



## **Activity report**

**Name of Activity:** Awareness raising workshop

**Target Group/Audience:** Persons with Disabilities

**Date:** 10<sup>th</sup> August 2022.

**Venue:** Kafue District (Baptist Community Church)- Kanyanja

**RESULT 4: The political and social framework for children with neurodevelopmental disorders and their families has improved in the target area**

**Objective:** 1 day workshop for persons with disabilities to educate them about their general rights, entitlements to social benefits.

**Attendance Total:** M: 12 F: 11

### **Activity details**

**Result Area/ Activity No.:** 4.3.: Awareness raising workshop

On the 30<sup>th</sup> of August 2022, a five-days Entrepreneurship workshop was conducted at Chilambila Community School in Chilambila Kafue District. The meeting was attended by 20 parents of children with neurodevelopmental disabilities who were previous trained in Village Banking. The meeting was aimed at raising awareness among people with disabilities on issues such as human rights, disability

concepts and approaches to disabilities, barriers persons with disabilities face, and help them know and understand their rights as well as know and understand the international local legal frameworks that protect the rights of persons with disabilities. furthermore, the training was aimed at helping them have a better understanding for their entitlements, participate in advocacy and approach different stakeholders for their different needs and services. The training was facilitated by Madam Getrude Kapulisa, the executive director from Archie Hinchliffe Disability Intervention (AHDl). The first session of the meeting started by looking at the definitions of disability. Disability was defined as the outcome of an interaction between health conditions and impairments and the physical, human-built, attitudinal, and social environment according to the International Classification of the Functioning, Disability and Health. It was also defined as a permanent physical, mental, intellectual, or sensory impairment that alone, or in combination with social or environmental barriers, hinders the ability of a person to participate in society fully or effectively on an equal basis with others according to the Persons with Disability Act of Zambia, 2012. Lastly, described in the 2006 UN CRPD as including 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.

After define disability, the facilitator then engaged the participants by dividing them in various groups and gave them the task to list the types of disabilities they knew and how each type of disability they listed may be come about in or to an individual. After their group discussions, the participants selected representatives that presented made presentations of the discussions in front to other participants. The presentations highlighted the following: Stroke, Fits, blindness, heart attack, knocked knees, physical disability, albinism to mention among others as types of disabilities that may be caused by alcohol abuse,

having to many thoughts, road accidents and indicated for some disabilities like knocked knees -that they did not know the causes.

From their presentations, it was clear that there was a huge knowledge gap as they could not distinguish what disability was. This gave the facilitator an opportunity to bridge up the knowledge gaps by pointing out why for instance stroke, fitting and albinism could not be categorized as disabilities in that they do not hinder an individual's full and effective participation in line with almost all the definitions of Disability and that disability is a condition rather than a sickness. She explained that disability can be congenital or acquired and listed the major causes of disability globally as; chronic and other diseases, injuries, mental and psychosocial impairments, drugs and alcohol abuse, birth defects, malnutrition, HIV/AIDS, and other Communicable diseases. After pinpoint some causes of disabilities, she then also moved on and gave examples of disability such as Cerebral Palsy which occurs in children between the age of 0- 5 years old and that its damaged to an immature brain, down syndrome, club feet, hydrocephalus, blindness, deafness among others.

In the second session of the training the facilitator moved on to talk about the Barriers people with disabilities face. Barriers were defined as obstacles that do not allow people with disabilities participate in various programs or activities or things that exclude them from taking part in programs or activities that could be of benefit to them just like another able-bodied individuals. Among the barriers that were talked about were:

- i) Environmental Barriers- under these, the facilitator highlighted things like distance, structures that do not put into consideration the challenges people with disabilities may face when having access to a building for instance a two-story building that only has staircases and

does not accommodate a person on a wheelchair to easily have access to the other part of a particular structure/building. Secondly, she also gave an example of public transport, people with disabilities may face challenges to move from one place to another because most modes of transport cannot easily be utilized by people with disabilities due to the set in the sitting arrangements and space that is only designed to let in only people with disabilities.

ii) Institutional Barriers- under these she highlighted that there are certain laws that are put in place in certain institutions that infringe on the rights of people with disabilities. despite having laws that promote inclusiveness for people with disabilities, there are still some laws that silently exist within society that do not favor people with disabilities. For instance, people with disabilities are sometimes denied access in schools to peruse their desirable courses like IT, teaching, Engineering and are encouraged to peruse courses such as tailoring, carpentry to mention but a few and as are result they may be discouraged and opt to stay home and meant to believe that they cannot do certain things because of their conditions thus being excluded from attaining a certain level of knowledge that may be very useful to them.

iii) Attitudinal Barriers- these are barriers that hinder full participation or full access to a particular service or services because people with disabilities are just thought of as people who cannot manage to do things on their own. The attitudes of the people within the communities where people with disabilities live just naturally believe that a person with a disability is completely not useful and cannot learn anything due to their disabilities. she pointed out that this should not be the case as people with disabilities also have certain activities they can do. Secondly, she also said just like any other person, they too need to have access to good and quality medical care and services. Their disability should not make people think that they have a short

life span and hence they do not deserve to have access to education, medical care, recreation, and other social benefits.

Having discussed the barriers, the facilitator moved on to discuss the human rights, this was aimed at raising awareness among people with disabilities on the rights they have- so that they can better advocate for better conditions and overcome some barriers such as those highlighted above.

Guidelines such as the local and International Human Rights Laws and Policies like PWD ACT No. 6 of 2012, the Universal Declaration of Human Rights, and the United Nations Convention on the rights of the child (UNCRC) to mention but just a few, were highlighted to raise awareness on the existing guidelines aimed at protecting persons with disabilities from harm. In addition, the PWD Act was explained it was linked to the UNCRPD and role of ZAPD in brief too.

Last but not the least, the facilitator also discussed with the participants on Advocacy. Advocacy was defined as an activity by an individual or group that aims to influence decisions within political, economic, and social institutions. Persons with disabilities were told that they can mobilize themselves and identify challenges they face that excludes them from participation or benefiting from social and economic benefits. They could also identify various stakeholders they could work with to have their concerns represented during development planning meetings be it at community level, district level and even national level. The facilitator highlighted a few stakeholders among many others such as the Traditional leaders (chief, the headmen), councillors, Members of Parliament that can be engaged to address the challenges they face as persons with disabilities.

Persons with disabilities were grateful to have been part of such an informative training and requested for the organisations involved to continue organising trainings of such nature so that they can have an opportunity to have access to new information that is of great value to them.

**Outline achievements:**

- Appreciation of the knowledge learnt and shared
- They gained knowledge on what disability is how it may come about
- Gained knowledge on the human rights and rights of persons with disabilities
- Gained knowledge how they can advocate for better services and care to address the barriers they face

**Challenges:**

- Training started late because upon arrival, the driver had to cover long distances to pick participants that have mobility challenges to due long distances
- Time was limited as the training started late and ended slightly early to allow the driver to drop off participants that were coming from far places forcing members of staff to travel in the night back to Lusaka.
- Funds for assistants to people with disabilities were not catered for

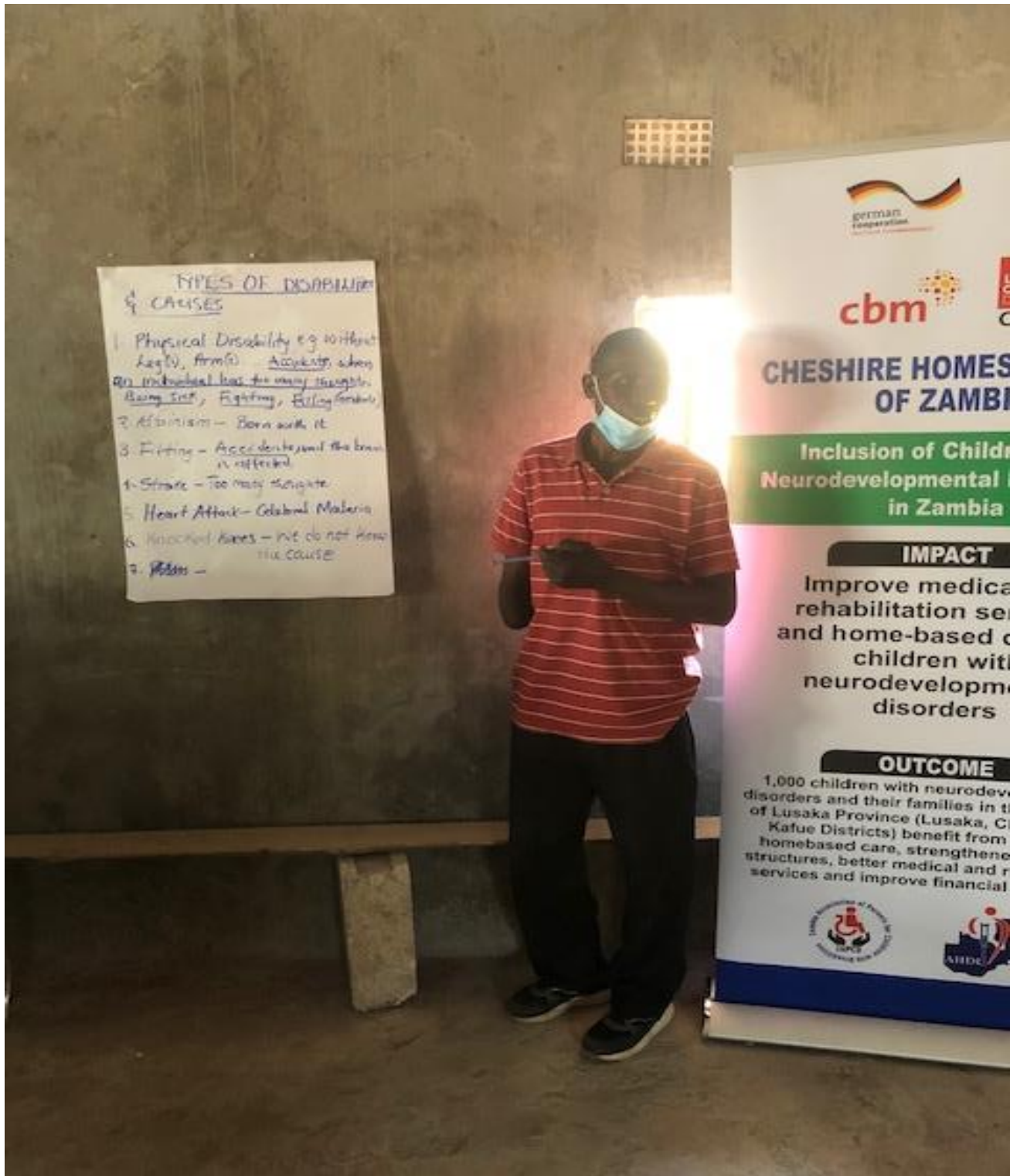
**Lessons Learnt:**

- Despite having disabilities, persons with disabilities still lacked adequate information regarding disability, and disability was perceived among them as sicknesses rather than a condition. After the training, persons with disability were able to distinguish the difference between their conditions and sickness. On the other hand, they also lacked information on the basic rights to take part in various social and economic activities because of their conditions. They believed their various disabilities automatically excluded them from enjoying social, economic even political benefits just like any other person.

## **Recommendations**

- Allocated some funds to carter for assistants for persons with disabilities

## Pictures



Person with a disability making a presentation





persons with disability during a group discussion



**Facilitator assisting a blind woman during an energizer**



**Persons with disability during group work**

**Convener/Organizer:** AHDI/CHESHIRE HOMES

**Report compiled by:** Ms. Betty M. Mukonka

**Date when compiled:** 15<sup>th</sup> AUGUST 2022.