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FROM THE AMERICAN PEOPLE

## **Common Myths on Inclusion of People with Disabilities**

**“We would like to work on disability issues, but there are so many issues facing ‘normal’ people that it’s just not a priority”**

People with disabilities are normal. People with disabilities are present in every community across the globe; it is just one expression of the diversity of the human race. However, it is true that people with disabilities have historically faced discrimination and have been marginalized from mainstream programs and practices by both local governments and the international aid community. The USAID mission is to: “Create a more secure, democratic, and prosperous world for the benefit of the American people and the international community.” A goal of obtaining a more secure, democratic, and prosperous world can only be achieved if USAID programs reach all people within the countries in which they are working—including those who face the greatest barriers within society.

**“There aren’t many people with disabilities here, so it’s really not an issue”**

One reason why the issue of disability is treated as something too specialized for the ordinary NGO is the misconception that the number of people with disabilities within the target population is insignificant. This myth arises for several different reasons. Many people with disabilities are hidden away by their families or placed in institutions due to social stigmatizations. There may be environmental and discriminatory barriers for people with disabilities that limit their ability to participate in certain activities. For example, due to limited accessible transportation or poor mobility devices, people with disabilities are marginalized and have less access to equal participation. Furthermore, disability is also not always apparent; a person may have a disability that may not be visible. Many people who may have a disability are often hesitant to self identify as disabled because they fear that it may lead to increased discrimination.

Although many countries around the world have begun to include people with disabilities in national censuses and surveys, they are often viewed as inaccurate by the disability population. As a result, most disability groups refer to the World Health Organization (WHO) estimate, which states that 10% of any given population has a disability.

**“We have a limited budget, and although we would like to help people with disabilities, we do not have a separate line item for this type of work”**

Although there may be situations where programs are designed specifically to address the needs of people with disabilities, there are numerous ways to include people with disabilities in existing programs at no extra cost. Doing simple tasks, such as outreach to disabled persons organizations (DPOs) during planning and including people with disabilities in selection and evaluation criteria in RFAs and RFPs, will help ensure the inclusion of people with disabilities in existing USAID programs. Inclusion of people with disabilities in contract, grants, and cooperative agreements is further supported by USAID’s disability policy and AAPD 04-17.

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## **“We don’t have the skills to include people with disabilities in our programs”**

In most cases, working with persons with disabilities is the same as working with persons without disabilities. Many of the development-related needs are the same, but sometimes the approach to meeting them is different. USAID staff persons do not have to all be experts in the area of disability and development. Instead, USAID staff should turn to existing resources to help them better design projects and activities that are inclusive of people with disabilities. The best resource by far is people with disabilities themselves. DPOs can be an invaluable source of information and can help guide and assist USAID staff to design inclusive programs and activities. USAID should conduct outreach to these groups and consider including DPO representatives in forums, strategic planning sessions, and as members of Technical Evaluation Committees (TECs). In addition to DPOs and people with disabilities, USAID has a disability team that can help answer questions and provide USAID with technical support.

A list of DPOs by region and country can be obtained through Mobility International’s website at <http://www.miusa.org/orgsearch>. USAID’s disability team can be reached through the USAID Disability Coordinator, Lloyd Feinberg, at [lfeinberg@usaid.gov](mailto:lfeinberg@usaid.gov).

## **“Addressing disability is a US luxury and is not applicable to the developing country context”**

USAID is committed to the reduction of poverty and recognizes that poverty is one of the leading causes of violence and political instability around the world. The World Bank estimates that people with disabilities make up around 20% of the poorest of the poor, which translates to approximately 260 million people with disabilities living in absolute poverty. USAID cannot achieve its mission of a more secure, democratic, and prosperous world without addressing the needs of the poorest of the poor. Reducing barriers to ensure the inclusion of all people is not a luxury. Rather, it is an essential component of quality development practice.

This myth often arises when addressing USAID’s policy, AAPD 05-07, which states that all new construction or renovation of construction provided by USAID funds should be made accessible for people with disabilities. This is not a practice that is imposing unrealistic standards to the developing context but instead is consistent with USAID’s approach to “build back better.” Furthermore, accessible infrastructure is just good practice, and these adaptations have been proven to be useful to the population in general. For example, providing ramps in buildings instead of stairs assists the participation of mothers with strollers and small children, in addition to facilitating the moving of equipment.

## **“Disability is a health issue”**

Health is as important to persons with disabilities as it is to persons without disabilities, but it is not the only issue or even, in many cases, the most important issue. Instead, when developing and designing programs for people with disabilities, it is extremely important to look at all aspects of the life of a person with a disability, including economic issues, education, civic participation, etc. Looking only at the “cure” for disability or focusing only on an individual’s limitations is known as the “medical model” approach to disability. This model can be harmful because it promotes a negative, disempowered image of people with disabilities, as opposed to the “social model,” which states that it is the environmental, cultural, or social barriers that are factors to defining who is and is not disabled in a particular society.