

MAPPING OF DISABLED PERSONS' ORGANISATIONS (DPOs) IN AFGHANISTAN

**COMMUNITY CENTRE FOR THE DISABLED (CCD)
BRITISH & IRISH AGENCIES AFGHANISTAN GROUP (BAAG)**

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Acronyms

BAAG	British & Irish Agencies Afghanistan Group
CCD	Community Centre for the Disabled
DPOs	Disabled Persons' Organisations
INGO	International Non-Governmental Organisation
MOLSAMD	Ministry of Labor, Social Affairs, Martyrs, and Disabled
NGO	Non-Governmental Organisation
PWDs	Persons with disabilities
SCA	Swedish Committee for Afghanistan
WFP	World Food Programme

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I. Background

In September-December 2018, CCD undertook a provincial mapping exercise as part of its joint project with BAAG, funded by UKAid Direct, entitled *Enabling rights for persons with disability through effective awareness raising and advocacy*.

The provincial mapping aimed to engage DPOs from across Afghanistan in order to better understand how many exist, where they are located, what types of services they are able to provide and with what reach. This has never been done before and the data collected would assist in establishing the first ever comprehensive database of DPOs in Afghanistan, provide information on the location and capacities of current DPOs, including their capacities in advocacy and potential for feeding into national initiatives on disability rights. As part of the review and re-launch of Disability Rights Watch Afghanistan (DRWA), they will be linked up with the new DPO database, evaluating the existing advocacy capacities, opportunities, and gaps in the provinces, with the view to expand and strengthen the coalition and its membership. This will strengthen knowledge about DPOs in Afghanistan leading to improved coordination between themselves and with the DRWA.

II. Main objectives and outcomes

The main objectives of the mapping were to:

1. Record general information about how many DPOs exist in Afghanistan, where they are located, what they do, what services they are able to provide, and with what reach.
2. Evidence existing capacities and gaps of DPOs, particularly when it comes to advocacy.
3. Share information about DRWA, its purpose, aims, and opportunities for engagement.
4. Collect stories and case studies to evidence findings and inform future work.

The expected outcomes to be achieved were:

1. Establish the first comprehensive DPO database for the country.
2. Identify existing provincial-based advocacy efforts and capacities in 22 provinces.
3. Establish a baseline for DPO advocacy capacities.
4. Register interest for DRWA membership, including potential for charging an annual membership fee of Afs 100.

III. Key findings

Key findings

- Female-led DPOs are rarer than we thought. It was previously expected that female-led DPOs were likely to exist but are hard to find due to societal pressures, stigma, and the double discrimination faced by women with disabilities. However, findings from the mapping show that female-led DPOs generally do not exist as, historically, DPOs in Afghanistan developed out of unions run by men and often comprise war veterans. This is markedly different from other places in the world, such as in East Africa where DPOs are mainly women-led because they are often started by mothers who have a child or family member with a disability. This mapping identified only three women-led DPOs in Afghanistan. This poses a significant challenge in ensuring the needs and voices of women and girls with disabilities are heard. Other ways will therefore need to be found to try to fill this gap, for example by exploring what other women-led initiatives on disability exist within the country, such as through Women's Institutes, civil society organisations, and individual activists.
- DPOs are concerned about the future of PWDs in their communities. As they try to raise the voices of PWDs who are unheard, and without support, they fear many would not survive. DPOs are working hard to provide support to PWDs in their communities, however minimal in scale, and 42% do so without any funding or facilities.
- While DPOs may operate at a small-scale, they are very effective with the limited resources available. In many cases, they are ready to provide support but lack the funding and/or facilities to do so. The main issues DPOs try to address are around ensuring access to food, shelter/land, education, salaries and pensions, and jobs.
- DPOs expect the government to take a more active role on these issues but the majority feel the government institutions they engage with are uncooperative and hard to convince. This is a major challenge for many DPOs who feel government support would greatly enhance the ability to address the needs of PWDs.

IV. Methodology

a. Definitions

Definition of disability and language

This exercise utilised the following definition of disability: 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.¹ In general, disability was understood to primarily include the following and was used to collect data on disability during the mapping:

¹ UN Convention on the Rights for Persons with Disabilities (UNCRPD)

<p>A) Physical and sensorial difficulties</p> <ul style="list-style-type: none"> • Lack part of/entire member(s) of the body; • Left leg below the knee; • Left leg above the knee; • Right leg below the knee; • Right leg above the knee; • Right arm below the elbow; • Right arm above the elbow; • Left arm below the elbow; • Left arm above the elbow; • Hand amputee (thumb and at least 2 entire fingers); • Foot amputee (more than the toes). <p>Difficulties that impede movement and mobility</p> <ul style="list-style-type: none"> • Left leg; • Right leg; • All body; • Lower part of body; • Both legs; • Right side; • Left side; • Right arm; • Left arm. <p>Visual impairments</p> <ul style="list-style-type: none"> • Both eyes blind; • One eye blind; • Both eyes low vision. <p>Hearing impairments</p> <ul style="list-style-type: none"> • Both ears deaf; • One ear deaf; • Both ears low hearing. <p>Speech Impairments</p> <ul style="list-style-type: none"> • Total; • Severe; • Partial. 	<p>B) Intellectual and learning difficulties</p> <p>The person has to have at least two of the 3 signs in order to be considered as having a disability. A Yes to only one question does not suffice.</p> <ul style="list-style-type: none"> • Later/slower speaking patterns compared to other members of the family; • Later/slower walking, mobility development compared to other members of the family; • General retardation in development patterns, behaving much younger than the given age. <p>C) Behavioural and psychological difficulties</p> <p>The person must show at least two of the 8 signs in order to be considered as having a disability. A Yes to only one question does not suffice.</p> <ul style="list-style-type: none"> • Difficulty or impossibility in expressing needs, using language that no one understands; • Difficulty or impossibility in being with people who are not familiar; • Difficulty or impossibility in keeping still, staying in one place; • Difficulty or impossibility in keeping quiet, talking all the time in presence of others or alone; • Violent behaviour regarding yourself (banging head against the wall, self-mutilation, biting own hand etc.).
<p>D) Communication and social functioning difficulties (Linked to Identifiable Reason)</p> <p>This sections looks at some attitudes and interaction patterns that persons of the household might have. It consists of 6 questions. The person has to have at least two of the 6 signs in order to be considered as having a disability. A Yes to only one question does not suffice.</p>	<p>E) Fits and seizures</p> <p>The person has to have a Yes to two of the questions in order to be considered as having a disability.</p> <ul style="list-style-type: none"> • Fits, seizures; • Epilepsy signs; • Fainting or passing out without reason.

<ul style="list-style-type: none"> • Having repetitive, stereotyped body movements (rocking back and forth); • Sudden and unpredictable physically violent behaviour towards other person (hitting, biting, scratching, spitting, pulling hair...) without reason; • Sudden and unpredictable verbally violent behaviour towards other person (abusing, using foul language constantly...) without reason; • Getting angry very easily and screaming/yelling without reason, when touched. 	
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Disability vs. Difficulty

Findings from the National Disability Survey of Afghanistan (NDSA) survey toolkit highlight the advantages of using the term ‘difficulty’ instead of ‘disability’ when administering disability-related questionnaires in the country. It was felt that similar to a number of other surveys carried out, the term ‘difficulty’ or ‘mushkel’ in Dari, is less threatening and constitutes less of a label for the persons concerned, thus making the reference to disability easier.² However, although ‘mushkel’ means ‘difficulty’, it also means ‘problem’ and the two words are not differentiated in Dari. It therefore often carries a negative connotation when referring to ‘people with problems’, so this should be taken into consideration.

As noted by the NDSA toolkit: “The debate on the advantages and the drawbacks of the use of the term is still continuing; researchers supporting the use of this term placing the need to find the various, and the more hidden persons with disability; on the other hand the organisations of persons with disability as well as other structures that are working on these issues were concerned that not using the term “disability” would mean denying their identity as persons with disability. The elaboration and the testing of the NDSA tool showed that the latter argument, important as it is from a rights perspective, was not a drawback for conducting research in a respectful but non-biased manner.”

Definition of Disabled Persons’ Organisations (DPOs)

DPOs are defined as organisations, formal or informal, registered or not registered, which are run by persons with disabilities and for persons with disabilities. Disabled people’s organisations (DPOs) are incredibly diverse, exist for a range of purposes, in a variety of sizes and work in very different ways. In Afghanistan, most DPOs operate at a local grassroots level and can comprise of two people or more.

b. Method for gathering information

Information was gathered from the Directors/Heads of DPOs through a questionnaire containing questions to ascertain statistical data as well as qualitative information. The questionnaires were administered by ‘Questionnaire Administrators’ – a group of

² NDSA Survey Toolkit 2005

interviewers comprised of CCD staff, Disability Trainers/Community Mobilisers, and a Disability Questionnaire Administrator who oversaw the process. Due to insecurity in the provinces during the parliamentary elections, it was difficult to employ Community Mobilisers who would be willing to travel to the provinces to conduct the survey. CCD therefore brought the heads of DPOs from 16 different provinces to Kabul to train them as Questionnaire Administrators. They then carried out the questionnaire in their respective provinces. There was one female Questionnaire Administrator.

The questionnaire was administered verbally, in Dari and Pashto, and face-to-face in each of the 22 provinces through a structured interview style. Where the security situation did not permit travelling, the questionnaire was administered through phone/email. The interviews lasted about 40-50 minutes.

Preparatory work included developing an outreach list for the 22 target provinces in order to establish at the outset who the main points of contact were in each region, developing the implementation tools such as the provincial mapping questionnaire, data analysis excel spreadsheet, DPO database format, and interview feedback form. The approach taken was to interview as many DPOs identified who fit the broad definition of a 'DPO'. DPO focal points in the provinces already known to CCD were consulted, and existing internal DPO contacts lists collated to compile a long list for the provinces in this study.

The questionnaire was first tested in 2 provinces – Bamiyan and Daikundi, so to receive immediate feedback about the questionnaire content, ease of interviewing and workability of questions being asked and collecting information, as well as collecting interviewee feedback questionnaire and take responses into account when informing a refined questionnaire. Following this round of testing, improvements were brought to the questionnaire to make it easier to administer (eg. the wording of some questions made simpler and shorter). A full version of the questionnaire can be found in Annex 1. The questionnaire was administered in Dari or Pashto.

The questionnaire was administered during October-December 2018 in two phases. The first phase included the following 12 provinces: Kunduz, Balkh, Faryab, Herat, Kandahar, Khost, Bamiyan, Kabul, Logar, Paghshir, Daikundi, and Nangahar. The second phase included the following 10 provinces: Badakhshan, Takhar, Baglan, Jowzjan, Sar-e-pol, Helmand, Maidan Wardak, Parwan, Ghazni, and Laghman.

c. Data collection and analysis

Data from the hard-copy questionnaires was transferred into a dedicated excel spreadsheet for analysis. CCD ensured the data was transferred into the spreadsheet on a rolling basis and as soon after the questionnaire was administered as possible. This way the information was still fresh in the mind of the person transferring the data and if any follow-up questions or clarification was needed from the interviewee, it could be obtained without much delay.

The data was transferred by CCD staff and the Disability Questionnaire Administrator in Kabul.

While many questionnaires were completed in Dari or Pashto, CCD transferred them into Excel in English, which was quicker than manually translating each questionnaire before entering the raw data into Excel.

It was intended that a photographer would be taken on to accompany the questionnaire administrators in a couple of provinces to capture photos to go along with case studies and stories. However, insecurity and budget limitations prevented this.

d. Limitations and challenges

Questionnaires administered over phone or by email to PWDs who have sensory impairments proved difficult unless they already had assistive technology or an aide to assist them. As expected, it also proved difficult to find DPOs addressing mental disabilities as it is rarely diagnosed or understood within the country.

Most of those interviewed were illiterate and have up to a primary school education. Communicating the purpose of the survey and making them aware of the project sometimes required survey questions to be simplified. This echoes feedback from some questionnaire administrators that future surveys should be shorter and/or with questions simplified.

Not all DPOs were willing to share information about the financial support they receive. This was due to the initial impression by some DPOs that CCD or DRWA might be able to provide them with funding and they did not want to be left out of such support. However, as part of the survey included an introduction about DRWA and its aims and purposes, information was also provided to clarify that CCD and DRWA are not in a position to be able to provide funding to other DPOs or organisations at this stage.

As the mapping took place during the parliamentary elections, many DPOs were busy campaigning for their local electoral candidates, making it was difficult to arrange interview times with them.

Due to insecurity in some areas, the postal/courier service refused to deliver the completed hard copies of the questionnaires to the CCD office in Kabul by ground. As a result, CCD had to arrange they be sent by air transport, which was more expensive. Planning for future similar activities should consider this.

Engaging women-led DPOs and women-led disability initiatives

In Afghanistan, DPOs are traditionally run by men. This is due to the fact that DPOs are considered to be civil society organisations, as many are unions or associations, and are registered with the government. It has historically been harder to set up a CSO which can be registered and therefore, women with disabilities who run disability-focused organisations are often classified as NGOs (which are easier for women to set up). While this mapping used a broad definition of DPOs, the way that DPOs in the country are understood will be reflected in and have bearing on the questionnaire responses.

Efforts were be made to reach women-led DPOs, including through the recruitment of a female Disability Questionnaire Administrator.

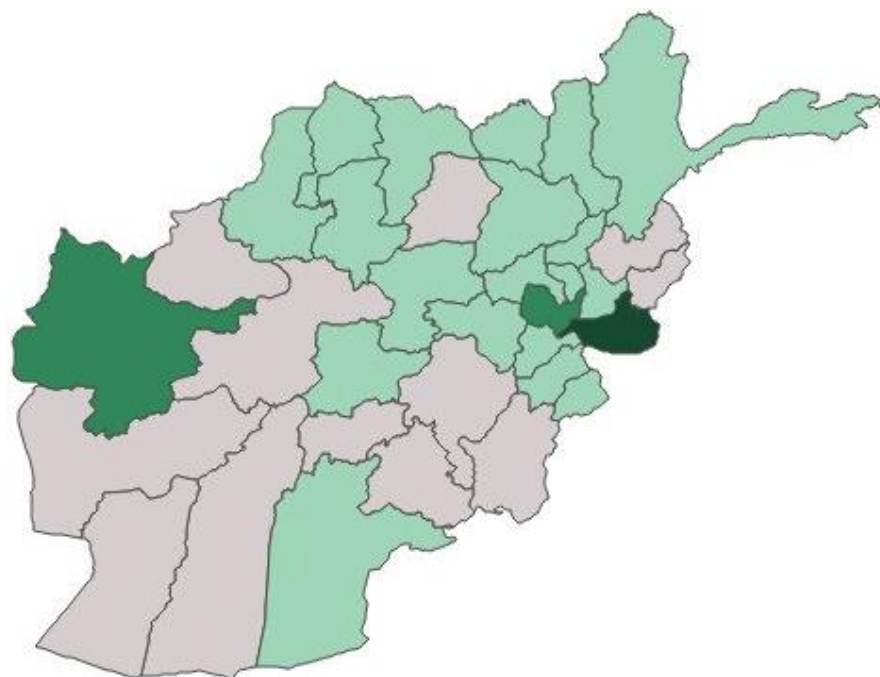
V. Findings

a. General information and statistics

The DPO mapping exercise reached a total 84 DPOs across 22 provinces in Afghanistan. An overwhelming majority (96%) of participants were males as, due to cultural and customary traditions, female-led DPOs are rare.

Of the 84 participants that completed the survey 71 (68 male; 3 female) identified themselves as people with disabilities (PWD). Half of those identified themselves as amputees whereas 24 reported difficulties that impede their movements or mobility. The remaining 12 primarily identified themselves as visually impaired with one stating a hearing impairment and two choosing not to disclose a disability. Thirteen participants reported having no disability and these were other DPO staff who participated in interviews.

Map 1



● Group A ● Group B ● Group C ● Group D

Number of DPOs in the provinces

Group A - provinces not covered in this study

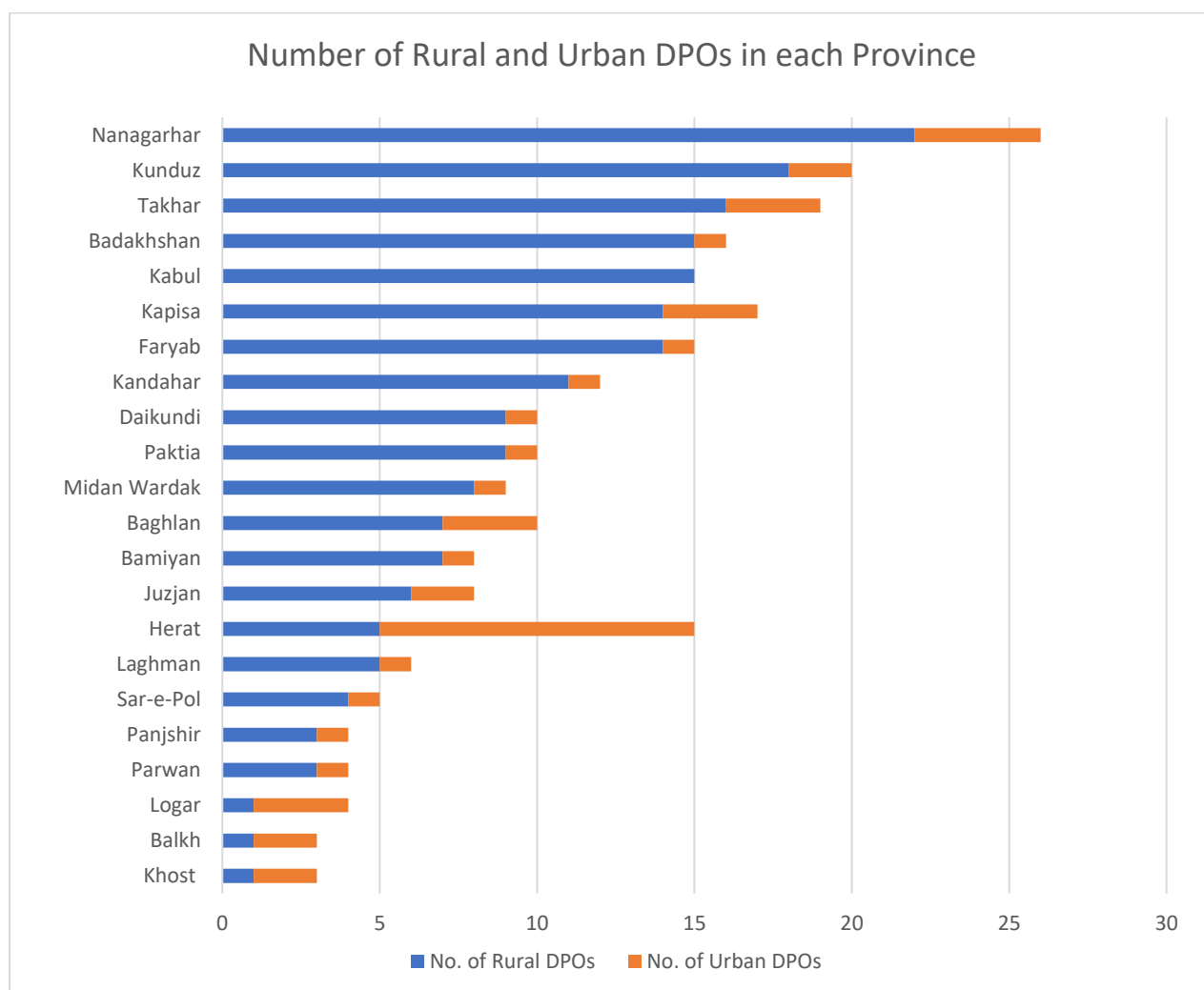
Group B - provinces with 1-5 DPOs (there were not provinces with 6-9 DPOs)

Group C - provinces with 10-20 DPOs

Group D - provinces with 20-30 DPOs

The 84 participants represented a diverse range of groups representing PWDs. Many of the participants headed DPOs based in urban centres, are registered to a government ministry, and receive support from a national or international donor. Other participants led subsidiaries of the urban DPOs to enable suburban or rural reach in provincial districts. The below chart outlines the number of DPOs situated in urban centres. The orange bar signifies the rural reach DPOs and their subsidiaries estimated they have in their provincial districts. The data outlined 90% of DPOs being registered to a government ministry and having written statutes and 90% had voluntary or paid staff. The three female-led DPOs were all registered and each had up to 10 staff who provided voluntary support. More than half of the DPOs were run by individuals between the ages of 30-50 and a fifth were run by those over 50 years of age. The three women DPOs were all led by individuals between the ages of 18-30. 85% of respondents said they had a workplace or meeting space available to them. Forty-nine respondents reported being members of provincial DPO networks, councils, or assemblies, a handful were part of the National Social Assembly of Disableds and Martyrs, and two were members of groups focusing on displacement and child rights.

Table 1



The general view at the start of mapping was that it is likely there are women-led DPOs operating in the country, but that they are hard to find and it was expected it would be a challenge to reach them. However, findings from this mapping proved this untrue. In fact,

women-led DPOs in Afghanistan are very rare and we could only find three. Interviews with several DPOs revealed that women-led DPOs do not exist as traditionally, DPOs in the country began as unions led by men, the majority of whom are war veterans. The female-DPOs identified did not know of other women like themselves and were not aware of similar initiatives for women with disabilities at the grassroots level. This poses a significant challenge in ensuring the needs and voices of women and girls with disabilities are heard. This will require further exploration to try to fill the gap, such as looking at other women-led initiatives within the country, such as Women's Institutes, civil society organisations, and individual activists.

The mapping also found that there was confusion among DPOs about the standard definitions for some types of disabilities. For example, speech impairments were labelled by some as a physical disability, while another categorised it as a sensory impairment, and yet another understood it to be a behavioural or psychological difficulty.

b. The work of DPOs

DPOs responded to a series of questions around the focus of their work, what they do, with what reach, and whether or not they felt it had been effective.

DPOs work in a range of areas to support PWDs in their communities. The most common activity reported was facilitation of food distribution to PWDs on behalf of the World Food Programme. Other common activities are:

- Facilitation of distribution of land and residential homes allocated by the government;
- Distribution and repair of aides, prosthetics, and wheelchairs;
- Ensuring access to basic services: this includes assisting PWDs with their registration, collecting disability benefits (often referred to as pension or salary), providing them with identity cards, and negotiating reduced rates for PWDs needing hospital care;
- Assisting with job placement and/or job creation: some reported providing PWDs with moveable carts/stalls so they could generate income in their local markets, others set up animal husbandry farms, while others have established small shops or worked with employers to get job placements for PWDs;
- Providing access to educational opportunities: this ranges from conducting skills-building trainings, literacy classes, vocational training on computer skills, to granting scholarships, and negotiating on behalf of students for reduced tuition fees from schools, to making sure studies with disabilities are enrolled in and admitted to schools;
- Organising protests, social movements, awareness raising, and advocacy initiatives on disability issues, including supporting PWDs within the community involved in new provincial forums to raise their messages and on issues such as corruption, basic needs, and drug/narcotics awareness;
- Arranging social events in the community for the International Day of Disabled Persons; and
- Providing direct financial support to families, including providing loans and/or pooling funds that PWDs can borrow from.

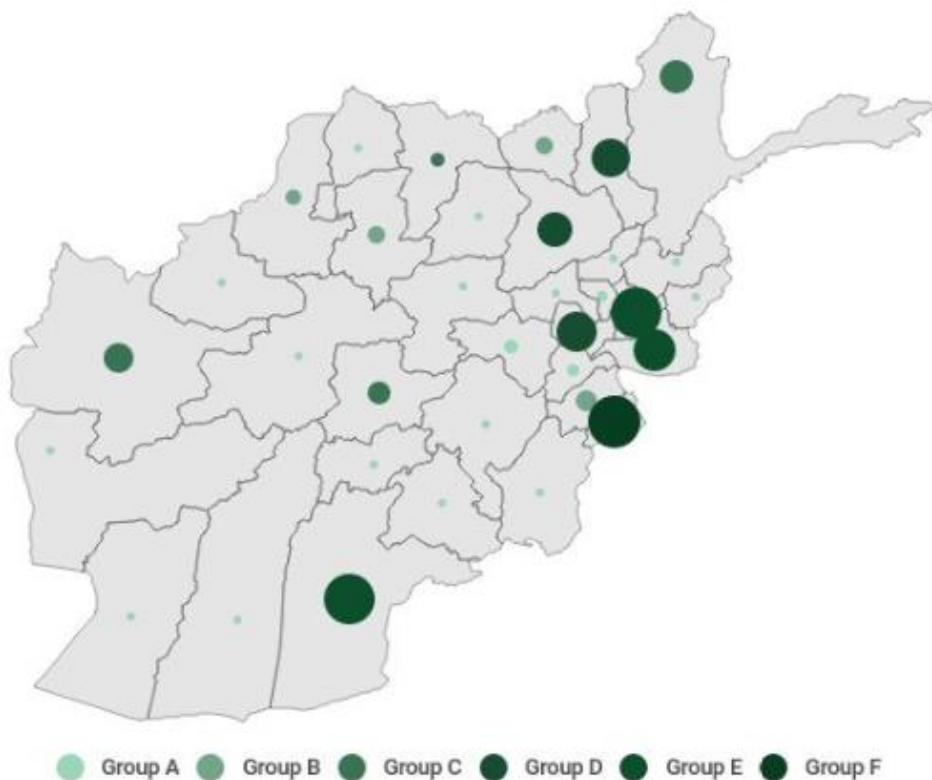
The DPOs surveyed primarily focus on supporting those with physical and sensory impairments – over half (48) do so through supporting people in their communities with improved mobility, mostly through obtaining or repairing prosthetics and wheelchairs. Support to those with visual and/or hearing impairments was a distinct focus for 17 respondents and four DPOs focus on speech impairments.

Participants were asked what the total number of beneficiaries they know or estimate to have reached. Collectively, the 84 DPOs felt they had reached 37,225 beneficiaries. While it was impossible to obtain an exact overall gender split of the beneficiaries reached, it was clear from respondents that women and girls with disabilities comprised a much smaller number of those reached in comparison to men and boys.

The majority of DPOs support both women and men with disabilities however, 12 DPOs focused on gender-specific support – three only serve women in Takhar, Logar and Balkh, and ten serve men only in Kandahar, Parwan, Nangahar and Kabul. The three female-led DPOs specialise in supporting women with disabilities through advocacy campaigns, employment and education workshops, and interestingly animal husbandry.

Map 2

Number of beneficiaries DPOs estimate they reach



Group A - 0-500
 Group B - 500-1,000
 Group C - 1,000 - 2,000
 Group D - 2,000 - 3,000
 Group E - 3,000 - 4,000
 Group F - 4,000 - 5,000

Looking at the DPOs more closely we find the majority support under 500 beneficiaries and manage a small number of projects. Forty-four percent of DPOs support under 100 direct

beneficiaries; 38% support between 100 and 500 direct beneficiaries; 7% support between 500 and 1,000 beneficiaries; and 11% supports over 1,000 beneficiaries. One province – Khost – claimed to reach 8,297 people.

All DPOs surveyed gave details of their organisations purpose, objectives and activities. These can be grouped into three core categories: advocacy, livelihoods and economic development, and service provision. The most common purpose cited by the DPOs was to provide advocacy and service provision for PWDs and the families of martyrs. Interestingly a number of DPOs demonstrated aspirations to become 'a source' in the field of education, health, employment and skills-building for PWDs and vulnerable communities in their province or district.

DPOs conducting advocacy activities focused on exploring collaborative approaches to raise awareness and campaigning for disability rights. Campaigning for the implementation of Afghanistan's National Disability Law and forming channels to access justice and have a voice in government were methods reported to amplify PWDs social and legal rights. DPOs sought to provide awareness raising workshops and work with community leaders to establish inclusive environments where economic and employment rights for PWDs would be addressed and stereotypes challenged. The overall objective of these advocacy initiatives was to create a positive culture of acceptance and support PWDs to thrive socially and economically.

DPOs focusing on livelihoods and economic development primarily looked to established inclusive learning environments for PWDs to gain new skills and build a platform for income generating activities. Examples of these activities were animal husbandry, opening bank accounts, and opening small to medium enterprises. DPOs working on livelihoods and economic development said they had a strong focus on women and promoting self-reliance and self-sufficiency.

For DPOs whose primary purpose was providing services, their core objective was to increase the literacy levels and skill-sets of their beneficiaries. This in turn fed into their secondary activities of livelihoods and economic development. To achieve this, DPO activities included providing non-formal education for adults such as literacy and numeracy lessons (most commonly found at DPOs supporting people with visual impairments). Skills-building training and recreational sports enabled DPOs to support PWDs find employment and alleviate mental health problems and feelings of isolation. In Nangarhar, one DPO focused solely on the provision of shelter whilst several other DPOs added this to their medical and financial support through providing rehabilitation centres, and access to financial support/ pensions.

There were a number of activities which DPOs felt they had been successful in delivering with a positive impact.

All of the DPOs surveyed classified 'success' as having solved a problem faced by an individual or group of persons with disabilities in their community that would allow them to lead a better life.

Distribution of food, aides, prosthetics, and wheelchairs was seen to have been successful and effective as it assisted people in having a better life and solving problems of poor

mobility and dependence on others. One DPO said food insecurity was the primary problem of PWDs and another said that without their food distribution they worried PWDs in their area 'would not survive'. Shelter and land for PWDs were other great concerns for many DPOs, as was ensuring PWDs were registered and had ID cards. Those who supported PWDs in resolving these issues considered it a great success as otherwise the government would not be aware of their existence or where to reach them to provide continued support. A significant number of DPOs said they had succeeded in ensuring PWDs were able to receive their disability benefits and receive them on time.

Education was seen to be a prominent area where success had been achieved, even if at a minimal scale. As one DPO said, 'With little facilities and supports we can be a change factor in the life of those with disabilities'. DPOs reported having provided effective training in literacy, computer skills, and other areas, which allowed PWDs to continue on either into further education and/or employment. They had also been successful in ensuring PWDs were enrolled and admitted to schools and that financial barriers were addressed where possible, having created good relationships with some schools and private universities.

In some cases, advocacy was seen to have been effective where it resulted in securing food, prosthetics, aides, and other materials for PWDs. Advocacy was overwhelmingly defined as successful only if it resulted in 'solving problems' for PWDs through provision of either tangible materials (e.g. prosthetics) or access to particular services (e.g. education, land, employment).

Other successes noted were income generation opportunities provided to PWDs, even if on a small scale. One DPO said that despite what might be viewed as small-scale efforts, their education and job placement work 'helps persons with disabilities change their lives forever'. Another DPO reported that eight students they trained to be tinsmiths and tailors now run their own shops and receive a stable income.

Added impact was seen to be that promoting the above projects allowed PWDs to socialise more and participate in society, which builds their confidence and motivates them to continue finding ways to pursue an education and/or career.

The activities that DPOs considered to have been unsuccessful highlight the challenges they continue to face. Half of the DPOs surveyed expressed frustration in being unable to achieve their objectives through the activities chosen. Where some DPOs in the provinces had succeeded, others had failed.

Several said that their individual advocacy efforts had not always achieved the expected outcome and this was largely due to lack of support from government institutions. Many who tried to establish animal husbandry farms or small shops for PWDs to run could not gain government support to do so. In Bamiyan, it was reported a shop built for PWDs was destroyed by the municipality. DPOs noted that it is hard to engage PWDs in advocacy when there are no clear material gains from it, as many are very poor and must prioritise finding a way to earn an income.

Despite the success in ensuring access to education where possible, many DPOs reported that a lot of private universities were not willing or interested in entertaining their requests to admit students with disabilities; as one DPO put it, they 'could not be convinced'.

Access to more financial support and facilities is lacking and limits the reach DPOs are able to have. One DPO reported being prepared to provide a computer skills training course but could not find a free facility from which to do it. Ideas for other projects such as vocational training in carpentry, establishing other skills-building training, and support sessions for women have not been able to materialise due to lack of funds, and many have approached NGOs and government ministries for assistance, without much luck. A few mentioned proposals for skills-based training and social services such as shelter provisions were unsuccessful, as DPOs did not have the experienced staff and resources to file strong applications.

It was reported that not much had been achieved in encouraging government agencies to implement disability rights and this was attributed to either low awareness or low value placed on disability rights. A DPO in Nangarhar developed an initiative to change the behaviour of government towards PWDs but so far has not been able to get government authorities to cooperate. Another tried to engage their provincial authorities to change two provisions in the disability law but also found authorities would not cooperate. As one DPO put it, the entities they should be working with on these issues 'are not implementing the laws' and another DPO felt 'nobody respects and accepts the existing laws' on disability. These DPOs clearly felt little confidence they would cooperate in the future.

58% of DPOs surveyed received funding for their activities whilst the remaining 42% had no means of fundraising and therefore no income. Those receiving no income included all DPOs based in Baghlan, 87% of DPOs in Kabul, and nearly half of those surveyed in Nangarhar and Herat. All three of the women-led DPOs are supported by the Swedish Committee for Afghanistan (SCA).

Of those DPOs receiving an income, a quarter of the funding came from local contributions, predominantly from 'businessmen and businesswomen', with another quarter reporting having received funding from a government ministry (Ministry of Education, MOLSAMD, and a governor's office). The remaining half received either funding from an INGO or NGO or international organisation, most commonly SCA and WFP. Other INGOs noted as having contributed include Islamic Relief, Counterpart International, and International Rescue Committee.

c. DPO advocacy initiatives

Respondents were asked if they undertook any advocacy and if so, on what, with what reach, and whether the outcomes had been considered successful or not and why.

Sixty-five of the 84 DPOs surveyed conduct advocacy initiatives. DPOs defined advocacy as their efforts to raise disability issues with various stakeholders to ensure 'the voice of disability is heard', with the ultimate goal of enabling PWDs to access their rights. Successful advocacy was therefore seen to be that which ensured a PWD or group of PWDs were newly able to access their rights to some degree.

Advocacy undertaken by respondents focused on the following issues:

- Calling for full implementation of existing national disability laws.
- Calling for distribution of land and shelter to PWDs.
- Calling for the disability benefits (salaries and pensions) of PWDs to be paid in full and on time.
- Advocating for the education of PWDs. This includes calling on educational centres to admit PWDs and provide scholarships and offer discounts for disabled students, especially women.
- Advocating for implementation of the labour law in relation to PWDs and providing more employment opportunities for PWDs.

Lack of government cooperation or support, and lack of or poor implementation of policies were seen to be the biggest hindrances to PWDs accessing their rights. The advocacy undertaken was therefore most often stated as targeting government agencies including MOLSAMD, the Election Commission, and the Peace and Reconciliation Commission. In some cases, advocacy efforts focused on educational centres and families of PWDs (families in particular as a means to convince them that their disabled family member/s should be able to go to school or work). In a handful of cases, INGOs and NGOs were also the advocacy targets. One DPO in Logar focused on raising issues with Afghans living abroad to raise donations to help women with disabilities and their families. Some awareness raising to PWDs about their rights was also considered part of advocacy.

The most popular way for DPOs to organise was reported as being through demonstrations, protests, and gatherings. One DPO reported travelling to Kabul to participate in coordinated advocacy on disability issues. A few noted that there are efforts to find solidarity with others, among PWDs and unite their voices, and with other DPOs however, generally, this type of coordination remains difficult outside of protests and demonstrations. Other methods included holding conferences on disability issues and engaging media and social media to raise messages of concern, the latter particularly so for issues related to employment. A DPO in Kandahar said they had Advocacy Committees in all regions of the country in order to raise issues and concerns on the abovementioned issues.

Fifty respondents felt their advocacy had been successful to some degree.

The most common advocacy for DPOs across the country is on employment issues (as reported by DPOs from Balkh, Herat, Logar, Kandahar, Nangarhar, Laghman, Badakhshan, Takhar, Baghlan, and Kabul). Advocating for increasing the disability benefits of PWDs and/or ensuring they received them were largely successful. The same was true of pensions although DPOs in at least three provinces said either part or all of pension payments still had not been received. However, the outcomes of advocacy for job replacements were mixed. Many resulted in positive outcomes, for example an initiative which called on government administrators to hire PWDs as cleaners and another which asked that PWDs be assigned as teachers at educational centres to teach disabled students. However, some failed to elicit such positive responses. One DPO in Nangarhar urged the local government to place PWDs in 3% of their vacancies but was not successful and those applying pressure on local government to implement labour laws all reported being unsuccessful in their efforts.

Efforts to lobby for land distribution or shelter for PWDs was more often successful than not for DPOs who had advocated on the topic. One DPO reported achieving land distribution for 14 PWDs from a government agency, and several others had similar successes. A DPO in Logar brought other DPOs together to form a cooperative to push for the distribution of 1,000 acres of land to be earmarked for PWDs and the government eventually agreed. A DPO in Herat successfully reclaimed a research building, which had been taken over by the Ministry of Education and was previously given to PWDs by MOLSDAM for use.

Success has been found in areas advocating for better access to education. Because of their advocacy, one DPO was able to facilitate 23 PWDs attending university in Kabul and arranged 21 scholarships for others to attend schools in India, Pakistan, and Iran, while another DPO ensured a school for blind girls was established. In Daikundi, the Cooperation for Poor Disabled (CODCCA) advocated inclusive higher education and obtained a 50% discount on tuition fees for PWDs attending a private university. However, it was noted that successes are piecemeal and government universities have not been responsive to such efforts.

Interestingly, the DPO who advocated among Afghans living abroad was able to raise Afs 11,900 to support 16 PWD families.

DPOs also reported outcomes of some their advocacy being ‘not satisfactory’ and highlighted a number of areas in which work still needs to be done.

PWDs are still not able to fully access their rights and it was noted that future advocacy should aim to ensure PWDs are able to access their rights and basic services – education, jobs, and opportunities to earn an income and feed themselves and their families in the first instance, as well as build their skills for an independent life; access to healthcare services and technology that could improve their quality of life; access to long-term shelter and land; and access to transport services which would improve mobility of PWDs and increase their ability to engage in society. It should be noted that access to education (basic literacy, vocational, etc.) was the top concern among the respondents.

DPOs reported facing several obstacles, which hampered their advocacy efforts. Corruption among government agencies was cited as a barrier by two DPOs in Nangarhar. Almost all DPOs interviewed felt more work was needed to target ‘changing the mind-sets’ of government institutions about disability rights and raise awareness among them about the importance of implementing disability laws and devising better and more effective policies which responded to the needs of PWDs. Cooperation from government counterparts in many provinces was reported as low or non-existent and was highlighted by the majority of respondents as an area needing improvement. As stated by a DPO from Kabul, ‘The government and responsible authorities must organise certain activities to help the disabled change their life’.

DPOs reflected that their own advocacy efforts needed to improve if they were to be more effective. DPOs in Herat and Jowzjan asked for more effective advocacy tools, perhaps accompanied by training. However, better cooperation and coordination between DPOs on issues of mutual interest would require some investment, as most do not have any facilities or meeting spaces to speak of, and this would preferably include engaging with relevant NGOs. A number of DPOs highlighted that small asks could go a long way – small amounts of financial contributions for things like teaching materials and access to free facilities would

make a difference. Two DPOs in Nangarhar said better planning and organising, not just in advocacy but in delivering interventions, was needed.

The 19 DPOs that said they did not practice advocacy stipulated that they instead focused on service delivery. That said, a number of these DPOs did have an element of advocacy in their organisations objectives. For example, a DPO in Parwan stated one of their objectives was to 'bridge the gap between [GoA] and PWDs' and a DPO in Paktia stated 'implementing disability laws' as an activity.

d. DPOs relations with other stakeholders

In descending order, the most common stakeholders engaged by DPOs surveyed were government officials/government organisations, other DPOs, elected bodies such as provincial councils and parliament, NGOs, and community leaders and members. Only one DPO said they engaged with an INGO and an international organisation.

Of the 84 participants, 77 (92%) said their main working relationships with other stakeholders were with government officials/government organisations. Six percent said their main working relationships were with other DPOs, and two percent with elected bodies such as provincial councils and the parliament. None cited NGOs or community leaders or members as the top stakeholders they engage with. However, almost all DPOs noted that they engage with more than one, if not all, of the mentioned stakeholder groups.

Overall, the nature of DPO relationships with the stakeholders mentioned varies. For example, their primary engagement with government and elected bodies is through obtaining services for PWDs, and this is felt to be the best way to improve the authorities understanding of and support to disability issues – although this is limited in many areas of the country. Engagement with NGOs is mostly geared towards service provision but also providing opportunities for DPO skills development and capacity building. The relationship with other DPOs is mostly around supporting each other's policy and advocacy initiatives, but DPOs also report the importance of continuously staying in touch and learning from each other. Interactions with community leaders and members are mostly around gaining space and acceptance to conduct their work and raise disability issues. Media outlets were also mentioned as another stakeholder group with whom DPOs engage with on policy and advocacy issues.

Many DPOs reported that their engagement with all stakeholders listed improved their confidence, motivation, and energy, especially in continuing their work and trying to improve it. As one respondent stated, 'staying in touch encourages us'. Few DPOs felt that the stakeholders they engaged with wholeheartedly did not support their work; however, those that did came from Herat, Baghlan, Nangarhar, Parwan, and Kabul provinces.

Government officials/government organisations: Respondents said that when it comes to interactions with the government, almost half are engaged through attending meetings or events around once a month. Many also noted meeting once every two months is common. 32% said they engaged with the government as either a partner or member, and 10% knew them personally/is a family member. Only 5 respondents felt that the government did not support their work. 96% said the relationships had produced outcomes although did not

specify if the outcomes were positive or negative. The majority of positive outcomes reported relate to securing services for PWDs and these include repair of artificial body parts, ensuring PWDs receive their pensions, providing employment and job replacement, emergency relief, ensuring PWDs have access to education by providing needed school supplies, transportation, food, and distributing land to PWDs. A smaller but significant portion of respondents felt positive outcomes of the relationships were improved coordination, cooperation, and generally being able to work together. A handful of DPOs reported that positive outcomes included support to their advocacy, information-sharing, the government providing advice and consultation in DPO decision-making, and legal and financial support.

It was reported that in some areas, these outcomes have contributed to an increased awareness in laws and disability rights. Examples included better working structures adopted within government and government offices providing space for DPO meetings. It has resulted in PWDs' problems being solved and provided more opportunities for PWDs to engage in society.

However, all but two respondents felt their relationships with the government could be improved. The top ways for improvement suggested were (in descending order), increased collaboration to build stronger and longer lasting relationships, more and 'proper' (or impartial) consultation with each other, and more mutual involvement and support to each other.

Elected bodies (provincial councils and parliament): Seventy percent of DPOs surveyed engage with elected bodies such as provincial councils or parliament. More than half do so through face-to-face meetings or events and almost a quarter do so because of personal family connections. It is most common for DPOs to engage with elected bodies once a month or once every two months.

All but two of the respondents who have working relationships with elected bodies felt they supported their work. Overall, support was classified as general support to DPO projects, assistance in solving problems in the community, and helping DPOs gain government support and attention when needed. A couple of DPOs from Parwan and Kabul relayed negative views that elected bodies 'promised to help, but never actually helped us' however, another DPO in Kabul felt that elected bodies tend to support them more than the government.

All but one DPO felt their working relationships with elected bodies resulted in positive outcomes. When asked to explain why/provide examples, the data here is skewed because 78% simply specified as to whether or not the outcome was positive, negative, or a mix. However, of those DPOs who gave more detailed answers, examples included that relationships resulted in services being provided to PWDs, (land, construction of a township for PWDs, provided database for PWDs, patronage, more facilities), assistance with identifying PWDs and therefore making it easier to reach them, and helping DPOs build relationships with other organisations.

Every single respondent who engages with elected bodies felt their working relationship could be improved. It was felt this could be done through continuing to meet with each other and coordinating where possible when it came to issues of mutual interest and share views and consult each other on a more systematic basis.

NGOs: 67% of respondents engage with NGOs; 22 of those through formal partnerships on projects, 15 through taking part in NGO meetings/events, 12 as members, 4 by personal/family connections, and 3 through engaging on specific advocacy or awareness initiatives led by NGOs. DPO engagement with NGOs is reported as usually being as frequent as once a month or once every two months.

All but two DPOs engaging with NGOs felt NGOs were supportive of their work. This was because NGOs supported DPOs in ensuring service provision to PWDs, including in the health and education sectors, provide capacity building opportunities, and assisting with or supporting DPO advocacy, information-sharing, and/or awareness raising programmes.

All but two DPOs reported that the interaction had produced positive outcomes. Examples of positive outcomes include NGOs ensuring services were provided (such as wheel chairs, education, office supplies, and training) and one DPO in Herat reported that NGOs helped them build relationships with other institutions.

However, 95% of respondents who engage with NGOs felt their relationships could be improved. It was felt this could mainly be done by working more collaboratively together on projects and decision-making, being more involved in each other's work, especially when it comes to awareness raising on disability rights, and having more systematic information-sharing. It was also recommended that interactions include NGOs providing technical support to DPOs, including when it comes to developing documentation (such as Statutes and policies), and that training and skill-building opportunities continue.

Other DPOs: 75% of survey respondents (63 out of 84) engage with other DPOs, usually on a monthly or weekly basis and; 60 reported they felt other DPOs support their work. The DPOs surveyed said that other DPOs were most helpful in supporting their advocacy or through doing policy and advocacy work together; as one stated 'we get united on confronting government policies'. In Kabul, one DPO reported 26 DPOs coming together on specific issues. Other positive engagement is through playing a 'teaching and advising' role wherein DPOs reported learning from each other and continuously staying in touch when possible helps build their capacity as a group. The positive outcomes of these were seen to be improved implementation of projects, better information-sharing and coordination, and improved learning. They also sometimes help each other in addressing their own accessibility needs.

However, almost all felt that their working relationships with other DPOs could be better. It was suggested this could be done by working together more often and coordinating to provide a common voice on and support each other on common goals.

Community leaders and members: 54% of respondents have working relationships with community leaders and/or members. Unlike all of the other stakeholder groups, the majority of DPOs who engage with community leaders and members do so through personal or family connections.

The forms these engagements take was not sufficiently captured in the data set however, three DPOs mentioned that community leaders or members attend their advocacy meetings and one said they visit their centre. In any case, engagements are reported to be quite frequent with 22% meeting every two weeks, 35% meeting once a month, and 20% meeting once a month.

All but one DPO felt that community leaders and members were supportive of their work. This has taken the form of community leaders/members assisting DPOs with the implementation of their projects (by providing advice, help in planning and organisation, and general cooperation). Interestingly, the second highest form of support was said to be through 'social support' or through 'socializing' which aids DPOs and PWDs in gaining space and acceptance within their communities to participate in society and conduct their work. This is the only stakeholder group in which this type of support was identified.

Every single DPO which engages with community leaders and members said the engagement had positive outcomes, which for most, resulted in societal acceptance of their work and operations. All but two felt their relationships could be improved and; that this could be done through more mutual consultation and working together, as well as more systemic meetings and dialogue.

Other: Media outlets were identified as another stakeholder with whom DPOs engage on advocacy and awareness raising messages and which could be improved.

e. DPOs views on Disability Rights Watch Afghanistan (DRWA) and membership

Respondents were given information about DRWA and asked their views about the idea and how such a network could support them and their work.

All of the DPOs currently conducting advocacy efforts said the DRWA would be valuable to them and would help 'make our silent voices louder'. It was thought that the DRWA would provide an opportunity to support advocacy initiatives on a number of fronts – firstly through providing financial support for campaigns, secondly through coordinating efforts, strategic planning, and delivery of messages, and third as a network which could provide workshops and training to its members on networking and advocacy methods. 'Unifying our voices' or 'uniting all DPOs around the country' was a common role seen for DRWA to play.

Several DPOs which felt their advocacy had been ineffective suggested that DRWA act as a coordinating body, which could connect them to hard-to-reach decision-makers, building their advocacy skills, and help them in 'making better plans'. The fact that DPOs do not have many resources was raised as a challenge and in fact, several saw DRWA as a source of financial support. It was raised that DPOs generally do not have the facilities and means to consistently support a secretariat so DRWA would need to consider costs for booking venues/meeting rooms and covering expenses for DPOs travelling to attend.

Participants were asked if they would be interested in DRWA membership and if so, whether they would be in a position to pay a minimal membership fee.

Eighty-three of the 84 DPO participants surveyed expressed a desire to join the DRWA. Of the 83 wanting to join just over half said they could not pay an annual membership fee. Many of those opposed to a membership fee do not receive regular funding or income generation therefore the DRWA would need to find a flexible and inclusive membership programme to ensure who could not pay a membership fee could DPOs join. The 40 DPOs with the capacity to pay a membership fee set amounts ranging from \$100 a month to just \$2 a month.

The rationale for joining the DRWA varied. It is seen to present an opportunity for DPOs to unify under a single banner and present a stronger voice. Through this, DPOs could collaborate, exchange ideas, share information and build their capacity, especially in advocacy and policy-making on priority issues.

DPOs recognised the DRWA's potential for coordinating awareness raising campaigns and supporting travel opportunities for PWDs to connect more on local advocacy efforts. Many DPOs said they expected financial aid from DRWA and/or direct partnerships on new projects.

Respondents emphasised the need for DRWA to provide honest, unbiased support and that it be Afghan-led.

DPOs surveyed suggested meeting with CCD to further discuss how the DRWA can be effective on addressing the most pressing issues (this was subsequently arranged through a consultation workshop in Kabul in February 2019).

f. Additional points and reflections

DPOs were asked if they knew of other DPOs in their provinces who should be included in the survey. Over half of respondents suggested one or more additional DPO in their province. Due to time constraints, these DPOs could not be included in the survey but will be included in future consultations and communications about DRWA. They include a number of DPOs who identify themselves as Women's Institutes in Takhar and Logar.

Additional comments and questions from DPOs focused around reiterating the importance of the DRWA as a coordinating body, governed by Afghans and tasked to unite DPOs and address PWD rights at national and international levels. Other DPOs reiterated their need for skills building workshops and recommended face-to-face meetings with CCD to discuss how the DRWA would form and sustain itself in the future. A consultation workshop was run by CCD in February 2019 in order to do so.

g. Lessons learnt and further reflections

As the questionnaire covered multiple objectives, it was very long and time-consuming to deliver. Questionnaire Administrators recommended shorter questionnaires in future. Overall, participants were thought to understand the questions well however a few interviewers found illiteracy of interviewees to be a challenge and felt this could be avoided in future if interview questions were phrased in more direct or simple terms.

While it was only possible to administer the questionnaire in 22 of the 34 provinces, questionnaire administrators agreed that in future, efforts should be made to cover all 34 provinces and this could be made possible by again seeking the support of DPOs in the provinces by bringing them to Kabul for training in how to administer a questionnaire and record and collect data.

The strengths of the questionnaire were that it has allowed the number of DPOs in certain provinces to be identified and engaged, which is promising for future DRWA initiatives and

general contact with DPOs in the provinces has already proved useful in linking up with existing work being done. A key lesson learnt was that there are far fewer women-led DPOs than was expected and the needs and voices of women and girls with disabilities will therefore need to be further explored by DRWA and its members.

Findings also show that there is a particularly high number of beneficiaries of DPOs in Bamiyan and Daikundi provinces, which was not expected. Questionnaire Administrators noted that DPOs may look very simple in their form and activities, but their efforts add so much to the lives of PWDs they are able to reach. They highlighted that much more can be done to provide and improve the organisation of and technical support for, DPOs.

Questionnaire administrators reflected that the interviews further highlighted current perceptions about disability. Most citizens still view PWDs as people who are not able to do or accomplish anything. PWDs are economically poor, usually fighting poverty, most are illiterate and have no access to free education, face stigma, and must 'always remain quiet and stay in the backseat of society, especially women'. Despite the increasing number of disabilities due to war - daily attacks and explosions, there is no major strategy for the safety of civilians or those disabled as a result. Despite all of this, as stated by one questionnaire administrator, 'PWDs are courageous, strong, soft-hearted; they suffer in poverty, pain, grief, illiteracy – despite it all, living a hopeful life and willing to help and work for a better future'.

Annex One

Mapping of Disabled Persons' Organisations in Afghanistan

Name of questionnaire administrator: _____

Date questionnaire was administered: _____

Method of administration: a) phone, b) face-to-face, c) other, please specify _____

Instructions to the questionnaire administrator:

- a) Please conduct the interview in safe place, one that is accessible to the interviewee and where he/she feels secure. Aim to conduct the interview in a setting which affords visual, physical, and auditory privacy.
- b) Carry your CCD identification card and if needed show it to the interviewee.
- c) If the interviewee is a new contact, tell them how you got their contact information.
- d) If the interviewee has any questions about the CCD, DRWA and other aspects of your work, allow them to ask the question. Then answer their questions calmly and completely. If you are not able to answer them, be honest and tell them that you would get back after finding the answer from colleagues. You can use the information in the introduction section. If they didn't ask questions, you should still tell them the info in the introduction section.
- e) Please don't press if the interviewee doesn't want to answer any/some questions.

Questionnaire

Introduction:

Community Centre for the Disabled (CCD) is an Afghan non-government organisation established in 2004. We have been involved in [mention the main services/activities]. With the support from UKAid Direct, and BAAG, our partner agency, we are working to re-establish and expand the Disability Rights Watch Afghanistan (DRWA), a national network that will monitor the rights of People with Disability (PwD) and advocate for better support to them.

Our understanding of disability is broad. We think that, “disability is the condition that results from the interaction between an individual impairment in functioning and the community and social resources, beliefs and practices that enable or prevent a person from participating in all spheres of social life and taking decisions that are relevant to his/her own future.”

At the moment, we are carrying out a survey in 22 provinces in the country to identify the Disabled Persons’ Organisations (DPOs) and how they can be best supported. The survey does not aim to provide material and financial support to DPOs or individuals. Your responses will help us a great deal and we really appreciate your time for taking part in this survey.

We treat your information very sensitively. We will keep these documents very safely. The paper versions will always be kept in secure place and the digital copies will be password protected. CCD and BAAG will not share your information with any other body without your written consent.

The answers to this questionnaire are optional so if you don’t want to answer particular questions, please feel free to not do so. Our questions are not too sensitive and is not likely to put you and/or your organisation under any kind of risk. However, if you wish so, we can anonymise your identity. So if you don’t want to tell us your name, it is not a problem. The interview is likely to take 60 minutes.

Before we start the survey, please let us know if you have any/any other question.

If you are happy to take part in this study and for us to use your info, please sign here.

Name: _____

Contact number/email: _____

Date: _____

Signature of the interviewee (optional): _____

Signature of the administrator: _____

A. General questions:

1. Respondent:

1.1. Name: _____

1.2. Gender: a) male b) female

1.3. Age/Age group: _____ a) 18 – 30, b) 30 – 50, d) 50+

1.4. Job title: _____

1.5. How do you identify yourself? a) Person with no disability or b) Person with disability

1.6. If PwD: Please say what type of disability/disabilities? [*Questionnaire administrator can see Annex 1 for more info*]

a) Physical and sensual difficulties

1. Lack part of/entire members of body
 2. Difficulties that impede movement or mobility
 3. Visual impairments
 4. Hearing impairments
 5. Speech impairments
- b) Intellectual and learning difficulties
 - c) Behavioural and psychological difficulties
 - d) Communication and social functioning difficulties
 - e) Fits and Seizures
 - f) other, please specify _____

2. Name of the organisation/group that you represent: _____

2.1. Legal status of the organisation: a) registered b) not-registered

2.2. If the organisation is registered, please write the registration number and the entity with which it is registered. _____

2.3. Year of establishment: _____

2.4. Are you member of a network? a) yes, b) no

a) If yes, please name? _____

2.5.

2.6. On what category/categories of disability is your work focused? [please select one or more of the following options]

a) Physical and sensual difficulties

1. Lack part of/entire members of body
2. Difficulties that impede movement or mobility
3. Visual impairments
4. Hearing impairments
5. Speech impairments

b) Intellectual and learning difficulties

c) Behavioural and psychological difficulties

d) Communication and social functioning difficulties

e) Fits and Seizures

f) other, please specify _____

g)

2.7. Where do you work? Which province/district/villages?

2.8. Do you have staff in your organisation? a) yes, b) no

a) If yes, how many are they? _____

b) How many are men and how many are women? _____

c) How many staff are on paid basis? _____, man _____, woman _____

d) How many work on voluntary basis? _____

e) If you have membership, how many members? _____ man _____, woman _____

2.9. Does your DPO have a place to work? a) yes, b) no

2.10. Does the organization have a place to invite other people to meet? a) yes, b) no c) yes, but not big enough

B. Questions about the organisation's work:

3. Why was your organization set up? To do what?

4. What are your organisation's objectives/plans now?

5. Do you have a written Statute? a) yes, b) no

5.1. If yes, can we have a copy? a) yes, b) no

6. Does your organization receive any financial contribution? a) yes, b) no

6.1. If yes, from whom and for what?

7. What activities have you conducted in the last two years?

8. How many direct beneficiaries approximately have you been able to reach in these two years?

8.1. How many of them were PWD? _____

8.2. How many men? _____

8.3. How many women? _____

9. Which of your activities have been effective?

9.1. Please tell us why you think so? [Please encourage the respondent to tell stories about their own lives, the lives of their colleagues or beneficiaries that have improved as a result of their work].

10. Which of your activities have not been effective? [Please encourage the respondent to tell stories about the obstacles they have faced].

10.1. Why they haven't?

11. Could DRWA support you in your work? a) yes, b) no

11.1. If so what kind of support? Please give examples.

12. Do you do any advocacy work? a) yes, b) no [if this question is already answered, please skip all sub-questions of 12]

[Note to the questionnaire administrator: By advocacy we mean, any activity that seeks to ensure that people, particularly PwD, are able to raise their voices in policies, practices and decisions of government and private businesses; and defend their rights.]

12.1. If so please give examples:

12.2. What were the results?

12.3. Do you think your advocacy work has been effective? a) yes, b) no

12.4. Please tell us why you think so?

12.5. What still needs to be achieved?

12.6. Could DRWA support you in your advocacy work? a) yes, b) no

a) If so what kind of support? Please give examples.

C. Questions and the organisation's relationship with other stakeholders?

13. Do you work or have working relations with other stakeholders? a) Yes, b) no.

13.1. If yes, please tick one or more:

- a) Government officials/government organisations,
- b) Elected bodies such as provincial council and the parliament
- c) NGOs,
- d) Other DPOs,
- e) Community leaders and members,
- f) Other people/organisation? Please specific _____

14. If the answer to the Government official/organisations is "yes":

14.1. What kind of working relations do you have with them?

- a) Partner (implement project with/for them)
- b) I am their member
- c) I know them personally/is my family member
- d) I take part in their meetings/events
- e) I talk to them over phone/email
- f) Other please specify:

14.2. How often do you meet/relate to them? Please tick:

- a) Once a week
- b) Once in two weeks
- c) Once a month
- d) Once in two months

- e) Four times a year
- f) Once in six months
- g) Once in a year
- h) Other, please specify: _____

14.3. Do they support you in your work? a) yes, b) no
a) If yes, how?

14.4. Has this relationship produced any positive or negative outcome for you and/or the organisation? a) yes, b) no
a) If so, please give examples:

14.5. Can your interactions be improved? a) yes, b) no
a) If so, how? please give examples:

15. If the answer to the elected bodies such as provincial council and the parliament is "yes":

15.1. What kind of working relations do you have with them?

- a) Partner (implement project with/for them)
- b) I am their member
- c) I know them personally/is my family member
- d) I take part in their meetings/events
- e) Other please specify:

15.2. How often do you meet/relate with them? Please tick:

- a) Once a week
- b) Once in two weeks
- c) Once a month
- d) Once in two months
- e) Four times a year
- f) Once in six months
- g) Once in a year
- h) Other, please specify: _____

15.3. Do they support you in your work? a) yes, b) no
a) If yes, how?

15.4. Has this interaction produced any positive or negative outcome for you and/or the organisation? a) yes, b) no
a) If so, please give examples:

15.5. Can your interactions be improved? a) yes, b) no
a) If so, how? please give examples:

16. If the answer to the NGOs is "yes":

16.1. What kind of working relations do you have with them?
a) Partner (implement project with/for them)
b) I am their member
c) I know them personally/is my family member
d) I take part in their meetings/events
e) Other please specify:

16.2. How often do you meet/relate with them? Please tick:
a) Once a week
b) Once in two weeks
c) Once a month
d) Once in two months
e) Four times a year
f) Once in six months
g) Once in a year
h) Other, please specify: _____

16.3. Do they support you in your work? a) yes, b) no
a) If yes, how?

16.4. Has this interaction produced any positive or negative outcome for you and/or the organisation? a) yes, b) no
a) If so, please give examples:

16.5. Can your interactions be improved? a) yes, b) no
a) If so, how? please give examples:

17. If the answer to the other DPOs is "yes":

17.1. What kind of working relations do you have with them?

- a) Partner (implement project with/for them)
- b) I am their member
- c) I know them personally/is my family member
- d) I take part in their meetings/events
- e) Other please specify:

17.2. How often do you meet/relate with them? Please tick:

- a) Once a week
- b) Once in two weeks
- c) Once a month
- d) Once in two months
- e) Four times a year
- f) Once in six months
- g) Once in a year
- h) Other, please specify: _____

17.3. Do they support you in your work? a) yes, b) no

- a) If yes, how?

17.4. Has this interaction produced any positive or negative outcome for you and/or the organisation? a) yes, b) no

- a) If so, please give examples:

17.5. Can your interactions be improved? a) yes, b) no

- a) If so, how? please give examples:

18. If the answer to the community leaders and members is "yes":

18.1. What kind of working relations do you have with them?

- a) Partner (implement project with/for them)

- b) I am their member
 - c) I know them personally/is my family member
 - d) I take part in their meetings/events
 - e) Other please specify:
-
-

18.2. How often do you meet/relate with them? Please tick:

- a) Once a week
- b) Once in two weeks
- c) Once a month
- d) Once in two months
- e) Four times a year
- f) Once in six months
- g) Once in a year
- h) Other, please specify: _____

18.3. Do they support you in your work? a) yes, b) no

- a) If yes, how?
-
-

18.4. Has this interaction produced any positive or negative outcome for you and/or the organisation? a) yes, b) no

- a) If so, please give examples:
-
-

18.5. Can your interactions be improved? a) yes, b) no

- a) If so, how? please give examples:
-
-
-

19. If the answer to other people/organisations is "yes":

19.1. What kind of working relations do you have with them?

- a) Partner (implement project with/for them)
 - b) I am their member
 - c) I know them personally/is my family member
 - d) I take part in their meetings/events
 - e) Other please specify:
-
-

19.2. How often do you meet/relate with them? Please tick:

- a) Once a week

- b) Once in two weeks
- c) Once a month
- d) Once in two months
- e) Four times a year
- f) Once in six months
- g) Once in a year
- h) Other, please specify: _____

19.3. Do they support you in your work? a) yes, b) no

a) If yes, how?

19.4. Has this interaction produced any positive or negative outcome for you and/or the organisation? a) yes, b) no

a) If so, please give examples:

19.5. Can your interactions be improved? a) yes, b) no

a) If so, how? please give examples:

D. Questions and the organisation's willingness to be part of DRWA?

20. Do you think you/your organization would like to be part of it? a) yes, b) no

21. What would you like/expect DRWA to provide?

22. If DRWA membership had annual fees, would you be able to pay it? a) yes, b) no

22.1. If yes, how much? _____

E. Final questions:

23. Is there other DPO/DPOs in your province that we should include in this survey? If yes, can you please provide us their name and contact info?

24. Do you want to add anything else?

25. Do you have any questions?

26. Do you want to have our contact details for future relations?

If yes, this is the number/email of our team leader in Kabul:

Thank you very much for you time. We really appreciate your contribution. The questionnaire ends here.

Reflections section/additional notes or reflections from questionnaire administrator:
