

Report on the Deliberative Panel of the Market-Based Solutions for the Extreme Poor programme

With support from the Rockefeller Foundation



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1. List of acronyms

ADD International	Formerly known as Action on Disability in Development
AMFIU	Association of Microfinance Institutions of Uganda
CDO	Community Development Office
CDD	Community-Driven Development
IDS	Institute of Development Studies
MFI	Micro Finance Institutions
NGO	Non-Governmental Organisation
SACCO	Savings and Credit Cooperative Society
VSLA	Village Savings and Loan Association

2. Introduction

This report describes the discussions held by a deliberative panel on disability in Uganda. The panel formed part of a wider research project on ‘market-based solutions for the extreme poor’ funded by the Rockefeller Foundation. The Foundation was interested in how market activity (broadly defined) could reach and potentially benefit the very poorest and most marginalised people. The research team proposed that this issue was looked at through the lens of disability, since persons with disabilities account for around 20 per cent of the population in Uganda,¹ and persons with disabilities are usually among the poorest.

¹ Uganda Bureau of Statistics (2012) *Uganda Demographic and Health Survey 2011*, Kampala: Uganda Bureau of Statistics, www.ubos.org/onlinefiles/uploads/ubos/UDHS/UDHS2011.pdf (accessed 3 January 2017)

The research focuses on two localities: the urban location of Kawempe on the outskirts of Kampala, and the rural neighbourhood of Gulu.

The research was participatory, and we emphasise this. Participation requires more than involvement. It means that the analysis of data and evidence is done by the people involved in the process. In the first phase of fieldwork, persons with disabilities worked as peer researchers. In the deliberative panel, a wider group of local stakeholders took part, and at the Bellagio event there was a mix of global decision makers and people with experience nearer the grassroots. The starting point for the research was that persons with disabilities could and should research their own realities and determine in dialogue with others what needs to be done in response to what they have learned.

The research was carried out by a consortium of organisations: the Institute of Development Studies (IDS), ADD International and the Coady International Institute. Within IDS the research was carried out collaboratively by the Participation Cluster and the Markets, States and Society Cluster. IDS had previously piloted similar work with ADD International (and Sightsavers and HelpAge International) in Bangladesh. IDS has collaborated with the Coady Institute on participatory economic analysis.

This views of the panellists were written up and edited by Danny Burns, Erika Lopez Franco and Yogesh Ghore.

3. Research design and methods

The overall design of the research involved three elements:

- 1 The first element was a literature review and development of a typology of market-based and market-systems approaches for extremely marginalised populations.
- 2 The second element included the collection and analysis of 102 life stories, which focused on experiences of work and livelihood generation within the broader context of a person's life experience. These were analysed collectively in a week-long workshop and a report was produced summarising the key issues and discussions. The focus of this work was primarily diagnostic, with some early thinking on solutions. The report is authored by the peer researchers, all of whom are persons with disabilities, with co-authoring support from IDS and ADD International.
- 3 The third element of the research was an investigation of the 'market system' within the two localities – Gulu and Kawempe – where this research was undertaken. This included interviews and focus groups, and involved various mapping exercises.

A week-long deliberative panel with an expanded group of relevant Ugandan stakeholders then debated the findings of these three elements, with a particular emphasis on the second and third. Here, the focus was on finding solutions to the problems that had been identified in the earlier stages.

This report describes the findings of the deliberative panel.

The panel met for five days. It comprised 17 people: six peer researchers, one trader, one market leader, two staff and one leader from organisations of persons with disabilities, one Disability Rights Non-Governmental Organisation (NGO) staff member (Sight Savers), three government officials, one community /opinion leader and one ADD International staff member. The group did not include all impairment types, and specifically did not include persons with intellectual disabilities or persons with psychosocial disabilities (please refer to the appendix for more detail). The findings cannot be generalised to these other groups, which often experience particularly extreme stigma; this would be an interesting area for further investigation.

The purpose of a deliberative panel is to bring diverse stakeholders together to critically interrogate an issue or issues. They need to have time to build a relationship of trust, and time to think and reflect on the issues that emerge in contrast to typical research processes in which people are asked to give their opinion on things without having time to digest the evidence and make sense of it. Deliberative processes enable this to happen. The schedule for the five days of the panel meeting was as follows:

Day One: Getting to know each other and building trust

Day Two: Understanding the issues

Day Three: Focusing on five key issues that emerged from the life-story analysis

Day Four: Identifying solutions to the critical issues

Day Five: Dialogue with policymakers and other decision makers to discuss the findings.

Deepening the understanding of the challenges and thinking about strategies to overcome them

As mentioned in the introduction, the main objective of the deliberative panel was to draw out strategies to overcome the challenges faced by persons with disabilities in benefiting from market-based approaches to development. Because of the mixed composition of the panel, it was important to share a starting point and deepen the understanding of the challenges, integrating the diverse views in the room. Needless to say, there were conflicting opinions, so taking the time to question and improve the understanding of the diverse viewpoints in itself provided valuable insights for thinking about strategies.

The peer researchers presented to the wider panel the eight challenges identified in their analysis of the 102 stories collected from other persons with disabilities living in poverty². The other panellists shared their views on the main challenges they perceived that persons with disabilities systematically face in the Ugandan context. There were immediate differences between the story analysis and the panel deliberation. For example, in the panel several points surfaced in relation to the way that persons with disabilities are perceived to be 'blocking themselves'. The panel members noted a lack of support for collective endeavours by persons with disabilities, and the lack of a genuine collective spirit among

² The peer researchers published a report with their own analysis of the stories collected. This report will be available soon on our website.

persons with disabilities, beyond applying for grants. In this way, new perspectives on the research process allowed us to better understand the complexities of tackling the inequalities that persons with disabilities face.

4. Key issues

The diverse issues identified by participants can be grouped into five broad categories:

- Social norms which discriminate, overlook and minimise the role of persons with disabilities in society;
- Barriers to collective action by persons with disabilities;
- Limitations for persons with disabilities in accessing markets;
- Barriers for acquiring credit, loans, savings and capital;
- Lack of adequate infrastructure and services.

The following sections present a summary of the discussions, which deepened our understanding of the issues and presented potential strategies for overcoming them.

4.1 Social norms

There are social norms that discriminate against, overlook and neglect the value of persons with disabilities to society.

Situations of discrimination, neglect and abuse towards persons with disabilities were common across the stories collected for this research. Peer researchers also shared their personal experiences. Participants reflected on their observation that there is greater acceptance of persons with disabilities who acquire impairments compared to those born with impairments. Those born with an impairment are seen by many as a curse in both urban and rural settings. Moreover, perceptions of them as dependents, 'used to receiving handouts', helpless and in 'need of sympathy' abound. Participants stressed the fact that persons with disabilities themselves often internalise social norms around their own 'lower value'. This is manifested in simple actions such as persons with disabilities preferring to trade and work with persons without disabilities. As one panellist with a disability commented, 'There is limited/no ability within the persons with disabilities, hence no need for the cooperation.'

Having strong self-esteem and confidence were identified by peer researchers as key personal attributes in the positive stories of persons with disabilities who had successful businesses. This was also explored under key issue 2 on collective action. A contrasting view came from another peer researcher who stated: 'As persons with disabilities, we always think we are not what **you** think we are. We are beyond our disability.' This powerful statement led the group to unpack the reasons behind the persistence of these negative perceptions of persons with disabilities. It was agreed that the 'strangeness' of persons with disabilities to the majority of the population was a determining factor in the emergence of these prejudices; most people in society have not interacted on a regular basis with persons

with disabilities, which results in a negative mindset and attitudes towards them. The negative perception that persons with disabilities have internalised from others around them also spreads to the wider community, generating a vicious circle which is hard to break.

Potential strategies

The discussions concluded that there is a need to change society's perceptions from discrimination to recognition. To allow society, and persons with disabilities themselves, to recognise the value that persons with disabilities bring as equal members of the community, panellists listed the following strategies:

- 1 Involve persons with disabilities in more community activities so others get to know them better;
- 2 Build the confidence of persons with disabilities, to motivate them to struggle against the odds;
- 3 Provide psychosocial support to individual persons with disabilities to overcome the stigma that they have internalised;
- 4 Organise career fairs (with persons with disabilities exhibiting) because communities believe in seeing, and 'seeing is believing';
- 5 Use role models – examples of successful persons with disabilities in the market;
- 6 Emphasise positive parenting: a child can grow up with a positive mentality if the family supports him/her. It is key to work with families of persons with disabilities so that they learn to treat the child with a disability equitably with their siblings.

It was not possible to discuss all of these strategies within the time available at the panel. Nonetheless, it was possible to see the interconnections between some of them; for example, the fact that providing counselling sessions for individuals with a disability is a valuable way to overcome stigma, but will have a limited effect if it is not accompanied by counselling for parents and other family members. The following two strategies were prioritised by the panellists and discussed in much more detail.

Strategy 1: Role models

Bringing persons with disabilities and the general population close to individuals or groups of persons with disabilities who have thrived against the odds is a strategy which can attain at least four objectives:

- 1 Expose wider society to the existence of individuals and groups of persons with disabilities who are doing business effectively – and to the possibilities that exist if persons with disabilities are able to access their rights;
- 2 Motivate and inspire other individuals and groups of persons with disabilities, providing a sense of 'if he/she/they can do it, I/we also can';
- 3 Foster healthy competition among persons with disabilities;
- 4 Mentor and advise other individuals and groups of persons with disabilities who want to start a market activity, because mentors with a disability will have credibility and perhaps share similar barriers.

The discussions identified two main avenues through which role models could be promoted. Firstly, events could be convened where role models with disabilities share their experiences. For the panellists, this face-to-face approach and direct contact was seen to be essential, because ‘seeing is believing’. It is also important that the role models are properly briefed about the objectives of the event and supported in public speaking and other necessary skills.

Secondly, exchange visits where persons with disabilities are taken to workplaces would allow them to understand the reality of the business and the context around its operation; role models could also come and visit the workplace of fellow persons with disabilities to provide advice. Interestingly, there was no mention of the need for large-scale national media sensitisation campaigns. Participants felt that these had been tried before but were not effective.

Defining who is a role model, what he or she looks like, and how to identify and reach out to such a person was central to the discussions. Role models can be identified through a combination of approaches. On the one hand, it was acknowledged that persons with disabilities know who among themselves inspire people. Some persons with disabilities might be successful businesspeople but not inspirational role models, because of the way they behave in the community. On the other hand, role models could be identified through the national disability structures in combination with the local councils and other community leaders. This second suggestion raised divergent opinions. In Kampala, the national structures of organisations of persons with disabilities often work with the ‘usual suspects’, so they might simply put their leaders forward as role models. In contrast, in Odek sub-county, since 2014 the National Union of Disabled Persons of Uganda has selected seven persons with disabilities as contact persons and area representatives. This group works with the Community Development Office (CDO) office and serves as a channel of communication to persons with disabilities. Since these people are spread across the sub-county, this was seen as an effective way for identifying role models in different communities.

This divergence of opinions confirms that it is not possible to rely on only one avenue for implementing a strategy such as promoting role models – multiple strategies and stakeholders are required. Moreover, whereas persons with disabilities can work with a range of institutions, they should not count on them to take the initiative; persons with disabilities themselves must be proactive. Identifying role models through an open invitation or call was a suggestion which could be further explored, but the context and ways of putting out this call must be properly understood.

Finally, in order to encourage relatively disadvantaged³ persons with disabilities to attend events and join work placements with role models, attention needs to be paid to factors which would enable their meaningful participation:

³ These recommendations reflect discussions among persons with physical and sensory impairments. Further deliberation would be needed on the factors to enable meaningful participation of other – often highly disadvantaged – impairment groups, such as persons with intellectual and psychosocial disabilities.

- Ensuring that assistive devices are available to enable persons with disabilities to access the meeting venue;
- Identifying accessible meeting spaces, such as sports fields, with enough chairs and tents provided;
- Providing sign-language interpreters;
- Organising transport for exchange visits;
- Ensuring accessibility to division chambers/council halls, etc. when convening smaller meetings.

Most of these requirements are cross-cutting to all strategies presented in this report and appear recurrently in the following sections.

Strategy 2: Social inclusion of persons with disabilities

The second strategy discussed in depth was the design and implementation of initiatives which promote the social inclusion of persons with disabilities in the larger community. In simple terms, the panellists defined social inclusion as persons with disabilities engaging in community activities on equal terms, to enable others to know them better, since there is a sense that ‘communities do not know how to interact with persons with disabilities’. Some broad objectives for social inclusion were identified:

- Ensure access to information on equal terms;
- Encourage and motivate persons with disabilities to continue their work;
- Increase the number of persons with disabilities benefiting from government services, programmes and grants;
- Change the perception of persons without disabilities about the value and role of persons with disabilities in society, which contributes to building self-esteem;
- Foster recognition of the equal rights of persons with disabilities.

Some of the panellists who work implementing community development programmes, including some that target persons with disabilities, mentioned that one major challenge is to get persons with disabilities to participate and join these endeavours. Peer researchers agreed but argued that often they do not receive invitations, the requirements are too complicated, people with higher educational levels are preferred, or there are infrastructural barriers to them accessing meetings. Some ideas emerged to respond to these concerns:

- Communication needs to be inclusive. A combination of media channels is required to reach out to people with diverse impairments, for example, using commercial radio, community radio, churches/mosques, vehicle stickers, posters on lamp posts and fences, and at sports venues. Drama was mentioned as a way to reach out to some of the more marginalised persons with disabilities.
- Promote registration of mixed groups. This enhances access to the four existing government programmes (Uganda Women Entrepreneurship Programme, Community-Driven Development (CDD), Uganda Youth Livelihood Programme and Disability Grant). In order to make these groups inclusive, two elements were

identified. Firstly, leadership positions have to be shared between persons with and without disabilities. Secondly, all members should share a similar starting point in income, social status etc., to minimise risks of power imbalances.⁴

Another essential component of social inclusion initiatives is the need for incentives for persons without disabilities to work with persons with disabilities. The only avenue explored by the panellists was to provide mixed groups with mentoring and training, to allow persons with and without disabilities to dialogue and generate a mutual understanding. In Kampala, this strategy is already in place; all community groups will attend mentoring sessions once a week for a three-month period. However, peer researchers raised once again the barriers for attending these sessions: inconvenient schedules and inaccessible venues. Hence, designing and testing innovative approaches to delivering these mentoring sessions is required.

4.2 Collective action

Working together towards a common objective requires addressing power dynamics and politics.

Gaining a deeper understanding of the diverse elements shaping the collective action of persons with disabilities in the Ugandan context was crucial to the deliberative process. Unpacking questions such as 'Why collective action for persons with disabilities?' 'Do persons with disabilities need groups?' 'If so, what must these groups look like?' was key to understanding the major challenges posed by collective action. While the focus of the discussion on collective action in the story analysis process was more on potential forms of economic collaboration, the panel focused more on the underlying issues which prevented persons with disabilities from working together. To get a rounded picture, it is necessary to read both accounts. But here we focus on the panel's deliberations.

Like other collectives, groups of persons with disabilities are subject to power dynamics which limit the participation of the most vulnerable, for example, the poorest and least educated, and women. In the worst cases, those at the top suppress the grassroots members in shameful ways. Anecdotes surfaced about women being sexually abused, becoming pregnant and then being abandoned by the leader of a group. People felt that their disability status was being used instrumentally by 'so-called' leaders, because 'persons with disabilities have become another way of making money, taking advantage of their condition as an income-generating activity'. Many grants are set up to service the leaders' interests. Most persons with disabilities form groups to attract and acquire grants. Once this has been achieved, the groups disintegrate.

Complaints surfaced around the paternalistic attitudes of better-educated leaders from more privileged backgrounds, who do not take into account the ideas from those persons with disabilities who have little or no education. As one panellist noted, 'They always want to decide for us. We are not in the know.'

⁴ More details on the various challenges for groups are in the section key issue 2 Collective action

The group leaders sell a vision to the rest of the group but the decision making is centralised and not owned by the collective, so groups close as soon as the leaders' objective is attained. There are other groups which have developed and grown but suffer from 'founder's syndrome' – where the same people represent persons with disabilities across diverse forums. Panellists saw this as a barrier to getting funding, since those who founded the organisations are those who benefit first.

These scenarios are coupled with a lack of transparency and accountability in the management of the groups, from the grassroots – such as the Village Savings and Loan Associations (VSLAs) – to the wider organisations of persons with disabilities. In one of the examples, the chairperson and the signatories shared 40 per cent of the amount obtained and the rest of the group members shared the remaining 60 per cent. In the case of organisations of persons with disabilities, district leaders often tend to choose their friends and family to benefit from the projects.

Another element which further limits the inclusion of the most marginalised voices in collective action arises from individuals themselves. Panellists acknowledged that many persons with disabilities lack the confidence to speak in public. For example, a person who stammers might opt out of the group in order 'not to waste the members' time'. Also because of the abuses identified above, parents of children and young persons with disabilities and albinism forbid them to join groups. This makes it difficult for organisations of persons with disabilities to attract new and younger members.

Despite all these challenges, peer researchers who analysed the stories, as well as the participants of the deliberative panel, were clear that collective action of persons with disabilities is needed for various reasons:

- Having a group is the best way to build relationships with power-holders, and hence to bargain collectively to change policies.
- Persons with disabilities learn from each other and share experiences.
- Unity is power. The voices of persons with disabilities are more easily heard in groups and easily accessed.
- Having groups makes it easy for service providers to locate persons with disabilities.
- Persons with disabilities can share the workload of the group.

Potential strategies

The panel identified a number of potential strategies:

- 1 When thinking about collective action, persons with disabilities should be encouraged to drive leadership from grassroots to district level, rather than the other way around. This would encourage the participation of people beyond the 'usual suspects'.
- 2 The continual monitoring of management capacity and transparency is necessary because these factors determine how effective collective action will be. Those

- who have capacity will mobilise people, and the group will stay together and believe in the management if decision making is transparent.
- 3 Making organisations of persons with disabilities sustainable requires changes in public policies, services and attitudes. Some government policies and most services don't cater for active persons with disabilities. Many parents, on the other hand, 'ground' adult persons with disabilities like children (stop them from leaving their home), don't take care of them or don't allow them to be active.
 - 4 Role-model organisations of persons with disabilities who have developed successful business models should be identified.
 - 5 A coalition of organisations of persons with disabilities could be formed. Get one lead organisation of persons with disabilities to fundraise and later distribute a grant to other organisations of persons with disabilities.
 - 6 Include persons with disabilities in more community activities so others know them better and they are open to forming mixed groups (social inclusion). Groups made up solely of persons with disabilities are not seen as ideal because this contributes to their further exclusion.
 - 7 Organisations of persons with disabilities exist at different levels, such as working on rights and economic empowerment. It is important to think of ways to strengthen the capacity of organisations of persons with disabilities to work on markets.

Strategy 1: Role models of groups of persons with disabilities who are successful in their business

This strategy and the conditions for it to be met are articulated in the previous section on social norms.

4.3 Access to markets

There are multiple and compounded limitations for persons with disabilities in accessing markets.

Participants deliberated on the key characteristics of the rural and urban markets, and the specific barriers and challenges that persons with disabilities face while accessing these markets. It was noted that while persons with disabilities were subjected to the same set of issues as other micro entrepreneurs operating in the informal economy – including inadequate market infrastructure, transportation, seasonality and access to financial services – these issues affected them disproportionately due to their disability. The additional barriers that persons with disabilities face include mobility, discrimination, and negative social and cultural attitudes, communication, a low asset base, and high reliance on family and friends. As a consequence of these barriers, persons with disabilities were mostly engaged in micro-scale activities, across a small number of economic sectors, resulting in low, often seasonal, and unreliable income. For example, as farmers in the rural context they were growing crops such as beans, sesame, sorghum, maize and cassava, and as traders/retailers in the urban context, they were selling products such as pumpkin, sweet potatoes and cassava. These products were considered 'low-risk' since they had higher shelf life as compared to perishable products such as fresh fruit and vegetables, which provide a higher return.

The stories vividly showcased the multiple and compounded barriers which persons with disabilities experience in accessing markets:

- Distance: in the rural areas like Odek sub-county, most of the markets are in trading centres, yet some persons with disabilities reside far from these locations.
- Poor management of markets: congestion in the markets, such as Kalerwe in Kampala, presents a constant threat to persons with disabilities. An example was narrated of a wheelchair getting completely destroyed because of the carelessness of traders in the markets. Who pays for this damage?
- An unequal footing for competition: persons with disabilities often generate less income from market trade due to competition from traders without disabilities, who have more produce and are able to sell at better prices.
- Lack of accessible market infrastructure: toilets, stalls and floors are not disability friendly. In Gulu town main market, there are ramps for accessing the building; however, the stalls are inaccessible, so persons with disabilities are allocated space on the floor.
- Higher costs for persons with disabilities compared to other traders: transport for traders with disability, and their goods, to get to the market is expensive; often persons with disabilities must pay for two seats. The road network, especially in rainy seasons, is difficult for persons with disabilities even if they have a mobility device. In addition, the available means of transport are poor – climbing and jumping into trucks and taxis with produce and goods is hard for many persons with disabilities. Also, some cannot trade without a helper, which implies another cost. In sum, these costs have a significant bearing on the profits of persons with disabilities.
- Communication barriers: in particular, speech and hearing impairments limit the capacity to communicate, bargain and trade with clients. Persons with visual impairments are easily cheated either by their helpers or their clients due to their difficulty in recognising different bills.
- Discriminatory attitudes of customers towards persons with disabilities: some customers do not buy from persons with disabilities, believing that the commodity has an impairment just like the vendor. It was mentioned that even some persons with disabilities do not buy from other persons with disabilities.
- Low self-esteem and confidence: low self-esteem coupled with a low level of education make it hard for persons with disabilities to feel confident when trading and bargaining. Also, a lack of education can mean that a person with a disability faces more challenges understanding the market environment, learning the diverse languages spoken and accessing customers.
- The nature of the impairment determines the customer base: this limits the possibilities for diversifying trade to more profitable crops.

The discussions concluded that in order to enable persons with disabilities to access markets, a variety of strategies must be explored and ideally combined. These range from holding duty bearers accountable, to sensitisation for tackling discrimination in markets. Solutions need to come from a broad range of stakeholders, not market actors alone.

Potential strategies

The potential strategies proposed were:

- In response to a lack of accessibility and adequate transportation, attention needs to be paid to providing easy and timely access to assistive devices and equipment.
- The significance of transportation for market access requires adoption of an action plan to ensure accessibility to transportation, with allocation of resources, a time-bound framework, and in particular a monitoring mechanism and effective sanctions for non-compliance with accessibility standards as per the UN Convention on the Rights of Persons with Disabilities⁵.
- Recognising the impact of the informal economy on the livelihoods of persons with disabilities, improvements in the governance of markets is required, particularly in the privately owned markets in Kampala where basic services such as toilets and drinking water have been commercialised.
- The existing building control rules⁶, which require markets to be made accessible through inclusive design, should be enforced.
- Pathways in markets should be cleared frequently to enable persons with disabilities to manoeuvre around the market easily.
- Acknowledging the importance of collective action, the role of various organisations of persons with disabilities as economic actors needs further examination.
- Investment is required to build infrastructure that is accessible for persons with disabilities, particularly for the rural informal markets.
- The participation of the local community (buyers, sellers, service providers) is crucial in the design and proper usage of the market infrastructure, since it was observed that some of the recently built structures were not in complete use.
- There is a need for fulfilment of the rights of persons with disabilities by market planners. Sensitivity and consideration to persons with disabilities by law enforcement teams in markets is also important.
- Improved market governance is needed: most markets are congested because market expansion was not planned for.
- In order for persons with disabilities to compete with others, they must have access to education and skills which are relevant for the local market, and are suited to their personal context.
- Given the complexity associated with self-employment for persons with disabilities, a combination of financial services, access to inputs, training, skills development and

⁵ Convention on the Rights of Persons with Disabilities and Optional Protocol (2008), United Nations, www.un.org/disabilities/documents/convention/convoptprot-e.pdf (accessed 3 January 2017)

⁶ The Building Control Act of 2013, an Act to consolidate, harmonise and amend the law relating to the erection of buildings; to provide for building standards; to establish a National Building Review Board and Building Committees; to promote and ensure planned, decent and safe building structures that are developed in harmony with the environment; and for other related matters.

See <http://ugandajournalistsresourcecentre.com/uganda-building-control-act-2013/>

livelihoods advice (financial literacy, business, technical) is required for the gradual building of assets.

- Sensitisation and training of persons with disabilities on quality control is critical because persons with disabilities may have had less access to such information, and such knowledge is key to successful sales in the market.
- Acknowledging that persons with disabilities often have no choice but to find work in the informal economy, there is a need for sensitisation of the law enforcement officials for fair and dignified treatment of persons with disabilities.
- It is important that persons with disabilities are made aware of their rights and entitlements to demand services both from private and public institutions, including the right to accessible communication (e.g. sign language).
- The pockets of success in stories from persons with disabilities are important and should be highlighted, to sensitise persons with disabilities and the general public to the range of opportunities that could exist if the rights and entitlements of persons with disabilities were realised.
- Considering persons with disabilities are often not part of community meetings and are often excluded from information and services generally available for others (unless it is a disability-specific programme/announcement), special attention is required from local government and other service providers to ensure their inclusion. Local media and sensitisation of local community leaders are some important tools for such outreach. Gathering more data disaggregated by impairment type (e.g. difficulty seeing, difficulty hearing)⁷ in village- and parish-level censuses would also help to plan more accurately for inclusive services.
- Timely market information (such as prices) should be communicated effectively to persons with disabilities. Having access to this information would protect persons with disabilities, who are unable to travel long distances to markets, from being cheated by middle men. Opportunity exists for increasing the use of technology for the dissemination of information (on opportunities, prices, markets etc.) and provision of services such as finance through mobile money.⁸ It would be important for this information to be made available in accessible formats, for example, for persons with visual impairments.
- There is a need to know the number of persons with disabilities for planning purposes. The National Census of Uganda does not show disaggregated data by impairment type and location. The limitation of the tool used in the recent census is that it only considered physical and visual impairment.
- Given that the most immediate family and friends can be a crucial support that persons with disabilities rely on while accessing markets/economic opportunities, it is important that they are considered in designing any solutions for the integration of persons with disabilities, as part of a broader framework that also recognises the responsibilities of other stakeholders and policymakers.

⁷ Using the UN Washington Group questions, among other tools: Washington Group on Disability Statistics, 'Question Sets and Tools' (2016), United Nations, www.washingtongroup-disability.com/washington-group-question-sets/ (accessed 3 January 2017)

⁸ In parallel with activities to provide more sustainable access to electricity in rural areas

Strategy 1: Skills training

Persons with disabilities often lack access to mainstream skills training schemes, unless deliberate action is taken to include them. Training for skills enhancement must include **technical** (functional) skills, **business/entrepreneurial** skills (customer care, numeracy and finance, communication, marketing etc.), and **life skills** (social and behavioural). This includes sensitisation and training of persons with disabilities on quality control. If they improve the quality of their products and services, persons with disabilities will retain and attract new customers. Skills training is essential for learning a new trade and for refreshing existing skills. For example, some farmers think that having a hoe and basic knowledge of cultivation is adequate, yet they may also need skills in pest control, fertiliser dosage and application, spacing etc. Refresher training will improve the service and product quality, which will in turn enhance livelihoods.

It is important that all persons with disabilities are enabled to recognise their own abilities and receive advice on where these can fit best into available markets. Skills need to be relevant to the market otherwise people will have skills with no livelihood opportunities. Skill development needs to be tailored to individuals and to local contexts.

The stories showed that many persons with disabilities already possess skills, although there were a few cases where family neglect and marginalisation had hindered the development of any skills at all. For people with hearing and visual impairments, basic skills which need to be provided are sign language and Braille, as these are stepping stones to other skills. Training for persons with disabilities should be taken up as a part of the Government of Uganda's Skilling Uganda initiative.

The panel considered which sectors offered particularly promising opportunities for training people with different impairment types, in the current Ugandan context. (This is not intended as a judgement on what people with different impairment types are capable of⁹ – but rather as one group's assessment of the sectors with the most immediate promise, taking into account current market demand, and pending long-term campaigning to make more sectors accessible.) Table 1 provides a summary of the types of skills training that the panel thought most suitable for different impairment types:

Table 1: Skills for the different impairment types

Impairment type ¹⁰	Skills to prioritise for training
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⁹ Under the UN Convention on the Rights of Persons with Disabilities, 'disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others' (UN Convention on the Rights of Persons with Disabilities, *op. cit.*, Preamble, paragraph e). On this basis, any assessment that persons with disabilities intrinsically can or cannot work in a particular sector is problematic, since the real issue may not be the person's impairment, but rather the extent of accommodation in the work environment.

¹⁰ Some impairment types, such as intellectual and psychosocial impairment, were outside the scope of the panel's discussion.

Visual	Craft, hairdressing, tailoring and knitting, farming
Physical	Craft, carpentry, welding, hairdressing, tailoring and knitting, mechanics, electrical installation, electronic repair, farming
Hearing	Tailoring, selling in markets, hairdressing, craft, carpentry, welding, mechanics, electrical installation, electronic repair, farming
Persons with albinism	Craft, carpentry, tailoring and knitting, mechanics, electrical installation, electronic repair
Little persons	Craft, carpentry, welding, tailoring and knitting, mechanics
Deaf and blind	Craft, tailoring and knitting

It was felt that skills training in itself can only have a limited impact on the ability of persons with disabilities to access markets – even if thorough research has been carried out to ascertain the local market demand for skills. After training, there is a need for internships (i.e. work placements); start-up capital; provision of appropriate tools and assistive devices, and mentoring/coaching. An initiative considering some of these components is already in place in Uganda (although available evidence suggests that few persons with disabilities currently benefit – see key issue 4 below). A panellist explained that ‘for a person to acquire the CDD grant, he presents his business; he is given the grant to boost the business on condition that he will be assigned some people to get some skills training.’ The CDD grant offers an opportunity in this area and must be utilised as a follow up to the training (in other words, the training must be a pre-condition for receiving the CDD grant).

The range of institutions and people that need to be involved in training include vocational institutes, government officers (especially for agricultural techniques), local artisans and NGOs. In addition, successful persons with disabilities could teach other and act as role models. This would help boost the self-esteem of persons with disabilities (as seen in key issue 1).

Once again, peer researchers reminded the group of the lack of access to information and awareness of available schemes, as well as the barriers that the most marginalised persons with disabilities face in accessing these sorts of schemes.

Strategy 2: Provision of assistive devices and equipment

Many persons with disabilities require assistive devices to participate effectively in social, economic and political life. Panellists reflected that if the Ugandan Government is committed to the Sustainable Development Goals and in particular to ‘leave no one behind’¹¹, then, like other countries, it should prioritise social inclusion. Consequently, the Ugandan Government has a central role to play in ensuring access to assistive devices and needs to make this part of its policy priorities. This is not the case at the moment. The provision of these devices relies heavily on international NGOs.¹²

¹¹ United Nations (2016) ‘Blog on the 2016 theme of the High-Level Political Forum – Ensuring that no one is left behind’, Sustainable Development Knowledge Platform, <https://sustainabledevelopment.un.org/hlpf/blog> (accessed 30 December 2016)

¹² This issue was also raised by the UN Committee on the Rights of Persons with Disabilities in United Nations (2016) ‘Concluding observations on the initial report of Uganda’, Committee on the Rights of Persons with Disabilities,

The Ministry of Health is responsible for providing wheelchairs and prosthetics. Participants felt that the service should be provided by technical people at regional referral hospitals, where assessments and fittings should be done. However, because of budget constraints in Mulago and Gulu, referrals are only focusing on children (challenges of health provision are further explored in key issue 5). Ministries rely on NGOs to establish physiotherapy departments within hospitals. Some NGOs even provide free assistive devices, most of them working closely with health service providers who provide the list of persons with disabilities in need of devices. NGOs also provide meals for persons with disabilities during training, and refund transport costs.

Solutions proposed by panellists were:

- The distribution of assistive devices should be under the Ministry of Health. Organisations of persons with disabilities and NGOs need to lobby the government to budget for assistive devices. They should use the media to leverage efforts to plan and budget for assistive devices.
- The government should encourage local production of assistive devices and equipment. Some of these could even be produced by persons with disabilities in micro enterprises, which would also provide livelihood opportunities.
- If the government cannot provide all the devices needed, it should at least waive taxes and import duty on devices which come from abroad.
- In general, more information and awareness raising are needed to publicise those few provisions that are in place for persons with disabilities to access assistive devices.
- There is a need for streamlining the processes from the identification of persons with disabilities through to the distribution of devices. A system that ensures better information flow, transparency and accountability is required.
- Organisations of persons with disabilities and NGOs have a role in identifying those in most need of a device and referring them to organisations for help. Persons with disabilities should first report to the district unions before going to the umbrella organisation, the National Union of Disabled Persons in Uganda.

4.4 Accessing capital and savings

Access to capital and/or financial services is needed for persons with disabilities to start, consolidate or grow a business, yet this was highlighted as a significant barrier limiting the participation of persons with disabilities in both the rural and urban markets. Often this barrier is closely linked to the lack of land ownership by persons with disabilities. The lack of access to financial services affected the productivity and market participation of persons with disabilities in different ways: it affected their ability to make investments in good-quality inputs to increase their production; hire labour in time; hire transportation; start

http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fUGA%2fCO%2f1&Lang=en (accessed 30 December 2016), paragraphs 41–42

new activities such as value addition, aggregation and trading. This caused a vicious circle of low production/low productivity, leading to low income and low investments. Therefore, access to financial services is crucial for persons with disabilities to graduate from micro and seasonal activities to sustainable self-employment/entrepreneurship.

The main barriers to accessing capital are:

- Persons with disabilities may not meet the conditions for membership in VSLAs (such as area of residence and minimum saving amounts).
- Small-scale moneylenders still exist, but in villages they have been pushed out of business due to the emergence of VSLAs.
- Savings and Credit Cooperative Societies (SACCOs): mostly operating at the sub-county level, these may be hard for persons with disabilities to access.
- Banks: supervised by the Central Bank of Uganda, they have tighter rules and regulations and often only operate in urban or peri-urban settings.
- There is a lack of trust of persons with disabilities among members in saving groups.
- Persons with disabilities have few assets for security/collateral, but Micro Finance Institutions (MFIs) and banks require land titles in order to approve loans, which poor persons with disabilities do not have. A few privileged persons with disabilities own customary land; but even in these cases, family consent is a prerequisite for formally granting ownership.
- Securing loans and saving with financial institutions involves signing forms, giving consent, etc. The difficulty of these tasks is compounded by the existing misperceptions and lack of trust in persons with disabilities from the institutions themselves.
- Persons with disabilities often lack guarantors owing to the perception that persons with disabilities do not have the capacity to pay back loans.
- The interest rate on loans is high (although this is not an issue exclusive to persons with disabilities).
- Many persons with disabilities lack financial literacy, knowledge about loan schemes and access to financial training.
- Persons with disabilities tend to experience low, irregular and unpredictable cash flows in the informal sector. In order to achieve the goal of **universal financial inclusion**, a deeper understanding of the livelihood and cash flow of persons with disabilities is required.

While the banks, MFIs and SACCOs should spearhead the process of financial inclusion of persons with disabilities, other stakeholders and institutions also have an important role to play. These include regulators; government at various levels (particularly the departments of Crop Production, and Community Development); the Association of Microfinance Institutions in Uganda (AMFIU) for tracking financial inclusion at the MFI level and undertaking advocacy at the national level; and NGOs for the expansion of VSLAs, bank linkages, training, resource mobilisation for organisations of persons with disabilities, and advocacy.

Potential solutions

- VSLAs: these can be self-initiated with minimal requirements, mostly at the village level. VSLAs were identified by persons with disabilities as the most accessible finance institutions. However, they also present challenges; for example, in mixed saving groups, others may not work with persons with disabilities because of income disparity and perception of their inability to work. There were also reports of conflicts in groups with only persons with disabilities where these were not well managed.
- MFIs: these are supervised by the Central Bank and the Association of Microfinance Institutions in Uganda. To access credit, a person needs to have an account.
- Kalulus/informal cash rounds: a revolving fund where members contribute an agreed amount to one group member per week. These often develop into a SACCO.
- Government grants: these include the Youth Livelihood Programme, the Uganda Women Entrepreneurship Programme and the Youth Venture Capital Fund.

Thinking about avenues for persons with disabilities to increase access to capital and savings, the panellists proposed the following:

- Financial literacy, technical and business skills are an important accompaniment to financial services and must be provided to persons with disabilities.
- Persons with disabilities need to be informed about the work of MFIs. MFIs, on the other hand, need to be sensitised on how to handle persons with disabilities.
- Financial service providers should offer financial outreach, such as assisting persons with disabilities to open accounts from within their villages.
- VSLAs should be expanded to areas where persons with disabilities have no access to banks. As one panellist commented, 'some persons with disabilities have never seen banks.' Persons with disabilities should form alliances with disadvantaged persons without disabilities, to stand together and also to foster inclusion (see key issue 1).
- Awareness should be raised about the importance of family members providing loans to persons with disabilities if they are in a position to do so.
- Government grants need to be better managed because if they are not closely monitored, the capital quickly runs out. The panel felt that if there is stricter oversight, recipients will be encouraged to work hard: 'A person with disability who waits for a government grant is [perceived as] not serious, so boosting the business of persons with disabilities is a much better option.'
- The use of technology for financial inclusion should be encouraged (such as mobile money, M-cash). This includes lobbying the government to import accessible phones that can be utilised by persons with disabilities.

- Given that most banks don't have sign-language interpreters, there is a need to enforce the existing laws on accessibility and reasonable accommodation to ensure banking facilities are accessible to persons with disabilities.¹³
- Considering the informality of self-employment, micro-scale enterprises, and issues of mobility associated with persons with disabilities, member-based informal sources of finance offer the best alternative for them. These include VSLAs in the rural areas, kalulus (informal cash rounds) and SACCOs in the urban areas.
- NGOs/existing grants should be used to pilot innovations in credit guarantee funds to mitigate some of the barriers to persons with disabilities obtaining credit and allow them to cultivate a relationship with MFIs/banks.
- Given that a lack of assets and guarantees is a significant barrier for persons with disabilities, consideration should be given to providing land titles to persons with disabilities, for example, by including their names in the titles to family land so that they can use it as a guarantee for securing loans.
- The role of organisations of persons with disabilities should include advocacy on financial inclusion, targeting various financial institutions to address policy issues of access and accountability.

Strategy 1: Training and sensitisation of persons with disabilities and financial service providers

Deliberations were particularly contentious among peer researchers and other panellists who work on different aspects of implementing community development initiatives, some which specifically target persons with disabilities. On the one hand, peer researchers recalled cases in which they had been excluded from training or other useful initiatives; for example, a peer researcher remembered passing by a financial training session organised by a few banks and the National Social Security Fund, which she did not know about. On the other hand, CDOs also expect persons with disabilities to be proactive in joining activities, and searching and applying for the various schemes and grants available, rather than sitting back and waiting for a particular kind of mobilisation.

Some numbers were provided to illustrate the lack of access to training and sensitisation. For example, in fiscal year 2014/2015, Kawempe gave the CDD grant to 36 groups; out of 700 persons only 7 were persons with disabilities, yet CDD is a grant that targets everybody. Similarly, the Uganda Women Entrepreneurship Programme sensitised 939 women, of whom only 12 were women with disabilities (the grant targets all women between 18 and 65 years old). Currently, the National Union of Disabled Persons of Uganda (NUDIPU) organises joint community meetings for persons with disabilities with bank officials, in locations closer to the persons with disabilities; however, each party meets their own costs, since NUDIPU only holds a community mobilisation role.

¹³ The lack of sign-language interpreters in banks was also recently raised by the UN Committee on the Rights of Persons with Disabilities in its Concluding Observations on Uganda (*op. cit.*, paragraph 17d)

From these discussions, the underlying issue observed was that persons with disabilities who are marginalised are not accessing information, and as a consequence are not accessing training or grants which could make a difference to their precarious situation. Hence, anyone proposing a training scheme or sensitisation campaign should think carefully about how to reach those most in need. Looking beyond this, training and sensitisation activities aimed towards financial inclusion should cover diverse issues ranging from general and business finance literacy, access to and use of disability-friendly banking technology, to improving attitudes, behaviours and structures,¹⁴ which can make financial institutions less daunting and truly accessible for persons with disabilities. Given that many persons with disabilities have never seen a bank or microfinance institution, exposure visits to such places should be part of the sensitisation process. One panellist noted that before starting training and sensitisation programmes, it is essential to know the number of persons with disabilities for planning purposes because (as noted above), the National Census of Uganda does not show disaggregated data by type of impairment and location, etc.

Finally, thinking about which **institutions** could deliver training and sensitisation activities, panellists identified:

- Government officials at the Crop Production Department: this department has the budget for training, but there are many bureaucratic processes to follow in acquiring government money;
- The CDO;
- MFI, SACCO and banks: these institutions allocate funds for training members and marketing;
- NGOs: these are best placed to sensitise the diverse financial institutions. Also, they can support organisations of persons with disabilities with resources for them to sensitise more of their members;
- AMFIU, the role of which is mostly to supervise MFIs and undertake advocacy at the national level;
- Persons with disabilities themselves: this is possible, and potentially most powerful, since it would also allow for addressing the ‘strangeness’ of persons with disabilities to the rest of society. As one participant said ‘A person is much more powerful than any poster’, indicating that sensitisation activities and training should also be conducted by persons with disabilities and not only through experts.

Strategy 2: Expansion of VSLAs

Some of the challenges of expanding VSLAs are linked to the issues explored in detail in key issue 2 Collective action. To work properly, VSLAs should focus on their core business of promoting savings and giving credit; however, they should also consider the diverse requirements of their members, particularly persons with disabilities and other marginalised groups. For example, one peer researcher expressed concern, saying that because no one can interpret for her in the VSLA, she prefers to keep her savings with her mother. Should a

¹⁴ Most banks don’t have sign-language interpreters, few have publications in Braille and many have physical accessibility limitations. There is a need to implement the law to ensure banking facilities are accessible to persons with disabilities.

solution to this be only on the side of the deaf person by coming to the meetings with an interpreter? Alternatively, should the VSLAs provide some kind of support? These are questions which remain open and require further thinking. There is also a need for a deeper understanding of group dynamics¹⁵ and the social, cultural and political reasons why people are being excluded. The geographic dispersal of persons with disabilities, and the diversity of their impairments, requires mixed groups, but with a targeted approach such as revolving funds specifically for persons with disabilities.

Despite not being perfect, VSLAs were identified in the stories as the most accessible credit system for persons with disabilities. Panellists outlined some other ways of expanding VSLAs:

- Learn about savings and group dynamics from kalulus/informal cash rounds;
- VSLAs to open up bank accounts;
- Promote VSLA–bank linkages for increased financial security;
- Registration of VSLAs with the national government to improve regulation and security;
- Diversify the group with other enterprises such as collective livelihood activities;
- Facilitation of relationships, and monitoring of performance, by local organisations of persons with disabilities and government structures;
- Persons with and without disabilities should be considered over groups comprising persons with disabilities alone.

4.5 Access to infrastructure and services

Poor infrastructure and services have the greatest impact on those most reliant on them, such as persons with disabilities.

This section broadly outlines the main challenges in accessing infrastructure and services faced by persons with disabilities. However, strategies for addressing these issues were not discussed during the deliberative panel process due to the breadth, complexity and depth of the problems. These challenges affect all of the population in Uganda; however, those who are most dependent on decent infrastructure and services such as health, education and transport are most affected.

Challenges of infrastructure

Panellists spoke about the many infrastructure challenges in Uganda and how these particularly affect persons with disabilities:

- Roads and pavements: excess of mud in the rainy season traps persons with disabilities, and there are persistent difficulties in accessing the main road because of big ditches. Town and city planners do not consider the needs of persons with disabilities.

¹⁵ This largely relates to issues explored under Key issue 2 Collective action

- Means of public transportation: the cost of transportation is higher for persons with disabilities, the biggest challenge is being able to afford it, but also the trucks and taxis can even be dangerous owing to the lack of proper seats or handles.
- Housing: there is an absence of reasonably priced accommodation for persons with disabilities.
- Communication technologies: radio, internet, signposts and TV shows are not always accessible to persons with disabilities due to language, sight and hearing barriers.
- Public buildings such as churches, shopping centres, courts, markets and toilets: the Ugandan Government ratified the UN Convention on the Rights of Persons with Disabilities in 2008¹⁶ but it is largely ignored; also the Building Control Act is not enforced.

Some of the reasons why panellists thought that these challenges persist are:

- The general public is not sensitive to, or aware of, persons with disabilities using the roads. This is clearly seen in the lack of respect of zebra crossings and the few pavements available.
- Persons with disabilities lack knowledge about their rights.
- Persons with disabilities lack access to information.
- Government commitment to enforce the relevant laws and policies is weak.

Challenges of accessing services

The available services include health, education, legal services, and other government programmes and grants such as Operation Wealth Creation, CDD, Uganda Women Entrepreneurship Programme and the Youth Livelihood Programme. The barriers to accessing each of these services are different. However, two of the main claims from the panellists are that there is a pressing need to change the attitude of service providers towards persons with disabilities, and that persons with disabilities should overcome difficulties through collective action – organising in groups and unions to form stronger links with power-holders and demanding better access to government programmes.

Some of the issues raised are:

- The challenges vary according to impairment type: persons with visual impairments lack information in Braille, and most public officers lack sign-language skills; for example, there are no sign-language services at police stations.
- The challenges of health service provision are particularly bad: for example, health workers in hospitals questioning expectant mothers with disabilities about why, as persons with disabilities, they got pregnant. Delivery beds are not disability friendly, so women with disabilities go through a lot of problems to give birth.

¹⁶ ILO (2009), 'Inclusion of People with Disabilities in Uganda', International Labour Organization, www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_115099.pdf, (accessed 3 January 2017)

- In cases when women with hearing and visual impairments are raped and conceive, health workers ask for their husbands to be present at the hospital appointment. When the health worker learns the conception was a consequence of rape, the hospital demands a letter from the local council as proof. The local councillor in turn asks for money in order to write the letter. One of the female panellists argued:

‘The government gives more attention to a ... [person without disability] who is raped than a person with disability. Does it mean persons with disabilities are useless?’

- Procedures for accessing any services, grants or programmes are lengthy, and there is no positive discrimination for persons with disabilities.
- Persons with disabilities are regarded as affiliates of the National Resistance Movement (NRM), the ruling political party in Uganda. Some service providers deny services to persons with disabilities for political reasons.
- Legal services are rarely available, but even when they are, they are inaccessible to persons with disabilities because the buildings are inadequate. As one panellist noted, ‘The court in Mbale is inaccessible to persons with disabilities and automatically denies persons with disabilities the right to a fair trial.’

5. Conclusions

Many practical things which can be done to support market access were discussed. In this conclusion we want to highlight just a few.

What is perhaps the most surprising aspect of the deliberations in the panel was the emphasis on what persons with disabilities need to change. People felt that collective action was necessary in order to change social norms; to organise more favourable economic arrangements; and to influence national policy and service delivery (including holding the government to account). However, there are huge tensions within the ‘community’ of persons with disabilities, ranging from exploitation from leaders to the fact that persons with disabilities did not give themselves or fellow persons with disabilities the same value as persons without disabilities. They were perhaps just as unlikely to trust fellow persons with disabilities as people in the general population were. In many ways, this discussion echoes the analysis of the life stories. That is, it is crucial to build confidence and self-esteem before any of the more technical solutions are likely to work. As we saw when analysing the life-stories, the process of building self-esteem through support from family, friends and the community can create a virtuous circle. Hence, investing in getting those relationships right is critical.

More generally, we learned that interventions need to be sequenced. For example, there is no point in someone getting access to markets if they are cheated every time they sell in that market because they don’t know the prices.

Sometimes what is needed is relatively straightforward. People need access to transport to get materials, and to take their goods to market. When they reach the market, they need spaces which are accessible for persons with disabilities. Further, there are some relatively targeted inputs which could be made to support numeracy and access to networked information on prices that enables people to get the knowledge they need to avoid being cheated. It might be an appropriate issue for collective action. People working in the same industry might not want to work together, but they could collectively access information on prices – perhaps through organisations of persons with disabilities.

One particularly significant discussion point related to the scarcity of assistive devices. Thinking about how the construction of these might be a source of livelihoods in itself was insightful.

On the finance side, the issue of credit guarantees seems to be central. Persons with disabilities are not considered to be creditworthy. Action needs to be taken to rectify that perception and to find guarantors. The latter could come from NGOs or collective community-held funds, for example.

There is generally a lack of data on persons with disabilities, disaggregated according to the impairment. This adds to the problem of identification and targeting, particularly at the district and local level. The government, in collaboration with NGOs and organisations of persons with disabilities, needs to collect such data.

Problems which are faced by persons without disabilities who live in poverty and marginalisation are amplified by disability. Access to primary education is a case in point. Even if the only source of livelihoods is the informal economy, education gives confidence, numeracy and skills. Similarly, access to health services may not at first sight appear to be central to access to markets for persons with disabilities, but there are direct and indirect impacts. Aside from any health issues associated with their impairments, persons with disabilities are also more at risk of accidents and may be more likely to get ill due to the strain on their bodies from getting goods to market, working the land and so on. If they do not have access to good health-care services, they are even less likely to be able to work. This is another example of the amplifying effect of discrimination. It is clear that any market interventions have to take a systemic perspective, and look at the wider contexts within which the opportunities for persons with disabilities occur.

6. Appendix: intellectual and psychosocial disability

One limitation in the participatory process was that we were neither able to engage persons with intellectual or psychosocial disabilities as researchers, nor to collect their stories. In principle, ADD International and its partners seek to work with persons with any impairment type, in line with the UN Convention on the Rights of Persons with Disabilities. However, meaningful inclusion of persons with intellectual and psychosocial disabilities in participatory research is an area that requires specialist skills. We did not have these skills on the research team, and did not consider it feasible to train the peer researchers in such skills within the timeframe of the project. Undertaking the research without appropriate training risked leading to meaningless, tokenistic and potentially unethical participation – and for this reason we reluctantly concluded that we could not include persons with intellectual and psychosocial disabilities in the project in this instance.

We will be clear about this in all reporting of our findings, noting that the experiences of persons with physical and sensory impairments may not be generalisable to persons with intellectual and psychosocial disabilities (who are likely, for instance, to experience particularly extreme stigma). This would be a fruitful area for further research in future.

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