



Convention on the Rights of Persons with Disabilities

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Committee on the Rights of Persons with Disabilities

Consideration of reports submitted by States parties under article 35 of the Convention

Initial reports of State parties due in 2011

Rwanda** ***

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List of acronyms and abbreviations

ADPD	African Decade of Persons with Disabilities
ADRA	Adventist Development and Relief Agency
AGHR	Association Générale des Personnes Handicapées au Rwanda
AJB	Access to Justice Bureau
ANFSM	Association Nationale des Femmes Sourds-Muets
CBMI	Christian Blind Mission International
CEPGL	Communauté Economique des Pays des Grands Lacs
CRPD	Convention on the Rights of Persons with Disabilities
DHS	Demographic and Health Survey
DRPI	Disability Rights Promotion International
EAC	East African Community
ECD	Early Childhood Development
EDPRS	Economic Development and Poverty Reduction Strategy
EICV	Integrated Household Living Conditions Survey
EMIS	Education Management Information System
EU	European Union
FARG	Genocide Survivors Assistance Fund
FRWP	Forum of Rwandan Women Parliamentarians
GDP	Gross Domestic Product
GOR	Government of Rwanda
HI	Handicap International
HIMO	Haute Intensité de la Main-d'oeuvre (Labour-Intensive Works)
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
HSSP	Health Sector Strategic Plan
ILO	International Labour Organisation
IPC	International Paralympic Committee
JICA	Japanese International Cooperation Agency
KHI	Kigali Health Institute
KIE	Kigali Institute of Education
KIST	Kigali Institute of Science and Technology
MAJ	Maisons d'Accès à la Justice
MIFOTRA	Ministry of Public Service and Labour
MIGEPROF	Ministry of Gender and Family Promotion
MINALOC	Ministry of Local Government

MINEDUC	Ministry of Education
MININFOR	Ministry of Information
MININFRA	Ministry of Infrastructure
MINISPOC	Ministry of Sports and Culture
MOH	Ministry of Health
MMI	Military Medical Insurance
MO	Ministerial Order
NCC	National Commission for Children
NCHR	National Commission for Human Rights
NCIE	National Centre for Inclusive Education
NCPD	National Council of Persons with Disabilities
NGO	Non-Governmental Organisation
NHRC	National Human Rights Commission
NPC Rwanda	National Paralympic Committee of Rwanda
NPPA	National Public Prosecution Authority
NUDOR	National Union of Disabilities' Organisations of Rwanda
NUR	National University of Rwanda
OAU	Organisation of African Unity
OG	Official Gazette
OGRR	Official Gazette of the Republic of Rwanda
PO	Presidential Order
PRSP	Poverty Reduction Strategy Paper
RDRC	Rwanda Demobilisation and Reintegration Commission
RNDSC/ADPD	Rwanda National Decade Steering Committee of the African Decade of Persons with Disabilities
RNUD	Rwanda National Union of the Deaf
RWF	Rwandan Francs
SACCO	Savings and Credit Cooperatives
SGBV	Sexual and Gender-Based Violence
SNE	Special Needs Education
SNIE	Special Needs and Inclusive Education
SRH	Sexual and Reproductive Health
TFDIER	Task Force for the Development of Inclusive Education in Rwanda
TFTR	Task Force on Treaty Reporting
THT	Troupe des Handicapés Twuzuzanye
UNDP	United Nations Development Programme

UNESCO	United Nations for Education and Sciences Organization
UNICEF	United Nations International Children's Emergency Fund
UNR	National University of Rwanda
UR	University of Rwanda
UR-CoE	University of Rwanda College of Education
VSO	Voluntary Services Overseas
VUP	Vision 2020 Umurenge Programme
WHO	World Health Organisation

Introduction

1. Rwanda ratified the Convention on the Rights of Persons with Disabilities and its Optional Protocol on 15 December 2008 without qualification.
2. This Initial Report of Rwanda on the implementation of the Convention on the Rights of Persons with Disabilities (CRPD) was prepared for presentation to the Committee on the Rights of Persons with Disabilities, in conformity with Paragraph 1, Article 35 of the Convention. The present Report on the Implementation of the Convention on the Rights of Persons with Disabilities is elaborated pending the submission by Rwanda of the common basic document to the Human Rights Council in the framework of the Universal Periodic Review.
3. The Rwandan context is characterised by the adverse effects of the 1994 Genocide against the Tutsi, which resulted in many additional Persons with Disabilities as well as mental health challenges. Rwanda is also engaged in ambitious efforts of reconstruction, national reconciliation, institutionalisation of good governance, and promoting economic growth.
4. This Initial Report presents the achievements of Rwanda in application of the provisions provided for by the Convention; several of these achievements have been attained via joint collaborations of the Government of Rwanda with development partners and civil society organisations. The report was prepared in conformity with the Directives governing the document specific to the Convention and to Harmonised Directives.
5. The production of the Initial Report involved structured consultations with institutions in charge of the implementation of programmes pertaining to the articles of the Convention: Parliament (Chamber of Deputies and the Senate), Ministry of Foreign Affairs and Cooperation, Ministry of Justice, Ministry of Gender and Family Promotion, Ministry of Health, Ministry of Education, Ministry of Public Service and Labour, Ministry of Internal Affairs, Ministry of Local Government, Ministry of Disaster Management and Refugees, Ministry of Sports and Culture, Ministry of Infrastructure, Office of the Government Spokesperson, Ministry of Finance and Economic Planning, National Council of Persons with Disabilities (NCPD), National Commission for Human Rights, Rwanda Demobilisation and Reintegration Commission, National Public Prosecution Authority, Rwanda National Police, National Institute of Statistics of Rwanda, Rwanda Correctional Service, former National Steering Committee for the African Decade of Persons with Disabilities, National Commission for Children, and Rwanda Housing Authority.
6. Civil society organisations and NGOs involved in the implementation of the CRPD that were consulted include NUDOR and some of its member organisations (Rwandan Union of the Blind, Collectif Tubakunde, RNUD, THT), Handicap International, VSO, and MyRight-Empowers Persons with Disabilities.

Part A. General and institutional framework of the protection and promotion of human rights and the rights of persons with disabilities in Rwanda

7. Rwanda is a landlocked country facing rapid population growth. The surface area of Rwanda is 26,338 km² and the population of the country stands at 10,515,973 residents,¹ with a population density of 416 inhabitants per km², making Rwanda the most densely populated country in the East African Community. The population growth is 2.6% per year. The percentage of women is 52% whereas the percentage of men is 48% meaning there are 93 males for every 100 female inhabitants.

8. In the aftermath of the Genocide against the Tutsi, real GDP grew at over 10% per year as the economy recovered from a low base (1996–2000). This was followed by a period of stabilisation (2001–2006) during which real growth fell to an annual rate of 6.4%.² During 2012 GDP was once again on the increase at 8%.³ The Gross domestic Product (GDP) per inhabitant increased from US\$206 in 2002 to US\$740 in 2014. The economy of Rwanda is predominantly based on agriculture, which employs 71.6%⁴ of households and contributes to 33% of GDP; the service sector contributes a further 45% of GDP. Industry contributes 16%. Eighty-two per cent of women report working in agriculture as their primary source of income, against a figure of 61% for men.

9. The Government of Rwanda has developed a road map⁵ (Vision 2020) for sustainable development aiming at attaining the status of a middle-income country by the year 2020. The Government of Rwanda has developed a series of Poverty Reduction Strategy Papers, the national frameworks aimed at socio-economic transformation of the country and numerous programmes to achieve this ambitious goal.

10. These programmes include the first Economic Development and Poverty Reduction Strategy (EDPRS1) (2008–2012), subsequently reviewed and revised in the light of progress achieved to produce the second Economic Development and Poverty Reduction Strategy (EDPRS2) (2013–2018).

11. During the period 2006 to 2011 approximately 200,000 households, or one million people, emerged from poverty with 45% of the population now living below the poverty line compared to 57% five years before.⁶ Extreme poverty⁷ fell from 36% in 2005/06 to 24% in 2010/11.⁸ This data also shows that on average⁹ 10.5% of households in any poverty quintile are headed by a person with a disability, a useful statistic for planning purposes.

12. Rwanda is equally committed to the attainment of the Millennium Development Goals (MDGs), and has made especially good progress in the areas of health and education. MDG Country Report¹⁰ shows that Rwanda is very likely to achieve goals in achieving universal primary education, (MDG2); promoting gender equality (MDG3); reducing child

¹ RPHC4 Thematic Report: Population Size, Structure and Distribution (January, 2014).

² EDPRS (2008–2012) September 2007.

³ NISR, GDP National Accounts 2012.

⁴ The third Integrated Household Living Conditions Survey (EICV3).

⁵ First elaborated in 1998/99.

⁶ NISR Evolution of Poverty in Rwanda from 2000 to 2011 Results from the Household Surveys (Feb. 2012).

⁷ Using a poverty line of RwF 64,000 per adult equivalent per year in January 2001 prices and an extreme poverty line of RwF 45,000 in the same units adjusted in subsequent surveys.

⁸ NISR Integrated Households Living Conditions Survey EICV3.

⁹ Median figure.

¹⁰ NISR MDG Country Report 2007.

mortality (MDG4); improved maternal health (MDG5) and in combating HIV/AIDS, malaria and other diseases (MDG6).

13. Rwanda is an independent, sovereign, democratic, social, and secular Republic, which recognises a pluralistic government. The Rwandan Constitution provides for a presidential system of government, with separation of powers between the three branches (executive, legislative and judiciary). These play an important and complementary role in the promotion and protection of human rights.

General Legal Framework within which Human Rights are protected

14. The rights of Persons with Disabilities are protected along with all other Rwandan citizens principally by the Constitution. The rights of Persons with Disabilities are additionally protected by the National Laws No. 01/2007 on the Protection of Persons with Disabilities in general and No. 02/2007 on the Protection of Former War Combatants with Disabilities.

Constitutional Framework

15. In its Preamble, the Rwandan Constitution reaffirms the principles of human rights enumerated by the Charter of the United Nations and other international instruments. In Articles 10 to 51, the Constitution provides for fundamental rights as they are stipulated in the Universal Declaration of Human Rights and the Obligations of Citizens.

16. Article 11 of the Constitution stipulates, “All Rwandans are born and remain free and equal in rights and duties. Discrimination of whatever kind based on, inter alia, ethnic origin, tribe, clan, colour, sex, region, social origin, religion or faith, opinion, economic status, culture, language, **social status, physical or mental disability**, or any other form of discrimination, is prohibited and punishable by the law.” Additionally, Article 14 of the Constitution commits Rwanda, within the limits of its capacity, to “take special measures for the promotion and welfare of the survivors of genocide who were rendered destitute by the Genocide against the Tutsi committed in Rwanda from the 1st of October 1990 to the 31st of December 1994, the persons with disabilities, the indigent, and the elderly, as well as other vulnerable groups.”

17. Rwanda has acceded, ratified or approved many key international and regional instruments on human rights and their additional protocols, in particular the Universal Declaration of Human Rights, the African Charter on Human and Peoples’ Rights, the International Covenant on Economic, Social and Cultural Rights, the Convention on the Elimination of All Forms of Discrimination against Women, the Convention on Rights of the Child, and the Convention on Persons with Disabilities.¹¹ In accordance with Article 190 of the Constitution, these are sovereign: “Upon their publication in the official gazette, international treaties and agreements which have been conclusively adopted in accordance with the provisions of law shall be more binding than organic laws and ordinary laws.”

¹¹ See Appendix 1 for comprehensive listing.

Specific Legal Protection of the rights of persons with disabilities

18. Rwanda recognised the Standard Rules on the Equalisation of Opportunities for Persons with Disabilities.¹² Although not a legally binding instrument these represent a strong commitment of Governments to take action to achieve equal opportunities for Persons with Disabilities. Therefore progress towards a National Policy on Disability (2003) was made, and by 2007 Rwanda promulgated Law No. 01/2007 of 20 January 2007 relating to the protection of Persons with Disabilities in general.

19. A second Law No. 02/2007 of 20 January 2007 relating to the protection of Persons with Disabilities and former war combatants was passed at the same moment. Law No. 54/2011 of 14 December 2011 relating to rights and protection of the child also provides specific protection to children with disabilities.

20. The law relating to the protection of Persons with Disabilities protects the rights of any person with disabilities, entitles them to equal rights with other persons before the law, and requires them to be treated with respect and dignity. A Person with Disability has the right to family life in the same condition as others; to an appropriate education with respecting the nature of their disability; and to medical care, including prosthetic and orthotic appliances if required. A Person with Disability has the right to non-discrimination in employment; to appropriate means of communication and transport; and to participation in sports and culture. Persons with Disabilities also have rights to protection and a quality of care in centres catering for them; to protection in disasters or conflict; to protection against any form of discrimination or any form of violence; and to legal assistance. (See Appendix 2 for a listing of legislation relating to the rights of Persons with Disabilities in Rwanda.)

21. The law relating to the Protection of Persons with Disabilities and Former War Combatants guarantees specific rights to them whose physical or mental disability is judged to place them in categories of persons with 70% or greater extent of disability. These rights include free medical care; free shelter adapted to their disability and located near basic infrastructure such as roads, schools and health centres; and exemption from paying court fees, any court charges, and exemption from paying for Government documents. Ex-combatants in categories of persons with less than 70% extent of disability do not benefit from these same rights, although any needy ex-combatant has a right to a monthly subsistence allowance.

22. Former war combatants with disabilities have been categorised according to the Belgian Official Scale of Disability¹³ into four categories of disability, ranging from Category 1 (between 90–100%) to Category 4 (between 30–49%), thus allowing those in categories 1 and 2 to benefit from these rights stipulated by Law No. 02/2007. The rationale for these financial privileges arises from the fact that disability was suffered in the service of the nation.¹⁴

23. A number of Ministerial Orders were adopted in 2009 relating to the measures to facilitate Persons with Disabilities in communication, travel, education, sport and leisure, medical care, and employment. Good progress has been made in application of existing law, though Government recognises that more remains to be done. Several of the measures specified in Ministerial Orders have yet to be fully realised. Specific Ministerial programmes and plans vary in their attention to specific disability targeting and full

¹² Adopted by the UN Special Assembly 20 December 1993.

¹³ BOBI the Barème Officiel Belge des Invalidités adopted into Belgian law (20/3/1975) and used by medical doctors to appreciate the importance of physical or psychological disability.

¹⁴ This poverty linked grant is not available to equally poor people whose disability has other origins.

inclusion, though some strong examples are emerging.¹⁵ There is also useful small scale programming by other development partners from which Government may learn and bring to scale.¹⁶

24. Most recently, Law No. 3/2011 of the 10 February 2011 determines the responsibilities, organisation, and functioning of the National Council of Persons with Disabilities (NCPD), a public institution with financial and administrative autonomy. It is composed of representatives¹⁷ who are Persons with Disabilities from Cells, Sectors, Districts, Provinces, the City of Kigali, and the National level, with an executive staff appointed under public sector recruitment procedures. This Council is a forum for advocacy and social mobilisation on issues affecting Persons with Disabilities in order to build their capacity and ensure their participation in national development. It supports the Government to implement programmes that benefit Persons with Disabilities. NCPD's responsibilities include mobilisation and representation of Persons with Disabilities; encouraging their participation in national development programmes; advocacy and inclusion; sensitising society; lobbying for rights of Persons with Disabilities; and in particular monitoring the respect of laws protecting Persons with Disabilities. The Government of Rwanda through the NCPD also participates in prevention and mitigation activities and coordinates activities aimed at the advancement of Persons with Disabilities.

Judicial Framework

25. The monitoring of laws designed to protect and afford rights to all Persons with Disabilities is the specific responsibility of two institutions. Law No. 01/2007 of 20 January 2007 relating to protection of Persons with Disabilities in general, grants Persons with Disabilities the right to legal representation, and obliges the National Commission for Human Rights (NCHR) to monitor how the rights of Persons with Disabilities are respected.¹⁸

26. Law No. 3/2011 of 10 February 2011 determining the responsibilities, organization and functioning of the National Council of Persons with Disabilities, also confers to NCPD the powers for specific monitoring of the legislation which protect Persons with Disabilities.¹⁹ The exemption from paying court fees afforded to former war combatants with disabilities in Categories 1 and 2 is an alternative measure to provide access to justice for this category of Persons with Disabilities.²⁰

Institutional Framework

27. The following institutions are responsible for protecting human rights in general and the rights of Persons with Disabilities in particular:

- **The Parliament of Rwanda** monitors the complaints of the population, the respect of human rights in general, and the rights of Persons with Disabilities in particular. It has established mechanisms for efficient participation on the promotion of human rights, including the Forum of Rwandan Women Parliamentarians (FRWP) and the

¹⁵ HSSPIII has clear targets relating to disability service provision, prevention and data capture.

¹⁶ GOR – Handicap International Inclusive Education Pilot (2010–2013) is one such example.

¹⁷ Elected in March 2011 in a process supported by the Rwandan National Electoral Commission.

¹⁸ Articles 8 & 10.

¹⁹ Article 6 (8°).

²⁰ Law No. 2/2007 of 20th of January 2007 relating to the protection of former war combatants with Disabilities, Article 13.

Amani Forum, which plays an important role in peace-building and the promotion of security in the Great Lakes Region.

- **National Commission for Human Rights (NCHR)** is an independent public institution provided for by the Constitution of Rwanda. The NCHR is in compliance with the Paris Principles and is accredited with “A” status.²¹ The NCHR is composed of seven commissioners nominated from different categories of Rwandan society, including civil society. Commissioners enjoy immunity in the exercise of their duties. The NCHR has the overall mission of promoting and protecting human rights and has special missions including to educate and sensitise the public on human rights, to provide advice on request or on its own initiative on draft laws related to human rights, to urge state organs to ratify international conventions on human rights, and to take measures to integrate them in the national legislation, to monitor respect for the rights of the child, women, Persons with Disabilities, people living with HIV/AIDS, refugees, migrant workers and members of their families and elderly in its special mission regarding the protection of human rights.²² The Commission investigates cases of violations of human rights committed on the territory of the Republic of Rwanda by state organs, officers who abuse their powers, organisations, and individuals. It carries out investigations on violations of human rights and receives petitions from victims of the violation of human rights and may bring the matter to the attention of competent jurisdictions. It reports annually on these matters.²³
- **The Office of the Ombudsman** is an independent institution established by the Constitution. Its mission is to prevent and to fight against injustice, corruption, and related offences in public and private administration. It receives and examines complaints from individuals and independent organisations on actions by civil servants and employees of private institutions. In addition, it carries out sensitisation and public awareness activities in various institutions so as to urge them to find solutions to complaints from the population, including petitions lodged by Persons with Disabilities.
- **Courts and Tribunals** play an important role in the promotion and the protection of human rights through rendered judgments. All orders and judgments rendered often refer to the International Conventions on Human Rights ratified by Rwanda.
- **The National Public Prosecution Authority (NPPA)** also plays a key role in the protection and the promotion of human rights. It has a service in charge of protection of victims and witnesses, especially in areas related to the fight against gender-based violence, corruption and narcotics.
- **The National Council of Persons with Disabilities (NCPD)** has the responsibility to lobby for the rights of Persons with Disabilities and in particular monitoring the respect of laws protecting persons with disabilities. As a forum for advocacy and social mobilisation on issues affecting persons with disabilities, the NCPD has an urgent need to build capacity and work for participation of Persons with Disabilities in the national development.

²¹ International Coordinating Committee’s Sub-Committee on Accreditation (SCA) of National Human Rights Institutions

²² Law No. °19/2013 of 25/03/2013 determining missions, organization and functioning of the National Commission for Human Rights (articles 4, 5 and 6).

²³ For example Annual Activity Report July 2011–June 2012 reports that 6 of 1346 complaints investigated involved Persons with Disabilities (4 women & 2 boys).

28. Other institutions, by virtue of their respective specific fields of intervention, have a function in promoting and protecting the rights of Persons with Disabilities amongst generic human rights. These include for example the Rwanda National Police; the Gender Monitoring Office; the National Women's Council; the National Youth Council; the Child Rights Observatory; the National Unity and Reconciliation Commission and others.

National Policies and Programmes

29. The Government of Rwanda is strongly committed to the process of participatory development through decentralisation, which started in 2000 and is implemented through the transfer of decision-making powers and budgeting to local government. Communities have direct relationships with local government via elected local leaders or local representatives. Village-level committee members are well placed to represent the views of village households, and in turn convey messages from local government towards the local population.

30. Persons with Disabilities are organised since March 2011 at all hierarchical levels of decentralised administration. Elected committees of Persons with Disabilities at the different levels of local government may be able to actively participate in governance and ensure the integration of Persons with Disabilities in community development programmes. Government and NCPD recognise that current capacity of committee members restricts this and indeed may constrain the full participation of Persons with Disabilities in the elaboration of action plans and evaluation of the implementation of these at all administrative levels.

31. Currently the national development strategies are described within the second Economic Development and Poverty reduction Strategy (EDPRS2). In addition this states that Rwanda does not intend to leave any of its citizens behind in its development.²⁴ Specific steps will be taken to ensure that Persons with Disabilities and other disadvantaged groups are able to contribute actively to the country's development and to benefit from it.

32. Key interventions will include:

- Making all infrastructure accessible and ensuring access to information in forms that are relevant to persons with disabilities
- Legal and regulatory frameworks relating to Persons with Disabilities will be reviewed
- Education personnel and teachers with skills in inclusive and special needs education will be increased in number
- Assistive devices and appropriate learning resources will be scaled up

33. In addition to these general priorities in EDPRS2, sector-specific plans and policy should give attention to needs of Persons with Disabilities within the framework of their general mandate. This is the principle of "mainstreaming".

34. Thus there are a number of national policies and programmes, which if fully delivered will improve the economic, social and health status of persons with disabilities.²⁵ Evaluation and learning from EDPRS1 highlights room for improvement in mainstreaming

²⁴ EDPRS2 Disability and Social Exclusion (Section 6.60).

²⁵ For example National Education policy including 12 years basic education for all; National Labour Policy.

disability as a cross-cutting issue.²⁶ Hence responsibility for including Persons with Disabilities in Rwandan development remains a multi-sectorial one that requires additional attention from all.

35. There are additional national policies aimed at protecting vulnerable groups, such as the broad National Social Protection Strategy and the Family Policy,²⁷ which draw upon the Orphans and Vulnerable Children Policy and Strategic Plan,²⁸ child rights legislation, and Gender-Based Violence Policy and Strategy,²⁹ among others. Data on Persons with Disabilities were collected as part of the 2012 Population and Housing Census, which counted 446,453 Persons with Disabilities (4.2%) in a population of 10.5 million inhabitants.

The National Social Protection Policy

36. Social protection was not a strategic area identified under the first PRSP and suffered from a lack of strategic planning, consolidated budget, and a monitoring framework.³⁰ Despite this, an estimated 7–10% of the national budget was allocated to social protection programmes, including funds for Persons with Disabilities.³¹ Adoption of EDPRS2, the Social Protection Policy,³² and a Social Protection Sector Strategy (2013) has brought greater clarity over the poor and vulnerable people targeted, and the means used. The mission of the sector is to ensure that all poor and vulnerable people are guaranteed a minimum income and access to core public services and that those who can work are provided with the means to escape poverty. This provides a safety net that is delivered through cash transfers including VUP direct support programmes, public works programmes, and other grants for vulnerable groups paid through FARG, RDRC, and child and refugee support programmes.

37. The National Social Protection Policy is steered by MINALOC supported by other ministries in charge of gender promotion, health, education, youth, labour and employment, social security, and others.

38. Social protection takes place across a range of sectors, in which its focus is on ensuring that poor people can overcome financial barriers to accessing public services. This is highly relevant for Persons with Disabilities within the broader population of vulnerable and poor households.

39. The objective of social protection policy is to reduce vulnerability in general, and vulnerability of the poor and marginalised people, in particular; to promote sustainable economic and social development by the reduction of social risk and coordination of saving activities; and the protection of vulnerable groups in the short, medium and long terms.³³ Major beneficiary groups of social protection are survivors of the Genocide against the Tutsi, orphans, children in difficult situations, widows, people living with HIV/AIDS, youth from broken families, demobilised ex-combatants, persons with disabilities, repatriated people, refugees, older people, disaster victims, and historically marginalised groups.

²⁶ EDPRS1 (2008–2011) review MINECOFIN.

²⁷ MIGEPROF, October 2013.

²⁸ 2003.

²⁹ 2011.

³⁰ EDPRS2.

³¹ Social Protection Public Expenditure Review 2006 cited in EDPRS2.

³² MINALOC 2005.

³³ National Social Protection Strategy (MINALOC 2011) and EDPRS2 Social Protection Strategy (July 2013) www.minaloc.gov.rw.

Family Policy and Policy on Protection of Orphans and Other Vulnerable Children

40. The protection of orphans and other vulnerable children is coordinated by the Ministry of Gender and Family Promotion within the framework of the Family Policy.³⁴ Great upheavals in Rwanda and the consequences of the Genocide against the Tutsi have significantly affected the family. Alongside the serious loss of life there has been a momentous change of roles, with a high number of widows, orphans, and more households headed by women and children as a result. At the same time, the family is the unit in which children will be raised with changed attitudes that will reunite and renew society, an issue of great importance in Rwanda. The Family Policy was developed in 2005 to address these issues, and revised in 2013. There has been significant progress in developing and implementing other policies that relate closely to family issues.³⁵

41. Current policy deals with the support and promotion of the family, giving importance to childrearing, educating, and socialising children. This policy also addresses problems that arise within families, such as domestic violence against spouses or child abuse. Extreme poverty is acknowledged to undermine the ability of families to perform their basic functions and therefore the Family Policy seeks to ensure that extremely vulnerable families are financially supported.

42. The vision of the Government is to help vulnerable children to develop themselves and to attain their full potential and access all opportunities on equal footing with all other citizens. The policy on the protection of orphans and other vulnerable children defines orientations for the promotion of the rights of children with disabilities, namely:

- Access to physical rehabilitation services
- Early prevention of the disabilities among young children
- Access to formal and informal education
- Promotion of community systems that enable children with disabilities to remain in the family and receive necessary family and community support

Part B. Segment of the treaty specific document submitted to the Committee relating to General provisions of the Convention

Articles 1 to 4 of the Convention

43. The definition of “disability” used in the Law No. 01/2007 of 20 January 2007 relating to the protection of Persons with Disabilities in general, in its Article 2, defines the disability as a state of a person who “has lost the capacities that are essential to life or who has deficiencies compared to other persons and due to this fact, who does not enjoy equal chances and opportunities like the others. Under the terms of this law, a person with disability is any person with congenital deficiency or inability acquired due to illness, an accident, a conflict or other reasons that may cause a disability.” This definition with its focus on deficiency corresponds to a medical model of disability and several of the priorities fixed by Rwanda derive from this (for example the categorisation of persons with disabilities, provision of appliances and the physical adaptation of buildings).

³⁴ 2003 Orphans and Vulnerable Children Policy and Strategic Plan.

³⁵ The most important of these are the Integrated Child Rights Policy (ICRP), the Early Childhood Development (ECD) Policy and the Gender Based Violence (GBV) Policy.

44. UNCRPD explains³⁶ 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*. This definition with its focus on the impact of the way society is organised for the persons with disabilities corresponds to a social model of disability and would emphasise priorities of social attitudes, communication and inclusion and dismantling barriers to access.

45. Many non-state actors in Rwanda adopt the social model of disability as the basis for disability rights advocacy conducted by Persons with Disabilities organisations (DPO).

46. Handicap International for example, considers disability as the reduction in social participation that occurs when a person with a deficiency meets a non-adapted environment. This social model of disability perceives disability as a non-rigid but evolving status, a situation that varies according to the context and that may be modified.³⁷ Persons with Disabilities frequently reported that it was not their lack of ability but the attitudes of others towards their disability that prevented them from leading full and active lives, equal with others.

47. The conceptualization of “long-term” in Presidential Order No. 31/01 of 25 August 2003 on compensation for personal injury due to accidents caused by motor vehicles, implies the permanent incapacity which is defined in Article 2, as “any physical, psycho-sensory or intellectual disability resulting from an infringement on the body of the victim taken as a whole”. Doctors determine the consolidation date with the possibility, where necessary, of seeking a second medical opinion. The “long-term” concept is used in the social model of disability defined above when applied to sustainable development of adaptation of the environment to the needs of Persons with Disabilities and sustainable development of capacity to include all persons with disabilities.

48. The concept of “communication and language” is defined as a set of means that facilitate exchange and interactions between people. As for person with disabilities, it is a set of means that are adapted to their disability such as Braille writings, sign language, and software programmes that are used by Persons with Disabilities to facilitate their communication. Law No. 01/2007 of the 20th of January 2007 relating to protection of Persons with Disabilities in general, which indicates that gestures, Braille texts and other means that aid Persons with Disabilities in communication, where possible shall, be used in conferences and meetings, news reading and other public debates.³⁸ The Ministerial Order No. 1/09 MININFOR of the 10th of August 2009 determining modalities and facilities offered to Persons with Disabilities in the area of communication.

49. The concept of “discrimination based on disability”: the Constitution of the Republic of Rwanda prohibits any form of discrimination.

50. The Constitution of the Republic of Rwanda reaffirms the equality of all Rwandans in rights and duties and prohibits any form of discrimination based especially on physical or mental disability.³⁹ A number of laws refer to the same concept in the prevention and repression of discrimination against persons with disabilities: the law relating to protection of Persons with Disabilities in general, the law relating to the protection of Persons with

³⁶ Article 1: Purpose.

³⁷ Handicap International, Rwanda 2010 Activity Report.

³⁸ Article 26 of the Law No. 01/2007 of the 20th of January 2007 relating to protection of Persons with Disabilities in general.

³⁹ Article 11 of the Law No. 01/2007 of the 20th of January 2007 relating to protection of Persons with Disabilities in general.

Disabilities former war combatants, the law regulating labour; the law on prevention and punishment of gender-based violence.

51. The concept of “reasonable adaptation”: is defined as a set of adaptations necessary for and appropriate to the needs of Persons with Disabilities to ensure their enjoyment of their rights. These however may be realised at proportional costs, when necessary for their real and current needs, within the limits of available and affordable means; and this leads to budgetary limits often being cited as a challenge to achieving reasonable adaptations. Adaptation measures are needed to deal with attitudinal barriers (where people consider the disability and not the ability), environmental barriers (that restrict access) and institutional barriers (whose generic policy may fail to make reasonable adaptation to ensure full inclusion for Persons with Disabilities and their access to services on an equal basis with others).⁴⁰ Attitudes towards Persons with Disabilities are progressively shifting and Government leadership in these areas remains important. Current emphasis reflected in EDPRS2 key interventions⁴¹ reflect a willingness to do more.

52. The concept of “Universal design” was recognized in Rwanda for example through the National Social Protection Policy, 2005. This policy stresses that the designing of products, equipment, programmes and services must be user-friendly to all, including persons with disabilities, with certain subsequent specific adjustments for persons with disabilities. This concept is equally applied in other national programmes, especially in the education for all, universal access to essential drugs, universal social protection and inclusive schools.

Statistics and comparative data on the Protection of the Rights of Persons with Disabilities

53. Overall, 446,453 Persons with Disabilities aged five and above are living in Rwanda according to the 2012 Population and Housing Census, out of which 221,150 are male and 225,303 are female.⁴² There is only a small difference by gender, with a prevalence rate of 5.2% for males (aged five and above) and 4.8% for females. The share of Persons with a Disability is larger in rural areas than in urban areas at 5% and 3% respectively.⁴³ 229,198 households are headed by a Person with a Disability. The economic activity status of household heads with and without a disability reflects the results on employment in general, as 58% of household heads with a disability are currently employed compared to 85% of household heads without a disability. In households headed by a Person with a Disability, a larger number of dependents have to be supported by one working person than in households headed by a Person without a Disability. The economic dependency rates are 177 (i.e., 177 dependents per 100 employed persons) and 142 respectively.⁴⁴

⁴⁰ This situation was described as one where policy makes no distinctions over Persons with Disabilities so their automatic inclusion is an assumption, that is frequently contradicted by reality.

⁴¹ See Section A: para. 33.

⁴² <http://statistics.gov.rw/publications/rphc4-thematic-report-socio-economic-characteristics-persons-disabilities>.

⁴³ RPHC4 – Theme 13 – Socio-economic characteristics of persons with disabilities, xvii.

⁴⁴ RPHC4 – Theme 13 – Socio-economic characteristics of Persons with Disabilities, xviii.

Number of Persons with Disabilities and their percentage among the resident population aged 5 years and above (Prevalence of disabilities) by sex, province and area of residence

Province and area of residence	Total population (5 years and over)			Number of Persons with Disabilities (5 years and over)			Prevalence of disabilities (% of persons with this disability)		
	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes
Rwanda									
Urban	777,994	732,386	1,510,380	27,289	21,418	48,707	3.5	2.9	3.2
Rural	3,518,825	3,946,741	7,465,566	193,861	203,885	397,746	5.5	5.2	5.3
Total	4,296,819	4,679,127	8,975,946	221,150	225,303	446,453	5.2	4.8	5.0
Kigali City									
Urban	397,446	353,111	750,557	12,232	8,818	21,050	3.1	2.5	2.8
Rural	111,255	115,421	226,676	5,705	5,415	11,120	5.1	4.7	4.9
Total	508,701	468,532	977,233	17,937	14,233	32,170	3.5	3.0	3.3
South									
Urban	105,390	96,801	202,191	4,751	3,714	8,465	4.5	3.8	4.2
Rural	943,007	1,073,307	2,016,314	54,610	59,244	113,854	5.8	5.5	5.7
Total	1,048,397	1,170,108	2,218,505	59,361	62,958	122,319	5.7	5.4	5.5
West									
Urban	127,255	129,950	257,205	4,504	3,855	8,359	3.5	3.0	3.3
Rural	854,402	984,527	1,838,929	48,194	53,479	101,673	5.6	5.4	5.5
Total	981,657	1,114,477	2,096,134	52,698	57,334	110,032	5.4	5.1	5.3
North									
Urban	67,028	73,239	140,267	2,125	2,055	4,180	3.2	2.8	3.0
Rural	636,522	718,921	1,355,443	29,282	31,713	60,995	4.6	4.4	4.5
Total	703,550	792,160	1,495,710	31,407	33,768	65,175	4.5	4.3	4.4
East									
Urban	80,875	79,285	160,160	3,677	2,976	6,653	4.6	3.8	4.2
Rural	973,639	1,054,565	2,028,204	56,070	54,034	110,104	5.8	5.1	5.4
Total	1,054,514	1,133,850	2,188,364	59,747	57,010	116,757	5.7	5.0	5.3

Source: Fourth Rwanda Population and Housing Census 2012.

54. Since January 2014, The Government of Rwanda has begun the project on the categorization of Persons with Disabilities into basic categories based on the degree of disability.⁴⁵ This census and categorisation will enable better care and the elaboration of actions targeting the welfare and empowerment of Persons with Disabilities.

55. The priorities of Rwanda in the implementation of the Convention on the Rights of Persons with Disabilities are:

- Reduce poverty and increase material quality of life (Article 28)

⁴⁵ See Section X health for further detail.

- Increase access to quality education (Article 24)
- Increase access to quality and appropriate health promotion and treatment services (Article 25)
- Improve quality of information about disability, increase disability awareness, and promote positive social attitudes (Article 9)
- Increase active citizenship, ensure representation, and build a strong disability movement (Article 29)⁴⁶

Part C. Measures on the implementation of specific rights of the Convention realisation of specific rights and freedoms – articles 5, 8 to 30 of the Convention

Article 5: Right to equality and non-discrimination

56. The right to equality and non-discrimination of Persons with Disabilities are guaranteed by the Constitution (Article 11) and by various other laws, especially Law No. 01/2007 of 20 January 2007 relating to protection of Persons with Disabilities in general in Articles 18 and 27; and Law No. 13/2009 of 27 May 2009 regulating labour in Rwanda, in Articles 12, 97 and 98.

57. The Law relating to protection of Persons with Disabilities in general punishes any form of discrimination or any form of violence against a person with disabilities, with the heaviest penalty among the penalties provided by the Penal Code and those of the special laws relating to this crime. The Law regulating labour in Rwanda in Articles 97 and 98 prohibits any discrimination against Persons with Disabilities at the workplace and grants working conditions to the worker with disabilities suitable to their disability, where these are necessary due to the work to be performed.

58. Since 1994 Rwanda has made considerable progress in the promotion of the rights of Persons with Disabilities by formulating policies and programmes aimed at the involvement of Persons with Disabilities in the national development process. The National Development Plan has spoken consistently about the need for sector strategies to be inclusive of vulnerable groups, including Persons with Disabilities. In 2003, a National Policy on Disability was adopted.

59. The government has since realised that these laws alone are not adequate and has created the National Council of Persons with Disabilities (NCPD) to advocate for Persons with Disabilities and monitor the implementation of the laws which protect them.⁴⁷ Individuals seek intervention from NCPD staff where they feel they have been discriminated against. The Government of Rwanda has established clear interview protocols and appeals mechanisms for public sector recruitment processes and works actively at District level to promote and monitor labour law. More generally, redress has to be sought through mainstream administrative or judicial channels, which may sometimes mean that a Person with Disability cannot afford to pursue their appeal.

60. The Government of Rwanda is responsible for sensitising institutions about the ratification of international conventions relating to human rights and integrating them into existing Rwanda law. The NCHR is also responsible for urging Government institutions to

⁴⁶ National Programme of the promotion of the rights of Persons with Disabilities, 2010–2019.

⁴⁷ NCPD Strategic Plan July 2013-June 2018; Strategic Objectives.

submit the reports related to international treaties on human rights in a timely fashion. The NCHR especially ensures the respect of the rights of Persons with Disabilities⁴⁸ by training duty bearers and carrying out field investigations on violations of the rights of Persons with Disabilities. These investigations involve assessing the level of understanding of the rights of Persons with Disabilities amongst duty bearers, staff at centres for children with disabilities, and parents, and the extent to which these are respected.

61. In its training sessions, the NCHR sensitises the population on the right of all to equality and non-discrimination, including programming on international conventions and Rwandan laws on the prevention and punishment of discrimination and sectarianism. In different sessions in 2011–2012, the NCHR sensitised 206 student members of human rights clubs in secondary schools and higher learning institutions.⁴⁹

62. NCHR annually reports upon surveys it has conducted on the rights of Persons with Disabilities in general and on the rights of children with disabilities respectively⁵⁰ and the Commission notes that at times “poor families with children with disabilities are considered like others with no special consideration. Government programmes aimed at fighting poverty do not reach these families in a special way because in general the local authorities do not know the rights of children with disabilities”.⁵¹

63. This recognises that although there are laws protecting the rights of Persons with Disabilities and several steps have been taken in their implementation, there is still need for further effort to ensure that rights are better protected.

64. Specifically, the National Programme on the Promotion of the Rights of Persons with Disabilities (2010–2019) was created in 2009 by the Government of Rwanda in consultation with the former National Steering Committee on the African Decade of Persons with Disabilities together with organisations of Persons with Disabilities.⁵² This details extra efforts to reinforce actions initiated in 2003 to promote inclusive education, accessibility, full participation of Persons with Disabilities, and integration of ex-combatants with disabilities. To date the plan is overseen by the Ministry of Local Government (MINALOC), which has the responsibility to mainstream disability in the plans and programmes of all ministries via the NCPD.

Article 8: Awareness-raising

65. Disability is still regarded by many members of society in Rwanda as a burden, a misfortune, or even a curse. The impact upon household poverty where one member has a disability is verifiable and there remain social barriers and some belief in myths attributing disability to punishment or witchcraft.⁵³ Some children, especially those with multiple disabilities or learning disabilities, may be concealed, and not brought for registration or medical consultations. Persons with Disabilities may be subjected to physical violence or psychological abuse due to negative attitudes and ignorance. Persons with Disabilities report that attitudes are changing slowly but much more could be done.⁵⁴ The language used

⁴⁸ Law No. 19/2013 of 25/03/2013 Determining missions, organization and functioning of the National Commission for Human Rights.

⁴⁹ NCHR Annual report, July 2011 to June 2012 (<http://www.cndp.org.rw>).

⁵⁰ NCHR Annual report July 2010-June 2011 and July 2011–June 2012, website <http://www.cndp.org.rw>.

⁵¹ NCHR Annual report, July 2011 to June 2012 (<http://www.cndp.org.rw>) P75.

⁵² Also called the National Programme on Disability.

⁵³ EICV3 (2010/11).

⁵⁴ Stakeholders consulted in elaboration of MIGEPROF Family Policy (section 4.1 57).

now reflects the identity of the person with a disability, and disability equality training for frontline staff could provide a useful next step in dismantling social barriers that make it harder for Persons with Disabilities to fully access public services.

66. Mobilisation and sensitisation activities are coordinated at the national level by MINALOC, in partnership with other public institutions and organisations of Persons with Disabilities.

67. Numerous international awareness days are celebrated, principally the International Day of Persons with Disabilities;⁵⁵ World Mental Health Day; White Cane Day; International Day of Deaf Persons; International Day of Deaf/Blind Persons.⁵⁶

68. Other events around child rights and women's rights may also be pertinent to the rights of women and children with disabilities; in some years a specific theme of disability has been adopted.

69. In Rwanda, the International Day of Persons with Disabilities is celebrated annually on December 3rd. It is marked by several sensitisation activities throughout the country. During celebrations of IDPD in Rwanda 2013, a theatre troupe of Persons with Disabilities enacted scenes depicting the attitudinal barriers and the organisational barriers PWD still frequently encounter and reported "the attitudes of Persons without Disabilities are often harder to change than Persons with Disabilities."⁵⁷ Despite positive advances in recent years, much can still be done to empower Persons with Disabilities and fully include them in Rwanda's development, and to dismantle organisational and attitudinal barriers to this.

70. Other state and non-state actors have run awareness raising campaigns: for example the National Commission for Children annually organises a Children's Summit with one representative from each district of children with disabilities advocating their views. The Government of Rwanda produces a weekly TV programme to advocate for child rights with an emphasis on the most vulnerable children including children with disabilities. The Government of Rwanda repeatedly screened on Rwanda TV for one month a film documenting access. Over a three-year period, Handicap International ran a weekly radio programme and live phone-in (Radio 10) to discuss rights of Persons with Disabilities and to handle questions from callers. NUDOR ran a seven-month programme⁵⁸ from June 2013 on local radio (Voice of Africa) with a focus on education for children with disabilities. The Government of Rwanda through the NCPD has televised a documentary film dealing with physical access to public buildings. NCPD has contracted with a local NGO advocating PWDs and two local radio stations⁵⁹ to produce regular radio talks and broadcast them on weekly basis to advocate for issues related to Persons with Disabilities.⁶⁰

71. In addition, NCPD was granted a fifteen-minute TV show and radio talk show by the Rwanda Broadcasting Agency (RBA), as a mechanism to advocate for Persons with Disabilities. This has the potential to further improve community attitudes towards disability.

72. The National Commission for Human Rights also carries out sensitisation and training activities: it has translated the CRPD and its Optional Protocol into Kinyarwanda, and has disseminated this treaties and national laws on the protection of Persons with Disabilities. Each year, the NCHR sensitises and trains different groups of Rwandan

⁵⁵ Organised since 2001 by the Rwandan Disability Movement (FACHR then FENAPH).

⁵⁶ Celebrated for the first time in 2013.

⁵⁷ Interview with one member of community theatre troupe.

⁵⁸ Supported by MyRight and DPOD (Disabled Peoples' Organisations of Denmark).

⁵⁹ New Millenium Production.

⁶⁰ MoU Signed between NCPD and ROJAPED Solidarity, Radio Inkoramutima and Radio One.

population on the rights of persons with disabilities, including different local authorities at grassroots levels. For instance, in 2011–2012, in different sessions; the NCHR has trained 295 Executive Secretaries of Sectors, on human rights in general and on the rights of Persons with Disabilities in particular.⁶¹

73. Public awareness raising about epilepsy and mental health disorders takes the form of a weekly 20-minute radio broadcast⁶² overseen by the Mental Health Unit of Rwanda Biomedical Centre, Ministry of Health. During the Genocide against the Tutsi memorial period annually (April to July) public sessions and discussions are organised and free telephone hotline provides advice to patients or family members. These public sessions seek to improve understanding and treatment for persons exhibiting symptoms of trauma or post-traumatic stress.

74. NGO or DPO working on disability commonly include training and sensitisation activities; some have been specifically related to promoting awareness of the CRPD amongst PWD,⁶³ others deal more broadly with rights of citizens, women and local community development processes. UPHLS has worked consistently and closely with RBC/MOH several of the associations of Persons with Disabilities carry out sensitisation/mobilisation and training activities on rights of Persons with Disabilities (AGHR; RUB; and RNUD all use decentralised groups of members as a means to communicating these).

Article 9: Accessibility

75. This article has to do with Persons with Disabilities having access on an equal basis with others to facilities provided to the public, in both rural and urban areas. It is closely linked to awareness raising as this has specifically to do with attitudinal barriers (stigma and ignorance).

76. It would be a misconception to assume that when “policy does not discriminate all people are included”⁶⁴; Government recognises that special measures may be necessary to ensure Persons with Disabilities can access all services and facilities in equal measure with others.

77. Challenges have to do with environmental barriers; attitudinal or communication barriers and some institutional barriers. Access to transportation, access to the physical environment and information/communication are all equally important components if a person with a disability is to access public services. Legal protections provide for free access to public transport; information in suitable forms including Braille or signed communication; and dispensation from fees in cases of extreme poverty, in line with poverty related protection programmes offered to the whole population. The Government of Rwanda recognises that there are still some challenges to be addressed in closing the gap between intent and impact for persons with disabilities.

78. The Government of Rwanda is committed to providing training to stakeholders on accessibility issues facing Persons with Disabilities; one key strategic objective of the Government of Rwanda through the NCPD is to sensitise Rwandan society in general and different institutions in particular to respect the rights of Persons with Disabilities. This role is represented by the Mainstreaming function of the Council.

⁶¹ NCHR Annual report July 2010–June 2011 and July 2011–June 2012, (<http://www.cndp.org.rw>).

⁶² Twite ku buzima bwo mu mutwe.

⁶³ Handicap International in the period up to 2011; Community Rehabilitation Programme.

⁶⁴ Legal Advisor in Government Ministry: this view was also expressed by some others.

79. Measures to train stakeholders on accessibility issues facing Persons with Disabilities include NCPD Health worker training organized for 600 staff in 30 districts over 3 days Dec 2013; funded by the Government of Rwanda through annual budget. Training on Customer Care for 300 Community Health Workers in Gicumbi District funded by World Vision Rwanda. Other training reported included sessions organized by NGO (on access to HIV information for example). There is still much that could be done to include disability awareness sensitization for all frontline staff in the State sector (teachers, police, medical staff, SACCO banks etc.) as a standard part of their qualifying training. This would be a mainstreamed approach to attitudinal barriers, targeting service delivery staff and civil servants at source.

80. Accessibility of Persons with Disabilities in an unfriendly built environment is now organised in line with Ministerial Order No. 01/CAB-M/09 of 27 July 2009 determining the modalities of constructing buildings providing various public services to ease the access of persons with disabilities, and requires facilities for persons with disabilities.

81. Article 3 of this Order stipulates that “whether public or private any building meant to provide services to the public, must provide passages ways for Persons with Disabilities so as to have easy access to services being offered”. Article 4 of the same Order defines standards for special parking space for vehicles of Persons with Disabilities.

82. The Government of Rwanda dictates standards,⁶⁵ requires building plans to demonstrate access and conducts inspections.⁶⁶ This reflects occupancy of existing and multi-storey buildings however much more could be done on low-cost measures (demarcated parking spaces; visual environment; customer services for Persons with Disabilities). Compliance mechanisms are clear, district engineers in charge of urbanisation and infrastructure are trained annually and required to enforce building control regulations. Non-compliance does not often appear to generate any sanction.

83. Article 26 of the Law relating to protection of Persons with Disabilities in general, requires where possible the use of gestures, Braille writings and other ways that aid Persons with Disabilities in communication, in conferences and meetings, news reading and other public debates. An accessibility manual guide was produced by University of Rwanda College of Education.⁶⁷ This manual sets out different technologies destined to assist Persons with Disabilities. It is addressed to various stakeholders involved in the protection of the rights of Persons with Disabilities and defines accessibility in its various components; namely:

- Accessibility to build and converted environment
- The capacity to move freely
- Access to information and communication

84. The news televised on the National Television is also interpreted in sign language. The Government of Rwanda through MIGEPROF and NCPD produce a weekly television programme to promote the right of Persons with Disabilities to communication through the use of the sign language. The groups or individuals requiring interpretation must frequently organize their own signing; this places emphasis on family members to become involved in health consultations, legal matters and other interactions with authorities. Allocations to district budgets for disability inclusion could be used to address such local access issues.

⁶⁵ RHA Facilities for Persons with Disabilities in Public Buildings Ref: Rwanda Building Control Regulations March 2009 and revised in 2013.

⁶⁶ Inspection on Government Buildings in City of Kigali February 2013.

⁶⁷ As reported July 2011; document not seen by 2013 team.

Article 10: Right to life

85. The Constitution, in Article 12, guarantees the right to life and the right to physical and mental integrity. It stipulates that “Every person has right to life. No person shall be arbitrary deprived of life”. Similarly, the law relating to rights and protection of the child against violence, in Article 4, guarantees the right of the child to life since its conception. Abortion is legal in Rwanda only if medically necessary to preserve the life of the mother; there is no in-utero screening for abnormality.

86. Although cultural beliefs and myths may suggest that it is a misfortune to have a child or family member with disability, Rwandan culture also places strong value on the value of the child that must live and benefit from the care of its family; and if someone acquired Disabilities they must be cared for. Responses to Persons with Disabilities have been lead in Rwanda firstly by the church and mission groups, then by associations and organisations of Persons with Disabilities and currently Government programmes strive to meet the needs of all citizens including persons with disabilities.

Article 11: Situations of risk and humanitarian emergencies

87. The Government of Rwanda created the Ministry of Disaster Management and Refugee Affairs (MIDIMAR) in 2010 to create disaster reduction and response (DRR) capacity within administrative sectors. DRR is taken as a cross-cutting theme in EDPRS2 meaning that since Rwanda is not exempt from the increased incidence of extreme weather related to climate change the county should prepare. These preparations should be found in several key sectors (agriculture, infrastructure, urbanisation, health and social protection).

88. Local committees are trained and charged with identifying the most vulnerable in advance of situations of man-made or natural disasters; frequently existing women’s groups and youth groups are targets for awareness raising. Since October 2012 some DRR clubs in secondary schools have been created and the subject discussed in formal class settings. National level awareness raising was conducted during the International Day for DRR (14 December 2013) taking as its theme “Attention to Persons with Disabilities”. This highlighted greater risk to Persons with Disabilities in a crisis situation and the increased risk of disability caused through an emergency.

89. The law relating to protection of Persons with Disabilities in general, in Article 9, provides for specific assistance and rescue of Persons with Disabilities in times of conflict, accidents and other disasters. The Ministerial Order (No. 04/09 of 30 March 2009) on the application of this provision establishes Government responsibilities depending on the category of each disability and in particular to remind and sensitize organizations which give assistance in such periods to provide emergency aid and help those with disabilities; to evacuate Persons with Disabilities from areas of conflict or other disasters; and pay particular attention to Persons with Disabilities giving attention to any special needs this group may have.

90. The Government of Rwanda engages with UN agencies and District DRR Committees to influence preparedness. Frequently the Rwandan Red Cross with its extensive network of community volunteers are “first responders” in an emergency and an MOU links the two institutions (an example of State – Non-State partnership). This has allowed GOR to access funds, currently directed, at strengthening Red Cross teams at Sector and District levels in the NW through training and equipment.⁶⁸ Volunteers live in

⁶⁸ Interview Rwanda Red Cross focal point.

the communities and are expected to know families where there are people with disabilities, making sure that they are assisted in case of any emergency. It seems this is being made more explicit in training and in any future crisis more would be done to focus on disability sensitive responses.

91. In Rwanda it would also seem possible to consider how well the needs of Persons with Disabilities have been handled within and since the great humanitarian emergency that flowed from the Genocide against the Tutsi, mass exodus of people, and rehabilitation of survivors. The work of the RDRC has addressed many cases of ex-combatants with Disabilities arising out of this emergency.

Article 12: Equal recognition before the law

92. Article 11 of the Constitution guarantees the right of all Rwandans to equality before and under the law. Law No. 42/1988 of 27 October 1988 instituting Preliminary Title of Book One of the Civil Code, in its Article 15, guarantees the right to legal personality from the time of birth until death.

93. The law relating to protection of Persons with Disabilities in Rwanda, in its Articles 3 and 7, guarantees the right to any person with disabilities to enjoy equal rights as those of other persons before the Law and has the right to give opinions on issues of national interest and on any issue concerning him or her in particular and he or she shall contribute to national development depending on his or her disabilities.

Article 13: Access to justice

94. The Constitution, in Article 18, reaffirms the right to defence among the fundamental human rights. The person with disabilities enjoys the right to legal assistance. This assistance is provided for by Law No. 20/01/2007 on the Protection of the Rights of Persons with Disabilities in general, in Article 8.

95. Similarly, the new Criminal Procedure Code No. 30/2013 of 24 May 2013, in Article 26, provides that the interrogation of suspects by a Judicial Police Officer is conducted in a language the suspect comprehends. The provision guarantees the rights of all the suspects including Persons with Disabilities although the means to do this is not always available.⁶⁹

96. The Rwanda Bar Association provides legal assistance to persons with inadequate income, including Persons with Disabilities who may find themselves in such a situation. Lawyers assigned for this mission are paid from the judicial assistance fund managed by the Bar Council. In every district there are two MAJ (Maison d'Accès à la Justice) judicial access points, put in place⁷⁰ to offer legal assistance to the poor citizens, especially those living in the countryside. These MAJ operate a pro-bono system able to provide free legal assistance to vulnerable groups and indigent citizens, including Persons with Disabilities although this may still be insufficient to address all cases.

⁶⁹ For example sign language interpretation for persons with hearing impairment; impartial communication or interrogation in judicial matters involving Persons with intellectual Disabilities may be impossible where family members are relied upon for communications.

⁷⁰ Piloted in Nyanza 2008 and established in all Districts.

Article 14: Liberty and security of the persons

97. The Constitution, in Articles 10, 11 and 16, reaffirms the inviolability of the human being, freedom and equality of all Rwandans before the law. Persons with Disabilities like all other members of the population enjoy these same rights and constitutional freedoms. Competent organs protect their security along with that of other citizens.

98. The Community Policing Programme initiated by the Rwanda National Police over a decade ago is used to involve communities in preventing and fighting crime, transforming the police from a reactive role towards prevention via police-public partnership. This approach has facilitated the involvement of the population in solving localised problems and the prevention of violence committed against vulnerable groups, including persons with disabilities. Rwanda National Police has initiated a training programme providing sign and communication skills to Police Officers at police stations and posts to enable communication with Persons with Disabilities (hearing impaired) that require their services. Rwanda National Police collaborates closely with the ISANGE One Stop Centre a referral centre where a comprehensive package of support for victims of gender-based violence was trialled. This initiative has subsequently been replicated in District Hospitals. These services, that include post exposure prophylaxis to protect against HIV, cater for the needs of all victims of sexual abuse including persons with disabilities.

Article 15: Freedom from torture or cruel, inhuman or degrading treatment or punishments

99. The Constitution, in Article 15, stipulates that “no person shall be subjected to torture, cruel or inhuman or degrading treatment; and no person may be subjected to experimentation without his/her informed consent” These principles are enshrined in fundamental human rights and the rights of citizens. Rwanda has acceded to the Universal Declaration of Human Rights that declares that in Article 5 that “No one shall be subjected to torture, to cruel, inhuman or degrading treatment or punishment” and is also a signatory to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.

100. Law No. 01/2007 of 20 January 2007 relating to protection of Persons with Disabilities in general in Article 3 stipulates, “Every Person with Disability shall be entitled to equal rights with others persons before the law. He or she shall be respected and be entitled to human dignity”. It is widely agreed that the mere deprivation of liberty can be harmful to the physical and mental well-being of persons with disabilities. However, those persons need additional care and protection; they benefit from a specific attention from prison’s administration authorities in order to ensure that the mere fact of their detention does not impact negatively on their life expectancy, dignity and capability to reintegrate in the society after their release.

Article 16: Freedom from exploitation, violence and abuse

101. The Law No. 54/2011 of 14 December 2011 relating to rights and protection of the child against violence, in Article 15, protects the child with disabilities in a special manner by guaranteeing his or her right to medical care, education and social welfare. Law No. 59/2008 of 10 September 2008 on prevention and punishment of gender-based violence, in Article 33, provides for severe punishments for persons found guilty of sexual violence against persons with disabilities.

102. The Ministerial Order No. 03/09 of 30 March 2009 establishing modalities for regular monitoring of activities of tutors and centres that cater for the Persons with Disabilities, especially provides for prior control of services that will be provided to Persons with Disabilities and a monitoring system of the activities of guardians and centres. This Order in Article 8 regulates the monitoring of activities of tutors for Persons with Disabilities and the centres: the person in charge of Social Affairs at the Sector level shall monitor the behaviour of the tutors for Persons with Disabilities and the centres visiting each tutor of Persons with Disabilities once a quarter.

103. The National Women's Council, which is represented at the village level (*Umudugudu*), is actively involved in the prevention and the fight against gender-based violence. It regularly carries out sensitization on different forms of violence and provides assistance to victims seeking justice and is equally in a position to defend and protect women with disabilities from violence and abuse. Anti GBV committees have been established at the level of each Administrative Sector in the entire national territory and anti GBV clubs created in secondary schools of the country. These committees and clubs participate in the sensitization of the public on the negative effects of violence in general, and on violence committed against vulnerable persons including persons with disabilities.

Article 17: Protecting the integrity of the person

104. The Constitution, in Article 10, stipulates that the human person is sacred and inviolable and that the State of Rwanda and all public institutions have the absolute obligation to ensure the respect, the protection and the defence of the person.

105. In the same vein, Article 27 of the law relating to protection of Persons with Disabilities in general stipulates that any person found guilty of any form of violence against a person with disabilities shall be punished by the most severe sentence provided for by the provisions of the penal Code and specific laws related to that offence.

106. Article 10 of the same law assigns the National Commission for Human Rights the mandate of monitoring the respect of the rights of people with disabilities.

Article 18: Liberty of movement and nationality

107. The Constitution, in Articles 7 and 23, reaffirms the right to nationality for every Rwandan and the freedom of movement. It prohibits arbitrary deprivation of the nationality and accepts dual citizenship. Organic Law No. 30/2008 of 25 July 2008 relating to Rwandan nationality, in Articles 3, 6, 14 and 19 accepts dual nationality and reaffirms the right to the Rwandan nationality to any person whose one of the parents is Rwandan and prohibits the loss or the Rwandan nationality of origin, while the same Organic Law accepts acquisition of Rwandan Nationality by naturalisation for all foreigners, Persons with Disabilities inclusive, who fulfil all requirements to apply for Rwandan Nationality.⁷¹

108. Under the terms of Law No. 54/2011 of 14 December 2011 relating to rights and protection of the child against violence, in Article 5, it is stipulated that every child has the right to a name and registration at its birth.

⁷¹ www.migration.gov.rw/fileadmin/templates/PDF_files/Organic_Law_relating_to_Rwandan_Nationality-2.pdf.

Article 19: Living independently and being included in the community

109. The Law relating to protection of Persons with Disabilities in general (Article 5) guarantees to the person with disabilities the right to live in a family under the same conditions as other members of the family and any orphan with disabilities who cannot live on his/her own has the right to be protected by a guardian, an adoptive parent or be referred to a child care centre or other association that cares for children. Article 4 of the same law states that these centres or associations, which cater for Persons with Disabilities, are obliged to fulfil conditions to enable the Persons with Disabilities to have a decent living in matters relating to security and health. The centres and associations are required to have sufficient capacity and equipment in order to be able to integrate Persons with Disabilities into the social life and to have a role in the development process.

110. Currently and historically, the Government of Rwanda encourages the creation of associations/cooperatives and centres that care for and support Persons with Disabilities by other interested parties.

111. It has signed agreements with a certain number of international associations involved in this sector.⁷² All these actors provide services aimed at the integration of Persons with Disabilities into the community.

112. In addition Persons with Disabilities and their parents and other allies have created a number of Rwandan civil society organisations. These associations provide support and services to their members as well as increasing understanding of the rights of Persons with Disabilities and taking legitimate actions to pursue these. Persons with Disabilities Organisations (DPOs) engage in pressing for the full inclusion of Persons with Disabilities in society and development processes and the effective implementation of policies designed to deliver this. DPOs and associations of Persons with Disabilities are governed in their activities by the general regulatory frameworks for either civil society groups or co-operatives.

113. Many of the major associations Persons with Disabilities are indicated in Appendix 3. Several of these DPOs and associations receive grant funding from development partners and some subsidies from the State.⁷³

114. Under state programmes, as is the case for other vulnerable groups, Persons with Disabilities benefit from the programme that promotes access to free shelter. Dispensations from Mutual Health Insurance fees and education related fees are available to very poor families including those with persons with disabilities.

Article 20: Personal mobility

115. Rehabilitation services are provided in a number of specialist reference units producing mobility appliances where needed: these are the Rwandan Military Hospital, University Hospital Huye, Gihundwe District Hospital, Ruhengeri District Hospital, Kigali Central Hospital with other non-state providers in Mulindi Japan; Gatagara and Gikondo centres, and Gahini. There is no white cane production, nor wheelchair production in Rwanda; all orthopaedic workshops listed above provide prosthetic and orthotic appliances.

⁷² These non-state actors are coordinated via the Disability Forum convened quarterly and on a needs basis by NCPD. Members include: ADRA, JICA, MyRight, NUDOR, VSO and others.

⁷³ For example the National Paralympic Committee has an office within the National Stadium and receives an annual grant towards its operations from MINISPOC.

Since 2013 the costs of appliances has been standardised across all State institutions and modalities for provision via health insurance schemes set out.

116. For those with visual impairment mobility training (white cane orientation skills) is included in Activities for Daily Living (ADL) training; the only current provider for adults being the Centre run by Rwanda Union of the Blind at Masaka. This centre is subcontracted by JICA to deliver such training to demobilised ex-combatants with visual impairment. Special schools for students with visual impairment (Gatagara, Gahini) teach orientation and independent mobility skills to visually impaired pupils. The Government of Rwanda gives periodic support to centres for children with disabilities for the acquisition of white walking sticks to ensure the security of the children with poor sight in their movement.⁷⁴

117. The Minister of Health is charged to establish the degree of disability for all persons; see Section Health Article 25 below for detail. Once this categorisation is achieved it will entitle all Persons with Disabilities in certain categories, to additional financial support.

118. Provision of artificial limbs and hearing aids will be free of charge for those who shall be classified in Categories 1 and 2 (ranging from 70% to 100%); and these people will be allowed to travel free on government-owned public vehicles (although in many areas such vehicles are not numerous).

119. There remain considerable challenges to making public transport accessible and affordable to persons with disabilities. Public transport is frequently still difficult to access for many persons with disability though the Government seeks to ensure that all public transport buses newly acquired are equipped with facilities such as appropriate seats, and doors so as to ensure easy access. The same measure shall be applied to public service vehicles operated by private transporters⁷⁵ and shall benefit not only Persons with Disabilities but also small children, pregnant women, older people and those with temporary injury. Cards were (not yet) issued to Persons with Disabilities due to the categorization process that is not yet under way,⁷⁶ which would authorise them to use public transport free of charge. Many public parking lots have very few spaces specifically reserved for Persons with Disabilities to enable them park their cars and/or special vehicles and others occupy these without sanction.

Article 21: Freedom of expression and opinion, and access to information

120. The right of all Rwandans to expression is generally protected (under Articles 33–36) of the Constitution. Freedom of thought and opinion; freedom of speech and information; freedom of association and peaceful assembly are all guaranteed under conditions determined by the law. The Constitution does not yet recognise Rwanda Sign Language as a national language to be accepted as a means of communication.

121. The Law relating to protection of Persons with Disabilities in general specifically protects (Article 7) the rights of Persons with Disabilities to the freedom of expression, to a role in the community and national development and the right to be consulted and give views on activities and services accorded to them. The committee structures put in place through the election of representatives amongst Persons with Disabilities with the creation

⁷⁴ Estimated at 1.500,000 Rwf in 2010 MIGEPROF, Report, July 2011.

⁷⁵ *Idem*.

⁷⁶ Ministerial Order No. 20/18 of 27/7/2009 determining the modalities of classifying Persons with Disabilities into basic categories based on the degree of disability.

of NCPD⁷⁷ are intended to coordinate and communicate the views and needs of Persons with Disabilities from cell up to national level. At District level, District Development priorities and plans should respond to these. Despite improvements, noted particularly in Districts with effective NCPD District committee members *and* an effective District Disability Coordinator employed by the local authority, Government is aware of the challenges which remain in terms of fully involving Persons with Disabilities in all relevant programmes.

122. The form in which it is delivered may restrict access to information. People who are deaf report mixed messages about Umuganda programmes – they are physically able to complete the community works elements but have no insight into the information delivered or discussed by the community after this. For many other Persons with Disabilities if they are unable to move to the site of any public meeting they do not receive information given there or participate fully in community processes.⁷⁸ In many services it remains the case that service providers frequently rely upon family members of those persons with visual or hearing impairments or intellectual disability to intervene and interpret the communication of information. This necessarily intrudes into confidentiality of consultations around health, sexual health and judicial matters.

123. The challenge is to scale up the discrete sign language training events that have mainly been organised with the Rwanda National Union of the Deaf (RNUD) to date.

124. A National Centre for Training in Sign Language could support far wider training and application of sign language, not just amongst specified interpreters but also providing a basic level for those in service delivery roles and for parents and family members.

125. Similarly the current capacity to source or produce materials in braille is extremely low. Although the University of Rwanda College of Education runs a Braille training programme for Persons with Disabilities and teachers for special needs education, the provision of braille texts for students, lecture notes, information sheets for public service users, signage for guidance within public buildings are all insufficient and much more remains to be done.

126. In the domain of press modalities the provision of facilities to Persons with Disabilities in the area of communication are defined by the Ministerial Order No. 01/09/MININFOR of 10 August 2009 on modalities for facilitating Persons with Disabilities in the area of communication. According to its Article 2 “The audio-visual press, both public and private, provides for modalities for interpretation, within the limits of available resources, to Persons with Disabilities to enable them to follow their programmes”.

127. In practice this means that available resources are often cited as the reason for limited access. It is a positive development that Rwandan national television provides simultaneous sign language interpretation during the main nightly news broadcasts. MIGEPROF and NCPD produce and broadcast a televised weekly programme during which sign language experts interpret for persons with hearing disability and the content of the programme itself provides strong messages, good at raising awareness about the rights of children with disabilities among parents and the public.

⁷⁷ Elections of March 2012.

⁷⁸ For example the Ubudehe process used to categorise extremely poor households.

Article 22: Respect for privacy

128. The Constitution, in Article 22, prohibits any arbitrary interference in the private life of a person, his or her family, his or her home or his or her correspondence. In the same vein, confidentiality of personal information and information related to health and re-adaptation of Persons with Disabilities is protected for the same reason. Persons with Disabilities in Rwanda enjoy the same protection although in practice this privacy may be compromised currently.⁷⁹ A draft Mental Health Law⁸⁰ guarantees patient rights including the right to have this information in the patients preferred language, and to have access to an independent advocacy service.

Article 23: Respect for home and the family

129. Free consent of any person of the female or male sex to contract marriage is a right recognized by the Constitution of the Republic of Rwanda (Article 26). Article 27 of the Constitution stipulates that: “The family, which is the natural foundation of Rwandan society, is protected by the State”.

130. Current policy⁸¹ deals with the support and promotion of the family giving importance to childrearing, educating and socialising children. Important for the Family Policy is the finding through the national EDPRS review exercise that there is significant room for improvement in mainstreaming disability. The current policy contains strong analysis of the significance of disability within a family noting that when a person with disability heads a family there is higher incidence of poverty. Poverty incidence in households headed by a person with disability is 50%, which is clear six percentage points higher than the national average.⁸²

131. The implementation strategy for this policy makes clear the intent to mainstream disability in collaboration with disability organisations and families. It is only recently finalised and adopted but presents clear opportunities for collaboration between MIGEPROF and NCPD.

Article 24: Education

132. UNCRPD expects that all Persons with Disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the community in which they live. The Constitution, in Article 40, stipulates that primary education is free and compulsory in public schools and obliges the State to take measures to facilitate the education of persons with disabilities. Similarly, Law No. 01/2007 of 20 January 2007 relating to protection of Persons with Disabilities in general, in its Article 11, states the right for Persons with Disabilities to an appropriate education with respect to the nature of his or her disability. Special conditions are allowed for those who cannot sit exams under the same conditions as others.

133. Law No. 12/2001 of 28 April 2001 relating to rights and protection of the child against violence, in Article 15, stipulates that the child with disabilities shall benefit from

⁷⁹ This was most frequently raised with relevance to cases of violence including rape directed towards persons with hearing or intellectual disabilities and the pursuit and investigation of such cases.

⁸⁰ First produced November 2013 and expected to pass into Law during 2014.

⁸¹ Family Policy MIGEPROF October 2013.

⁸² EICV3 Thematic Report Social Protection, cited also in Family Policy & Strategic Plan.

special protection, access to medical care, education and social welfare. This protection is the responsibility of both the parents and the Ministry having the Social Affairs in its attributions.⁸³

134. Education Policy expects that all children should benefit from the twelve Years Basic Education programme and Special Education and Inclusive Education is an integral part of the approved Education Sector Plan (2013–17) although a recent revision of Inclusive Education policy⁸⁴ has yet to be approved. Rwanda reports⁸⁵ excellent progress towards MDG targets for primary school net enrolment (96.5%)⁸⁶ and strong primary school completion rates (138.5%).⁸⁷

135. MINEDUC EMIS data of July 2012 show that 32,241 children and young persons with disabilities, 14,733 (or 46%) being female, were enrolled in Rwandan schools. This figure is composed from data showing totals of 1,259 children with disabilities (671 boys; 588 girls) pre-primary pupils; 23,863 primary pupils are children with disabilities (13,070 boys; 10,793 girls); 6,153 secondary students (3,141 boys; 3,012 girls) and 966 students with disabilities in Vocational Training Centres (626 male; 340 female).

136. Children with special education needs (SEN) are a broad group encompassing all learners with a temporary or permanent need for adjusted education such as girls, orphans, students from the poorest families and including children with disabilities. A Task Force for the Development of Inclusive Education in Rwanda (TFDIER) is charged with addressing the challenges of addressing all learners' needs within mainstream schools, oversight of training for sufficient teachers with specialist skills, and developing and providing suitable learning materials.

137. There remains a gap between policy commitments and the practice of inclusion in the Rwandan Education sector and Government recognises that much remains to be done, not only to improve enrolment of students with disabilities into education but in providing meaningful learning, and progression to a similar standard as other students. MINEDUC works with Non State partners towards this goal. UNICEF has supported the education of children with disability since 2006 through establishment of Child Friendly Schools;⁸⁸ 5,595 children with disabilities have been enrolled in these.⁸⁹

138. Access to school has been most often considered in terms of physical access providing ramps and adapted toilets;⁹⁰ less frequently resource rooms are created with adapted learner materials or learning support equipment for children with visual, auditory or intellectual disabilities. Generally all public schools have inadequate infrastructure and are inadequately resourced.⁹¹

139. The non-state sector or parents associations run special schools⁹² catering exclusively for the learning of children with disabilities; the collective Tubakunde brings together 38 centres/organisations run by parents of children with intellectual disabilities. Others for visually impaired or hearing-impaired pupils are run by church organisations.

⁸³ In Rwanda the Ministry of Local Government and Community Development MINALOC.

⁸⁴ July 2013.

⁸⁵ NISR MDG Country Report 2007.

⁸⁶ http://www.mineduc.gov.rw/fileadmin/user_upload/2013_Rwanda_Education_Statistics.pdf.

⁸⁷ http://www.mineduc.gov.rw/fileadmin/user_upload/2013_Rwanda_Education_Statistics.pdf.

⁸⁸ 52 such schools have been created in 17/30 Districts.

⁸⁹ MINALOC progress report on implementation of National Programme of PWD 2010 cited in UNCRPD Initial report August 2011.

⁹⁰ 241 access ramps have been built in 64 schools clustered around Child Friendly Schools.

⁹¹ Special Education and Inclusive Education Strategic Plan (2011–2015).

⁹² Some 50 special centres / schools have been developed.

Government contributes some staff salaries. UNICEF has also funded partnerships with the Adventist Development and Relief Agency (ADRA) and Handicap International to work on the training of teachers, parents and District Education Officers to be able to include children with disabilities in public schools, respond to their SEN in specialized schools and promote inclusive education. Since 2011 Wur Fir⁹³ Rwanda has offered assessment and structured learning activities to 48 children with intellectual disabilities.

140. Collaboration with Government bodies⁹⁴ ensures learning is institutionalised about the specialised education and personal development services offered in the Gisagara unit and feasibility of transition for some students to mainstream primary schools. Rwanda National Union of the Deaf (RNUD) carries out research activities on the Rwandan sign language, has produced a dictionary of the Rwandan Sign language and are the only permanent resource point in country able to provide sign language training for teachers, educators, parents and students.

141. Recently Handicap International concluded a four-year phase of Inclusive Education pilot⁹⁵ realised in collaboration with MINEDUC. This delivered short term training on inclusive education methods to 1,496 teachers from 36 model primary schools that in turn shared learning with 122 cluster schools in five districts. 4,078 children with disabilities (2,266 boys; 1,812 girls) benefited; the social integration of these students, changed behaviours and acceptance by their peers without disabilities is promising and the approach provides an excellent model for further scale up by Government, whereby the NCPD has trained 420 teachers in inclusive education to provide practical skills on how to teach pupils with special needs.

142. Currently Handicap International is testing and developing standards and tools of inclusive education in 24 pilot primary schools in Kamonyi and Rubavu districts in collaboration with the Rwanda Education Board. This exemplifies the type of agency led, time bound inclusive education project where short term teacher training inputs have been shown to improve learning conditions and inclusion for students with disabilities. There is a recognised need to develop this type of pilot into a sector wide systemic response and to adequately resource this. The Government of Rwanda through the NCPD has trained 210 teachers in Inclusive Education, in order to provide with them enough knowledge and skills to teach pupils with different learning difficulties.

143. The University of Rwanda (UR) College of Education is the main provider of BA and diploma courses in special needs and inclusive education (SNIE) and a distance education programme providing additional learning for more than 2,000 teachers/year. All trainees graduating from teacher training colleges take one module in SNIE; and since 2011, 150 teachers have been offered continuing professional development courses in special education. Additionally 50 students are following a Masters' programme and 65 postgraduate diplomas outside Rwanda. A school of inclusive education is envisaged at UR College of Education from 2014.

144. The Rwanda Education Board has launched⁹⁶ a comprehensive review and development of the curriculum for all levels (pre-primary to secondary) to take into account the needs of different pupil groups including those with special educational needs and disabilities.

⁹³ German NGO working with children with intellectual disabilities.

⁹⁴ Kigali Institute of Education and the National Curriculum Development Authority.

⁹⁵ EU funded.

⁹⁶ November 2013.

145. The Government of Rwanda has deliberately invested from 2008 in the University of Rwanda College of Education and five other public institutions allowing Students with Disabilities to progress to tertiary level education for the first time. There has been some adjustment of the teaching and learning environment to allow this, including the practice of accepting learners with various educational needs at lower pass marks and non-standardised marking of exam scripts. Currently one private university (Adventist University of Central Africa) admits learners with SEN under Government Scholarship.

Article 25: Health

Legal protections

146. Under the terms of UNCRPD Persons with Disabilities may expect to access the same range of free or affordable health care programmes as others including sexual and reproductive health (SRH) services and early intervention and any specific health services needed because of their disability.

147. The law on the protection of the rights of Persons with Disabilities in general (Law No. 1/2007) recognizes the right of a person with disability to health, especially access to medical care, including access to artificial limbs and hearing aids, in case of need (Article 14). This law obliges centres or associations that provide care to Persons with Disabilities to have a trauma and psychosocial counselling service in the area of mental health (Article 16).

148. Health care in Rwanda is paid for via a variety of health insurance schemes. The Law No. 65/2007 of 31 December 2007 on the Creation, Organisation, and Administration and Management of Health insurance regimes in Rwanda in Article 30 reaffirms the rights of access to artificial limbs and hearing aids. Persons with Disabilities who are not capable of paying their insurance subscriptions are eligible to benefit from subsidy paid by the State.

149. The Law No. 02/2007 of 20 January 2007 relating to the protection of former war combatants with Disabilities in Articles 8 and 10 defines specific rights to former war combatants with Disabilities, especially the right to free medical care and health insurance fees paid by the Government. Ex-combatants already benefit from these measures.

150. The Ministerial order No. 20/18 of 27 July 2009 determines modalities to classify other Persons with Disabilities into categories according to their degree of disability. This categorisation shall among other benefits enable subsidized medical care to be paid for by the Government – Categories 1 and 2 shall receive 100% subsidy, Categories 3 and 4 50% subsidy. This process has been under discussion and preparation for some time. Currently a multidisciplinary medical team is appointed to train other health professionals to conduct the categorisation exercise, with a pilot expected from January 2014 followed by national rollout using trained teams at every district hospital.⁹⁷ This major exercise is a challenge remaining in the way of the most needy Persons with Disabilities accessing affordable health care.

Policy Implementation

151. The Third Health Sector Strategic Plan (HSSPIII, July 2012–June 2018) reflects overall progress in assisted births at health facilities, in the proportion of children fully immunised, and Early Childhood Development (ECD) interventions which may detect

⁹⁷ Information provided by MOH Disability Desk Officer.

developmental disabilities, all contributing to prevention measures. The plan recognises that strong emphasis should still be given to prevention and care of trauma and disabilities that add a real financial burden on the health sector and the country.⁹⁸ The plan in its focus on disability prioritises strategies to reduce morbidity and mortality leading to disabilities, and to improve access to health services for people with disabilities. During the lifetime of the plan MOH will also raise awareness and demand among communities and families for healthy child development and support measures to expand equity-focused, targeted services for children in marginalised groups (including Persons with Disabilities). Targeted planning and management of SGBV among vulnerable groups, including children and Persons with Disabilities is a desirable response to heightened gender based vulnerabilities among Persons with Disabilities.

152. The Health Sector Policy of 2014 main interventions will be to reduce mortality and morbidity due to events causing disabilities, preventive interventions must be strengthened, such as protective legislation against traffic accidents (use of seat belts, policing) and guidelines disseminated on handling of trauma, disabilities, and rehabilitation. Access to health services for people with disabilities is progressively being improved (physical accessibility, adapted services depending on the type of disability). Protocols for disability-friendly services will be established in all hospitals and consultation services will be available at health centre level for this vulnerable group.⁹⁹

153. Many others structures, policies and programmes within MOH contribute to this attention to disability: there is for example a final draft of the Non-Communicable Diseases Policy available, a National Strategic Plan for the Prevention of Avoidable Blindness just completed (2007–2013), a recently created Injury and Disability Unit and disability related criteria integrated into the Health MIS system.

154. Although the MOH has overall stewardship on health issues, 15 other government ministries implement activities that either directly or indirectly impact the health of the Rwandan people.

155. The health sector is also supported by development partners (DPs), faith-based organisations (FBOs), non-governmental organisations (NGOs), professional associations, and regulatory bodies. Managing such multi-faceted partnerships is challenging but good results have been demonstrated.¹⁰⁰

Prevention and moderation of the impact of disability

156. Rwanda has a limited but increasing number of health specialists able to manage disabling health conditions and in some cases provide timely treatment that prevents disability. These are audiologists (6); ophthalmologists (14)¹⁰¹; plastic surgeons (1).¹⁰² Training has been provided to staff at every health post in basic eye care, first level healthcare providers are able to perform basic diagnosis, eye care and referrals; annual campaigns are run on prevention of blindness, combining community cataract screenings and operations.

⁹⁸ The main causes of disability that informants in 2002 Census cited were: Genocide against the Tutsi and war, poverty (malnutrition, lack of adequate and appropriate medical care), ignorance (use of traditional healers, poor care in pregnancy), disease, accidents, and congenital causes.

⁹⁹ http://www.moh.gov.rw/fileadmin/templates/policies/Health_Sector_Policy_2014.pdf.

¹⁰⁰ See progress to MDG health targets Section A (11).

¹⁰¹ Another 6 training externally.

¹⁰² Another 2 training externally.

157. The University of Rwanda trains ophthalmic technicians and physiotherapists; a new curriculum was developed in 2012 to include rehabilitation services and orthopaedic training; in 2008, a paediatric surgical centre was opened in Kigali City. The Government of Rwanda plans to have trained all surgeons in Provincial Hospitals in specific disabling health conditions, which are present in Rwanda, such as club foot, fistula, spina bifida. Rwanda receives medical missions from international experts to help treat such cases and build local skills and capacity.

158. Currently Rwanda has no comprehensive CBR programme addressing social and physical rehabilitation. Several small projects run by INGO and with some DPO partners touch on elements of CBR: mobilization and identification of persons with disabilities; creation of associations including parent groups; information and advocacy to access services (including health care, mental health services, treatment subsequent to gender based violence and rape).¹⁰³ Handicap International and Inkuru Nziza have both worked with families to address some medical/developmental consequences of disability (no specific results about reach and impact in the period 2009–2013 have been identified). Inkuru Nziza Gikondo Centre known as the Community-based Re-adaptation Centre (CBRC/RBC), mainly funded by the Christian Blind Mission (CBM), provides support and re-adaptation for the young people with disabilities.

159. The Centre specialises in supporting persons who have lost limbs or with fractured bones, those suffering from conditions such as cerebral paralysis, epilepsy, Down syndrome, arthritis, clubfoot, and Blount disease. Since 1997, all District and referral hospitals are equipped with a service for the rehabilitation of People with Disabilities.

HIV Prevention among Persons with Disabilities

160. HIV prevalence in Rwanda is now 3.0% in the general population yet 3.5% among Persons with Disabilities who still find social and institutional barriers in accessing HIV prevention and other sexual and reproductive health services. Policy provides for all HIV positive children needing medical care to access this. The annual National Paediatric Conference on Children and HIV places emphasis on the protection of orphans and other vulnerable children including children with disabilities.

161. Work to deliver accessible HIV services is principally achieved via a technical partnership with a civil society organisation, UPHLS.¹⁰⁴ Some other NGO projects also contribute: for example during 2008–2013 HIV Prevention, Care and Support services were accessed by a total of 96,083 Persons with Disabilities in 16 districts of Rwanda through US funding.¹⁰⁵ Of this total, 2,090 persons (61% women) accessed care and support with the greater number involved in prevention activities.

162. UPHLS is funded by Global Fund as a sub-recipient of Rwanda Biomedical Centre to ensure that HIV services are disability-inclusive and does this by delivering disability inclusion training to healthcare providers; piloting accessible IEC materials,¹⁰⁶ and inputting this experience in the MOH/IEC Committee; conducting outreach targeting Persons with Disabilities via peer educators; promoting VCT. Some other project interventions have been implemented by local organizations of persons with disabilities¹⁰⁷

¹⁰³ For example from 2008–2012 Handicap International ran a community-based reintegration and functional rehabilitation project in five districts impacting 28,912 people with disabilities.

¹⁰⁴ Umbrella of organisations of Persons with Disabilities combating HIV/AIDS.

¹⁰⁵ Pilot HIV & Disability project funded by Health Resources and Services Administration with Handicap International.

¹⁰⁶ IEC materials adapted to 4 types of disabilities were developed and approved by CNLS.

¹⁰⁷ Several supported by Handicap International; also VSO; AGHR by Global Fund.

to enable them engage in activities related to the prevention of HIV/AIDS and other sexually-transmitted infections.

Mental Health and Intellectual Disabilities

163. There is widespread misunderstanding within the community about the nature of mental disorders and this remains a barrier to accessing appropriate treatment. Intellectual disabilities and learning disorders can be effectively managed, especially when detected early on, to allow the child to develop intellectually and socially. Mental health conditions are treated more appropriately, where possible at community level, with Community Health Workers providing the first point of detection of mental health problems.

164. Since 1995 with the introduction of the National Mental Health Policy mental health practice has moved significantly from the asylum psychiatry model in operation pre-Genocide against the Tutsi. The Genocide itself of course fuelled huge changes in mental illness within the population. A nationwide study¹⁰⁸ conducted in 2009 found almost 29% of the population suffered from post-traumatic stress disorder (PTSD) with almost 54% of this group also suffering from depression.

165. During the annual memorial period (April-July) there is still a surge in incidence of episodes of trauma an indication of underlying mental health issues still present in those who have apparently made visible progress back towards social inclusion.

166. Mental health services are delivered as outlined by the policy framework. Two national level referral services¹⁰⁹ form the apex of a mental health system that is being rapidly decentralised, principally through investing progressively in mental health training for staff at all levels. Six operational centres are distributed across all regions and at district level hospitals are integrating mental health in their services. Public awareness is a continuous IEC activity achieved in part via a weekly radio broadcast on mental health issues.¹¹⁰ A permanent toll-free hotline can provides guidance when anyone shows symptoms of mental health problems; family members normally use this. Additional awareness events are organised during memorial period.

167. Mental Health Law clarifying patients' rights and caregivers' rights and responsibilities (both families and service structures) was drafted in November 2013 and is expected to pass into Law during 2014.

168. The continuous growth in number of consultations for mental health problems is an indicator of improved health seeking behaviour and improved access to services since the launch of the Mutuelle de Santé health insurance scheme.¹¹¹ The first cause of consultations at the SCPS National referral centre is epilepsy accounting for 52% of all consultations.¹¹² At Ndera hospital during the same period epilepsy was the cause for 33% of all consultations. In Rwanda 5% of the population is found to have epilepsy¹¹³ and this has socio-economic implications for sufferers and for the education and development of children with epilepsy.

169. Parents' organisations grouped in the collective Tubakunde form a civil society action, in response to the low level of services provided for children with intellectual

¹⁰⁸ Munyandamutsa N. & Mahoro-Nkubamugisha P. (2009) Prevalence of PTSD in the Rwandan population; cited in National Mental Health Policy.

¹⁰⁹ Ndera Psychiatric Hospital and the Psychological Counseling Centre (SCPS).

¹¹⁰ *Twitehuze mabungu*.

¹¹¹ National Mental Health Policy.

¹¹² From June 2010 to June 2011.

¹¹³ Study commissioned by MOH 2005; cited in National Mental Health Policy.

disabilities. They act as a lobby group and work closely with the National Children's Commission and MINEDUC to address the specific needs of these children. The actions of two other groups: the League for the Fight against Epilepsy¹¹⁴ and the National Organisation of Users and Survivors of Psychiatry in Rwanda (NOUSPR) are not established.

Article 26: Habilitation and rehabilitation

170. This article refers to the measures to be taken to enable Persons with Disabilities to live with maximum independence and full inclusion in all aspects of life. It therefore has to do with technical aids, which may moderate the impact of disability (such as white canes, wheelchairs and other appliances) and also the social attitudes of peers who may regard disability over ability and tend to exclude persons with disabilities.

171. The Law No. 02/2007 of 20 January 2007 on the protection of ex-combatants with disabilities defines specific rights of ex-combatants with disabilities in the area of adaptation and rehabilitation. The Law No. 01/2007 of January 2007 on the protection of Persons with Disabilities in general defines rights to medical care including prosthesis and orthotics (appliances and/or tricycles) where required.

172. Ministerial Order No. 20/18 of 27/07/2009 determining the modalities of facilitating Persons with Disabilities access to medical care explains¹¹⁵ that the Government shall be entirely responsible for the care (in respect of prosthetics and orthotics) of those Persons with Disabilities whose degree of disability is between 70% and 100%. Others shall be covered by their mutual health insurance (as outlined above) and a revised standardised tariff has been approved by relevant health institutions and disseminated in public orthopaedic workshops. The application of this order is currently stalled, for Persons with Disabilities not yet categorised to qualify for Government support; individuals must obtain suitable mobility appliances according to their means or may fashion rudimentary crutches and tricycles.

173. The habilitation and rehabilitation of Persons with Disabilities in Rwanda are carried out both by institutional and private actors¹¹⁶ with emphasis on medical appliances. For example since 2012, World Vision and Handicap International developed a joint Wheel chair service provision programme that distributed 973 wheelchairs. Other Development partners¹¹⁷ have directly and via INGO partnerships provided support for the efforts of the country in activities related to the adaptation and re-adaptation of Persons with Disabilities through both financial support and capacity building. There is no national CBR programme however.

174. At the local level, district development plans include a social component for the empowerment of vulnerable groups, including persons with disabilities. There are limited funds held at district level for inclusion – these could sensibly be spent upon many varied things signed communication for meetings, appliances for individuals, support with fee waivers for poor families with Persons with Disabilities and are quickly exhausted. At the national level, the budget for the initiatives aimed at integrating vulnerable groups,

¹¹⁴ Based at Ndera Hospital.

¹¹⁵ Article 3.

¹¹⁶ Principally Central Hospital Kigali; University Central Hospital Huye; Gihundwe District Hospital; Ruhengeri District Hospital; Rilima Hospital Bugesera; centres at Gatagara, Gikondo, Gahini and Mulindi Japan Centre.

¹¹⁷ JICA, EU, DFID.

including Persons with Disabilities for the period 2011–2016 is estimated at more than 179 Billion Rwandan Francs.¹¹⁸

175. Since its inception in 1997 the Rwanda Demobilization and Reintegration Commission (RDRC) has screened 2,892 ex-combatants with disabilities¹¹⁹ and allocated them to categories according to the extent of their disability. 34,959 grants have been made under the Vulnerability Support Window to ex-combatants judged by the Local Authority to be in financial need.

176. 2,773 receive medical rehabilitation including treatment through health insurance mutual schemes and medical appliances where needed. 2,759 ex-combatants with Disabilities receive monthly subsistence allowances; 587 ex-combatants with Disabilities received housing. 3,361 ex-combatants have received formal education or vocational training. JICA has specifically contributed to the vocational training of those with disabilities (1,742 persons¹²⁰) in existing VTC centres rendered barrier free, and to the rehabilitation of ex-combatants with Disabilities with start up grants and equipment on graduation.¹²¹

177. The Government of Rwanda through the RDRC has created an internal system of a Mental Health Rehabilitation Unit and social workers to deal with mental health issues (aggression, substance abuse, passivity and withdrawal). There is also collaboration with Ministry of Health (MOH) and joint training in Psychosocial First Aid provided to staff at sector and district levels.

Article 27: Work and Employment

178. The largest part (69%)¹²² of household revenue across the entire Rwandan population is generated through agriculture or non-farm self-employment.

179. Among the poorest households, levels of reliance upon agriculture over non-farm employment are greater than in the general population.¹²³

180. The means by which productive rural activity for many in Rwanda is organised is defined by the Cooperatives Policy,¹²⁴ which frames the context for these self-help organisations, organised by the community in a business-like fashion that are seen to be the key to rural economic development.

181. Rwanda Cooperative Agency¹²⁵ supports cooperative development, registration and access to finance employing staff to provincial level to do so. Cooperative development staff are also locally employed by districts and mandated to work with all cooperatives, applying the principle that cooperatives are open to universal membership.

182. Since no specific complaint has been referred to RCA it is assumed that Persons with Disabilities are able to access these.

¹¹⁸ MINALOC, National Social Protection Strategy 2011–2016.

¹¹⁹ Data published on public website records cumulative results.

¹²⁰ There is no disaggregation of this figure by gender; nor disability type since RDRC uses categories of extent of disability.

¹²¹ 3 consecutive programmes from 2006–2013.

¹²² EICV3 Poverty report February 2012.

¹²³ ie. Among poor households a greater part of income is derived from agriculture (6.7% points more) with less coming from non-farm self-employment (7.3% points less).

¹²⁴ National Policy on the Promotion of Cooperatives RCA, March 2006.

¹²⁵ Established under MINICOM 2008.

183. Indeed Persons with Disabilities Organisations (DPO) report that their members are more likely to be found in informal associations where social gains may be more substantial than the volume of capital invested and economic gains. These associations are nevertheless an important precursor to full cooperatives and the small-scale savings activities that frequently take place within such associations must be encouraged. This strategy is in line with a lower risk approach¹²⁶ to begin a cooperative from start-up capital mobilised within the group rather than with a bank loan. In addition the Business Development Fund¹²⁷ can be accessed to guarantee up to 75% of start-up capital and is open and eligible to persons with disabilities.

184. MIFOTRA reports knowledge of 105 production co-operatives registered by Persons with Disabilities and largely effective. At registration cooperative members are registered both by gender and disability and this data held at district level. Since 2012/13 specific attention has been directed at encouraging Persons with Disabilities to join or to create cooperatives and there are now increased numbers of mixed cooperatives including persons with disabilities.¹²⁸

185. According to RPHC4, the labour force participation rate (LFPR) of Persons with Disabilities is, at 56%, lower than that of the population without a disability (75%). Persons facing difficulties learning/concentrating and difficulties speaking have the lowest LFPRs of 43% and 48% respectively. Self-employment is more common among the population with a disability (77% of the currently employed) than among currently employed persons without a disability (68%). Also, 13% are employees compared to 18% among the population without a disability. The main occupation and the main industry among employed Persons with Disabilities is agriculture, forestry or fishing. It should be noted that discrepancies between persons with and without disabilities are partly due to the age structure, as a larger proportion of the elderly work in self-employment and agriculture. These results suggest that Persons with Disabilities face certain obstacles in terms of their participation in family formation, education, and employment.¹²⁹

186. In the case of formal waged employment Law No. 01/2007 of the 20th of January 2007 on the protection of Persons with Disabilities in general, in its Articles 18, 19 and 20 prohibits any discrimination against Persons with Disabilities in the area of employment. On the contrary, a person with disabilities is given priority in case of equal professional competence or equal marks obtained in recruitment interview for employment. Persons with Disabilities shall benefit in general from favourable working conditions depending on the state of his/her disability.

187. In addition, the Law No. 13/2009 of 27 May 2009 governing the Labour Code in Rwanda, also prohibits¹³⁰ any discrimination on the workplace against Persons with Disabilities and obliges employers to ensure favourable working conditions at the place of work depending on the state of the person with disability. It also prescribes modalities to be followed where, following illness or accident, a person now with disability may need to be redeployed within their service.

188. The Ministerial Order No. 03/19.19 of 27 July 2009 determining modalities of facilitating access to employment by persons with disabilities, in its Articles 4 and 5 stipulates that on completion of their studies or professional training, Persons with

¹²⁶ Endorsed by RCA.

¹²⁷ Established 2011.

¹²⁸ Reported by several District Disability Co-ordinators at Huye, International Day of Disability events December 2013.

¹²⁹ RPHC4 – Theme 13 – Socio-economic characteristics of persons with disabilities, xviii.

¹³⁰ Article 98.

Disabilities shall be entered on the Labour Market Information System (LMIS) a register intended to facilitate job seeking or creating self-employment. This system is not yet well developed. Since May 2012 an Employment Services Centre has been created in Kigali City and it is envisaged this will host the LMIS component, pilot the system which if successful would be replicated in other provinces.

189. The same Ministerial Order states that employers, who shall have given employment to Persons with Disabilities to a level of at least 5% of their employees, shall be given awards by Ministry of Public Service and Labour. This has occurred in 2012 and 2013 with awards sponsored by JICA awarded to qualifying employers; in 2013 these were largely District administrations with a significant proportion of employees being persons with disabilities.

190. The Government of Rwanda through the Ministry of Public Service and Labour (MIFOTRA) monitors application of Labour Law conducting meetings in districts with employers (Public and private companies) to explain the implications of each new Ministerial Order as they are passed and to explain existing instruments. A weekly radio programme¹³¹ is also broadcast updating both employees and employers on legal rights and responsibilities.

191. MIFOTRA collaborates with the Workforce Development Authority (WDA) in particular to monitor employment of vocational training graduates with disabilities (a number of 2,525 are identified) and a tracer study is to be commissioned. As for the reintegration of former war combatants, Rwanda Demobilization and Reintegration Commission has since 2005 trained demobilized ex-soldiers with disabilities in the practice of various trades such as plumbing, masonry, tile laying, tailoring and agriculture. 1,742 Persons with Disabilities have been trained.¹³² Ex-trainees are encouraged to form cooperatives on graduation integrating with general community members; findings of a final evaluation¹³³ show 92% of ex-trainees have joined cooperatives with 85% creating their own source of income using start up materials provided.

192. MIFOTRA also collaborates with NCPD to facilitate and coordinate activities relating to employment of Persons with Disabilities. In particular an independent panel within the Public Service Commission monitors recruitment for positions in public bodies and transparent processes exist to guard against discrimination. Government recognises that these still present barriers for deaf candidates and reasonable accommodation measures should be taken.

193. The national employment policy includes specific programmes in favour of Persons with Disabilities among which are the following:¹³⁴

- Support programmes to Persons with Disabilities including their specialised training and micro finance (in place via BDF)
- Programmes aimed at encouraging Persons with Disabilities to form associations and cooperatives and engage in income generating activities; (mandate of RCA staff)
- A series of promotional measures aimed at employing Persons with Disabilities in the public and private sector

¹³¹ Indashyikirwa ku murimo – Excellence in Workplans.

¹³² As reported in Section Habilitation and rehabilitation above (51).

¹³³ Final Evaluation Report Ex-Combatants and Other Persons with Disabilities (ECOPD – JICA) Project October 2013.

¹³⁴ MIFOTRA, National employment Policy, December 2007.

- A series of measures aimed at creating a user-friendly and favourable working environment for persons with disabilities. (partially addressed via RHA Building regulations and control of these but social barriers to communication and information provision not yet addressed)

194. Data from the EICV3 does not adequately inform understanding of how Persons with Disabilities are employed or gain income; it does however illustrate that households with a Person with Disabilities are found more frequently in the two poorest quintiles of the population.

195. To address this gap MIFOTRA has negotiated additional questions already included within the survey in use for EICV4; this analysis has the potential to inform strategies to address employment and self-employment for persons with disabilities.

196. Meanwhile several associations involved in the rights of Persons with Disabilities (the membership based organisations of Persons with Disabilities, DPO) receive financial support from the Government of Rwanda and its development partners so as to promote entrepreneurship adapted to Persons with Disabilities through the creation of income generating micro-projects. The reach of these organisations is generally numerically limited¹³⁵ although some of the groups supported have made impressive progress in terms of their social and economic standing. This provides a model, which could be brought to scale in Government programming; the RCA and NCPD strategies are highly relevant to this.

Article 28: Adequate standard of living and social protection

197. The basic report on well-being in Rwanda the third Household Survey (EICV3) finds that 45% of households live below the poverty line. Poverty is both a cause and consequence of disability and there is a significantly higher poverty index amongst households headed by a person with disabilities. Many Persons with Disabilities depend upon family members for social and material support; where this is the case this compromises their right to live independently and exposes them and the family to economic hardship.

198. The right to an adequate standard of living in Rwanda has its foundation in the general principles of the Constitution (Article 9) in which the State commits itself to building a State committed to promoting social welfare and establishing appropriate mechanisms for ensuring social justice. Law No. 02/2007 further protects the rights of ex-combatants with disabilities and those in 1st and the 2nd categories receive free shelter and monthly allowances. There is no similar entitlement for other Persons with Disabilities and no specific article in Law No. 01/2007 specifying social protection measures. Rather Persons with Disabilities shall be entitled to equal rights under the law and have the right to live in the family in the same condition as others.¹³⁶

199. Persons with Disabilities in general therefore are entitled, on the same conditions as other poor households, to access broader social protection mechanisms or poverty-linked grants or other material support. In Rwanda the improvement of the living conditions of poor and vulnerable persons in general is achieved through the following programmes:

- **Umuganda:** On the last Saturday of each month and on other specific occasions all community members engage in this Rwandan tradition of collective work whose

¹³⁵ Current membership is detailed in Appendix 3.

¹³⁶ Article 5.

objective is to implement community projects and local improvements.¹³⁷ Families of Persons with Disabilities may be selected as beneficiaries of works carried out in form of “Umuganda”.

- **Ubudehe:** is an ethos founded on solidarity values in the Rwandan traditional society. Households in each community collectively recognise the poorest households amongst them and in open village forum “rank” all households into one of four poverty-related categories. On this basis the poorest households qualify to access benefits from the range of social protection mechanisms available – the first being access to so-called “Ubudehe funds” for micro-projects.
- **Vision 2020 Umurenge Programme (VUP):** is a national social protection programme whose objective is to reduce extreme poverty allowing families to move up and out of the poorest categories determined by the Ubudehe process. The programme provides support via three mechanisms: Direct Support provides cash grants to the heads of extremely poor (indigent) households for a minimum of 12 months; Public Works offers the chance of 3–9 months employment for adults from very poor households who are selected for work schemes; Financial Services are a low interest credit system that allows individuals or groups where a significant proportion of the members are the very poorest, to take a loan and invest in selected business activities. Among the programme’s beneficiaries are Persons with Disabilities particularly as recipients of Direct Support.
- **Labour Intensive Public Works (HIMO)** is a mechanism also used outside the context of VUP¹³⁸ and provides rural opportunities for employment, skills and wages that are expected to enable youth, poor families, and some Persons with Disabilities to earn monetary income in exchange for community work.
- **One Cow per Poor Family Programme – Girinka** is a Government distribution programme overseen by MINAGRI that provides livestock to poor families, including persons with disabilities, to fight against child malnutrition and to improve agricultural production by fertilising their fields. It has run since 2006 and to date has provided cows to over 177,200 families.¹³⁹
- **Membership of Mutual Health Insurance Schemes:** “Mutuelle de Sante” is a community-based health insurance scheme, subsidized by the Government. There is a sliding scale of tariffs charged at three rates according to the Ubudehe Category of the household. For the poorest categories of household (Ubudehe categories 1 & 2) Government pays fees on their behalf. This mechanism protects all poor households equally; those with Persons with Disabilities have the same access.
- **National Settlement Programme:** As part of the national home building programme whereby Rwandans have been settled into villages (Umudugudu), special provision for vulnerable groups was made allowing persons with disabilities, widows, orphan heads of households and others to have access to decent shelter. From 2011 the Government of Rwanda launched a campaign to improve the quality of rural housing: known as *Bye Bye Nyakatsi*¹⁴⁰ this provided free individual

¹³⁷ Community assets such as roads, bridges, schools & clinics may be maintained; woodlots planted; or individual assets restored/repared, for example rebuilding the home of an older person or tilling the land of a family affected by HIV.

¹³⁸ Since this currently (May 2013) covers only 180 of Rwanda’s 416 administrative sectors.

¹³⁹ MINAGRI website January 2014.

¹⁴⁰ “See the End of Grass Thatched houses”.

rehousing to poor families. Persons with Disabilities have benefited along with others in these efforts to eradicate this kind of inappropriate shelter.

- **Umurenge SACCO:** These are savings and credit cooperatives established at every sector level. This helps bring financial services to rural users, improve financial literacy and facilitate access to capital and credit for savers from low-income groups (PWDs included). This is not a social protection mechanism but is a structure that may help households transition out of extreme poverty through economic activity fuelled by savings.

Article 29: Participation in political and public life

200. As the route to participation in National Children's Summit organized annually by the National Commission for Children elected structures of child representatives have been created and include a representative of children with disabilities at each level.

201. Persons with Disabilities have the right to vote and the right to be elected in administrative organs at the village, sector, district levels, as well as at the provincial and national levels. Relatively few are directly elected to mainstream administrative organs. Since election¹⁴¹ of representatives amongst Persons with Disabilities to the various levels of the National Council of Persons with Disabilities at District, Sector and Cell levels these representatives may interact directly with their equivalent administrative authorities (ie. Cell, Sector and District committees). Organised training sessions for members of the National Council of Persons with Disabilities are helping to build the capacity of representatives of Persons with Disabilities to do this effectively.

202. In Rwanda, the National Council of Persons with Disabilities, which is endowed with administrative autonomy and yet reports to MINALOC, is an organ enshrined in the Constitution of Rwanda. The assignments of this Council are among others the election of two candidates with disabilities to the Parliament Chamber, of which one Member of Parliament is elected to the National Parliament and another to the East African Legislative Assembly of the East African Community.

203. The current MP participates in the Social Affairs Commission and for example has lobbied for revisions to the draft law on pensions to accord a lower pensionable age (50-55yrs) to persons with disabilities; this in comparison to a general pensionable age of 60yrs.

204. The East African Legislative Assembly is developing a Disability Policy to be adopted by all member states and there is an expectation that measures such as establishing a Regional Disability Development Fund to address the special needs of Persons with Disabilities may help to spearhead economic empowerment. As yet the disability secretariat is funded by contributions from member States and no funds have been devolved to Rwanda through the Gender and Community Development budget line, so for the present this remains only of potential benefit.

205. National Children Forum structured from the village level up to the national level where an elected committee of six Children comprises a representative of children with disabilities at each level. This forum is a platform given to children by the Government of Rwanda to enable them express their views and opinions which are incorporated into plans of different actors in the Government at different levels.

¹⁴¹ Organised March 2012 by MINALOC in collaboration with National Electoral Commission.

Article 30: Participation in cultural life, recreation, leisure and sport

206. UNCRPD recognises the rights of Persons with Disabilities to take part on an equal basis with others in cultural life, in recreational, sporting and leisure activities. Children with disabilities should have equal access with others to play and recreation including within the school system. Importantly, Persons with Disabilities shall be entitled to recognition and support of their specific cultural and linguistic identity including sign languages and deaf culture.

207. In Rwanda the rights of Persons with Disabilities to participate in the cultural, artistic and intellectual life and recreational activities, leisure and sports are provided for by the Law No. 01/2007 of the 20 January 2007 on the protection of Persons with Disabilities in general, in Articles 21 and 23. This law obliges care centres for Persons with Disabilities and educational centres in general to provide for places reserved to cultural and sporting activities, and leisure as well as adequately trained trainers formed for the persons with disabilities. This law specifies that the person with disabilities shall benefit from facilities that enable him or her to exercise and participate in sporting activities, to watch games, movies, drama and other forms of leisure. NCPD organizes annual celebration of Christmas and the Eve of the New Year¹⁴² and gifts are presented to children.

208. The Ministerial Order No. 01/2009 of 19 June 2009 determines modalities to facilitate Persons with Disabilities to exercise and participate in cultural activities, leisure and sports.

209. This Order in its Article 2, determines modalities to facilitate Persons with Disabilities to exercise and to participate in cultural activities, leisure and sports. The same Order, in its Article 3 stipulates that Persons with Disabilities shall benefit from facilities that enable them to join international sporting associations. All means necessary to participate in international sporting activities (transport, meals, contributions...) shall be put at their disposal.

210. To date, NCPD has signed a MoU with RNUD and VSO to implement the Rwanda Sign Language Dictionary Project, a three year project which will end by having the National Sign language Dictionary. The Purpose of this Dictionary is to harmonize existing signs in order to have National Signs.. Much remains to be done to bring this to scale and to facilitate active participation of deaf persons in all walks of life.

211. There are similar examples of activities organised by Persons with Disabilities in cultural and sporting fields. Troupe des Handicapés Twuzuzanye (THT) has since 2009 run popular community theatre shows on the theme of disability, exclusion and stigma across 7 districts. These reflect and report changing attitudes in which the general public is more sympathetic towards persons with disabilities; Local Authorities more frequently state their intent to include Persons with Disabilities into national social protection programmes. It is recognised that this drama troupe is just one of many contributions to changes in public attitudes and in the attitudes of authorities with responsibilities towards Persons with Disabilities in their communities.

212. Another civil society actor arising from within Persons with Disabilities organisations has been the Rwanda National Paralympic Committee. Established in 2001 and operated by Persons with Disabilities themselves on a voluntary basis, NPC has subsequently had support from the Rwandan Ministry of Sports, and Culture. They currently use premises within the National Stadium and receive an annual grant. NPC is member of the International Paralympic Committee (IPC) and the African Sports

¹⁴² From 2011 onwards it is celebrated with children with different disabilities.

Confederation of the Persons with Disabilities (ASCOD). The organisation firmly believes in the value of sport in building confidence and skills of players and as a tool for improving community bonds. Rwandan athletes with disabilities regularly participate in various competitions and there have been some brilliant performances. From as early as 2006, Rwandan athletes with disabilities represented the Afro-Arab Zone and won a bronze medal during the first World Sit Ball Cup organized in Kigali. Rwanda was represented in 3 sports (sitting volley ball, athletics and powerlifting) by a team of 14 athletes with disabilities at the London Paralympic Games (July 2012).

Part D. Specific situation of boys, girls and women with disabilities

Article 6: Women with Disabilities

213. Government recognizes that women and girls should enjoy equal rights as others and that special attention and measures have to be undertaken to achieve this equal empowerment and promotion of women and girls. So too, recognizing that women with disabilities are subject to multiple discrimination based on their disability and their gender, UNCRPD states that appropriate measures must be taken to ensure that women and girls with disabilities enjoy their full rights.

214. Historically in Rwanda it has been harder for girls and women with disabilities to advance through the education system, to marry and to inherit some assets such as land. Measures to ensure their full and equal enjoyment of rights are enshrined in numerous laws, most importantly: The Constitution of the Republic of Rwanda (Article 11) prohibits any discrimination based especially on sex and physical or mental disability. In the area of inheritance, non-discrimination between children of male sex and those of female sex was introduced in the Rwandan legislation by the Law No. 22/99 of 12 November 1999 governing matrimonial regimes, legs and inheritance. Girls and women with disabilities enjoy these same rights. In penal matters, the Law No. 59/2008 of 10 September 2008 governing the prevention and repression of gender-based violence provides for severe sanctions for violence against the people with disabilities.

215. Elected authorities at the village and Sector levels are responsible among other duties for preventing and denouncing various forms of violence committed against children and women; people found guilty of these offences are prosecuted. The application of these laws is moderated from community level via mediators (Abunzi), local authorities and the various levels of the justice (court) system. In addition, a service for the prosecution of violence committed against women and children provides for a specific and toll free telephone number for emergency calls to seek the intervention of the Police. There are six One Stop Centres offering integrated legal and medical services to victims of gender-based violence who present to these.

216. Rwanda has taken a strong lead on women in community structures and governance structures, in Parliament and in Ministries there is good representation of women. There is less clearly articulated focus on the additional and special needs of women with disabilities.

217. Some specific policies make mention of the need to include Persons with Disabilities including girls or women with disabilities.¹⁴³ It is more common to find that if

¹⁴³ For example MIGEPROF Family Policy (October 2013).

policy makes any reference to Persons with Disabilities it is without any gender disaggregation of specific and additional barriers facing women and girls with disabilities.

218. One of the challenges of incorporating an understanding of disability specific gender empowerment in Rwandan institutions (Ministries, parastatals, NGOs, private sector etc.) is lack of disability specific gender-mainstreaming knowledge. There has been considerable investment in training to increase staff skills in gender analysis, gender responsive planning and budgeting and some gender action plans have been developed. Similar guidelines, checklists and programming for disability specific gendered actions are currently lacking. The Gender Monitoring Office may play an advocacy and watchdog role guiding Government programmes towards greater attention to the full inclusion of women and girls with disabilities.

219. Women with disabilities report still facing stigma and distinction although though the social and physical barriers encountered differ in relation to the nature of their disability. Some women with physical disabilities felt that since barriers to women's access (in education, health and productive activity) were generally improving they also were able to benefit from this progress. Others with physical disabilities or visual or hearing impairments report they still face barriers of isolation, access to information and learning and full social inclusion. Generally Women with Disabilities report finding it difficult to get married. This stems from cultural attitudes to the physical work undertaken by women in households, fields and business activity, but is underscored by ignorance and myths that Women with Disabilities deliver Children with Disabilities. However their husbands seldom abandon women who become acquired Disabilities or who give birth to Children with Disabilities.¹⁴⁴

220. Sexual violence and abuse is a significant problem in Rwanda. Two in five women (41%) have suffered physical violence at some point since age 15; one in five women has ever experienced sexual violence.¹⁴⁵ Women with no education are twice as likely to have experienced physical violence as women with secondary or higher education.¹⁴⁶

221. In this context Women and girls with Disabilities are particularly vulnerable: they are more vulnerable to violence in the first place and subsequently cultural and social beliefs and norms in the family affect the treatment of both perpetrator and survivor of sexual and gender based violence (SGBV).¹⁴⁷ Participants in this study, with a range of impairments, identified force or lack of consent as characteristic of SGBV and knew that they were vulnerable because of impairments, gender and age, low self-esteem and poverty that puts Persons with Disabilities in vulnerable social and economic positions where they may be coerced or agree to sex for money.¹⁴⁸

222. Women especially those who have visual, hearing or mental/intellectual disabilities suffer additional injustice as they are unlikely to be able to communicate what has been done to them or identify their abuser. However cultural attitudes (denial of the act of rape when the victim is a person with disability for example) affect how the victim is treated and whether the perpetrator is apprehended and punished. Generally SGBV against minors

¹⁴⁴ DFID Knowledge and Research report Disability in Rwanda (2005).

¹⁴⁵ DHS 2010.

¹⁴⁶ Idem.

¹⁴⁷ Handicap International (Feb 2012) Assessment of factors of risk and vulnerability of women & men with disabilities to SGBV.

¹⁴⁸ Over a 12 month period June 2011-May 2012, 805 women with disabilities sought support from Handicap International; Mental Health and Sexual and Gender based violence programme – this serves as an indication of need for such support services.

receives more rigorous prosecution and greater penalty¹⁴⁹ that SGBV against women with disabilities. Data from One Stop Centres does not capture that the client may have a disability only those incidences where a disability results from the violence.¹⁵⁰

223. Access to sexual health information and services for girls and women with disabilities is a similar challenge. While there is no disaggregated data on teenage pregnancy in relation to disability, disability organisations have found this to be a particular problem and this is supported by the understanding of risk factors above. It is a major issue for girls with hearing impairment and also, to a lesser extent, for girls with visual impairment. Children with Disabilities have very poor access to sexual and reproductive health advice and are often targeted by men for abuse and exploitative sexual relationships because of their particular vulnerabilities.¹⁵¹

224. Communication issues may prevent clients with disabilities accessing a full range of services: to date many of the initiatives to address this have relied upon civil society organisations (DPO) for technical inputs – RNUD has taught Sign Language to the police, RNUD with UPHLS has trained health staff in the basic means to communicate with clients with hearing impairment presenting at hospitals.

225. Handicap International sensitized 1,223 children with disabilities (41% female) on children rights and on sexual violence.¹⁵² There remain challenges to scaling up national capacity and making all services accessible and this is clearly considered in the EDPRS2 priorities.

Article 7: Children with Disabilities

226. In Rwanda several legal provisions reaffirm the interests and rights of children. The Law No. 54/2011 of December 2011 related to the rights and protection of the child against violence stipulates that in all decisions interesting the child, its interest must prevail; the child has a right to freely express its opinion on any issue of its interest. A child with disabilities must be protected in a special way, for its medical care, its studies and its welfare and wellbeing. The state shall take all appropriate administrative, legal, social and educational measures, to strengthen the protection of any child against any form of violence, attack or physical or mental brutality, abandonment or lack of due care.

227. In the Integrated Child Rights Policy¹⁵³ the Government of Rwanda recognizes international instruments, which it has signed to promote and protect the rights of all children, including children with disabilities. However this makes specific reference only to the UN Resolution 48/96 on Standard Rules on the Equalization of Opportunities for Persons with Disabilities and it is recognised that measures designed to protect children with disabilities could be further improved by bringing this policy into line with the provisions of the UNCRPD.

228. Book One of the Civil Code obliges parents to declare the birth of the child within fifteen days (Articles 117 and 119) while the Penal Code provides for sanctions against people who do not respect this obligation (Article 253). The registration of births and

¹⁴⁹ The element of “circonstances aggravantes” automatically adds to the penalty for SGBV against a child.

¹⁵⁰ Interview with Women’s Empowerment specialist-MIGEPROF.

¹⁵¹ From Strategic Plan Family Policy MIGEPROF (2013).

¹⁵² Project in Rutsiro District Western Province Ubuntu Care: Confronting sexual violence against children with disabilities in Rwanda.

¹⁵³ MIGEPROF August 2011.

deaths, which used to be carried out by Districts has since 2006 been shifted to the administrative level of Sectors (ie. the service was brought closer to the people). An officer in charge of Civil Registration was recruited to keep the civil registry of births and deaths.

229. The Government takes measures to ensure that families do not hide any member of their family (that may be a person with disabilities) under the pretext of respect for private life.

230. Law No. 22/2011 established the National Commission for Children (NCC) charged with the promotion and protection of the rights of all children. It is implicit that the NCC will work towards respect for the rights of children as prescribed by Law No. 54/2011 relating to the rights and protection of the child. The law establishing this body makes no reference to any specific responsibilities with regard to safeguarding the rights of children with disabilities although it does require that in monitoring of impact there should be tracking of the responses for all children with special protection needs. The NCC is currently developing a National Strategic Plan and there is collaboration between the NCC, Associations of Parents (Collective Tubakunde) and centres providing care and rehabilitation to children with disabilities. Annually the National Children's Summit is organised during which children's representatives are able to present their views on issues affecting all children; 30 children with disabilities participated in the 8th National Children's Summit.

231. Education including physical education, orientation and mobility skills training and sign language communication training, is fundamental to the life chances of a child born with or acquiring a disability. It is through NCC that earmarked transfers to some centres catering for the needs of children with disabilities are made; guidelines regulating centres for children with disabilities¹⁵⁴ have been produced and NCPD has conducted monitoring visits.¹⁵⁵

232. The proportion of Girls with Disabilities enrolled as students at every level of education is lower than that of boys: pre-primary (42%), primary (45%), secondary (48%), and VTC level (39%).¹⁵⁶ There is no distinction between genders in the decline in primary school pupils (taken as a proxy indicator for dropout) and at secondary level decline in number of boys is greater (at 15%) than for girls (13%).¹⁵⁷ As education for girls with disabilities allows girls to acquire learning and skills and seek productive employment appropriate to their abilities so women with disabilities will become better able to contribute to the economy of their households and to national development.

233. However it is recognized that there remain challenges to implementation of the rights for children with disabilities to access the education system in Rwanda – these require further attitudinal changes, additional capacity and nationwide institutional support.

Part E. Specific obligations

Article 31: Statistics and Data Collection

234. Collection of appropriate information including statistics and research data is an important first step to formulating policies and plans to give effect to the National

¹⁵⁴ Annual Report For The Year 2012–2013 In Domain Of Children With Disabilities, NCC.

¹⁵⁵ Field Visits in centres taking care of Persons with Disabilities, May 2012.

¹⁵⁶ MINEDUC Education Statistics 2012.

¹⁵⁷ Analysis of comparison pupil numbers in 2011 and 2012 – *idem*.

Development Plan and the CRPD Convention. GOR through lower administrative entities closer to the population has collaborated with non-state actors, in particular organisations of Persons with Disabilities and their collectives to address information needs (both quantitative and qualitative), yet recognizes that much remains to be done to quantify the needs of persons with disabilities. State parties assume responsibility for dissemination of statistics and their accessibility to Persons with Disabilities and others. At present, Rwandan Ministries publish a large number of policies, reports and updates on public websites specific to their institution and through administrative entities.

235. As yet there is no one Information Management System where data disaggregated by type of disability, age and gender of the individual would sufficiently guide planning. Nor do all Ministries required to act on disability collect results data to report on this. The newly created Injury and Disability Unit within MOH is expected to collect disability-disaggregated data and this may provide a model for other Ministries as they plan and budget for inclusive disability focused activities. MINEDUC EMIS system provides useful data on children with disabilities within the education system but does not yet effectively track progression and any reasons for dropout. The decentralized structures of NCPD exist to cell level and could serve to collect some information (such as existence of persons with disability; recording of cases of abuse of rights or denial of services linked to the individual's disability) and it falls within their responsibilities to do so.

236. According to WHO, 15% of the world's population live with disabilities. Among Rwanda's national population of 10.51 million inhabitants 446,453 (4.2%) Persons with Disabilities (aged five and above) are enumerated by the 2012 Population and Housing Census; of these 221,150 are male and 225,303 are female.

237. While disability type varies only slightly by sex it varies significantly by area of residence with typically twice higher prevalence of each disability type in rural areas than in urban areas.

Article 32: International Cooperation

Development Assistance

238. Rwanda recognizes the importance of international cooperation and its promotion. The Government of Rwanda's position on Official Development Assistance has been set out¹⁵⁸ and Rwanda is a signatory to the Paris Declaration on Aid Effectiveness (2004). The EDPRS is the primary Government national strategic plan and the framework for Government national budgeting, fiscal strategy, sector plans and lower level District Development plans. The profile of disability has been present through all these iterations: in Vision 2020; PRSP; EDPRS1 and now EDPRS2. A VSO programme¹⁵⁹ funded by the DFID (British Government) worked with DPOs to lobby in sector working groups for disability issues to be explicitly included in EDPRS1. Although despite several successful policy inserts, the overall findings of EDPRS1 reflect that there is still scope for improvement in mainstreaming disability.

239. National law provides for all programmes and services to be inclusive of persons with disabilities. A good number of NGO in Rwanda deliver programmes whose specific

¹⁵⁸ Rwanda Aid Policy 2006.

¹⁵⁹ 2006–2009.

targets are persons with disabilities.¹⁶⁰ Responsibility for monitoring their activities and impact is shared between the Department for Immigration (INGO), Rwanda Governance Board (all NGO) and NCPD as facilitator of the National Disability Platform.

240. At the African level, Rwanda hosts the Secretariat of the African Decade of People Decade with Disabilities, whose mission is to provide support in the implementation of the African Plan of People with Disabilities, building the capacity of organisations of people with disabilities, carrying out advocacy in the area of the respect of the rights of Persons with Disabilities and monitoring the implication of government programmes targeting people with disabilities.

241. Prior to the establishment of NCPD, MINALOC has developed (with support of development partners) the National Programme of Disability (2010–2019) whose mission is to translate into action commitments of the Government of Rwanda for the benefit of people with disabilities. This programme was a prerequisite to Rwanda being awarded the Secretariat for Ambassadorial Country Status during the second African Decade of Persons with Disabilities (2010–2019).

242. The National Council for Persons with Disabilities maintains good relations with the other federations and foreign or international institutions with similar missions; for example it is a member of the World Disability Union and the African Rehabilitation Institute. A Joint Declaration of Intent was signed with Rhineland Palatinate, one State of Germany Federal Government.

Article 33: Monitoring the implementation of the Convention at national level

243. The NCHR has a specific mission of protection, promotion and monitoring conferred by the CRPD itself as a national institution for the protection and promotion of Human Rights with A status (Article 33, paragraph 2) and the Law No. 01/2007 of 20/01/2007 on the protection of Persons with Disabilities in general (Article 10). Likewise, with this responsibility of monitoring the rights of persons with disabilities, the NCHR conducted two surveys respectively for the rights of Persons with Disabilities in general and for the rights of children with disabilities. The reports of these surveys together with their recommendations were submitted to the competent authorities for their consideration and implementation. These surveys were primarily conducted on the right to non-discrimination, the right to education, the right to health, the right to justice, the right to cultural freedom, to rest and leisure, the right to social welfare, the right to autonomy in the movement and the right to freedom of expression as well as access to information.¹⁶¹

244. It is within the mandate of NCPD to especially monitor the respect of laws, which protect persons with disabilities, and NCPD is therefore a major focal point within Government for matters relating to the implementation of this Convention. It has organized for the first time in 2013 the collection of data relating to performance within relevant sector Ministries and other Commissions, consultations with DPOs and the consolidation of this Initial Report. The National Council receives Government funding to deliver its mandate.

¹⁶⁰ Principal actors are alphabetically: ADRA; ; CARE International; CBM; Disabled Peoples of Denmark; Handicap International; JICA; MyRight; Norwegian Peoples' Aid; Plan International Rwanda; UNESCO; UNICEF; VSO; World Vision.

¹⁶¹ NCHR Annual reports July 2010-June 2011 and July 2011-June 2012 (www.cndp.rw).