and budgets. Interviewee 2, for his part, considers that the main obstacle is the difficulty in including the topic in public policies across different sectors, due to the lack of an integrated vision. In this vein, Interviewee 3 elaborates, stating that the most significant barriers have structural roots. The non-existence of a comprehensive framework law in accordance with the CRPD prevents establishing clear obligations for the State and the private sector. Furthermore, she denounces the lack of oversight and sanction mechanisms, and criticizes the institutional fragmentation that prevents effective governance. "CONADI does not have real governing capacity, and there is no intersectoral system that guarantees state coordination," she points out. She also questions the persistence of physical, attitudinal, and communication barriers. Interviewee 4 complements by pointing out the outdatedness of national policy, the lack of legislative harmonization, and the limited inclusion of persons with disabilities in decision-making. Interviewee 5 agrees that the assistance-based model still predominates in state structures and that this blocks the full implementation of the CRPD.

Inclusion in Public Policies within the Framework of the SDGs: For Interviewee 1, the stagnation observed with the CRPD is replicated within the framework of the SDGs: there is no significant progress in the inclusion of persons with disabilities, nor indicators to evaluate them. Interviewee 2 agrees, stating that government technical teams do not prioritize disability,

which prevents its mainstreaming. Interviewee 3 believes that inclusion within the framework of the SDGs has been superficial and rhetorical. While there is some discursive recognition, the planning, budgeting, and execution of policies still do not incorporate the rights approach. Furthermore, she points out that the lack of specialized institutions on the subject limits the impact of the SDGs on the real lives of persons with disabilities. Interviewee 4 is emphatic: "the SDGs still do not align with the CRPD," which reflects a disconnection between international commitments and local reality. For Interviewee 5, the persistence of a medical and charitable vision prevents true inclusion, and she stresses that the SDGs have not translated into concrete actions in favor of this population.

Current Legal Framework and Initiative 6571: Interviewee 1 considers that Initiative 6571 represents a genuine effort by the disability movement, although a deep debate about its content has not yet occurred. Interviewee 2 values it as a necessary advance in updating the legal approach, albeit without further technical analysis. Interviewee 3 maintains that the current framework is outdated with respect to the CRPD, and that an integral law is urgently needed. She considers Initiative 6571 positive but insists that it must be accompanied by real implementation mechanisms: "it is not enough to change the legal text if the institutional apparatus that executes it is not transformed". Interviewee 4 recognizes that the initiative incorporates fundamental concepts but regrets that the formulation process has not been sufficiently participatory. Interviewee 5 is cautious and states that it cannot yet be affirmed whether it represents a real advance without knowing its final version and the political will to implement it.

New National Disability Policy: Interviewee 1 affirms that the current policy responds to an outdated paradigm and must be replaced by one that reflects the principles of the CRPD. Interviewee 2 emphasizes that its elaboration and implementation must start from a broad participatory process. Interviewee 3 highlights the need for a policy based on human rights, intersectionality, and a life-cycle approach. She adds that it must include evaluation mechanisms, budget, and institutional articulation: a policy without resources, without follow-up, or intersectoral coordination is a dead leer. Interviewee 4 warns that, so far, consultation has been limited, which compromises the legitimacy of the process. Interviewee 5 emphasizes that the policy must be transversal, binding, and built in an obligatorily participatory manner.

Institutional Articulation in the GEDS Thematic Table: Interviewee 1 opines that these spaces have symbolic value, but their real impact is questionable. Interviewee 2 believes that the table should be the natural space for state articulation, although he recognizes that it does not fulfill that role currently. Interviewee 3 considers that institutional articulation is weak, without effective accountability mechanisms, coordination, or joint planning. Interviewee 4 coincides: the actions of the table are politically correct but limited and without verifiable results. Interviewee 5 abstains from opining due to not having current information on its functioning.

Role of OPDs in Public Policies and Monitoring: Interviewee 1 maintains that OPDs should have a formal role in dialogue and policy formulation processes. Interviewee 2 visualizes them as social auditing actors. Interviewee 3 states that they must participate in all phases of public policy and not be limited to being symbolically consulted. She emphasizes that their inclusion must be legally recognized, with effective advocacy capacity. Interviewee 4 adds that they must have the power to demand and propose. Interviewee 5 concludes that their participation must be obligatory and permanent, as a guarantee of a rights-based approach.

Disaggregated Data and Persistent Challenges: Interviewee 1 indicates that there has been progress in surveys and registries, but functional indicators or a national data system that allows evaluating policies still do not exist. Interviewee 2 recognizes improvements, although he regrets that they are not used adequately. For Interviewee 3, data generation remains sporadic and of use for planning: "most data is not updated or used in the design of interventions". She adds that key variables such as type of disability, territory, or ethnic origin have not been incorporated. Interviewee 4 considers that without disaggregated data; effective policies cannot be built. Interviewee 5 recognizes advances with the use of the Washington Group but insists that the information system remains weak and does not respond to human rights standards.

Strategies to Improve CRPD and SDG Implementation: Interviewee 1 proposes the direct empowerment of persons with disabilities as a starting point. Interviewee 2 suggests prioritizing the issue in government and cooperation agendas. Interviewee 3 recommends a multisectoral strategy, with state leadership and binding participation of OPDs. She emphasizes the need for a framework law, allocated budgets, continuous training, and specialized units in each ministry. Interviewee 4 proposes elevating the level of

collective work, establishing indicators, and reformulating the legal framework.

Interviewee 5 demands clear commitments and measurable actions from the executive and institutions.

Final Reflections: Interviewee 1 states that the progress achieved has been the result of pressure from the national movement. Interviewee 4 laments a setback in rights after the pandemic, and Interviewee 5 states that the current obstacles are enormous, and that there was more hope some years ago.

Conclusions and Recommendations

This analysis has highlighted the deep gaps that Guatemala faces in the implementation of the Convention on the Rights of Persons with Disabilities and in the substantive incorporation of the disability approach into the Sustainable Development Goals. Despite having normative frameworks and international commitments, the institutional, budgetary, and programmatic reality shows a great distance between discourse and practice.

Limited progress was identified in terms of awareness, some specific legal reforms, and a greater role for organizations of persons with disabilities. However, these advances have not managed to transform the state structure or significantly modify the living conditions of the population with disabilities.

The main barriers that prevent compliance with the CRPD include the persistence of the medical and assistance-based model, institutional fragmentation, the absence of a framework law with a human rights approach, the lack of indicators and earmarked budget, the weak leadership of the responsible entity, limited intersectoral articulation, and the non-existence of a reliable information system. Disability certification, although legally established, remains inoperative and not useful as a tool for planning and guaranteeing rights.

Regarding the SDGs, it is observed that disability has not been effectively mainstreamed. The absence of data, the population's lack of knowledge about their rights, and the lack of specific targets reflect the structural exclusion of the issue from the national development agenda.

Given this scenario, the document proposes a set of strategic recommendations aimed at reversing the situation:

- Promote the approval and implementation of a Comprehensive Disability Framework Law, aligned with the CRPD and endowed with enforceability and sanction mechanisms.
- Reconfigure the governing body for disability as an autonomous entity, with effective powers of governance, oversight, and inter-institutional articulation.
- Establish a national system of disaggregated, interoperable data linked to planning and budget systems, allowing for the monitoring of rights compliance.
- Reform the disability certification model to be useful, participatory, human rights-based, and aligned with the needs of public policy design.
- Include the disability variable as a transversal category in all social policies, with earmarked budgets, targets, and indicators.
- Strengthen the effective participation of organizations of persons with disability in the design, execution, and evaluation of public policies.
- Train public officials in the human rights approach, the social model, and universal accessibility, incorporating these contents into the training of public servants.
- Demand from international cooperation compliance with the principle of alignment with national priorities and with the agendas of the organizations of persons with disabilities themselves

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ZUSAMMENFASSUNG

Dieses Dokument analysiert kritisch die Fortschritte Guatemalas bei der Umsetzung der UN-Konvention über die Rechte von Menschen mit Behinderungen (CRPD) und die Einbeziehung von Menschen mit Behinderungen im Rahmen der Ziele für nachhaltige Entwicklung (SDGs). Obwohl Guatemala die CRPD im Jahr 2008 ratifiziert und die Agenda 2030 für nachhaltige Entwicklung offiziell verabschiedet hat, besteht nach wie vor eine Kluft zwischen seinen internationalen Verpflichtungen und der Realität von Menschen mit Behinderungen. Dieser Artikel ist Teil einer kritischen und reflektierenden Debatte über die Umsetzung der CRPD und die Einbeziehung von Menschen mit Behinderungen in die SDGs. Ziel ist es, einen Beitrag zur Überprüfung der Situation, der Herausforderungen und der gewonnenen Erkenntnisse in Ländern mit niedrigem und mittlerem Einkommen zu leisten, um einen Raum für eine fundierte Debatte und transformative Maßnahmen zu schaffen.

RÉSUMÉ

Ce document analyse de manière critique les progrès réalisés par le Guatemala dans la mise en œuvre de la Convention des Nations Unies relative aux droits des personnes handicapées (CRPD) et l'inclusion des personnes handicapées dans le cadre des objectifs de développement durable (ODD). Bien qu'il ait ratifié la CRPD en 2008 et adopté officiellement le Programme de développement durable à l'horizon 2030, le Guatemala affiche un écart persistant entre ses engagements internationaux et la réalité des personnes handicapées. Cet essai s'inscrit dans le cadre d'un débat critique et réflexif sur la mise en œuvre de la CDPH et l'inclusion des personnes handicapées dans les ODD. L'objectif est de contribuer à l'examen de la situation, des défis et des enseignements tirés dans les pays à faible et moyen revenu, afin de favoriser un espace de débat éclairé et d'action transformatrice. L'étude présentée dans cet article s'appuie sur des rapports officiels, des statistiques nationales et des recherches récentes menées par l'auteur afin d'évaluer la situation dans des secteurs clés tels que l'emploi, l'éducation, la santé, l'accessibilité, la participation politique et l'accès à la justice. Les conclusions révèlent de graves faiblesses institutionnelles et structurelles, notamment une législation obsolète, un manque de mise en œuvre des politiques nationales, des allocations budgétaires insuffisantes et une absence généralisée de volonté politique. L'article se termine par une série de recommandations concrètes alignées sur les meilleures pratiques internationales en matière de réformes structurelles et de gouvernance inclusive.

RESUMEN

Este documento analiza críticamente los avances de Guatemala en la implementación de la Convención de las Naciones Unidas sobre los Derechos de las Personas con Discapacidad (CDPD) y la inclusión de las personas con discapacidad en el marco de los Objetivos de Desarrollo Sostenible (ODS). A pesar de haber ratificado la CDPD en 2008 y haber adoptado formalmente la Agenda 2030 para el Desarrollo Sostenible, Guatemala muestra una brecha persistente entre sus compromisos internacionales y la realidad de las personas con discapacidad. Este ensayo se enmarca en un debate crítico y reflexivo sobre la implementación de la CDPD y la inclusión de las personas con discapacidad en los ODS. El objetivo es contribuir al análisis de la situación, los retos y las lecciones aprendidas en los países de ingresos bajos y medios, con el fin de fomentar un espacio para el debate informado y la acción transformadora.

Author: Ramiro Nochez McNutt is a Guatemalan political scientist and technologist specializing in disability-related public policy. He has over 30 years of experience in international organizations and state institutions. His research focuses on inclusion, institutional development, and human rights, and he currently leads projects such as the Disability Inclusion Index (IID) and Disability 101.

Contact: rnochezmc@gmail.com

20 Jahre UN-BRK: Gleichberechtigte Teilhabe lokal und global gestalten – Call for Papers

Zum 20-jährigen Jubiläum der UN-Behindertenrechtskonvention lädt der vierte Kongress der Teilhabeforschung (10.–11. September 2026 in Siegen) Wissenschaftler*innen ein, Beiträge einzureichen, die sich mit der Umsetzung einer gleichberechtigten Teilhabe befassen – insbesondere dort, wo sie entsteht: in den Kommunen. Gesucht werden Forschungsarbeiten, die zeigen, wie lokale Strukturen, Prozesse und Politik an der UN-BRK ausgerichtet und inklusiv gestaltet werden können, ebenso wie Beiträge zu globalen und europäischen Perspektiven sowie internationaler Zusammenarbeit gemäß Artikel 32 UN-BRK. Der Call for Papers richtet sich an die gesamte Breite der Teilhabeforschung, darunter Themen wie Arbeit, Wohnen, digitale Teilhabe, Gesundheit, Bildung, Kultur oder Freizeit. Eingereicht werden können quantitative, qualitative, Mixed-Methods- oder theoretische Arbeiten sowie partizipative und innovative Forschungsansätze, insbesondere solche, die Menschen mit Behinderungen als Co-Forschende einbeziehen.

Information: https://zpe.uni-siegen.de/teilhabekongress2026/call-for-papers/

20 years of CRPD: Challenges to equal participation at the local level - Call for Papers

Marking the 20th anniversary of the UN Convention on the Rights of Persons with Disabilities (CRPD), the fourth Congress of Participation Research (10–11 September 2026 in Siegen, Germany) invites scholars to submit contributions that address the realisation of equal participation with a particular focus on the local level. The call seeks research that demonstrates how local structures, processes, and policies can be aligned with the CRPD and made inclusive, as well as contributions to global and European perspectives and to international cooperation in accordance with Article 32. The call for papers is open to the full spectrum of participation research, including topics such as employment, housing, digital participation, health, education, culture, or leisure. Submissions can include quantitative, qualitative, mixed-methods, or theoretical work, as well as participatory and innovative research approaches, especially those involving people with disabilities as co-researchers.

Information: https://zpe.uni-siegen.de/teilhabekongress2026/en/call-for-papers-2/

CRPD Review Highlighted: HRW Warned of Extreme Risks for Persons with Disabilities in Gaza and the West Bank

Ahead of the CRPD Committee's 33rd session, Human Rights Watch (HRW) submitted urgent evidence on the situation of persons with disabilities in Gaza and the West Bank, documenting the severe and disproportionate harms they had faced during Israeli military operations and the ongoing blockade. HRW's research showed that people with disabilities had been at heightened risk of death and injury because evacuation routes were inaccessible, advance warnings were lacking, assistive devices were destroyed, and medical facilities were repeatedly attacked. Many had been unable to flee bombardments, while others had died after being denied medical evacuation or essential medications. Children with disabilities had been particularly affected, losing access to education, assistive technologies, specialised diets, and vital medical care. Thousands had acquired new disabilities due to the use of explosive weapons in densely populated areas. The collapse of Gaza's health system and severe restrictions on humanitarian aid had made even basic care unattainable. HRW urged States to suspend arms transfers to Israel, condemn violations of international humanitarian and human rights law, and press for full humanitarian access – including assistive devices, fuel, food, and medical supplies. The submission called on the CRPD Committee to demand disability-inclusive evacuation procedures, accessible health care, and greater protection for civilians with disabilities. HRW emphasised that without immediate action, Palestinians with disabilities would continue to face extreme and life-threatening conditions.

Information: https://www.hrw.org/news/2025/07/11/submission-on-the-situation-of-persons-with-disabilities-in-gaza-and-the-west-bank

Literatur

Farheen Akter Bhuian/Shah Ehsan Habib

Disability, Vulnerability and Sexuality: Sexual and Reproductive Healthcare Experiences of Young Persons with Disabilities in Dhaka City

Persons with disabilities encounter unequal access to sexual and reproductive health services (SRH). However, improving access to SRH remains a public health challenge, especially for this population in Bangladesh. This study explores the SRH-related care experiences and quality of services provided to PWDs in Dhaka city, along with the narratives of their personal struggles and vulnerabilities in navigating SRH issues in a society where they are often unseen and unheard. The results show that persons with disabilities often lack awareness about their SRH needs, and they have limited access to sex education. Most participants were typically hesitant to seek SRH services due to a lack of understanding, stigma, discrimination and the perception that these services are not essential. Persons with disabilities highlighted the necessity for disability inclusive built environments within healthcare facilities and the support from health assistants with greater inclusion of female healthcare workers.

Bezug: https://dgsjournal.org/wp-content/uploads/2025/09/dgs_12_01_03.pdf

Diana J. Fox/Haila Al-Mekaimi

Thirty Years of Empowering Kuwaiti Women through the Kuwait Union of Women Associations (AKUN): Reflections and a Report on the Regional Consultation on The Status of Women with Disabilities in the Middle East and North Africa (MENA)

This reflective article offers an account of the Regional Consultation on The Status of Women with Disabilities in the Middle East and North Africa (MENA) with the UN Special Rapporteur (SR), Dr. Heba Hagrass, on the Rights of Persons with Disabilities, held December 3-4 2024 in Kuwait. It begins with a brief overview of the process that led to the consultation; the research methodology rooted in feminist collaboration permitting the first author to join. Next is an overview of the organization that sponsored the consultation, the Kuwait Union of Women's Associations (AKUN), whose mission is to support and inspire Kuwaiti women and girls, building their capacities and advocating for women's inclusion and equity across societal sectors, including those with disabilities. The article then presents some of the challenges faced by women with disabilities as explained by the women who participated in the consultation, rooting it in the literature. Recommendations submitted to the SR follow, staying true to their language as a reflection of the agency and authority derived from the lived experiences of participants, many of whom were women with disabilities.

Bezug: https://dgsjournal.org/wp-content/uploads/2025/09/dgs_12_01_04-1.pdf

Chavon Niles/Angela Colantonio/Ariane Mangar/Barbara Lawrence/Beverly Nelson/Nadeen Al Awamry

Development of Rehabilitation Services for People with Disabilities in Guyana

Rehabilitation services in Guyana have evolved significantly over the past several decades, shaped by community leadership, international partnerships, and policy change. Yet, despite its crucial role in improving quality of life for individuals with disabilities, the history of rehabilitation remains largely undocumented in academic literature. Drawing on interviews and document analysis, this paper traces the development of rehabilitation services in Guyana, from the introduction of physiotherapy in 1949 to more recent efforts in community-based and specialized care. The COVID-19 pandemic disrupted services but also accelerated policy conversations around health equity, emergency preparedness and tele-rehabilitation. We argue that Guyana's experience offers valuable lessons for advancing inclusive, locally grounded rehabilitation planning in the Caribbean and the Global South.

Bezug: https://dgsjournal.org/wp-content/uploads/2025/10/dgs_12_01_05.pdf

Galina Nam/Umida Khakimova

Barriers to Employment for Individuals with Down Syndrome in Uzbekistan

Employment is widely recognised as a key factor in promoting independence, social inclusion, and quality of life for individuals with Down syndrome (DS). Yet, despite international progress in advancing the rights of people with DS, significant barriers

to employment persist worldwide. In Uzbekistan, these challenges are compounded by systemic, legal, and societal factors that remain largely unexamined in existing scholarship. The Law on the Rights of Persons with Disabilities (Government of Uzbekistan, 2020) establishes a legal foundation for inclusion, but inconsistent implementation and restrictive disability classifications continue to limit access to the labour market. Societal misconceptions about DS further reinforce exclusion, while insufficient vocational training and the absence of support mechanisms hinder workforce readiness. This article draws attention to these critical gaps and calls for targeted policies and sustained support systems to expand employment opportunities for people with DS in Uzbekistan.

Bezug: https://dgsjournal.org/wp-content/uploads/2025/11/dgs_12_01_07.pdf

Heather Michelle Aldersey/ Ashley Stone/Padam Pariyar/ Andrea Shettle/Valerie Karr

Engagement of Organizations of Persons with Disabilities in Inclusive Education Development Programs: Recommendations from a Multi-Country Evaluation

To date, international development programs in inclusive education have had limited engagement of organizations of persons with disabilities. Funders, however, are increasingly recognizing that engagement of persons with disabilities in programming related to disability inclusion is essential. In this short field reflection, the authors share lessons learned from evaluating three United States Agency for International Development (USAID)-funded education activities – in Cambodia, Malawi, and Nepal. In particular, they share how organizations of persons with disabilities were included in the activities; and they offer recommendations for international development actors to consider for future programming, based on their experiences in the field.

Bezug: https://dgsjournal.org/wp-content/uploads/2025/09/dgs_12_01_v1.pdf

Jörg Weber/Gaspard Ugirumurera/Rosine Nikuze/ Odette Nyiransengimana/Jim Cannon

Beyond Talk: Real Inclusion Happens in the Marketplace – Insights from Rwanda

Village Savings and Loan Groups (VSLGs) are widely promoted as a key mechanism for enhancing financial inclusion among persons with disabilities. Yet, little is known about whether these structures translate into sustainable economic empowerment. Drawing on qualitative insights from the ZUUN project in two rural districts in Rwanda, this article examines how persons with disabilities engage in livelihood activities such as beekeeping and banana farming and whether participation in VSLGs supports long-term business development. Findings show that participants are developing an emerging business mentality – adopting improved agricultural techniques, exploring market opportunities, and planning future investments – yet structural barriers limit meaningful economic progress. Insufficient equipment, lack of continuous technical mentorship, and weak market linkages hinder the transition from financial participation to real economic independence. The study argues that genuine inclusion occurs not through peer-group activities or awareness initiatives, but when persons with disabilities are recognized as economic actors in the marketplace. It calls for a shift in development programming toward long-term support systems, accessible resources, and integration into local value chains to ensure that financial inclusion efforts lead to sustainable livelihoods rather than temporary gains.

Bezug: https://dgsjournal.org/wp-content/uploads/2025/09/dgs_12_01_v2.pdf

Siyabonga Kunene

Barriers, Facilitators of Sports Participation and Needs of South African Paralympians

This study examines the ongoing challenges faced by athletes with disabilities (AWDs) in South Africa, where inclusion in sports remains limited despite national transformation initiatives. Using a qualitative design based on semi-structured interviews, the research explores both the barriers and facilitators that shape AWDs' participation in sports, as well as their broader needs. Twenty-three South African Paralympians – 12 women and 11 men, all identifying as African and averaging 26 years of age – were interviewed. All participants had more than five years of sporting experience. Thematic analysis of verbatim transcripts revealed several barriers, including social stigma, limited disability awareness, restricted opportunities for sports participation, and inadequate access to resources and services. At the same time, facilitators such as improved health, a sense of belonging, personal fulfilment, the experience of winning, and strong support from family and loved ones played an important role in sustaining involvement in sports. The findings highlight a clear need to strengthen disability inclusion, particularly through better access to healthcare services and the provision of essential resources. This study contributes foundational knowledge that can inform the development of targeted interventions to support athletes with disabilities more effectively.

Bezug: https://ajod.org/index.php/ajod/article/view/1532

Tsega H. Mirach/Rosemary M. Lysaght/Molalign B. Adugna et al.

Job Satisfaction among People with Disabilities in Ethiopia: A Cross-sectional Survey

Job satisfaction among people with disabilities is a critical issue, influencing productivity, job retention, and overall well-being in the workplace. This study investigated the job satisfaction of employees with disabilities in Ethiopia and examined key factors that shape their experiences in public sector employment. A cross-sectional survey was conducted in 2021 with 784 government employees with diverse disabilities, collecting sociodemographic information and data related to workplace satisfaction. Findings showed that job dissatisfaction was associated with low salary, gender, length of service, and lack of personal assistance, with vision impairments correlating with higher levels of dissatisfaction. As the first study to assess job satisfaction among public sector employees with disabilities in Ethiopia, the findings underscore the need for policy reforms aimed at improving working conditions and addressing structural inequities. Measures such as employment quotas, wage supplementation, and enhanced reasonable accommodation could help reduce disparities. The study also highlights the importance of inclusive research approaches to support ongoing efforts toward equitable employment and effective support structures for workers with disabilities.

Bezug: https://ajod.org/index.php/ajod/article/view/1660

Priccilar Vengesai

Political Rights of Persons with Disability in the Zimbabwean Media

This study examines the limited political inclusion of people with disabilities (PWDs) in Zimbabwe, despite constitutional provisions that reserve two Senate seats for them. Using a qualitative, document-based approach, the analysis highlights how differing definitions of disability and inadequate media accessibility systematically exclude people with visual and hearing impairments from political engagement. The findings show that these groups face substantial barriers in accessing media content during and after elections, restricting their participation in political processes. The study recommends practical measures to strengthen inclusion, including the use of sign language interpreters during campaigns, making party manifestos available in Braille, and incorporating sign language and Braille into educational curricula. Training journalists in accessible communication is also proposed to improve media representation. Overall, the study underscores significant media-related obstacles that hinder PWDs' political participation and offers concrete steps to enhance their visibility and engagement in Zimbabwe's political sphere.

Bezug: https://ajod.org/index.php/ajod/article/view/1596

Esther M.A. Gimono

Experiences of Deaf Women and Girls in Accessing Maternal Health Rights and Services in Uganda

This study explores the maternal health experiences of deaf women and girls in Uganda, a group disproportionately vulnerable to adverse pregnancy outcomes due in part to communication barriers and limited information about their reproductive health. Using a qualitative intrinsic case study approach, the research draws on semi-structured interviews, focus group discussions with 50 deaf women and girls in Mbale district, and insights from 13 key informants representing state and non-state actors, alongside documentary analysis of government policies. Findings show that none of the participants had access to antenatal services tailored to their linguistic and communication needs, resulting in significant challenges during pregnancy, childbirth, and postnatal care. Despite Uganda's legal commitments to maternal health rights, the health system has yet to integrate the linguistic requirements of deaf women and girls into service delivery. The study calls for clear, actionable policies that recognise and embed deaf epistemology in health policy, research, and practice to improve sexual and reproductive health services and ensure equitable maternal care for deaf women and girls.

Bezug: https://ajod.org/index.php/ajod/article/view/1627

Jerome P. Fredericks/Surona Visagie/Lana van Niekerk

Experience-based Suggestions for Improving Accessibility of Minibus Taxis for Wheelchair Users

This study examines how accessible transport – an essential prerequisite for achieving several Sustainable Development Goals – can be improved for wheelchair users in peri-urban South Africa. Using a cooperative inquiry approach in Paarl-East (Western Cape), the research engaged wheelchair users, caregivers, minibus taxi drivers, and local disability stakeholders in 16 group sessions to generate experience-based solutions for making minibus taxi services more accessible. Inductive thematic analysis produced five key themes: the need for effective communication platforms, including databases of wheelchair users and drivers and the use of social media; the importance of fair and affordable fares; the development of respectful behaviour and interactions among users and drivers; the necessity of a diverse fleet of customised taxis to meet different mobility needs; and practical service delivery strategies such as home pickups and drop-offs. While these stakeholder-driven suggestions

offer valuable direction, the study highlights gaps in accountability and funding that must be addressed to translate proposals into sustainable transport solutions. The findings contribute practical, experience-based insights for improving accessible minibus taxi services for wheelchair users in peri-urban settings.

Bezug: https://ajod.org/index.php/ajod/article/view/1699

Nurul H. Rofiah/Norimune Kawai/Dara Sudiraharja

Pesantren and Inclusion: Bridging Religion and Disability in Islamic Education in Indonesia

Islamic boarding schools (pesantren) play a central role in Indonesia's educational and religious landscape, and their evolving engagement with disability inclusion marks an important shift toward equitable Islamic education. This article explores how pesantren traditions, leadership structures, and learning environments intersect with national reforms on the rights of persons with disabilities. Drawing on a narrative literature review, the study examines the historical development of pesantren, the influence of kyai leadership, and emerging institutional adaptations that support students with disabilities. The findings highlight pesantren's potential to advance inclusive education through accessible facilities, adapted curricula, assistive technologies, and inclusive religious practices such as sign language interpretation and Braille Qur'an access. While many institutions demonstrate strong moral foundations for inclusion, gaps remain in physical accessibility, teacher training, and systematic accommodation. The article argues that pesantren can serve as powerful agents of inclusive transformation by embedding disability-responsive practices into both education and worship. Strengthening collaboration with government and disability organisations, alongside sustained professional development, is essential to ensure that pesantren become fully inclusive spaces where all learners can participate, belong, and thrive.

Bezug: https://ajod.org/index.php/ajod/article/view/1741

Sifiso E. Mbelu

Power Dynamics in African Spirituality and Disability: The South African Context

This article examines the complex relationship between disability, spirituality, and belonging within African spirituality in South Africa, highlighting how power dynamics shape the experiences of people with disabilities. Drawing on a qualitative literature-based analysis, the study synthesises existing scholarship to explore the dual role of spirituality as both a source of empowerment and a mechanism of exclusion. The findings show that while many individuals draw strength, comfort, and a sense of identity from spiritual beliefs and practices, others face marginalisation due to exclusionary rituals, interpretations, and power structures embedded within their spiritual communities. By unpacking these tensions, the study provides deeper insight into the cultural and social dimensions of disability in South Africa and underscores the need for more inclusive and equitable spiritual practices that recognise and accommodate the diverse experiences of people with disabilities. In doing so, it contributes to broader discussions on disability and spirituality and advocates for approaches that foster greater belonging and justice for all.

Bezug: https://ajod.org/index.php/ajod/article/view/1730

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Kontakt: heike.kruett@uni-siegen.de

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