



REPUBLIC OF ZAMBIA

NATIONAL POLICY ON PERSONS WITH DISABILITIES



2025

FOREWORD

The National Policy on Persons with Disabilities has been developed to address the challenges identified during the implementation of the 2015 National Policy on Disability and to incorporate emerging issues such as climate change that were not comprehensively addressed in the previous policy, leading to disability inclusive disaster risk reduction and mitigation.

The Government of the Republic of Zambia recognizes the need to fully address the challenges identified during the implementation of the 2015 Policy that Persons with Disabilities continue to face which include but not limited to: lack of prioritisation of disability matters in the development agenda; limited skills to implement inclusive interventions; gaps in data and evidence utilization; as well as inadequate funding for disability focused activities. The Policy will therefore provide a comprehensive framework to guide all stakeholders on disability matters. In addition, it is aimed at creating an enabling environment in all spheres for Persons with Disabilities to participate effectively and contribute to national development on an equal basis with others. It is envisaged that this Policy will facilitate meaningful improvements in the lives of Persons with Disabilities and contribute to the realisation of their potential and aspirations, based on their human rights.

It is also the duty of individuals, agencies, organisations, researchers, practitioners, advocates, and volunteers to remove barriers that Persons with Disabilities face and ensure that the vast potential of Persons with Disabilities is unlocked. I therefore, urge all stakeholders to participate fully in the implementation of this Policy for the well-being of Persons with Disabilities.



Mrs. Doreen Mwamba, MP

Honourable Minister of Community Development and Social Services
MINISTRY OF COMMUNITY DEVELOPMENT AND SOCIAL SERVICES

ACKNOWLEDGEMENTS

The National Policy on Persons with Disabilities is a product of extensive consultations with various stakeholders at provincial and national levels, led by Persons with Disabilities and their organisations. Through consultations, gaps in the preceding policy were identified, and diverse views and recommendations were obtained. Therefore, I would like to commend all stakeholders who participated in the various processes for their commitment.

I am indebted to line ministries, Organisations of and for Persons with Disabilities (OPDs), Community Based Organisations (CBOs), Faith Based Organisations (FBOs) and Civil Society Organisations (CSOs) whose invaluable input helped shape this Policy.

Further, I would like to thank our Cooperating Partners for the financial and technical support. Special mention goes to the World Bank, the International Labour Organisation (ILO) and UNICEF for the immense contributions towards this Policy.

I am confident that the various stakeholders involved in service provision and supporting Persons with Disabilities will continue to complement one another's efforts and conduct activities in a coordinated manner for the well-being of Persons with Disabilities.



Angela C. Kawandami (Ms)

Permanent Secretary
MINISTRY OF COMMUNITY DEVELOPMENT AND SOCIAL SERVICES

ACRONYMS

CBID	Community Based Inclusive Development
CBOs	Community Based Organisations
CBR	Community Based Rehabilitation
CSOs	Civil Society Organisations
CRPD	Convention on the Rights of Persons with Disabilities
DMIS	Disability Management Information Systems
DPOs	Disability Service Organisations
FBOs	Faith Based Organisations
FISP	Farmer Input Support Programme
ICTs	Information and Communication Technologies
IEC	Information, Education and Communication
ILO	International Labour Organisation
NDS	National Disability Survey
NGO	Non-Governmental Organizations
OPDs	Organisations of and/or for Persons with Disabilities
PAC	Policy Analysis and Coordination Division
SRH	Sexual Reproductive Health
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
UN	United Nations
WHO	World Health Organisation
ZAPD	Zambia Agency for Persons with Disabilities

WORKING DEFINITIONS

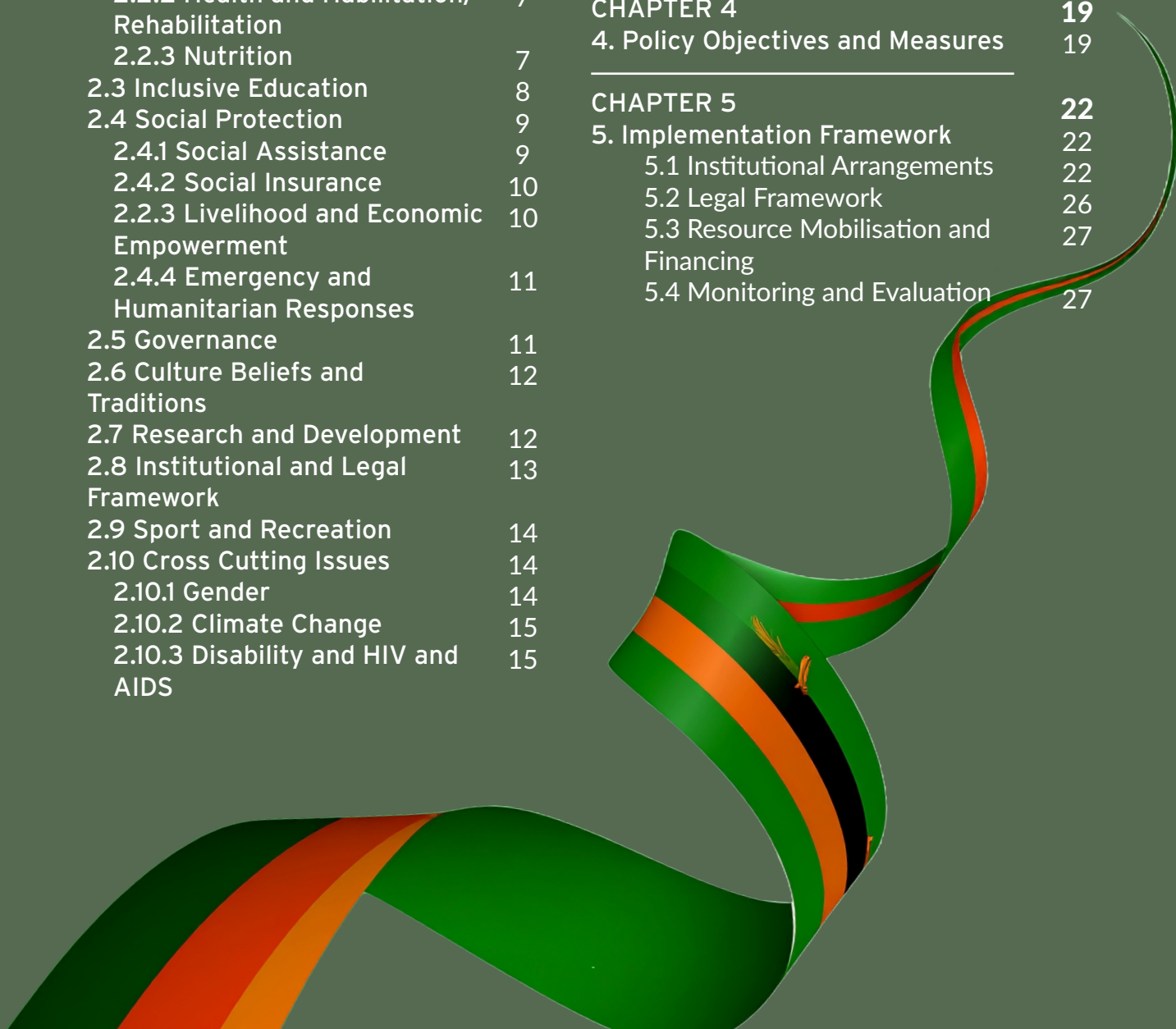
Accessibility	Opportunity to acquire the same information, engage in the same interactions and enjoy the same services as the person without disability in an equally effective and interactive manner with substantially equivalent ease of use.
Assistive Technology	Any item, piece of equipment or product system that is used to increase, maintain, or improve functional capabilities of individuals with disabilities.
Barriers	Factors in a person's environment that hinder the ability to fully or effectively participate in society on an equal basis with others
Communication	Refers to language, display of text, braille, tactile, large print, as well as audio, human-reader and alternative modes and formats of communication, including accessible information and communication technology.
Disability	Means a permanent physical, mental, intellectual or sensory impairment that alone or in combination with social or environmental barriers, hinders the ability of a person to fully or effectively participate in society on an equal basis with others.
Discrimination	The practice of treating one person, or group of people less fairly or less well than other people or groups.
Empowerment	This is the process of enabling people to increase control over their lives or to gain control over the factors and decisions that shape their lives.
Equalization of Opportunity	The process through which the general system of society such as the physical and cultural environment, housing and transportation, social and health services, educational and work opportunities, cultural and social life, are made accessible to all.
Habilitation	Refers to a process aimed at helping Persons with Disabilities attain, keep, or improve skills and functioning for daily living.
Impairment	Refers to any loss or abnormality of psychological, physiological or anatomical structure or function.
Inclusive Education	Refers to interactive teaching and learning settings where persons with and without disabilities learn together in a barrier free environment (from early childhood, primary, tertiary, vocational, adult and lifelong education which meet their diverse needs.

WORKING DEFINITIONS (CONT)

Independent Living	A well-organised movement among people with disabilities, to enhance self-esteem and self-determination, as well as the socio-economic resources available to choose and maintain individual, independent lifestyles.
Persons with Disabilities	Persons with Disabilities include those who have long-term physical, mental, intellectual, or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.
Reasonable accommodation	Means providing one or more modifications that are appropriate and necessary to accommodate a worker or job candidate's individual characteristics so that he or she may enjoy the same rights as others.
Rehabilitation	Refers to regaining skills, abilities, or knowledge that may have been lost or compromised as a result of acquiring a disability or due to a change in one's disability or circumstances.
Universal Design	The design of products and environments to be usable by all people, to the greatest extent possible without the need for adaptation or specialised design.

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CHAPTER ONE

1. INTRODUCTION

Persons with Disabilities can meaningfully participate in various spheres of life. However, their enjoyment of rights and access to services, as well as productive assets, is often limited, hindering their participation in national development. The barriers faced by Persons with Disabilities affect their lives and well-being.

The Government of the Republic of Zambia recognizes that addressing the needs of Persons with Disabilities is both a human rights and developmental issue. In 2010, Zambia ratified the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) as a commitment to improving the well-being of Persons with Disabilities. Additionally, the country has enacted several laws and policies related to Persons with Disabilities, including the Persons with Disabilities Act No. 6 of 2012, the 2015 National Policy on Disability, and the Mental Health Act No. 6 of 2019.

During the implementation of the 2015 National Policy on Disability, several achievements were recorded, including but not limited to: the development of the Disability Management Information System; the hosting of a Community-Based Rehabilitation (CBR) conference; an increase in social protection interventions for Persons with Disabilities; the development of Employment Coordination Mechanisms for Persons with Disabilities; and the establishment of a twin-track approach using methods such as Community-Based Inclusive Development (CBID) and the Human Rights-Based Approach (HRBA).

The 2025 National Policy on Persons with Disabilities identifies gaps that were not addressed by the 2015 Policy, include inadequate coordination of disability-related matters among institutions; ongoing inclusion challenges leading to limited access to quality education, health, and employment; communication barriers; stigma resulting in low integration of Persons with Disabilities in community development and national governance; insufficient budgetary support; and uncoordinated data gathering, as well as weak linkages among service providers. Further, the 2015 policy did not recognize disability as an evolving concept, resulting from the interaction between persons with impairments and the attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others.

The 2025 Policy also addresses emerging issues, such as the recent impacts of climate change, which have negatively affected the welfare of Persons with Disabilities. Additionally, it acknowledges the fast-evolving technological advancements that are reshaping the world, offering new opportunities and breaking down barriers for Persons with Disabilities. The policy further outlines the provision of an enabling environment that considers the needs of Persons with Disabilities. It is aligned with the Eighth National Development Plan and the Vision 2030, providing a comprehensive framework to achieve social inclusion and equality of opportunity for all Persons with Disabilities in Zambia.

This policy document is divided into five sections. Chapter one provides the introduction, while chapter two presents the situation analysis. Chapter three covers the vision, rationale, and guiding principles. Chapter four outlines the objectives of the policy and related measures, while chapter five details the implementation framework.

CHAPTER TWO

2 SITUATION ANALYSIS

According to the World Health Organisation (WHO) Global Report of 2020 on Health Equity for Persons with Disabilities, 1.3 billion or 16 per cent of the world's population experienced significant disability. Additionally, it states that about 40 per cent of Africa's population consists of people with disabilities, including 10-15 per cent of school-age children. This percentage translates into about 300 million people with disabilities in Africa. Disability is caused by many factors, including malnutrition and disease, environmental hazards, traffic and industrial accidents, and civil conflict and war. The number of Persons with Disabilities continues to increase.

Most Persons with Disabilities in Africa are excluded from schools and opportunities for work, virtually guaranteeing that they live as the poorest of the poor. School enrolment for Persons with Disabilities is estimated at no more than 5-10 per cent and as many as 70-80 per cent of working-age people with disabilities are unemployed.

The Zambia Disability Survey of 2015, indicates that the national disability prevalence rate among the adult population (18 years old and above) was 10.9 per cent with 181, 856 (2.4 per cent) Persons with Disabilities living in rural areas and 69, 571 (1.4 per cent) in the urban areas. The prevalence rate for children aged 2-17 years is estimated at 4.4 percent with 4.2 being girls and boys 4.5 percent. Fewer Persons with Disabilities at 80.8 per cent attained formal education compared to those without disabilities at 89.9 per cent. As a result, Persons with Disabilities are less engaged in formal employment. Under the 2015 survey, the overall average disability prevalence was estimated to be 7.7 per cent.

The effects of disability not only affect the individual but the family, community, and the nation at large and are more pronounced for vulnerable categories such as children. Children with disabilities are among the most disadvantaged and vulnerable groups. Stigma and discrimination against them often lead to increased exposure to abuse and neglect, reduced access to services, and a general lack of recognition. Further, children with disabilities and their families are more likely to live in poverty and they are the majority among the homeless population and those living on the street, which further worsens their marginalization. Children with parents with disabilities remain unprotected, have limited access to education, health, social protection, and other social services and are exposed to vices within families and in communities.

The Government has taken several legislative and policy steps as a commitment to advancing the rights of Persons with Disabilities. The first Policy for Persons with Disabilities in Zambia was developed in 1996. This Policy was preceded by the Persons with Disabilities Act No. 33 of 1996, which was a repealed version of the Handicapped Persons Act. The Act facilitated the dissolution of the Zambia Council for the Handicapped and the Zambia Agency for Persons with Disabilities (ZAPD) was established. In 2010, the Government ratified the UNCPRD which paved the way for the enactment of the Persons with Disabilities Act No. 6 of 2012, to provide for the elimination of all forms of discrimination based on disability. The 2012 Act led to the development of the 2015 National Policy on Disability which aimed at providing guidance and support for the Government and stakeholders on disability and development in line with international standards.

Despite the efforts made to ensure that Persons with Disabilities live decent and productive lives without any barriers, Persons with Disabilities are still generally marginalised and are unable to overcome the barriers that exist in the environment that they live in. In addition, many are presumed to be unable to live independently in their communities while support is either unavailable or tied to particular living arrangements. Community infrastructure is not universally designed and there is inadequate investment in developing possibilities for Persons with Disabilities to live independently in the community. This often leads to abandonment, dependence on family, isolation and segregation which negatively impacts the quality of life and often prevents Persons with Disabilities from playing their full role in society.

In this regard, the Policy has identified eleven thematic areas that require to be addressed comprehensively in order to improve the welfare of Persons with Disabilities. These areas include accessibility, inclusion, coordination, raising awareness on disability issues, education, livelihood and empowerment, employment, women and children concerns, health, habilitation and rehabilitation, as well as governance and meaningful participation.

2.1 Accessibility

Accessibility is often used to focus on Persons with Disabilities and their right to access entities through assistive technology. While accessibility is typically used to describe facilities or amenities that assist people with disabilities, the term can extend to features such as braille signage, wheelchair ramps, elevators, audio signals at pedestrian crossings, walkway contours, and website design, among others. Another dimension of accessibility is the ability to access information and services by minimizing the barriers of distance, cost, and internet interface.

In many countries, this has led to initiatives, laws, and regulations aimed at providing universal access to the internet and phone systems at a reasonable cost to citizens.

According to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) General Comment No. 2 on Accessibility, without access to the physical environment, transportation, information and communication technologies and systems, and other facilities and services open or provided to the public, Persons with Disabilities would not have equal opportunities for participation in their respective societies. Zambia, as a state party to the United Nations and the World Health Organization in particular, subscribes to the core areas that constitute accessibility, namely universal design, reasonable accommodation, usability, availability, and assistive technologies.

2.1.1 *Physical Environment / Facilities for Public Access*

Access to built environment for person **Physical Environment / Facilities for Public Access** with disabilities involve promoting accessible buildings and minimizing barriers. Removal of such barriers will enable Persons with Disabilities to participate more in economic activities and contribute to the country's development. Therefore, the importance of physical access to all environments for Persons with Disabilities cannot be over-emphasised. Physical access includes access to buildings, public spaces, and any other place a person might need to go for work, recreational activities, education, business, and health services among others. This also includes accessible routes, ramps, parking and passenger loading zones, elevators, signage, entrances, recreation facilities and restroom accommodations.

The Government recognizes the importance of access to the physical environment for

Persons with Disabilities and has taken legislative and policy measures to ensure their effective participation in daily activities. Through the Persons with Disabilities Act No. 6 of 2012, the Government mandates that the physical environment should be accessible to Persons with Disabilities. The Act also empowers the Zambia Agency for Persons with Disabilities (ZAPD) to conduct inspections on accessibility and issue accessibility adjustment orders to enhance access to the physical environment. Furthermore, efforts have been made to ensure that new infrastructure is accessible to Persons with Disabilities, including modifications to old infrastructure.

Despite these efforts, Persons with Disabilities continue to face challenges in accessing the physical environment. Many old and new public infrastructures remain largely inaccessible, lacking basic accessibility features such as ramps or rails. In cases where ramps are provided, they are often not user-friendly and do not conform to prescribed standards, posing a danger to Persons with Disabilities. This issue is compounded by the inadequate capacity of ZAPD to ensure compliance with accessibility requirements. Additionally, there is a lack of coordination among professional bodies expected to ensure the harmonization and enforcement of standards, such as architects, engineers, contractors, and surveyors. Furthermore, local councils, which have the mandate to ensure buildings conform to set standards, do not conduct inspections to ensure compliance and lack representation of Persons with Disabilities on their building plan approval bodies.

2.1.2 *Transport and Mobility*

Transport enables mobility and is a key component of disability-inclusive development. Mobility contributes to changing the lives of persons with disabilities for the better; it gives access to jobs, educational services, healthcare, markets, leisure and many other aspects of life.

To enhance the mobility of Persons with Disabilities, the Government through the Persons with Disabilities Act No. 6 of 2012 has provided tax incentives on assistive devices such as wheelchairs, rubber tips, crutches and walkers, including the importation of non-conventional motor vehicles, among others.

However, most Persons with Disabilities are unable to access assistive devices due to a lack of information and the high cost of the devices. Several barriers exist to accessing different modes of public transport such as trains, taxis, and buses. These include the absence of electric or manual ramps for independent mobility and ease. In addition, the majority of bus stops, stations and other ports are not accessible despite the law on disability that compels all public transporters and port services to be accessible.

2.1.3 *Information and Communication Technologies*

Information and Communication Technologies (ICTs) can serve as critical enablers that allow Persons with Disabilities to realise their full potential and participate on an equal basis with others, in all spheres of human endeavour. ICTs can help Persons with Disabilities have greater access to knowledge and independent living.

Progressive strides have been made in legislature to promote accessible communication modes and technologies. As provided for in Section 40 of the Persons with Disabilities Act No. 6 of 2012, all television stations are required to provide a sign language insert and subtitles in all newscasts and educational programmes as well as all programmes covering events of national significance. Further, it is Government policy that all public documents are in accessible formats.

However, Persons with Disabilities still face challenges accessing digital media platforms due to the high costs associated with assistive devices such as special phones, computers, hearing aids, visual aids, screen readers and other technologies. In addition, services and trained providers for Braille and Sign Language interpretation are not nationally available. There is also limited coordination and oversight role provided by the institutions mandated to promote access to information for all citizens such as the Independent Broadcasting Authority (IBA), Zambia Competition and Consumer Protection Commission (ZCCPC) and Zambia Information and Communication Technology Authority (ZICTA) in ensuring that products and services are accessible to Persons with Disabilities.

2.1.4 Assistive Technology

Assistive technology can help Persons with Disabilities in all aspects of their lives, including in education, employment, fitness and other everyday activities such as self-care, cooking and reading. It can positively impact Persons with Disabilities, their family and friends, and has broader socio-economic benefits. Early provision of assistive technology and devices can support the development of language and communication skills, and enhance the outcomes of education, health, future employment and community participation. Assistive technology also ensures Persons with Disabilities have the same opportunity to live as others.

The Government has put in place interventions to ensure the availability of assistive technologies for Persons with Disabilities, for instance, import tax waivers on selected assistive technologies and their products have been imposed.

Despite these interventions, the National Disability Survey of 2015, indicates that about 80 per cent of Persons with Disabilities, do not use assistive devices. This gap in the provision of assistive devices is particularly challenging for Persons with Disabilities as it reduces opportunities for optimal participation in society on an equal basis with others. Other gaps include inadequate budgetary allocations to assistive technology for persons with disabilities.

2.2 Inclusive Health Services

Health promotion services for the prevention of further disability and the promotion of health, in general, are important in determining the quality of life and health status of Persons with Disabilities. According to the 2015 Zambia Disability Survey (NDS), about 33% of all disabilities result from diseases and illnesses.

The Government has put in place measures to ensure Persons with Disabilities have access to health services that are inclusive. To address the health needs of Persons with Disabilities, the Government enacted the Mental Health Act No. 6 of 2019 which provides for the promotion and protection of rights of persons with mental illness, mental disorder, mental impairment or mental disability. The Government also enacted the National Health Insurance Act No. 2 of 2018 which provides for exemptions for Persons with Disabilities who are unable to work to be excluded from paying contributions under the social health insurance scheme and can therefore access health services for free.

Progress has been made in developing and translating Information, Education and Communication (IEC) materials into braille and sign language. Further, the Government has revised the pre-service curriculum for registered nurses and included communication for

people with hearing and visual impairment to address the challenges associated with providing Sexual Reproductive Health (SRH) services. Both in-service and pre-service nurses have been trained in disability inclusiveness and oriented on basic sign language. The Government has also put in place rehabilitation and habilitation services (including community-based inclusive development support strategies), preventive and early detection of impairments, including ophthalmology, physiotherapy, occupational therapy, speech and language therapy, mental health and prosthetics and orthotics services.

Notably, there are still challenges being faced by Persons with Disabilities when it comes to access of quality health services. Persons with Disabilities who experience relatively higher rates of poverty than others often face conditions that impact negatively on their health. These include lack of access to education, sanitary living conditions, clean water, and food security, among others. Further, some Persons with Disabilities are more susceptible than the general population to secondary health conditions, as a result, Persons with Disabilities may have a greater need for health services than the general population. Further, they experience stigma when accessing health services, poor access to health facilities due to long distances, and inadequate capacity and skills by health providers to manage clients with particular disabilities. Other notable challenges include limited access to health information and disability friendly environment.

2.2.1 Sexual and Reproductive Health

Persons with Disabilities have the same Sexual and Reproductive Health (SRH) needs as other persons and need services and information. To ensure that SRH programmes reach and adequately serve Persons with Disabilities, increasing awareness of the specific needs and rights of Persons with Disabilities is critical. The need for SRH services, particularly for women and girls with disabilities is often heightened and should be as such owing to their increased vulnerability to abuse. Women and girls with disabilities experience higher rates of gender-based violence, sexual abuse, neglect, maltreatment, and exploitation than women without disabilities (National Disability Survey Report, 2015).

awareness of the specific needs and rights of Persons with Disabilities is critical. The need for SRH services, particularly for women and girls with disabilities is often heightened and should be as such owing to their increased vulnerability to abuse. Women and girls with disabilities experience higher rates of gender-based violence, sexual abuse, neglect, maltreatment, and exploitation than women without disabilities (National Disability Survey Report, 2015).

The Government through the Ministry of Health has made strides in addressing some service gaps for Persons with Disabilities. These include: the development and translation of IEC materials into braille and sign language, and the airing of SRH communication on public radio stations. The Government has further reviewed the pre-service curriculum for registered nurses and midwifery to improve communication with people who have hearing impairment. This initiative is also intended to improve the engagement of Persons with Disabilities in health programming and health matters such as Sexual Reproductive Health (SRH), given that the National Disability Survey (2015) reported that 3.5% of females with disabilities were sexually abused when they were children.

Despite the efforts made, Persons with Disabilities still face several barriers which limit access to quality health services, and their full and effective participation not only as recipients but providers as well. Exclusion negatively impacts their health and well-being. In many cases, barriers are created or sustained as a result of myths, beliefs, stigma, ignorance and negative stereotypes and attitudes in mainstream society and among individuals, including healthcare providers. Persons with Disabilities are sometimes placed in institutions,

hospitals and other congregate living situations. These set-ups may not only prevent them from making informed and independent decisions about their sexual and reproductive health but may also subject them to increased risks of sexual abuse, exploitation and violence. Persons with intellectual and mental disabilities are particularly vulnerable in this regard.

2.2.2 Health and Habilitation/Rehabilitation

Closely related to the perception of disability in narrow terms as a health issue, and reinforced by the medical model of disability, is the notion that habilitation and rehabilitation are also medical subjects. Habilitation and rehabilitation encompass a range of measures; physical, vocational, educational, training-related, and others that are necessary to empower Persons with Disabilities to maximize their independence and ability to participate in society, not simply to achieve physical or mental health. For this reason, the right to health and the right to habilitation and rehabilitation are addressed separately in Section 28 of the Persons with Disabilities Act No. 6 of 2012. The exception, of course, is that health-related rehabilitation is recognized as part of the right to health. This includes, for example, physical therapy to strengthen muscles affected by an injury, illness, or disability.

The Government has embarked on implementing an approach of early detection and prevention of disabilities for children under the age of 5 years as well as provision of rehabilitation services for children born with disabilities such as cerebral palsy among others.

Further, the Ministry of Health continues to provide habilitation and rehabilitation services to ensure the wellbeing of Persons with Disabilities requiring these services. This is in line with the Persons with the Disabilities Act No. 6 of 2012. The Ministry of Health, in partnership with the Ministry of Community Development and Social Services as well as the Zambia Statistics Agency has ensured that disability-inclusive data collection tools are used when conducting the National Demographic Health Survey (DHS) which will assist in deriving meaningful, collaborated data and information on the situation of Persons with Disabilities in general, disability prevalence and the health related living conditions of Persons with Disabilities in particular.

data collection tools are used when conducting the National Demographic Health Survey (DHS) which will assist in deriving meaningful, collaborated data and information on the situation of Persons with Disabilities in general, disability prevalence and the health related living conditions of Persons with Disabilities in particular.

However, rehabilitation services are limited with inadequate qualified personnel, and materials to provide appropriate services.

2.2.3 Nutrition

Children with disabilities are more prone to malnutrition due to the feeding difficulties they face. This is a result of their conditions, which interfere with the process of feeding in one way or another. Some of the disabilities that can affect the feeding and nutritional status of children include cleft palate, cerebral palsy, hydrocephalus, and other neurological and orthopaedic defects. Persons with Disabilities are an integral part of the nutrition program being implemented countrywide. Proper nutrition supports children's growth and brain development, leading to lifelong benefits, including good health, better social outcomes, and increased productivity.

The Government has developed guidelines on Infant and Young Child Feeding within the framework of universal health coverage. The guideline provides recommendations for the feeding of infants and young children (from birth to 5 years) because early nutrition is fundamental for all children to grow, develop, and thrive.

In addition, recognizing the difficulties that children with disabilities face in receiving adequate nutrition, the Government is implementing programs to further improve feeding among affected children.

2.3 Inclusive Education

An education system that includes all students/learners, welcomes and supports them to learn, whoever they are and whatever their abilities or requirements, is key for the provision of an enabling environment particularly for learners with disabilities to fully participate and realise their full potential. It entails ensuring that teaching and learning benefits all learners in a barrier-free environment; and that the curriculum, teaching and learning materials, school buildings, classrooms and other environments including play areas, transport and toilets are appropriate for all children at all levels, meeting their diverse needs. It improves learning for all children both those with and without disabilities, out-of-school children and pregnant girls returning to school; orphans and other vulnerable children, including those withdrawn from the streets. Inclusive education protects and promotes children and young people's rights to education improves mutual understanding, reduces prejudice, and strengthens social integration so that children with disabilities are equipped to work and contribute economically and socially to their communities.

To ensure inclusive education the Government has put in measures to promote access to education from early childhood, primary, secondary, and tertiary education including skills training and life-long education for Persons with Disabilities. The Government has also ensured that all schools and education facilities provide inclusive education on a progressive basis, in line with the Education Act No. 23 of 2011.

The Ministry of Education has embarked on revising the curricula for pre-service teacher training by ensuring that all Universities and Colleges of Education prepare teachers to teach all learners including learners with disabilities.

In addition, deliberate measures have been included in guidelines to ensure access to loans and bursaries for learners with disabilities for instance the Constituency Development Fund (CDF) and loan and scholarships under the Higher Education Loans and Scholarship Board (HELSB).

However, challenges of inaccessible public infrastructure persist. Most of the public buildings/ infrastructure including schools and recreation facilities are still inaccessible to Persons with Disabilities. For instance, some schools lack ramps and accessible pathways for those who use wheelchairs, teaching and learning materials for children with disabilities as well as inadequate specialised teachers and counselors to manage children with disabilities. The special and mainstream schools with Special Units have inadequate learning and teaching resources such as braille materials, hearing aids, and sign language interpreters, among other specific services needed.

Countrywide, very few schools designed for inclusion of learners with disabilities exist. The few available schools are located in selected districts, away from their families and communities. In addition, the lack of accurate screening, assessment, and support for children with disabilities is pertinent. This causes challenges at the national and sub-national level to allocate equitable resource allocation to schools with children with disabilities and at the school level where learners are left without adequate support from teachers.

2.4 Social Protection

The Government has identified social protection as being central to social and human development as it can reduce poverty, vulnerability, and inequalities. Social protection impacts positively on health outcomes, poverty levels, economic and knowledge inequalities, and self-esteem.

Therefore, policy frameworks and relevant laws have been put in place to shape the application and implementation of social protection. In 2014, the National Social Protection policy was approved by the Government which addressed disability as a cross-cutting issue in the provision of social protection. The Children's Code Act No 12 of 2022 was enacted to ensure promotion and protection of the rights of children which provides for enhanced protection of children with disabilities.

Although the Government has been implementing various social protection programmes, poverty levels have remained high at about 60% (LCMS,2022). Some of the gaps in social protection include: inadequate research on social protection impacts resulting in a lack of evidence-generated data for decision-making on critical issues related to Persons with Disabilities.

While the Government has made some progress in implementing these programmes, Persons with Disabilities continue to experience adverse socioeconomic outcomes such as higher poverty levels poor health conditions, lower education outcomes, lower levels of employment, and disability-associated costs. This has been worsened by poor coordination and weak linkages in social protection programmes. (National Disability Survey, 2015).

2.4.1 Social Assistance

The Government and other stakeholders have been implementing several social assistance interventions targeting specific categories of beneficiaries. These have taken the form of non-contributory transfers either in cash or in-kind, fee waivers, and subsidies with a view of reducing poverty. These interventions specifically target those who lack the inherent capacity to work, rather than those who are failing to meet their needs through shortcomings in various aspects of their circumstances such as limited access to markets, insufficient capital, or land.

This form of assistance provides supplementary support to help such households have more secure access to food and other basic needs, including through investments in human capital. Programmes of this nature include the Public Welfare Assistance Scheme (PWAS), SCT scheme, nutrition and supplementary feeding interventions such as the Home-grown School Feeding programme, bursaries and scholarships, and the resettlement and rehabilitation of people with disabilities and orphans and vulnerable children.

There are however many challenges in the provision of social assistance to Persons with Disabilities. These include issues of coverage that have remained low in most of the programmes with only the Social Cash Transfer programme progressively growing its coverage. Most programmes do not have a quota to ensure deliberate inclusion of Persons with Disabilities on programmes. In addition, there are inadequate resources to fully cover all Persons with Disabilities with the social assistance they may require which often leads to high exclusion rates. Access to the Social Cash Transfer has been tied to the possession of a disability card which is not easily obtained due to the non-decentralized access of the cards, which often leads to high exclusion rates. Access to the Social Cash Transfer has been tied to the possession of a disability card which is not easily obtained due to the non-decentralized access to cards. While outreach activities to reach Persons with Disabilities in the districts are conducted by Headquarters, only a small fraction is reached due to limited resources such as personnel, funds, and equipment needed to produce the cards.

2.4.2 Social Insurance

Social insurance is a form of social welfare that protects against economic risks. The insurance may be provided publicly or through the subsidizing of private insurance. In contrast to other forms of social assistance, individuals' claims are partly dependent on their contributions, which can be considered insurance premiums to create a common fund out of which the individuals are then paid benefits in the future.

There are several social security schemes in Zambia. The National Pension and Scheme (NAPSA) is the largest social security scheme with an estimated coverage of eight percent of the labour force. Other schemes include the Public Service Pension Fund (PSPF) established under the Public Service Pensions Act and the Local Authority Superannuation Fund (LASF), established under the Local Authorities Superannuation Fund Act. The Workers' Compensation Act, also established the Workers Compensation Fund (WCF) to provide cash and non-cash benefits to employers, injured workers, and dependents in the event of injury, disablement, medical expenses, and death arising out of job-related accidents or industrial disease (disease related to the job). Further, Government also established the National Health Insurance Scheme (NHIS) as a compulsory scheme for all Zambian citizens and legal residents to provide sound and reliable healthcare financing for the health sector as part a broader social health protection policy reform towards attainment of Universal Health Coverage.

Nonetheless, social insurance schemes in Zambia have tended to exclude people in the informal economy due to legal and administrative barriers, this includes Persons with Disabilities, most of whom do not have formal jobs and are concentrated in the informal economy. Further, the schemes mainly operate based on existing employer-employee relationships and ignores the existence of self-employed and other categories of the informal economy to which many Persons with Disabilities belong.

2.4.3 Livelihood and Economic Empowerment

Livelihood and empowerment programmes seek to provide support to households and groups who lack sufficient capacity to generate adequate reliable income that strengthen their livelihoods. These programmes create an enabling environment for Persons with Disabilities that supports their social and economic integration as productive members of their communities.

Livelihood and empowerment programmes seek to provide support to households and groups who lack sufficient capacity to generate adequate reliable income that strengthen their livelihoods. These programmes create an enabling environment for Persons with Disabilities that supports their social and economic integration as productive members of their communities. This is done through the provision of training, grants, skills development loans, Farming inputs among others.

Government recognizes the role of empowerment programmes in the actualization of aspirations for Persons with Disabilities, and as such, programmes which include women empowerment, Food Security Pack (FSP), Skills Training, Community Self Help, Citizens Economic Empowerment, Constituency Development Fund and Youth Empowerment have been put in place. These programmes prioritize Persons with Disabilities during targeting and selection of beneficiaries through the quota system to enhance access to socio-economic opportunities.

However, Persons with Disabilities continue to have limited capacity in terms of human, financial, social capital and access to land.

In addition, information on empowerment programmes is not in accessible formats which worsens their disability and increases exclusion. Further, inadequate financial literacy and risk management among Persons with Disabilities coupled with some unfavourable programme guidelines contribute to widespread marginalization and impedes access to assets as well as restricts participation in empowerment programmes. Furthermore, most of the institutions implementing empowerment programmes including banks are concentrated in urban areas making access for Persons with Disabilities in rural areas a challenge.

2.4.4 Emergency and Humanitarian Responses

Emergency preparedness and response plans can provide a base for addressing the needs of Persons with Disabilities in all aspects, from evacuations to access to resources upon resettlement, such as food, water, and health services.

The Government, through the Disaster Management and Mitigation Unit (DMMU), has put in place several interventions to mitigate the impact of disasters such as floods, drought and pandemics in communities. The Unit addresses these emergencies at different levels and guides the response activities in the country. Social Protection interventions have also been implemented to cushion effects of disasters and pandemics. The Government has been working towards a shock responsive social protection system and adopted the SCT system to deliver emergency cash transfers to vulnerable persons including Persons with Disabilities during emergencies.

However, in emergency settings, Persons with Disabilities often suffer multiple challenges of neglect and abuse combined with inaccessible physical environment. In addition, the information on responses is in most cases in inaccessible formats resulting in Persons with Disabilities being excluded from benefits provided during such emergencies.

2.5 Governance

Public participation and good governance are key to the welfare of Persons with Disabilities. Including Persons with Disabilities in interventions to improve good governance is not only important to realise their political rights but also to leverage their rights in other areas such as health, education, livelihood, employment and justice to enhance national development.

Government attaches importance of Persons with Disabilities' participation in development. The Government has put in place legal framework to ensure equal participation of Persons with Disabilities in national matters at all levels as provided for in Article 173 (k) of the Constitution of Zambia. Further, Zambia is a State Party to various international conventions and agreements that ensures the protection and promotion of the participation of Persons with Disabilities in national governance. This has facilitated participation in the electoral process without barriers. Government has also appointed several Persons with Disabilities to several service commissions and other bodies.

However, the needs of Persons with Disabilities are neglected in governance processes. Multiple barriers to public participation exist and include inadequate social support, and knowledge among duty bearers about the needs and rights of Persons with Disabilities. Stereotyping the capacities of Persons with Disabilities to effectively participate in decision-making process is also rife.

Furthermore, Persons with Disabilities have less opportunities for self-representation in most decision-making and governance as evidenced by lack of representation at Cabinet Level while Parliament only has one male with a disability. There is also a large gap in civic education and knowledge of the rights to participate in socio-economic activities among the general population. The inadequacy of civic education and human rights information in accessible formats and communication modes and language contribute greatly to this reality.

Barriers exclude Persons with Disabilities and their organisations from the opportunity to effectively influence the development and implementation of laws, policies and services, which shape their daily lives and social inclusion. As a result, disability is largely left out of the political and development agenda as well as public planning.

2.6 Culture, Beliefs and Traditions

Cultural values and traditions are part of human development, and define a way of life. Cultural practices and beliefs have since time immemorial contributed to the preservation of communities. However, disability has remained an alien concept in most African cultures. Disability has often been associated with wickedness, curse, witchcraft and taboo.

Traditionally, disability in Zambia has been perceived as a misfortune or punishment in the family, caused by ancestral spirits and witchcraft. Due to these misconceptions and myths, Persons with Disabilities are in some cases hidden from society by family members, as they are considered to be a misfortune and incapable of carrying out day- to- day activities. With these misconceptions, Persons with Disabilities encounter a number of challenges in realizing their potential. The social stigma associated with disability negatively impacts the quality of life and often prevents Persons with Disabilities from playing their full role in society.

In an effort to promote positive cultural practices, traditions and beliefs, the Government has enshrined National Values and Principles in the Constitution of Zambia. The Persons with Disabilities Act No. 6 of 2012 further enforces the upholding of the rights for Persons with Disabilities. Awareness raising activities are also being undertaken on false and harmful beliefs on Persons with Disabilities through training and engagement of the media and House of Chiefs on the use of proper terminologies as well as promote non-discriminatory tendencies and cultural practices. There have also been efforts to support parents of children with disabilities to build a positive image in communities.

However, some of the cultural values and traditions are the cause of stigmatization and lack of awareness on the rights of Persons with Disabilities. For example, traditionally held misconceptions and beliefs on certain categories of disability such as albinism may lead to maiming and killing of Persons with Disabilities particularly persons with albinism for fortune and wealth. Continued negative cultural beliefs and practices in communities have led to exclusion of Persons with Disabilities from social life and disintegration of families. These negative cultural practices further gain momentum into institutionalized social norms leading to very slow actualization of policies, legislation and programmes for disability.

2.7 Research and Development

Research and Development play a key role in achieving sustainable development leading to better outcomes. It facilitates the creation of a comprehensive evidence base and the foundations for informing policy decisions and practices. Globally, Research and Development have brought improvements in teaching, training, levels of autonomy and the quality of life as well as appropriate resources required for Persons with Disabilities.

In Zambia, research and development is mainly led by the Non-Governmental Organizations (NGO) sector and academia. The few identified NGOs are engaged in the adaption, development and production of assistive paper technology, mobility aids and devices, medical and rehabilitation appliances. The learning institutions on the other hand, engage in innovative and trial research which does not contribute to industrial development to benefit Persons with Disabilities.

There has been very little disability related trial research around affordability and availability of assistive technology. Meanwhile, assistive technology is key to participation at home, school, and the workplace and in the community for Persons with Disabilities.

Overall, there is minimal research and innovation happening in Zambia around issues of disability and there has been inadequate coordination among research institutions, service providers and organisations of and for Persons with Disabilities engaged in adaptive research. Further, the country is short of financial, and skilled human resources to undertake research and development on assistive technologies for Persons with Disabilities. Funding opportunities for some innovations which could be piloted and scaled up are lacking.

2.8 Institutional and Legal Framework

A strong institutional framework is a precondition for effective and efficient implementation of disability interventions in the country. The development of comprehensive legislation, regulations, structures, and systems is critical to enhancing the welfare of Persons with Disabilities and ensuring coordination on disability matters.

The Ministry of Community Development and Social Services has the overall responsibility of formulating and providing policy guidance on disability. To further enhance this role, Government established ZAPD to have presence at national, policy guidance on disability. To further enhance this role, Government established ZAPD to have presence at national, provincial and district levels to coordinate the implementation of interventions on disability. In addition, the Government facilitated the appointment of Disability Focal Point Persons in line ministries and various institutions to promote disability mainstreaming in all Government programmes. This has been reaffirmed in the Eighth National Development Plan which provides for the appointment of disability focal point persons.

In terms of legislation, the Government signed and ratified the UNCRPD in 2008 and 2010 respectively and domesticated its provisions in the Persons with Disabilities Act No. 6 of 2012. This facilitated an approach to disability that was more aligned to social and human rights model which focuses on removing barriers in society and ensuring inclusive development. In addition, the Mental Health Act No. 6 of 2019 was enacted with a view to strengthen institutional framework around mental health. The Government of Zambia also made commitments to the Global Disability Summit (GDS) in 2018 and 2022.

Despite strides made by the Government to strengthen the institutional and Legal frameworks, disability programming still remains a challenge. The coordination of disability matters among institutions is inadequate. This is worsened by inactive disability focal point persons due to lack of guidelines and National Coordination Strategy to guide their operations. In addition, ZAPD has no presence in most districts which makes coordination a challenge. The Persons with Disabilities Act No. 6 of 2012 is also not comprehensive as it has not fully addressed certain categories of disability, while the statutory instruments to assist in operationalising the Disability Act are still being reviewed.

Further, the country has not yet ratified the Protocol to the African Charter on Human and People's Rights on the rights of Persons with Disabilities.

2.9 Sport and Recreation

Sport and recreation contribute to improving the quality of life of people and their socio-economic development due to the health and therapeutic nature. The quality of life is a broad concept influenced by the physical health of an individual, their mental state and degree of independence, social relations and many other variables from the environment. Additionally, sport and recreation enhance social cohesion, rehabilitation and participation.

Therefore, sport and recreation activities play a role in the lives of Persons with Disabilities as they acquire vital social skills, develop independence, and become empowered as agents of change. Sport can help reduce the stigma and discrimination associated with disability by transforming community attitudes.

Government launched the Community Sport Programme aimed at boosting citizenry participation in sport. Among the salient activities being undertaken is the establishment of community safe spaces, capacity building of community coaches and administrators and distribution of start-up sport equipment. The National Sports Policy also promotes equity in terms of participation of Persons with Disabilities through adaptive sports.

'Despite the efforts made, Persons with Disabilities face major barriers that limit their access to and participation in sport and physical activities. These include limited psychological and sociological factors such as attitudes towards Persons with Disabilities by community members especially those involved in sporting activities. Lack of understanding and awareness of how to include Persons with Disabilities in sport is another challenge. Additionally, sports and recreation facilities are not easily accessible by Persons with Disabilities and equipment is not readily available. This is coupled with limited opportunities and programmes to participate in, train and compete. Furthermore, there are barriers that deter Persons with Disabilities from accessing places for recreational activities such cultural performances, theatres, museums, cinemas, libraries, tourism sites among others.

2.10 Cross Cutting Issues

Mainstreaming cross-cutting issues in disability enhances development initiatives in programming. However, issues such as gender, climate change and HIV/AIDS have not been mainstreamed effectively and this has perpetuated exclusion of Persons with Disabilities in developmental issues.

2.10.1 Gender

Disability is not a gender-neutral experience. It has different impacts on women, men, girls, and boys. While the majority of Persons with Disabilities face inequalities, women and girls with disabilities often face additional disadvantages due to discriminatory social norms and perceptions of their value and capacities.

In Zambia 59 out of every 100 male headed households relative to 63 out of every 100 female headed households are poor. This implies that poverty has a female face in Zambia. This is particularly more severe to women and girls with disabilities who are more vulnerable to poverty and social exclusion, often have limited social, political, and economic opportunities as well as lack of access to basic services. Women and girls with disabilities are also at greater risk of sexual and physical violence and abuse. They often experience discrimination in various spheres of life.

In 1985, Zambia ratified the Convention on the Elimination of all forms of Discrimination against Women. The Convention seeks to end discrimination, particularly against women and girls. Government also enacted the GBV Act No. 1 of 2011 to provide for the protection of victims of gender-based violence. This increased access to quality GBV prevention and response services for women and girls with disabilities and enhanced legal recourse. Additionally, the National Gender Policy has been developed to promote gender equity and equality in all respects.

While progress has been made in enhancing the welfare of women and girls with disabilities, several challenges still exist. These include limited access to education, health, economic opportunities and participation in decision making.

2.10.2 Climate Change

Climate change is one of the issues affecting the world today. According to the 8NDP Zambia is vulnerable to natural hazards and the impacts of climate change. These affect socio-economic development, directly impacting food security, shelter, health, water resources and forestry. This, in turn, increase levels of vulnerability and poverty in communities, especially among the rural population and Persons with Disabilities. The United Nation's Report on Disability Rights in the context of climate Action, 2020 revealed that Persons with Disabilities are at increased risk of the adverse impacts of climate change, including threats to their health, food security, water, sanitation, and livelihoods.

In response to the adverse effects of climate change on disabilities, Government has established a long-term institutional structure for the coordination of climate change activities and programmes. Further, the country has embarked on the development and implementation of dedicated climate change-related policies and strategies. Government has also made strides to ensure the inclusion of Persons with Disabilities in disaster mitigation and preparedness through representation across the Disaster Development Coordinating committees.

Despite these efforts, climate change has continued to affect the well-being of Persons with Disabilities. In cases where disability has been included it is without providing concrete measures to enhance resilience and adaptive capacity. Information on climate change in most cases is not in accessible formats which excludes Persons with Disabilities from using adaptive strategies to mitigate the effects of climate change. This has further worsened vulnerability and poverty among Persons with Disabilities.

2.10.3 Disability and HIV and AIDS

HIV/AIDS is both a manifestation of poverty and vulnerability conditions that exist and the result of unmitigated impacts of the epidemic on social and economic conditions. The socioeconomic impact of HIV/AIDS could lead to the loss of jobs, income, and death of family members, such as parents, reduced education among others.

In sub-Saharan Africa, women with disabilities are 2.2 times more likely to acquire HIV than women without disabilities, which compares to this figure is 1.5 for men (UNAIDS, 2023) Persons with Disabilities are 10% less likely to know their HIV status and be on treatment than persons without disabilities. According to the 2015 Zambia Disability Survey, the second leading cause of death among Persons with Disabilities was HIV/AIDS-related causes at 6.8 percent.

Government has demonstrated a commitment to inclusivity and addressing the intersection of disability and HIV/AIDS and has undertaken various positive initiatives to improve services for Persons with Disabilities affected by HIV/AIDS.

Inclusive awareness campaigns specifically target Persons with Disabilities, using accessible communication methods to raise awareness about HIV prevention and treatment. The National HIV/AIDS Strategic Framework of 2017-2021 integrates disability as a key population, advocating for inclusive policies and programs that address the unique vulnerabilities and needs of Persons with Disabilities.

Efforts have been made to enhance the accessibility of HIV testing and counseling services and healthcare facilities and treatment centers are being made more disability-friendly ensuring Persons with Disabilities can access antiretroviral therapy (ART) services and adhere to treatment. There has also been enhanced collaboration with disability organizations which ensures the inclusion of the voices and perspectives of Persons with Disabilities in policy development and decision-making processes, making policies more representative and sensitive to their diverse needs.

Recognizing the mental health challenges faced by Persons with Disabilities living with HIV, the Government has integrated mental health support into HIV/AIDS treatment programs, providing comprehensive care to those affected. Moreover, the expansion of disability-inclusive mobile clinics and testing services helps overcome the challenges of limited outreach to rural areas, ensuring Persons with Disabilities in remote regions have access to vital HIV testing and counseling services. These positive initiatives demonstrate the Government's dedication to promoting health equity and social inclusion for Persons with Disabilities in Zambia's HIV/AIDS response.

However, the convergence of disability and HIV/AIDS continues to present complex challenges that require a comprehensive approach. Persons with Disabilities are highly susceptible to HIV and AIDS and continue facing additional barriers hindering their access to essential services and information, leading to health disparities and marginalization despite efforts by the Government to address the intersection between HIV/AIDS.

Generally, challenges in accessing HIV/AIDS services for Persons with Disabilities include limited accessibility of healthcare services and facilities, communication barriers for the deaf and hard-of-hearing, as well as those with intellectual and/or developmental disabilities, stigma and discrimination that discourages testing, and inadequate disability-inclusive education about HIV prevention. The peculiar challenges faced by Persons with Disabilities include covering long distances in rural areas with insufficient disability-inclusive healthcare infrastructure, higher poverty rates hindering access to quality healthcare services, inadequate training of healthcare providers in disability-inclusive care, and neglect of mental health support.

CHAPTER THREE

VISION

“A nation where Persons with Disabilities enjoy equal opportunities that are fundamental for independent living and development.”

3.1 Rationale

The Government of the Republic of Zambia attaches great importance to creating an enabling inclusive environment and supports Persons with Disabilities to participate and enjoy on an equal basis with others a meaningful and dignified life. The lives and well-being of Persons with Disabilities in community settings are closely linked to broader issues in national development because disability can cause poverty by preventing the full participation of Persons with Disabilities in the economic and social life of their communities.

While some efforts have been made, Persons with Disabilities in Zambia still face several challenges in the realization of aspirations of contributing to development and these include challenges in accessing essential services on an equal basis with others such as health, education, infrastructure, information, empowerment among others. This has perpetuated discrimination and inequity which result in vulnerabilities and poverty. There is therefore need to continue strengthening measures that aim at uplifting the welfare of persons with all forms of disabilities, where they can participate and contribute to the country's economic growth and poverty reduction for collective human dignity and respect. In addition, there was need to further strengthen alignment to the UNCRPD provisions, the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Citizens to Social Protection and Social Security as well as national documents such as the Eighth National Development Plan.

The Policy has therefore been developed to provide a comprehensive framework towards a just society which fosters inclusivity and encourages empowerment of Persons with Disabilities. The Policy directly addresses equality and non-discrimination, accessibility, health, education and employment. To achieve the ultimate goal of an inclusive society, the Policy also addresses the issues such as the right to life, home, family, recreation and independent living including the right to participate in the country's socio-economic development agenda.

3.2 Guiding Principles

The National Policy on Persons with Disabilities is guided by the following principles:

3.2.1 *Morality and Ethics*

Individuals, Organizations engaging in disability matters should embrace honesty and have strong morals that will promote and complement the good and unifying Zambian traditions and cultural values of caring for one another's diverse needs and utilizing our collective capacities.

3.2.2 *Patriotism and National Unity*

Individuals, Organizations are encouraged to adhere to national values and promote oneness for effective service delivery to Persons with Disabilities and ensure their meaningful participation in society.

3.2.3 *Human Dignity*

Individuals, Organizations will uphold the belief that all people hold a special value that is tied solely to their humanity and has nothing to do with their class, race, gender, religion, disability, or any other factor other than them being human.

3.2.4 *Equity, Social Justice and Equality*

Individuals, Organizations will ensure equal access and opportunities to all community members and no individuals or groups of people should be marginalised as a result of their disability.

3.2.5 *Non-Discrimination*

Persons with Disabilities will not be treated worse than others, excluded from or denied access to services, education, work, tribal or social life on the basis of their disability.

3.2.6 *Good Governance*

In dealing with disability matters, individuals, institutions will foster public confidence, and management of public resources in a manner that promotes the values of efficiency and no corruption.

3.2.7 *Freedom from Exploitation*

Persons with Disabilities will operate in secure environments, free from all forms of exploitation and abuse.

3.2.8 *Participation*

Involvement and acceptance of Persons with Disabilities will be facilitated in all sectors and by all entities.

3.2.9 *Accessibility*

Persons with Disabilities will be afforded access to information, social services, transportation, physical environment and all facilities and services open or provided to the public on an equal basis as with others.

CHAPTER FOUR

4 POLICY OBJECTIVES AND MEASURES

4.1 Objectives

The Policy will pursue the following objectives:

1. To facilitate the full participation of Persons with Disabilities in society;
2. To ensure access to quality inclusive health care and services for Persons with Disabilities at all levels;
3. To enhance access to inclusive formal, non-formal education and skills training for Persons with Disabilities;
4. To ensure that Persons with Disabilities have access to social protection;
5. To enhance active participation of Persons with Disabilities in governance;
6. To promote traditions, beliefs and cultural practices that are non-discriminatory to Persons with Disabilities;
7. To strengthen institutional and legal framework in the disability sector;
8. To increase investment in research and development for disability;
9. To promote provision of accessible and inclusive sports and recreation activities for Persons with Disabilities; and
10. To mainstream disability in all programming related to women, climate change and HIV and AIDs.

4.2 Measures

In order to attain the above objectives, Government shall put in place the following measures

Objective 1: To facilitate the full participation of person with disabilities in society

4.2.1 Measures

- a. Ensure the provision of information in accessible formats;
- b. Ensure availability of assistive devices to Persons with Disabilities;
- c. Ensure accessibility to physical environment/ facilities for public use;
- d. Enhance capacity in the infrastructure development sector;
- e. Enhance accessibility to various subsectors of transport;
- f. Enhance independent living for Persons with Disabilities; and
- g. Promote Community Based Inclusive Development Strategy for Persons with Disabilities.

Objective 2: To ensure access to inclusive quality health care and services for Persons with Disabilities at all levels

4.2.2 Measures

- a. Strengthen technical capacity of health care professionals in provision of services to Persons with Disabilities;
- b. Enhance data capturing on Persons with Disabilities;
- c. Strengthen mechanisms for promoting nutrition among Persons with Disabilities;
- d. Promote inclusive sexual reproductive health;
- e. Enhance provision and access of rehabilitation and habilitation services for Persons with Disabilities.

Objective 3: To enhance access to inclusive formal, non-formal education and skill training at all levels

4.2.3 Measures

- a. Ensure schools and training institutions are inclusive and accessible;
- b. Enhance provision of assistive technologies in schools, training institutions, communities and other learning environments
- c. Ensure availability of adequately trained teachers on inclusive education in schools and training institutions; and
- d. Promote the effective participation of teaching support staff in the learning environment for Persons with Disabilities.

Objective 4: To ensure that Persons with Disabilities have access to social protection services

4.2.4 Measures

- a. Enhance access to social assistance and social insurance services for Persons with Disabilities;
- b. Promote mechanisms to empower Persons with Disabilities; and
- c. Mainstream disability in emergency and humanitarian responses.

Objective 5: To enhance full participation of Persons with Disabilities in governance

4.2.5 Measures

- a.** Promote civic education among Persons with Disabilities;
- b.** Promote inclusion of Persons with Disabilities in decision making positions; and
- c.** Enhance awareness raising on the participation of Persons with Disabilities in governance issues.

Objective 6: To promote traditions, beliefs and cultural practices that are non-discriminatory to Persons with Disabilities

4.2.6 Measures

- a.** Enhance advocacy on demystifying negative traditions, beliefs and cultural values on disability;
- b.** Enhance implementation of disability related policies and laws; and
- c.** Promote the participation of Persons with Disabilities in cultural and traditional affairs.

Objective 7: To strengthen institutional and legal framework on disability sector

4.2.7 Measures

- a.** Promote harmonised coordination mechanisms and linkages among stakeholders in the disability sector;
- b.** Strengthen institutional structures on disability management; and
- c.** Strengthen the existing legislation on disability.

Objective 8: To increase investment in research and development for disability.

4.2.8 Measures

- a.** Enhance capacity of professional institutions engaged in research and development;
- b.** Promote research and innovations on assistive technologies for Persons with Disabilities;
- c.** Strengthen harmonization of disability data capturing and management; and
- d.** Enhance resource mobilization for research in the disability sector.

Objective 9: To strengthen provision of accessible and inclusive sports and recreation activities for Persons with disabilities

4.2.9 Measures

- a.** Promote accessible sports and recreation facilities for Persons with Disabilities;
- b.** Facilitate inclusive community sports and recreational activities; and
- c.** Ensure equal opportunities for Persons with Disabilities in sports and recreation

Objective 10: To mainstream disability in all programming related to gender, climate change HIV and AIDs

4.2.10 Measures

- a.** Strengthen the protection of women and girls with disabilities from all forms of abuse, violence and exploitation;
- b.** Promote disability inclusive HIV and AIDs programming; and
- c.** Promote disability inclusive climate change programming.

CHAPTER FIVE

5 IMPLEMENTATION FRAMEWORK

The implementation of this Policy requires an enabling environment to ensure the disability sector is well coordinated for enhanced welfare of Persons with Disabilities. The Implementation Framework outlines the Institutional Arrangements, Legal Framework, Resource Mobilization and Financing, Monitoring and Evaluation.

5.1 Institutional Arrangements

The Ministry of Community Development and Social Services shall collaborate with other Government ministries, OPDs, cooperating partners, civil society organisations, faith-based organisations (FBOs), and the private sector to implement this Policy. Below is an outline of the roles, responsibilities, and functions identified stakeholders will be expected to carry out in order to successfully implement the Policy.

5.1.1 *The Ministry responsible for Community Development and Social Services* shall:

- a.* Co-ordinate line ministries, OPDs, Cooperating Partners, and NGOs in the implementation of the National Policy for Persons with Disabilities;
- b.* Spearhead the mainstreaming of disability issues in all development programmes;
- c.* Facilitate and co-ordinate mobilization of community-based inclusiveness and programming;
- d.* Facilitate enforcement legislation in ensuring compliance with set standards and guidelines;
- e.* Undertake and coordinate research for the development of assistive devices;
- f.* Spearhead the review of the National Disability Policy; and
- g.* Mobilise and manage resources for the national fund for the implementation of programmes.

5.1.2 *The Office of the Vice President*

- a.* Coordinate with the Ministry responsible for Community Development and Social Services in the provision of services to Persons with Disabilities in disaster and emergencies;
- b.* Ensure disability matters are adequately budgeted for; and
- c.* Ensure disability is mainstreamed in the management and mitigation of disasters.

5.1.3 *The Ministry responsible for Internal Security* shall:

- a.** Ensure adequate protection of Persons with Disabilities;
- b.** Mobilise resources for the disability sector; and
- c.** Facilitate the mainstreaming of disability in all protection programming.

5.1.4 *The Ministry responsible for Finance and National Planning* shall:

- a.** Facilitate financial resources for effective implementation of programmes for disability inclusion and mainstreaming at all levels.
- b.** Mobilise resources for disability sector; and
- c.** Facilitate the mainstreaming of disability in the National Development Plans.

5.1.5 *The Ministry responsible for Agriculture* shall:

- a.** Coordinate with the ministry responsible for community development and social services in the provision of empowerment and services to Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming

5.1.6 *The Ministry responsible for Fisheries and Livestock* shall:

- a.** Coordinate with the Ministry responsible for Community Development and Social Services in the empowerment and provision of services for Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming.

5.1.7 *The Ministry responsible Small and Medium Enterprise Development* shall:

- a.** Coordinate with the Ministry responsible for Community Development and Social Services in the empowerment and provision of services for Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming.

5.1.8 *The Ministry responsible for Transport* shall:

- a.** Coordinate with the Ministry responsible for Community Development and Social Services ensuring transport for the public is accessible for services for Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming.

5.1.9 *The Ministry responsible for Infrastructure and Urban Development* shall:

- a.** Coordinate with the Ministry responsible for Community Development and Social Services ensuring infrastructure open to the public is accessible for services for Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming.

5.1.10 *The Ministry responsible for lands* shall:

- a.** Coordinate with the ministry responsible for community development and social services in ensuring Persons with Disabilities have access to land;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming.

5.1.11 *The Ministry Responsible for Green Economy and Environment* shall:

- a.** Coordinate with the ministry responsible for community development and social services in provision of climate change related services to Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming

5.1.12 *The Ministry responsible for Transport and Logistics* shall:

- a.** Ensure accessible transport for Persons with Disabilities; and
- b.** Budget for the mainstreaming of disability in all programming

5.1.13 *The Ministry responsible for Infrastructure, Housing and Urban Development* shall:

- a. Ensure accessible infrastructure for Persons with Disabilities; and
- b. Budget for the mainstreaming of disability in all programming

5.1.14 *The Ministry responsible for Information* shall:

- a. Facilitate dissemination of information on disability in accessible formats through the print and electronic media.
- b. Ensure access to information on all programmes for Persons with Disabilities
- c. Ensure disability matters are adequately budgeted for; and
- d. Ensure disability is mainstreamed in all programming.

5.1.15 *The Ministry responsible for Education* shall:

- a. Facilitate for inclusive and accessible schools and training institutions across the country;
- b. Ensure that schools and higher learning institutions have appropriate and adequate educational materials for Persons with Disabilities;
- c. Ensure the availability of adequate teachers, instructors and lecturers in all schools, and learning institutions;
- d. Ensure disability matters are adequately budgeted for; and
- e. Ensure disability is mainstreamed in all programming.

5.1.16 *The Ministry responsibly for Technology* shall:

- a. Coordinate with the ministry responsible for community development and social services in ensuring research and innovations are enhanced around disability matters;
- b. Ensure disability matters are adequately budgeted for; and
- c. Ensure disability is mainstreamed in all programming

5.1.17 *The Ministry responsible for Local Government* shall:

- a.** Ensure disability inclusion in all institutional structures in Local Government;
- b.** Collaborate with the ministry responsible for community development and social services in the empowerment and provision of services for Persons with Disabilities
- c.** Strengthen the Disability coordinating committee at district and community level:
- d.** Ensure that traditional leaders promote culture, traditions and beliefs that are not discriminative towards Persons with Disabilities in the communities;
- e.** Build capacity of officers in infrastructure development with disability standards;
- f.** Ensure disability matters are adequately budgeted for;
- g.** Ensure disability is mainstreamed in all programming; and
- h.** Ensure that Persons with Disabilities are co-opted into the WDC and CDF structures for their meaningful participation.

5.1.18 *The Ministry responsible for Justice* shall:

- a.** Facilitate the ratification and domestication of international conventions pertaining to the rights of Persons with Disabilities; and
- b.** Facilitate the amendment of existing laws and enactment of appropriate legislation pertaining to disability.

5.1.19 *The Ministry responsible for Labour* shall:

- a.** Ensure access to employment for Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming.

5.1.20 *The Ministry responsible for Youth* shall:

- a.** Coordinate with the ministry responsible for community development and social services in the empowerment and provision of services for youth Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming

5.1.21 Gender Division shall:

- a.** Ensure mainstreaming of disability matters in programming;
- b.** Ensure budgeting for disability matters; and
- c.** Coordinate policies and programmes for improved welfare of girls and women with disabilities

5.1.22 Human Rights Commission shall:

- a.** Sensitise and safeguard human rights for Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for; and
- c.** Ensure disability is mainstreamed in all programming.

5.1.23 Zambia Agency for Persons with Disabilities shall:

- a.** Monitor mainstreaming of disability issues in national development;
- b.** Ensure the National Policy for Persons with Disabilities to be transcribed in formats that accessible to Persons with Disabilities;
- c.** Conduct accessibility inspection of public infrastructure;
- d.** Provide empowerment to Persons with Disabilities;
- e.** Manage the Disability Management Information System;
- f.** Undertake disability surveys; and
- g.** Provide assistive devices for Persons with Disabilities.

5.1.24 Organisations for Persons with Disabilities / Non-Governmental Organisations shall:

- a.** Incorporate issues of disability in development work and programmes;
- b.** Undertake advocacy activities on various issues to uphold the welfare of Persons with Disabilities; and
- c.** Collaborate with the Government and other organizations in mainstreaming disability.

5.1.25 Cooperating Partners shall:

- a.** Provide financial, technical, and other forms of support during the implementation of disability programmes and activities.

5.1.26 *Private Sector* shall:

- a.** Contribute financial and material resources and provide opportunities for Persons with Disabilities;
- b.** Ensure disability matters are adequately budgeted for;
- c.** Ensure disability is mainstreamed in all programming; and
- d.** Collaborate with Government and CSOs to support the development and delivery of services to Persons with Disabilities.

5.1.27 *Academia and Research Institutes* shall:

- a.** Promote innovative research and developments in disability;
- b.** Participate in monitoring and evaluation in disability activities;
- c.** Ensure disability is mainstreamed in all programming; and
- d.** Ensure disability matters are adequately budgeted for.

5.2 Legal Framework

To effectively implement the National Policy for Persons with Disabilities, there is a need for an enhanced legal framework. In this regard, the implementation of this Policy will leverage the following existing laws that may enhance matters related to disability:

- a.** Constitutional Amendment Act No. 2 of 2016
- Disaster Management Act No. 13 of 2010
- b.** Gender Equity and Equality Act of 2015
- c.** Employment Code Act No.3 of 2019
- Persons with Disabilities Act No.6 of 2012
- d.** Local Government Act No. 2 of 2019
- e.** Mental Health Act No. 6 of 2019
- f.** Education Act No. 23 of 2011
- g.** National Health Insurance Act No.2 of 2018
- h.** Children's Code Act No. 12 of 2022
- i.** The Citizens Economic Empowerment Commission Act of 2008

In addition, the Government shall review, repeal and enact legislation and policies that will contribute to the creation of an enabling legal and policy environment that would protect and later on enable Persons with Disabilities to take any legal recourse. It is therefore envisioned that the Zambian Government shall:

- a.** Review the Persons with Disabilities Act No. 12 of 2012.
- b.** Domesticating Disability-related International Protocols/Conventions.

5.3 Resource Mobilisation and Financing

The implementation of the National Policy for Persons with Disabilities will require mobilization of financial, material, and human resources from both local and external sources. The Ministry responsible for Finance will be responsible for the timely disbursement of funds as budgeted for in the National Budget to enable timely implementation of the programmes outlined in the policy. The other resources will be mobilized from the private sector, bilateral, multilateral and Cooperating Partners.

5.4 Monitoring and Evaluation

The monitoring and evaluation function will be undertaken at all levels to enhance accountability and effectiveness. A framework within which the policy will be monitored and evaluated at the national level shall be developed and will be used to track and review progress against performance targets and indicators. Lessons learnt will be used to adjust programmes when and where necessary. In addition, the Government through the Ministry responsible for Community Development and Social Services will put in place a comprehensive monitoring and evaluation system that will track the various activities for outcome and impacts. In this regard, the Government shall:

- a.** Undertake a mid-term review of the Policy after five years; and
- b.** Establish an integrated system of monitoring and evaluation mechanisms involving other stakeholders.

Ministry of Community Development and Social Services
Community House, Sadzu Road
Lusaka, Zambia

+260 211 225 327
info@mcdsw.gov.zm