

Mapping Inequity:

Persons with Physical Disabilities in Jordan



الاسكوا
ESCWA

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Executive Summary

This report adopts a rights-based approach to map the access of persons with physical disabilities to social services in Jordan and assess the extent to which they enjoy equal opportunities and are socially integrated. The rights-based approach calls for a thorough assessment of the “4 A’s”, i.e. the availability, accessibility, adaptability and acceptability of social services for all members of society. It thus puts special emphasis on the environmental factors and policy gaps constraining the “4 A’s” and preventing the social integration of vulnerable groups. Accordingly, the objectives of this study are (a) to set forth the social, legal and institutional barriers preventing persons with physical disabilities in Jordan from fully enjoying their right to education, health, employment and social protection and (b) to gauge the ability of social policies to lift these barriers and facilitate the overcoming of inequity for this group.

The report begins by providing general background information on persons with disabilities in Jordan, pointing to the limited availability of reliable data in Jordan and the need for a consistent definition of disability (chapter I). It then turns to international and regional instruments ratified by Jordan that set forth the rights of persons with disabilities. These instruments - which incorporate the principles of the rights-based approach - offer a framework of action for the social inclusion of persons with disabilities (chapter II). An overview of the main policy documents relating to persons with disabilities as well as the administrative bodies in charge at the national level is then provided. On the one hand, this overview documents a comprehensive policy approach focusing on socio-economic rights and the establishment of specialized administrative bodies and institutions. On the other hand, it points to implementation gaps (chapter III). The core of this report focuses on sectoral policies for persons with physical disabilities in the fields of education, health, employment and social protection. It shows that despite the Government’s significant efforts to equalize opportunities, persons with physical disabilities still have largely inequitable access to social services and constrained opportunities of social development (chapter IV). The report concludes with general comments and specific policy recommendations. It sets forth the challenges still facing policymakers, and proposes ways forward in the fields of education, health, employment and social protection (chapter V).

All in all, this report allows for a number of conclusions. It testifies of the political will and commitment of the Jordanian Government to promote equitable opportunities for persons with physical disabilities, while highlighting unequal progress in the different policy domains. Indeed, some fields, including primary and secondary education or social assistance, receive the lion’s share of policymakers’ attention, while others, such as higher education, require more efforts. In addition, the report underscores the focus of policymakers on enhancing the availability and accessibility of social services for persons with physical disabilities and points to the challenge of improving their adaptability and acceptability.

Introduction

Introduction

The issues of equity and social justice, as well as the possibility to lead an independent and fulfilling life, are at the core of social policy in developed and developing countries. While these concerns relate to the population at large, they are especially relevant to the situation of vulnerable social groups whose functioning differs from the majority of society and/or who may need special attention and support. The integration of these groups into society requires increased attention from policymakers and from their social environment.

Persons with physical disabilities constitute one such example of a vulnerable group. Worldwide and in the ESCWA region, they are subject to high levels of discrimination, which stems from both social stigma and institutional structures, and is considered to be at the basis of their deprivation and impoverishment. The prevailing perception of persons with disabilities as “medical cases”, wherein the problem is seen to lie with the individual, contributes to such deprivation and motivates an approach that is based on charity rather than on empowerment.

By contrast, a different perspective on disability lies at the heart of the social model of disability, which sees disability situated in the wider external environment that constrains the interaction of persons with disabilities with their social surroundings.

The rights-based approach takes up the latter perspective and seeks to accentuate attention to the removal of physical and social barriers

that hinder the full integration of persons with disabilities into society. This approach, which lies at the heart of the United Nations support for social development, looks into the extent to which the needs of people are satisfied and, moreover, stresses their agency and underlines their right to a self-defined and fulfilling life. By applying the core criteria of this approach to a given social situation, factors of deprivation and policy gaps leading to social inequity, inequality and lack of equal opportunities can be mapped out.

The inequitable access of persons with physical disabilities to social and economic opportunities, and their subsequent vulnerability, is clearly revealed by socio-economic indicators. Persons with physical disabilities indeed face considerably higher levels of unemployment, significantly lower levels of education and dramatically higher infant mortality rates than the rest of the population.¹ They generally belong to the poorest and most disadvantaged social groups and tend to experience social segregation.

The strong correlation between disability and discrimination, deprivation and impoverishment deserves to be addressed by development specialists. It calls for a better understanding of the manifestations as well as the root causes of the social exclusion of persons with physical disabilities. In the ESCWA region, both the documentation of the hardships faced by persons with disabilities and the analysis of the triggers and enablers of their exclusion are often scarce.

¹ For more information, see United Nations Enable, *Factsheet on Persons with Disabilities*, which is available at: <http://www.un.org/disabilities/default.asp?id=18>.

Within that context, this report aims to deepen the understanding of the institutional, legal and attitudinal processes, structures and institutions that produce discriminatory asymmetries and that prevent persons with physical disabilities from fully enjoying their social, economic and political rights. In line with the ESCWA objective to strengthen national capacity to achieve inclusive and equitable social development in a globalized world, the paper aspires to provide national Governments with the knowledge and information for the following purposes: (a) to identify the obstacles that hinder the social inclusion of persons with physical disabilities; and (b) to devise more equitable and inclusive social policies for persons with disabilities and, more generally, for disadvantaged groups.

Specifically, the paper examines the situation of persons with disabilities in Jordan. Jordan has demonstrated a keen interest in facilitating the social inclusion of persons with disabilities. Its political will and commitment have translated into the ratification of such international conventions as the United Nations Convention on the Rights of Persons with Disabilities.² Moreover, it has elaborated key policy documents addressing the equalization of opportunities for persons with disabilities. For example, it introduced in 2007 the National Disability Strategy aimed at accommodating the rights and needs of persons with disabilities and at empowering them to contribute to the social and economic life of the country. This Strategy acknowledges that persons with disabilities in Jordan are still vulnerable to marginalization and enjoy

limited access to education, health services, job opportunities and social protection.

Exploring the hardships and the process of social exclusion of persons with disabilities in this middle-income ESCWA member country as well as the national policies and measures aimed at addressing these issues, sheds light on some of the challenges facing social policymakers. These challenges relate mainly to overcoming discrimination and equalizing the rights and opportunities for persons with disabilities.

Equalizing rights and opportunities for all members of a given society represents the cornerstone of the rights-based approach to social development. At the practical level, this approach translates into the need to design policies aimed at facilitating the availability, accessibility, adaptability and acceptability of social services, including education, health and social protection, for all citizens, particularly members of vulnerable groups (box 1).

Chapter I provides some general background statistics relating to persons with disabilities in Jordan.

Chapter II examines international and regional conventions that address specifically persons with disabilities. It underlines the characteristics and specificities of the rights-based approach to the inclusion of this vulnerable group.

Chapter III turns to national policy documents that have a bearing in relation to persons with

² Jordan ratified the United Nations Convention on the Rights of Persons with Disabilities in 2008, thereby becoming the eighteenth country in the world to commit to it without reservations.

disabilities in Jordan. It examines the main objectives and underlying principles of these documents in order to investigate their ability to unveil existing discriminatory processes and to address the equalization of opportunities for persons with disabilities.

Addressing sectoral policy provisions related to disability, chapter IV looks into the fields of education, health, employment, social protection and civic participation. For each sector, this chapter fleshes out more closely the mechanisms and practical realities of

inequity and social exclusion, and then confronts these realities to the strategies of national authorities that aim to facilitate the availability, accessibility, adaptability and acceptability of social services and equalize opportunities for persons with disabilities.

On the basis of these observations and analyses, chapter V presents the conclusions along with specific recommendations in terms of avenues for strengthening rights-based and inclusive social policies for persons with disabilities.³

Box 1. Key Elements and Implications of the Rights-Based Approach

Definition: The “4 A’s” (availability, accessibility, adaptability and acceptability) are constitutive elements of the rights-based approach. In the framework of this paper, they will be used in the following way:

(a) *Availability* refers to the existence, in adequate number, of specific social services catering to the particular needs of persons with disabilities (for e.g., habilitation programmes in health centres);

(b) *Accessibility* refers to the physical accessibility and affordability of mainstream social services (i.e. mainstream public schools and hospitals);

(c) *Adaptability* refers to the quality of mainstream social services and their flexibility (or, in other words, their capacity to adapt to the specific needs of some groups);

(d) *Acceptability* refers to the relevance and cultural and gender appropriateness of social services.

Objective: Assessing the accessibility and adaptability of mainstream social services allows us to monitor whether social facilities are provided on a non-discriminatory basis to persons with disabilities. Acceptability, on the other hand, gives a sense of the level of gender and culture sensitivity of social policies and services. All in all, the “4 A’s” provide a framework to assess the provision of social services to persons with disabilities and monitor progress in the equalization of opportunities for this disadvantaged group.

³ The information in this paper was obtained through a careful review of relevant legislation and official and non-official records from various ministries, including the Ministry of Education, Ministry of Higher Education, Vocational Training Corporation, Higher Council for the Affairs of Persons with Disabilities (HCAPD), University of Jordan, Royal Health Awareness Society, Ministry of Social Development, Ministry of Health, the Department of Statistics (DOS), and Al Hussein Society for the Habilitation/Rehabilitation of the Physically Challenged (AHS). This information was supplemented by interviews with relevant stakeholders and constituencies from the different entities, which were conducted by local consultants in Jordan from March to May 2009.

Chapter I

Definitions and General Statistics on
Persons with Disabilities in Jordan

I. Definitions and General Statistics on Persons with Disabilities in Jordan

The main official body responsible for producing data in Jordan is the Department of Statistics (DOS), which conducts a population census once every ten years. The population census contains a section on “persons with special needs”, which provides relevant information on persons with disabilities in the country.⁴ In this section, the census breaks down the population affected by disability by age, gender, governorate and type of handicap. It also provides information on a range of socio-economic development indicators, including health insurance status, educational level and economic activity. These indicators are examined more closely in the following chapters.

Based on information provided by the 2004 Population Census, the total number of Jordanians with physical disabilities is 32,793, amounting to some 0.64 per cent of the national population.⁵ More generally, according to the figures provided by DOS, persons with disabilities, including such non-physical disabilities as mental disability, represent 1.18 per cent of the Jordanian population, or 60,364 persons. The figures provided raise the issue of the accuracy of data on persons with disabilities. Indeed, the DOS estimates of persons with disabilities contrast with the estimates provided by international organizations. The World Bank, for example, estimates that there are between

196,000 (lowest estimate) and 524,000 (highest estimate) persons with disabilities in Jordan.⁶ The range of prevalence estimates is therefore between 3.5 and 10 per cent. Using a global average, the World Health Organization (WHO) estimates disability to affect 7 to 10 per cent of total population. This estimate converges partially with the estimates by the World Bank, while standing in sharp contrast to the figure of 1.18 per cent as estimated by DOS.

The discrepancies between these estimates can be considered a reflection of the lack of reliable information and statistics in Jordan. Within that context, the National Disability Strategy highlighted, in its first chapter, the paucity of reliable information on persons with disabilities in Jordan. The poor quality of data presents a major challenge in terms of estimating the magnitude of the problem and, consequently, of devising appropriate policies and interventions.

The contrasted estimates provided by the Government of Jordan and by international organizations can also stem from the lack of an explicit agreement on the definition of disability (box 2). WHO provides a comprehensive definition of disability to explain the limited opportunities of persons with disabilities by the restricted compatibility between the functioning of an individual and

⁴ The Government of Jordan. Department of Statistics (DOS). 2004 *Population and Housing Census 2004*. Available at: http://www.dos.gov.jo/sdb_pop/sdb_pop_e/inde_o.htm.

⁵ Ibid.

⁶ These estimates are based on data by the United Nations Statistics Office.

the features of the society in which he lives. Similarly, the National Disability Strategy adopts an interactive definition of disability that emphasizes the role of environmental, social and behavioural barriers in reducing the ability of persons with disabilities to carry out their activities or fulfil their rights. By contrast, the approach to disability as set forth by Law No. 31 is less comprehensive.⁷ Specifically, the Law disregards environmental conditions and focuses on impairment to explain the limited opportunities for persons with disabilities.

The 2004 Population Census allows for a broad overview of some of the characteristics of persons with disabilities in Jordan. Relying on national statistics, figure I shows, for example, the distribution of persons with physical disabilities by age and gender.⁸ It points to the fact that disability is more common among men than women across all age groups. It also reveals that children and youth with disabilities are more numerous than adults aged 30-44, adults aged 45-59 and elderly people with disabilities. Specifically, the

Box 2. Definitions of disability and persons with disabilities

According to the **World Health Organization (WHO)**, disability can be defined as “an umbrella term, covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations. Thus disability is a complex phenomenon, reflecting an interaction between features of a person’s body and features of the society in which he or she lives.”

The **National Disability Strategy** defines disability as “the reduction in the ability to carry out daily activities, or the exercise of a right or fundamental freedom on an equal basis with others, due to overlapping environmental, social or behavioural barriers in addition to visible physical impairment or invisible physical, emotional or intellectual impairment”.

According to **Law No. 31 of 2007** (the Law on the Rights of Persons with Disabilities), a person with disabilities is anyone “suffering from a permanent, partial or total impairment affecting any of his/her senses, or his/her physical, psychological or mental capabilities, to an extent that undermines his/her ability to learn, work, or be rehabilitated, and in a way which renders him/her unable to meet his/her normal day-to-day requirements under circumstances similar to those of non disabled persons”.

The **Department of Statistics** in Jordan breaks down the handicaps of “persons with special needs” into the following categories: multiple handicaps, visual, mental, cerebral palsy, physical, and deaf or mute. The census therefore distinguishes physical handicap from visual handicap, deafness and muteness. In the framework of this paper, however, figures and statistics relating to persons with physical disability include persons with a visual or physical handicap as well as deaf and mute people.

⁷ The Government of Jordan. Law No. 31 for the Year 2007: *Law on the Rights of Persons with Disabilities*.

⁸ It should be noted that these statistics refer to Jordanians living in Jordan. They do not take into account Palestinian refugees in Jordan.

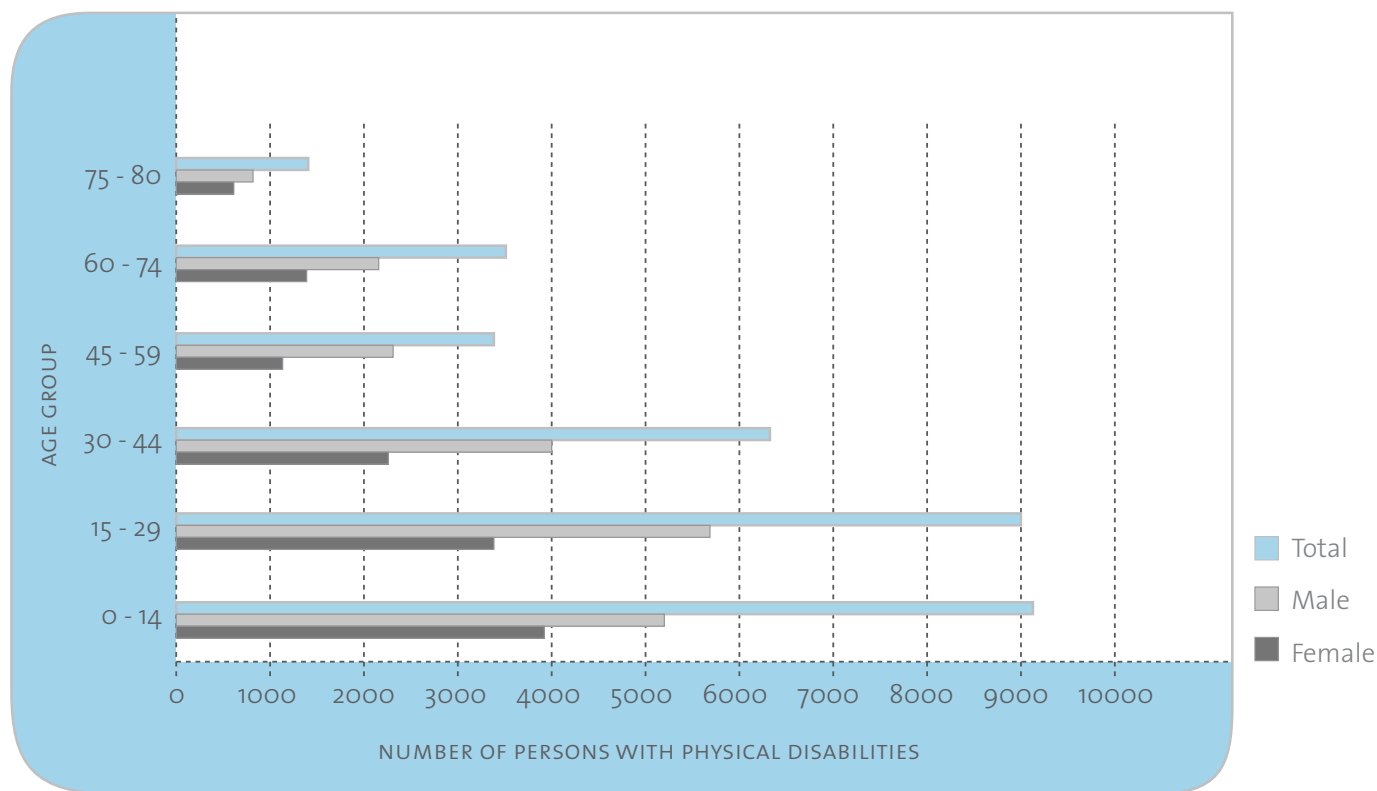
number of persons with disabilities is higher in the age categories 0-14 and 15-29, thereby reflecting the age structure of the general population.

Figure II shows the distribution of persons with disabilities across major governorates in Jordan, revealing that most persons with disabilities live in the Governorates of Amman, Irbid and Zarqa at, respectively, 32.3 per cent, 21.0 per cent and 16.2 per cent of the population with disabilities.

Figure III indicates the concentration of persons with disabilities in the different governorates in relation to the general population. It reveals that Ajloun, Mafrq and

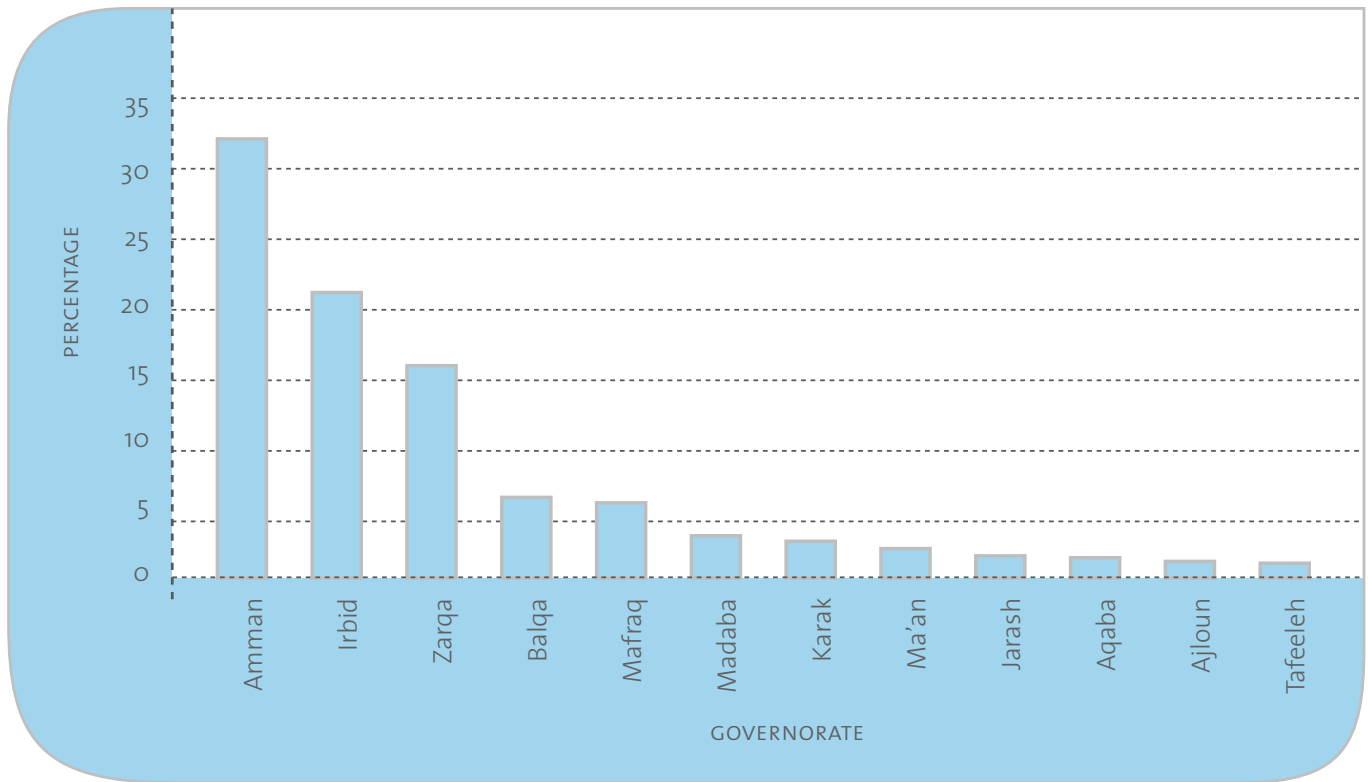
Irbid have the highest rates of persons with physical disabilities per 1000 inhabitants in the country at, respectively, 8.7, 7.9 and 7.4 per 1000, compared to, for example, 5.5 per 1000 in Amman. This information can be useful to policymakers who might want to look into the reasons for a higher concentration of persons with disabilities in some governorates. These higher concentrations can be attributed to, among other reasons, the way persons with disabilities are defined and accounted for by the different governorates or to environmental factors that influence the health and safety of the population. Also, data on the concentration of persons with disabilities across governorates can be useful to policymakers in setting nationwide policy priorities.

Figure I. Persons with physical disabilities by age group and gender



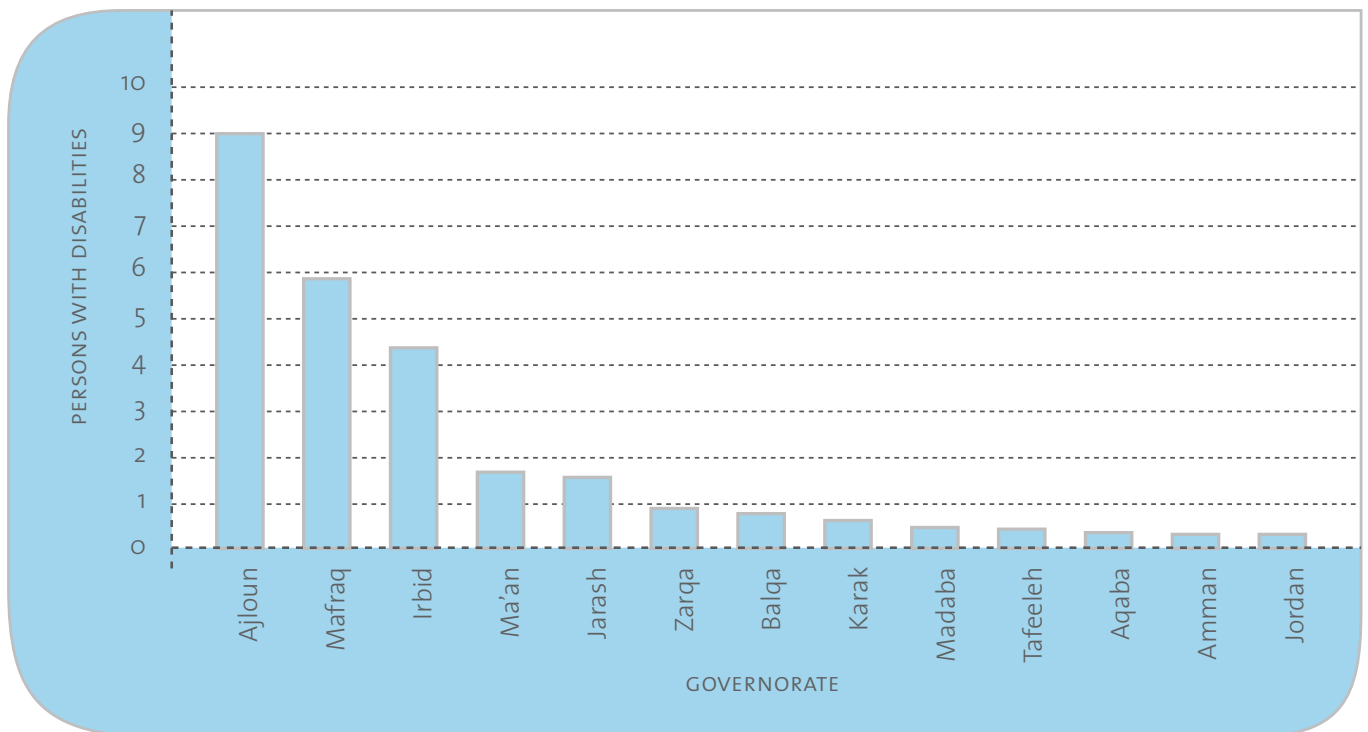
Source: Department of Statistics (DOS), *Population and Housing Census 2004*.

Figure II. Distribution of persons with physical disabilities across Jordan



Source: Department of Statistics (DOS), 2004.

Figure III. Concentration of persons with physical disabilities across Jordan (per 1000 population)



Source: Department of Statistics (DOS), 2004.

Chapter II

International and Regional
Instruments

II. International and Regional Instruments

Standards and rules have been developed at the international and regional levels with the aim to safeguard the rights of persons with physical disabilities. Jordan has ratified three important international conventions relating to persons with disabilities, namely: (a) the United Nations Convention on the Rights of Persons with Disabilities and its Optional Protocol; (b) the International Labour Organization (ILO) Vocational Rehabilitation and Employment (Disabled Persons) Convention; and (c) the Arab Agreement on the Rehabilitation and Employment of the Disabled. The most important highlights of these documents and their implications are summarized in table 1.

The sections below set forth the key elements of these international and regional instruments. The purpose is to shed light on the measures advocated by international and regional organizations aimed at equalizing opportunities for persons with disabilities and facilitating their social inclusion. These measures are a practical illustration of a rights-based approach to the inclusion of persons with disabilities in the sense that they address the availability, accessibility, adaptability and acceptability of social services for persons with disabilities.

Table 1. Highlights of relevant international and regional instruments

Instrument	Focus	Relevance in the context of Jordan
United Nations Convention on the Rights of Persons with Disabilities	Focus on the basic rights and fundamental freedoms of persons with disabilities	Ratified by Jordan
ILO Vocational Rehabilitation and Employment Convention	Focus on ensuring appropriate vocational rehabilitation to all categories of persons with disabilities	Ratified by Jordan
Arab Agreement on the Rehabilitation and Employment of the Disabled	Focus on systematic integration of persons with disabilities in society through securing access to jobs and the labour market	Ratified by Jordan

Source: Compiled by ESCWA.

A. United Nations Convention on the Rights of Persons with Disabilities

The United Nations Convention on the Rights of Persons with Disabilities was adopted by the General Assembly at the end of 2006. This Convention develops standards and measures

to be adopted by member States to ensure the equal enjoyment of all human rights by persons with disabilities.

The Convention encompasses a broad array of topics, ranging from justice to political and civic life, security, culture and social

development. Within that context, it addresses a number of issues, including education, health, employment and social protection. The Convention refers directly or indirectly to issues of availability, accessibility, adaptability and acceptability.

With regard to education, after having stressed the rights of persons with disabilities to education, the Convention clarifies that they should be included in the general education system, and that they should be accommodated for and taught Braille, alternative script, sign language or other language modes as necessary.

Concerning health, the Convention states that persons with disabilities have the right to enjoy the highest standard of health and health insurance without discrimination on the basis of their disability. Services should be provided either free or at affordable prices and need to be gender sensitive and close in proximity.

With regards to work and employment, the Convention stipulates the right of persons with disabilities to work on an equal basis with others in an environment that is inclusive and accessible. It also prohibits the discrimination in hiring, continuance of employment and career advancement. It prescribes the promotion of opportunities of self-employment, career advancement, assistance in obtaining jobs, and vocational and professional rehabilitation. The Convention recognizes the right of persons with disabilities to an adequate standard of living and social protection, including adequate food, clothing and housing; access to clean water; access to affordable services, in particular access of women, girls and

older persons with disabilities to social protection programmes and poverty reduction programmes; and access to public housing programmes and retirement benefits.

B. International Labour Organization Vocational Rehabilitation and Employment Convention

The ILO Vocational Rehabilitation and Employment (Disabled Persons) Convention of 1983 aims primarily to facilitate the equalization of opportunities between workers with disabilities and other workers. It focuses on both vocational rehabilitation and employment opportunities by supporting the availability of appropriate vocational rehabilitation to all categories of disabled persons, while promoting employment opportunities for persons with disabilities in the open labour market. The practical measures promoted include the provision of vocational training and rehabilitation counselling, placement and employment in order to assist persons with disabilities in securing, retaining and advancing employment.

The Convention stresses the need to make these services available and, moreover, to ensure the training of rehabilitation counsellors and other suitably qualified staff. Consequently, the focus is equally on the provision of services adapted to the needs of persons with disabilities.

C. Arab Agreement on the Rehabilitation and Employment of the Disabled

The Arab Agreement on the Rehabilitation and Employment of the Disabled of 1993 followed

from the realization by Arab States of the need to integrate persons with disabilities into the workforce in order to use their productive capacity. Habilitating and rehabilitating persons with disabilities and securing jobs for them are the cornerstones of the Agreement's strategy aimed at integrating them in the labour force.

The right to habilitation and rehabilitation translates into the need for Arab Governments to coordinate and collaborate with employers and employees in putting forward special habilitation and rehabilitation policies for persons with disabilities. The Agreement underlines, for example, the need to train counsellors to work with persons with disabilities.

The Agreement also addresses various facets of an employment strategy for persons with disabilities; and underscores issues of availability, accessibility and adaptability of job opportunities and services aimed at facilitating the employment of persons

with disabilities. The Agreement states, for example, the need to establish a quota system whereby a percentage of jobs are made available for persons with disabilities in governmental and non-governmental institutions. Additionally, it underlines the need to make the work environment accessible and adapted to the needs of persons with disabilities by, among others, providing adequate public transportation and modifying work establishments.

In combination, these three documents provide clear standards and a framework of action for the equalization of opportunities for persons with disabilities. As mentioned above, Jordan has ratified the three conventions and is therefore committed to enhancing the rights and opportunities for persons with disabilities. It is worth turning to the Jordanian national legislations and social policies in the fields of education, health, employment and social protection, to understand and better gauge their ability to enhance the security and well-being of this vulnerable group.

Chapter III

National Policy Documents
and Administrative Bodies

III. National Policy Documents and Administrative Bodies

Before turning to specific sectoral social policies, it is necessary to get a broad overview of the approach adopted by Jordan in its public policy documents that address the issue of persons with disabilities. This chapter sets forth the main highlights of relevant policy documents that formalize State interventions in the support for persons with disabilities in Jordan, namely, Law No. 31 of 2007 (Law on the Rights of Persons with Disabilities) and the National Disability Strategy (2007-2015). It then proceeds to examine relevant national administrative bodies and their specific mandates in relation to persons with disabilities.

A. National Policy Documents

1. Law No. 31 of 2007

The first special law for persons with disabilities in Jordan was adopted in 1989. It was abolished in 1993 when it was replaced by the Welfare of Disabled Persons Act No. 12. In 2006, a specialized expert committee in the field of disability, headed by Prince Zeid bin Raad, was formed to review and analyse the Welfare of Disabled Persons Act and its amendments in the light of the provisions of the United Nations Convention on the Rights of Persons with Disabilities. In order to ensure the consistency of the Jordanian national legislation with the international Conventions, the Welfare for Disabled Persons Act was replaced by Law No. 31 of 2007 on the Rights of Persons with Disabilities.

This Law is characterized by a shift from a welfare-based to a rights-based approach to disability. The focus has indeed moved from targeted care measures to the protection of the rights of persons with disabilities by removing discriminatory as well as environmental and social barriers. Within that context, the Law stresses the need to prevent discrimination on the basis of disability and to protect, inter alia, the freedom of persons with disabilities, their right to equal opportunities, and their right to participate in decision-making relating to their affairs. The requirement to adapt the physical environment to the needs of persons with disability is a pivotal element of the Law's approach to ensuring these rights.

Moreover, the Law is considered to be comprehensive in that it addresses the rights and services for persons with disabilities in the areas of health care; education and higher education; vocational training and work; social protection and institutional care; environmental access; customs and tax exemptions; public and political life; sports, culture and leisure; and litigation.

However, despite its rights-based focus and its comprehensiveness, the Law has a number of limitations that relate to the practical steps to be taken in order to protect some of the rights mentioned, the clarity of some sections and provisions, or the monitoring of the provisions under the Law. For example, despite the fact that discrimination is defined and non-

discrimination set as a key right, there is a lack of measures sanctioning discrimination or of provisions aimed at ensuring protection against discrimination. Equally, despite the efforts made by the Law to identify measures to equalize opportunities for persons with disabilities, there is an absence of adequate mechanisms aimed at holding the Jordanian administration accountable in cases of non-implementation of the Law's provisions.

Chapter IV examines more closely the relevant aspects of this important legislation in the fields of education, health, employment and social protection

2. National Disability Strategy

The formation of a specialized committee of experts in the field of disability and the formulation of the National Disability Strategy were a response to a royal decree by King Abdullah II in 2006. The Strategy, which was approved by the King in 2007, goes into more details than Law No. 31 and provides guidelines and a framework for action for the period 2007-2015.

Its overall objective is the respect of the rights of persons with disabilities and their integration in social, economic and public life. It puts special emphasis on issues of accessibility to infrastructures and social services and incorporates the following main principles and objectives:

- (a) A decline in the occurrence of disability and an improvement in the standard and quality of life for persons with disabilities;
- (b) The achievement of greater equity, equality and equalization of opportunities than had

previously existed;

- (c) Increased empowerment for persons with disabilities reflected through greater independence and self-reliance;

- (d) Further empowerment of persons with disabilities to participate and engage in community life;

- (e) Further integration of persons with disabilities in different areas of life, including educational, professional, vocational and social.

This overview of the Strategy's principles and objectives clearly reveals its focus on rights and the importance accorded to the equalization of opportunities to facilitate the inclusion of persons with disabilities. In addition to this rights-based approach, the Strategy has a number of strengths. First, it acknowledges the obstacles encountered by persons with disabilities in Jordan, thereby emphasizing the issue of discrimination and the weak quality and quantity of services for persons with disabilities.

Second, it clearly identifies, describes and sets milestones for ten relevant areas of intervention as follows: (a) legislation; (b) prevention and health care; (c) education, higher education and scientific research; (d) family empowerment and social protection; (e) economic empowerment; (f) communication and physical accessibility; (g) media, awareness and communication; (h) habilitation and rehabilitation; (i) equal opportunities and public life; (j) sports and leisure; and (k) culture.

The first phase of the Strategy ended in 2009 and the first monitoring review is due in May 2010. The main limitation of

this Strategy relates to the financing of its implementation. Notably, the question of funding is barely addressed. The Strategy provides cost estimates for the different programmes and activities of the plan as well as a total estimated cost for the implementation of the Strategy, which is set at 64.64 million Jordan dinars (or approximately US\$91 million) over 2007-2015. However, it does not contain relevant information on the sources of financing.⁹ This raises questions related to the availability of actual funds for the implementation of the Strategy and, consequently, its viability.

Chapter IV investigates the provisions of the National Disability Strategy in areas relating to social development. It compares those provisions with the actual, prevailing situation.

3. Other relevant strategies and documents

Law No. 31 and the National Disability Strategy constitute the two main policy documents relating to persons with disabilities. However, the needs and rights of this vulnerable group are also addressed to some extent by other policy documents, including the National Agenda (2006-2015); the Executive Programme 2007-2009 for the National Agenda; the National Youth Strategy for Jordan (2005-2009); the National Strategy for the Jordanian Family; the National Strategy

for Women in Jordan; the National Jordanian Strategy for Senior Citizens; and the National Mine Action Plan (2005-2009).¹⁰

Some of these documents refer to persons with disabilities occasionally (for example, the National Agenda or the National Strategy for Women), while others treat it as a cross-cutting theme (for example, the National Youth Strategy). Moreover, while some strategies recall the rights of persons with disabilities (for example the Executive Programme which mentions the right of persons with disabilities to employment in suitable positions or to education in a suitable environment), others provide policy recommendations and stress general measures to be taken (for example, the National Strategy for the Jordanian Family in the area of social protection).

The references made by these policy documents to persons with disabilities point to the commitment of the Government in mainstreaming the issue of persons with disabilities into social policies. The coherence between the provisions of the National Disability Strategy and Law No. 31 and, on the other hand, the rights and policy measures promoted by other strategies or action plans documents the interest of the Government in addressing the equalization of opportunities for persons with disabilities in the different social fields.

⁹ The Strategy only notes, on page 15, that sources of funding include State budget allocations, contributions from voluntary associations, the private sector, families of persons with disabilities, the National Fund, and financial aid and donations from Arab and foreign countries.

¹⁰ It should be underlined that mine victims are treated as a specific sub-category of persons with disabilities and receive special attention, most notably through the National Mine Action Plan. According to this Plan, from 1967 to 2004, there were 418 mine victims in Jordan. For more information, see Government of Jordan, *Jordan's National Mine Action Plan: Safeguarding life and promoting development, 2005-2009* (June 2005).

B. Responsible Administrative Bodies

1. Higher Council for the Affairs of Persons with Disabilities (HCAPD)

The most relevant national administrative body in relation to persons with disabilities is the Higher Council for the Affairs of Persons with Disabilities (HCAPD), which was formed in 2007 pursuant to Law No. 31 of that year. HCAPD is a public, financially and administratively independent council located in Amman whose president is appointed by royal decree. Members of the Higher Council are officials from the Ministry of Social Development, the Ministry of Labour, the Ministry of Health, the Ministry of Finance, the Ministry of Education, the Greater Amman Municipality, the Higher Council for Youth and the Jordan Paralympic Committee. Members of the Council also include representatives of persons with disabilities.

Pursuant to Article 7 of Law No. 31, the duties of HCAPD include the following:

- (a) Formulating national plans and policies relevant to persons with disabilities;
- (b) Following up and executing the National Disability Strategy;
- (c) Proposing any amendments to legislation on persons with disabilities;
- (d) Creating centres for services and research on disabilities;
- (e) Setting public standards for programmes and services offered to persons with disabilities.

It is worth noting that, while the Higher Council is expected to follow up on the implementation of policies relating to

persons with disabilities, it does not have an explicit monitoring role vis-à-vis the different ministries and national institutions.

Law No. 31 provides succinct information on the sources of financial resources for HCAPD, which include, for example, allocations in the State budget, 10 per cent of the Jordan Welfare Lottery, donations, grants, gifts and legacies to the Council. However, neither the National Strategy nor Law No. 31 provides clear information on the size and allocation of the HCAPD budget. Similarly, no information on budgetary allocations for programmes relating to persons with disabilities is available at the level of sector ministries.

2. The National Aid Fund

The National Aid Fund is a governmental agency that was established in 1986 to protect and assist needy individuals and households. Among other aims, it plays a key role in providing persons with disabilities with cash assistance and, to a lesser extent, training. Contrary to HCAPD, its focus is on service provision rather than social policymaking. The main programmes of the Fund targeting persons with disabilities include the Handicapped Care Aid, which provides cash assistance to families with children with disabilities; the Physical Rehabilitation Aid, which provides persons with disabilities with cash assistance to purchase rehabilitation equipments; and the Vocational Rehabilitation Training, which provides persons with disabilities with training opportunities. In addition, persons with disabilities are eligible to apply to the recurrent financial aids of the National Aid Fund.

In 2007, a total of 3.15 million Jordan dinars (or US\$4.45 million) was allocated to programmes for persons with disabilities. This amount represents approximately 5.5 per cent of the Fund's budget. Most of the Fund's spending for persons with disabilities was allocated in cash assistance programmes. Specifically, the budget of Handicapped Care Aid amounted to some 3 million Jordan dinars compared to 15,000 Jordan dinars for Vocational Rehabilitation Training. The budget distribution for 2007 seems to indicate therefore that the Fund favours assistance to persons with disabilities over empowerment.

3. Non-governmental organizations

Aside from governmental bodies, a few associations are also devoted to advancing the cause of persons with disabilities. The most active association is the Al-Hussein Society for the Habilitation/Rehabilitation of the Physically Challenged (AHS), which is a non-governmental organization (NGO) working with individuals affected by physical disabilities. It was established in 1971 and began its work by supporting State-run orphanages. Over the years, AHS evolved into the leading organization in Jordan, providing rehabilitation and educational services to persons with physical disabilities.

AHS has developed school classes that are accommodated for students with physical disabilities and are run in cooperation with the Ministry of Education. These classes cater to persons with physical disabilities residing in Amman and Zarqa, from kindergarten to the elementary level. Graduating students from AHS are linked to public schools in their communities, with whom AHS jointly organizes rehabilitation programmes. Moreover, AHS provides follow-up services to its students during the year following their integration in public schools.

This chapter indicated that policy documents in Jordan addressing disability and the social inclusion of persons with disabilities tend to adopt a rights-based approach, thereby emphasizing equity concerns. Chapter IV turns to sectoral policies in specific areas of social development, including health, education, employment and social protection. It presents the situation on the ground for persons with disabilities and examines the policy and practical responses provided by the Government aimed at facilitating the equalization of opportunities for persons with disabilities. The availability, accessibility, adaptability and acceptability of social services for persons with disabilities are assessed within that framework.

Chapter IV

Sectoral Plans and Actions for
Persons with Disabilities

IV. Sectoral Plans and Actions for Persons with Disabilities

This chapter highlights the current situation of persons with disabilities in the areas of education, health, employment and social protection and the specific responses provided by the Government. It examines how and to what extent national policy documents are implemented and what are the steps taken to facilitate the availability, accessibility, adaptability and acceptability of social services for persons with disabilities.

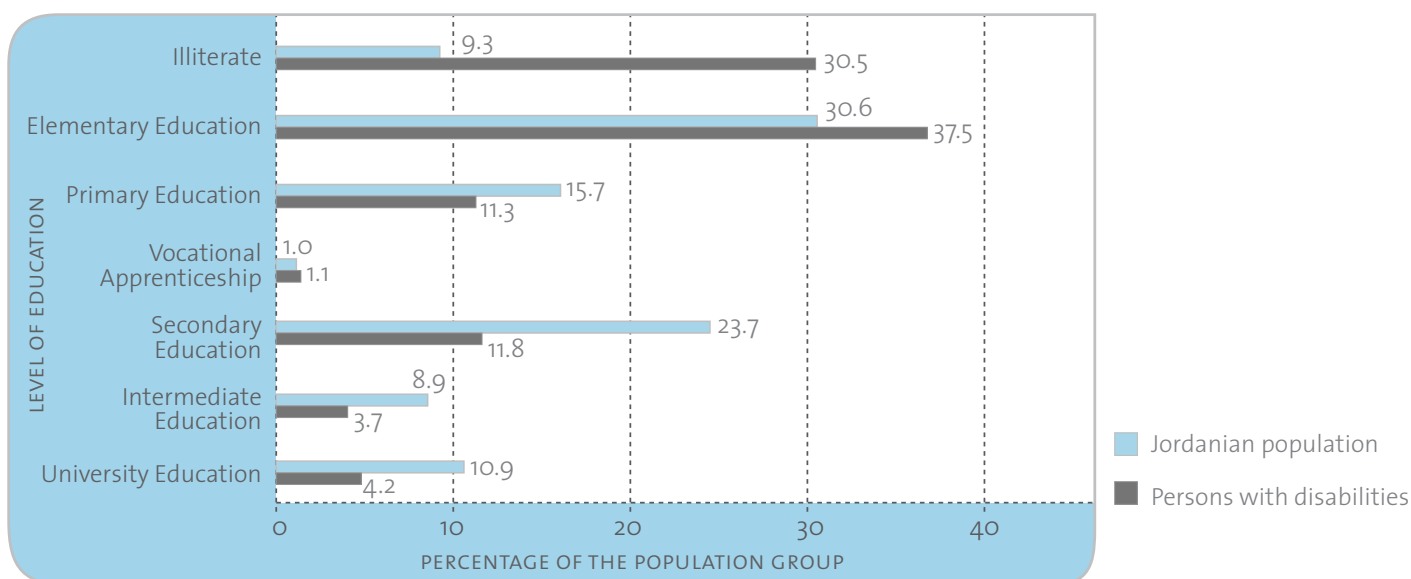
A. Primary and Secondary Education

1. An overview of the situation for primary and secondary education

Statistics and indicators on the educational levels of persons with physical disabilities point to the fact that they face a number of obstacles in accessing and remaining in the educational system.

Statistical data indicate that the educational level of persons with disabilities is significantly lower than the national average (see figure IV). Specifically, 30.5 per cent of persons with disabilities are illiterate, compared to a national illiteracy rate of 9.3 per cent. In addition, 37.5 per cent of persons with physical disabilities are limited to elementary education, as opposed to 30.6 per cent of the general Jordanian population. Regarding secondary education, a modest 11.8 per cent are enrolled in secondary education, compared to 23.7 per cent of the national population. The low levels of enrolment in vocational apprenticeship, whether among the general population or among persons with disabilities, can be attributed to the low prestige and value attached to vocational training in Jordan.

Figure IV. Educational level of persons with disabilities compared to the general population



Source: Department of Statistics (DOS), 2004.

Moreover, the data reveal a gender gap in the population with disabilities aged over 15 years (15+). Figure V reveals significantly lower educational attainment among women with physical disabilities. The illiteracy rate for women with physical disabilities is the most alarming figure, at 49.0 per cent of the female population with disabilities (amounting to 3,877 women with physical disabilities), and is therefore significantly higher than the level of illiteracy rates among the national population, at 9.3 per cent, and among men with physical disabilities, at 22.7 per cent (amounting to 3,328 men with physical disabilities).

According to these statistics, out of a total of 7,205 illiterate persons with disabilities, 3,877 are women. In percentage terms, women account for 53.8 per cent of all illiterate persons with disabilities, while they constitute only 37.9 per cent of the total population with disabilities. Overall, the comparison between these two figures shows that while women are underrepresented among persons with

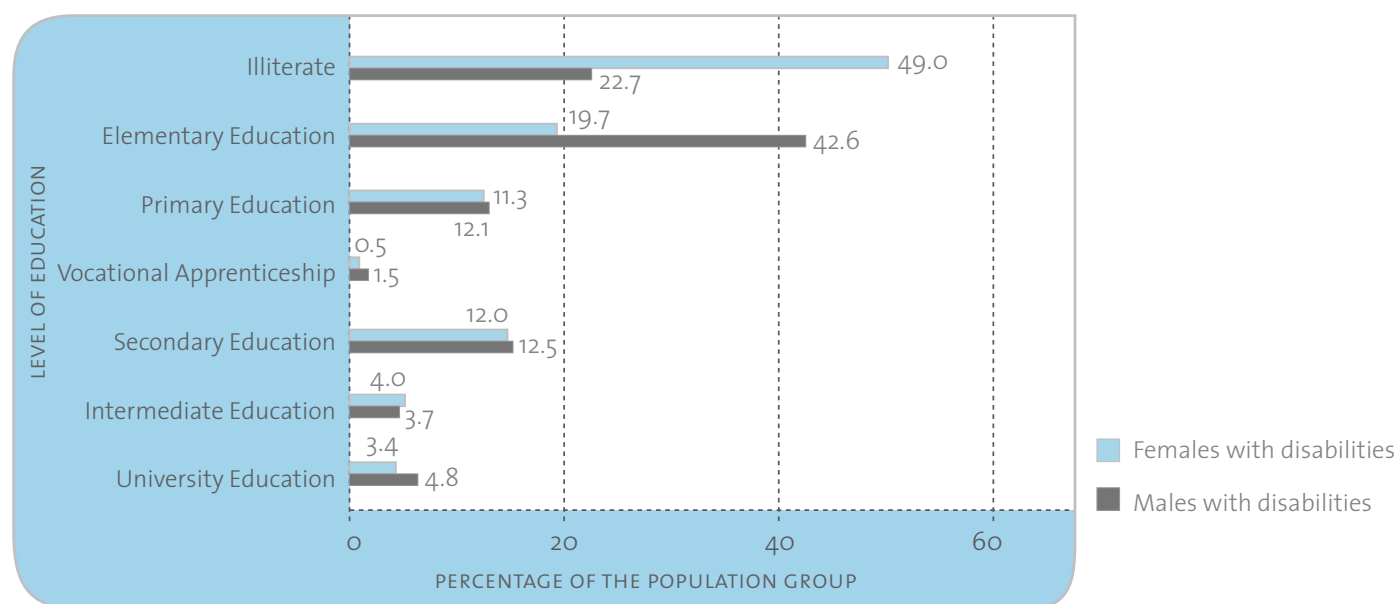
disabilities, they are overrepresented among illiterate persons with disabilities.

2. Sectoral policies and initiatives in primary and secondary education

The issue of access to primary and secondary education for persons with disabilities is at the core of Jordan's policy documents and initiatives. The availability of special education programmes for persons with disabilities is addressed as well as the accessibility and adaptability of the mainstream school system. The main focus, however, is on making school infrastructures accessible for students with physical disabilities.

Law No. 31 grants students with physical disabilities the right to education in the public school system and requires public schools to restructure their facilities in order to make them accessible for students with physical disabilities. The National Strategy underlines

Figure V. Educational level of Jordanians with disabilities aged 15+ by gender



Source: Department of Statistics (DOS), 2004.

the need to enable persons with disabilities to access education without discrimination within the regular educational institutions, or in special institutions for those who cannot be integrated. Regarding special institutions, it stresses, for example, the need to license and establish special education programmes in the private and voluntary sector. With regard to mainstream schools, the Strategy underlines that the accessibility of schools should be enhanced in order to facilitate the early integration of students with physical disabilities in the public school system. The Strategy realizes the lack of information and lists the following main priorities aimed at addressing the integration of persons with physical disabilities in public schools:

- (a) To conduct an inventory of accessible schools according to national building codes;
- (b) To design a plan aimed at habilitating inaccessible schools according to national building codes;
- (c) To release tenders for the adaptation of 100 schools in order to accommodate students with disabilities;
- (d) To appoint special education teachers to follow up on the school integration programme and follow up on students with physical disabilities.

Moreover, the National Strategy addresses the adaptability of schools by emphasizing on the improvement of the curricula in order to allow them to meet the needs of students with disabilities. It also underlines the need to train teachers.

Aside from these policy initiatives, several practical initiatives are reported to be underway to enhance the physical accessibility of some schools, including the following:

- (a) An initiative by the Ministry of Education: In cooperation with AHS, the schools in which students with physical disabilities are integrated are accommodated by installing a ramp and accommodating the bathrooms. The Ministry of Education does not keep record of the schools that have been accommodated;
- (b) The Madrasati Initiative: This royal initiative aims to renovate public schools in urgent need of repair and enhance the quality of the learning environment and tools in these schools. Madrasati, which works in collaboration with the Ministry of Education and the Royal Health Awareness Society (RHAS), requested listed schools to place ramps on entrances and enhance their bathrooms. Out of the list of approximately 90 schools, the Initiative enhanced the accessibility of 15 schools across the country;
- (c) An initiative by HCAPD: As the official umbrella organization for all matters relating to persons with disabilities, HCAPD piloted a project for the Ministry of Education whereby 10 schools in Amman were assigned for “environmental preparation” in order to become accessible and “friendly towards persons with physical disabilities” in terms of, among others, resources, physical and social environment, and staff.

In addition to these specific policies and initiatives, other general policy documents pay attention to the issue of education for persons with disabilities. Their approach to education agrees with the approach advocated by Law No. 31 and the National Disability Strategy. The Executive Programme for the National Agenda, for example, recalls the right to education for persons with special needs in a suitable environment and stresses the need to improve programmes that target students with special needs. Meanwhile, the

Youth Strategy emphasizes the integration of persons with special needs into educational institutes; and the National Mine Action Plan considers the role of educational opportunities in empowering mine victims and facilitating their socio-economic reintegration.

3. Challenges ahead

The overview of specific policies and initiatives for persons with disabilities in the area of primary and secondary education reveals the interest of policymakers in facilitating the accessibility of schools and, to a lesser extent, in adapting the curricula and training of teachers. These policies and initiatives have, however, a number of limitations.

The policies and initiatives that address accessibility to the mainstream school system have specific limitations. First, data on the number of schools accessible or the number of students with physical disabilities remain limited. Second, the efficiency of these policies and initiatives that facilitate accessibility is unclear. For example, students with physical disabilities stress their limited impact, underlining that it can sometimes take years for schools to be made accessible. Third, there is no specific budget allocated to cater for the needs of persons with physical disabilities in the education system. This does not mean that the funds do not exist given that there is a sum dedicated to maintenance and construction of buildings under which enhancing accessibility falls. However, it does point to the lack of specific resources.

The issue of adaptability is even more problematic. The need for staff development and training to accommodate the integration of students with physical disabilities in the

education system has been acknowledged by governmental and non-governmental actors. The National Disability Strategy sets forth this need and proposes ways forward. In the non-governmental sector, AHS is conducting an “attitudes-changing workshop” for school principals and educational counsellors at the beginning of each school year for the schools in which AHS students are to be integrated. However, public resources for staff development and training are scarce to non-existent. Interviewees report that the Ministry simply expects the teaching staff in the education system to be knowledgeable in dealing with students with physical disabilities. According to constituents, however, this is not always the case.

The issue of female illiteracy needs to be specifically addressed. It is indeed not mentioned as a priority despite the evident and prevailing gender gap.

Generally, there is an impetus at the policy level for inclusive education. Efforts are however needed to accelerate the implementation of comprehensive initiatives that could facilitate the accessibility and adaptability of education services. This raises the issue of institutional coordination and responsibility. While several institutions are responsible for the implementation of initiatives in the education field, no clear coordination or monitoring mechanisms have been developed. Indeed, despite the assignment of a liaison officer at the Ministry of Education, there seems to be currently no official body responsible for the management or implementation of Law No. 31 in the educational system.

B. Higher Education

1. An overview of the situation for higher education

The percentage of persons with disabilities enrolled in higher education is particularly low. As illustrated in figure IV, a modest 3.7 per cent of persons with disabilities have obtained an intermediate diploma, compared to a national rate of 8.9 per cent. Similarly, a mere 4.2 per cent of persons with disabilities have access to university education in Jordan. This figure contrasts with the 10.9 per cent rate for the national population.

2. Sectoral policies and initiatives in higher education

The Government and some universities have taken steps to facilitate the access of students with disabilities to higher education. Law No. 31 obliges universities to admit students with disabilities who pass the general secondary studies examination to public universities and in accordance with certain conditions.

Moreover, the Higher Education Council resolution 10/1/2039 of 2 October 2007 addresses the increased access to higher education for students with disabilities by calling on universities to provide appropriate environmental facilities for them. In cases where a disability is diagnosed to be above 40 per cent, the resolution exempts undergraduate students from 90 per cent of the tuition fees, and graduate and postgraduate students from 50 per cent of the tuition fees. The mainstreaming of students with disabilities in the university system is also emphasized by the Executive Programme 2007-2009 for the National Agenda (2006-2015).

In parallel, two universities, namely, the University of Jordan and the Hashemite University, have taken the initiative to form centres for students with disabilities. Such centres assist students with physical disabilities by helping them to resolve matters of concern with their professors or registration officers. Field visits to the University of Jordan show that, since 2003, measures have been taken to alter the physical environment and enhance physical accessibility. Entrances to buildings and bathrooms have been altered and some elevators have been installed.

Moreover, the University of Jordan and the Hashemite University have addressed the issue of discrimination. While there are no official anti-discrimination laws for students with disabilities, internal laws at these universities allow any student to file a student suit if he or she has been insulted by a member of staff or a fellow student.

3. Challenges ahead

Despite Government policy measures and the steps taken by universities, the right of students with disabilities to higher education is not being adequately fulfilled. This can be linked to the lack of coordination mechanisms between the institutions responsible for persons with disabilities and higher education. Specifically, there are no liaison officers between the Ministry of Higher Education and HCAPD, and the Ministry is not a member of the Higher Council. Moreover, the Ministry of Higher Education stated that it does not handle any issues related to persons with physical disabilities and that such issues rather remain the responsibility of HCAPD and individual universities.

The limited accessibility of universities is an example of the incomplete fulfilment of the right to higher education for students with disabilities. The rules of acceptance procedures illustrate this point. Indeed, acceptance procedures for students with disabilities do not take into account physical proximity and many students with physical disabilities are accepted into universities in governorates where transportation to and from university emerges as a major hindrance.

Moreover, even within universities, such as the University of Jordan, that have taken steps to facilitate the accessibility of infrastructures, the changes introduced are limited. Students with physical disabilities underline that, with the exception of buildings built over the past five years, colleges remain inaccessible; and the lifts in some buildings are only accessible by members of staff.

Discrimination is also a major persistent obstacle. It relates to the limited adaptability of higher education institutions. It is embedded in selection procedures (for example, persons with disabilities are not admitted in medical schools) as well as in administrative management (for example, students with physical disabilities are considered “non-regular students” and their cases are handled through HCAPD rather than through the regular university administration). Furthermore, discrimination is apparent in the social stigma surrounding persons with disabilities within universities. Women, in particular, report harassment and insults.

Overall, authorities and universities have made modest progress in facilitating the accessibility to higher education. However,

this accessibility remains generally limited, and issues of adaptability or acceptability have yet to be addressed.

C. Vocational Training

1. An overview of the situation for vocational training

Vocational training is considered an important non-academic learning stream given that it enhances access of its beneficiaries to specialized work and economic opportunities. The number of persons with disabilities involved in vocational training is extremely low. Indeed, an overview of vocational trainings in Jordan indicates that, in 2007, the Vocational Training Corporation, which represents Jordan’s official training institutions, trained 401 persons with disabilities. Other smaller governmental and non-governmental training centres welcomed 80 persons with disabilities. In addition, an important gender gap can be observed. Table 2 clearly shows the overrepresentation of men in the Vocational Training Corporation.

Table 3 lists other institutions involved in vocational training for persons with disabilities in Jordan breaking down the number of graduates by gender. In some cases, the access of men to vocational training is up to seven times higher than that of women.

2. Sectoral policies and initiatives in vocational training

Law No. 31 and the National Disability Strategy address the issues of availability, accessibility and adaptability of vocational training for persons with disabilities. Under Article 4c of Law No. 31, persons with physical disabilities

are granted the right to vocational training. The Article acknowledges the need to build the capacities of vocational trainers to deal with the needs of persons with disabilities.

Similarly, the National Strategy recognizes the importance of vocational training in preparing persons with disabilities for the labour market and increasing their economic participation. In this regard, the Strategy addresses a number of issues of concern. It underlines the insufficient number of vocational training centres, especially in rural areas. The Strategy also recognizes the need

to develop the qualifications of trainers to deal with persons with disabilities, adapt the curricula of vocational training centres and upgrade the programmes.

Moreover, the need to facilitate the access of persons with disabilities to vocational training is highlighted in the National Mine Action Plan and the Youth Strategy.

The Vocational Training Corporation is the official body in Jordan that provides vocational training. It is also the organization that provides vocational training to the largest

Table 2. Persons with physical disabilities enrolled in vocational training, 2007

Location	Number of trainees		
	Total	Men	Women
Drivers Training Centre	187	127	60
Ain Al-Basha	164	128	36
Zarqa Female VT Centre	18	12	6
Ghor Al-Safi	14	4	10
Jarash	5	2	3
Madaba	5	0	5
Moab	5	5	0
Abu Nseir	2	2	0
Petra	1	0	1
Jordan	401	280	121

Source: Vocational Training Corporation, which is available at: <http://www.vtc.gov.jo/>.

Table 3. Graduates from other vocational training institutions

Institution	Gender	2005	2006	2007
Ministry of Social Development: Vocational Training Centre, Russaifa	Men	35	36	31
	Women	4	8	4
Ministry of Social Development: Vocational Training Centre, Irbid	Men	20	23	15
	Women	12	15	11
Disabled Girls Society	Women	2	2	5
Jordanian Association for Physically Disabled Persons	Men	9	11	10
	Women	7	5	4

Source: Department of Statistics (DOS), 2004.

number of people. Currently, there are 57 vocational training centres distributed among all governorates in the country, including six that are accommodated for persons with physical disabilities in the three regions in Jordan.¹¹

Within the framework of cooperation between the Vocational Training Corporation and HCAPD, committees for the training of persons with physical disabilities have been formed to follow up on the needs of persons with disabilities.

Besides the Vocational Training Corporation, vocational training for persons with physical disabilities is provided by two other parties, namely: State-owned vocational training centres at Russaifa and Irbid, which are operated by the Ministry of Social Development; and NGOs. Specialization of vocational training programmes includes, among others, tailoring, carpentry, hairdressing, manufacturing and goldsmith apprenticeships.

3. Challenges ahead

While the need to develop vocational training for persons with disabilities has been recognized, the availability, accessibility and adaptability of these programmes remain limited. Indeed, as tables 2 and 3 show, the number of trainees is low. The unavailability of training programmes is an issue, especially in remote and rural areas.

Additionally, access to training centres is hindered by the absence of means of transportation for beneficiaries and the low accessibility of buildings. Vocational training programmes also appear to be ill-equipped to the needs of persons with disabilities as well as to the requirements of the labour market. In many cases, vocational trainings are considered as a pastime for persons with disabilities rather than as a means of economic empowerment. Many training programmes in fact focus on basic handicrafts.

¹¹ Specifically, there are three centres in the middle region, two in the north and one in the south.

The inadaptability of the vocational training programmes and their ineffectiveness in securing employment are considered to decrease the incentives for persons with physical disabilities to join them. The lack of involvement of the private sector is also an issue and points to the weak attention provided by private employers to the integration and empowerment of persons with disabilities. There is a need to include the private sector in the Higher Council and to enhance its cooperation with other parties involved in the development of vocational training.

D. Health

1. An overview of the situation for health

Table 4 lists the status of health insurance for persons with physical disabilities broken down by gender. The sources of health insurance for persons with physical disabilities are public, private or military. The table shows that the rate of health insurance coverage

for persons with disabilities is relatively low, with 58.5 per cent of persons with physical disabilities possessing health insurance. This rate, however, does not contrast starkly with that of the general Jordanian population, at 61.8 per cent. The table reveals a gender gap in health insurance coverage, with a lower number of insured women with disabilities compared to their male counterparts.

2. Sectoral policies and initiatives in health

Article 4a of Law No. 31 grants the following rights to persons with disabilities:

- (a) Preventive and awareness programmes, including early detection of disabilities;
- (b) Diagnosis and medical classification of disabilities;
- (c) Medical and psychological habilitation and treatment;
- (d) Primary health care for women with disabilities during pregnancy, delivery and post-delivery;
- (e) Free health insurance.¹²

Table 4. Distribution of Jordanians with physical disabilities by health insurance status and gender

	Men	Percentage	Women	Percentage	Total	Percentage
Insured	11,361	57.2	7,839	60.7	19,200	58.5
Not insured	8,466	42.6	5,055	39.1	13,521	41.2
Unknown	48	0.2	24	0.2	72	0.3
Total	19,875	100.0	12,918	100.0	32,793	100.0

Source: Department of Statistics (DOS), 2004.

¹² This free health insurance is renewed every three years and requires a disability report from a governmental hospital and a proof of property.

The National Strategy stresses the following challenges in health-care provision for persons with disabilities:

- (a) Lack of comprehensive medical coverage in the areas of prevention, early detection of disabilities, diagnosis, habilitation, and follow-up on disabilities;
- (b) Shortcoming in the medical referral system when dealing with persons with disabilities;
- (c) Lack of qualified medical staff in the area of disabilities;
- (d) Low coordination between the different institutions that work in the field of disability;
- (e) Lack of funds.

The National Strategy sets forth two goals, namely: lowering the rate of disabilities; and improving the quality of health-care service provision for persons with disabilities. It recognizes the need to integrate persons with disabilities in the primary health-care system and to provide them with medical insurance.

Furthermore, other strategies briefly address health issues for persons with disabilities. Within that context, one of the objectives of the National Mine Action Plan is to upgrade the capacity of hospitals in order to provide rehabilitation services. Additionally, the National Youth Strategy promotes counselling and advanced psychological health services for young people with special needs.

A practical step forward in the recent past has been the establishment of a new comprehensive health centre in Amman. This centre, which is accessible for persons with disabilities, can be seen as a model health centre and a sign of the commitment by the Ministry of Health to enhance the

environment of health centres for persons with physical disabilities.

3. Challenges ahead

The main strength in health-care provision for persons with physical disabilities lies in free medical insurance whereby, under the law, all persons with disabilities are granted access to services in the public health system. However, the statistics provided in table 4 show that only 58.5 per cent of persons with physical disabilities have a health insurance. Policymakers need to determine the causes of this discrepancy. The relatively low number of insured persons with disabilities could result, for example, from a lack of awareness of the existence of free medical insurance. It could also derive from administrative constraints or from the definition of persons with disabilities used to determine the eligibility of individuals to free medical insurance.

In general, persons with physical disabilities face two major challenges with regard to accessibility and adaptability of health-care services, namely: limited physical accessibility to health services; and inadequate mainstreaming of persons with physical disabilities in the health-care system.

The National Disability Strategy fails to mention the need to alter physically the environment and enhance accessibility to health infrastructures. There is no available information on the number of physically accessible institutions that operate under the Ministry of Health or the number of beneficiaries who have physical disabilities. In general, field visits have shown that scarce, if any, efforts have been made to render hospitals or diagnostic centres accessible.

Persons with disabilities complain about their access to mainstream medical staff being restricted owing to the requirement whereby they must first consult the doctor in charge of disability diagnostics irrespective of the nature of the health concerns for which they seek medical assistance. In addition, the main concern of the Ministry of Health for persons with disabilities seems to revolve around providing health services in the areas specific to disability, including, for instance, diagnosis of disability, provision of specialized equipment and rehabilitation.

More effort by the Ministry seems to be needed in order to ensure unrestricted access of persons with disabilities to the mainstream health-care system. In that regard, the Ministry needs to coordinate efforts with the relevant municipalities in order to ensure the physical accessibility of health-care centres. It must also ensure that the procedures of health-care services provision to persons with disabilities are not discriminatory and can provide the best quality available to cater for their needs.

More generally, the needs of persons with disabilities must be integrated in the Public Health Law and the coordination between different institutions and stakeholders needs to be enhanced.

On the whole, in addition to limited accessibility, efforts to mainstream the needs of persons with physical disabilities in the health-care system remain inadequate and issues of non-discrimination and adaptability of mainstream services need more attention. These limitations point to the prevalence of the “medical model” in dealing with persons with disabilities in the health sector over the

“social model”. Indeed, policymakers have until now focused on providing specific medical services for persons with disabilities. There is a need to deal adequately with the social, environmental and administrative barriers that prevent persons with disabilities from receiving treatment within the mainstream health-care system and fully enjoying their right to health care.

E. Employment

1. An overview of the situation for employment

DOS has elaborated different categories to reflect the employment situation of persons with disabilities. According to DOS, individuals categorized as “unemployed” are those who try to find employment but have not yet succeeded in securing it. Those categorized as “unable to work” are those whose participation to economic life is hindered by, for example, illness or disability.

Tables 5 and 6 provide a comparison between persons with disabilities and the general population in Jordan. It is important to note that employment rates for persons with physical disabilities are significantly lower than those of the general population, both among men and women. While unemployment rates are relatively similar, 48.1 per cent of persons with physical disabilities are unable to work owing to their disabilities compared to 6.4 per cent of the general population. Consequently, the majority of persons with physical disabilities do not consider employment an option because of their disabilities.

Moreover, a gender gap is discernible whereby a very modest 5.4 per cent of women with

Table 5. Distribution of Jordanians with disabilities and general population by economic activity (percentages)

Economic Activity	General Population	Population of Jordanians with physical disabilities
Employed	35.1	15.0
Unemployed	10.5	9.2
Student	15.9	7.6
Housewife	28.4	15.4
With means	3.2	3.9
Unable to work	6.4	48.1
Other	0.4	0.8
Unspecified	0.1	0.0
Total	100.0	100.0

Source: Department of Statistics (DOS), 2004.

Table 6. Distribution of Jordanians with disabilities and general population by economic activity and gender (percentages)

Economic Activity	General Population: men (aged 15+)	Men (aged 15+) with physical disabilities	General Population: women (aged 15+)	Women (aged 15+) with physical disabilities
Employed	58.0	24.7	12.1	5.4
Unemployed	12.3	12.5	8.6	5.9
Student	15.6	7.1	16.1	8.1
Housewife	0.0	1.3	56.0	29.5
With means	5.0	6.0	1.3	1.8
Unable to work	6.8	46.9	5.9	49.4
Other	1.4	1.5	0.0	0.0
Unspecified	0.9	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0

Source: Department of Statistics (DOS), 2004.

physical disabilities are employed, compared to their male counterparts, at 24.7 per cent.

2. Sectoral policies and initiatives in employment

Law No. 31 and the National Disability Strategy address the issue of employment. Article 4c of Law No. 31 underlines the right of persons with disabilities to equal employment opportunities and the obligation for employers to accommodate their needs. The Article also stipulates that all public and private establishments employing between 25 and 50 workers should employ at least one person with disability and that, in all public and private establishments employing more than 50 workers, no fewer than 4 per cent of all employees should be persons with disabilities.

In addition, Article 12 mandates private sector institutions that do not respect the quotas to pay a fine equal to twice the minimum wage of 150 Jordan dinars (approximately US\$210) for each person with disability the establishment would otherwise be employing. The fine is doubled if the violation is repeated.

In parallel, Article 13 of the Labour Law of 1996 mandates that employers employing 50 workers or more and “whose nature of work allows employing disabled workers who have been trained vocationally through programmes and the vocational training institutes for the disabled approved by the Ministry or established in cooperation with the official or private institutions, shall employ such disabled workers with a percentage of 2 per cent of the total of his workers and send to the Ministry a statement in which the employer shall clarify the positions held by the

disabled who have been trained vocationally and the wage of each of them”.

The National Disability Strategy sets forth a number of measures to be taken in order to increase the economic participation of persons with disabilities, including as follows:

- (a) Enhancing accessibility at workplaces;
- (b) Providing accessible public means of transportation on routes to qualified industrial zones;
- (c) Providing monetary incentives to institutions that show commitment in hiring and training persons with disabilities;
- (d) Ensuring rights of persons with disabilities to equal opportunities in the workplace and equal pay in appropriate working conditions;
- (e) Supporting and building the capacities of vocational training institutions and increasing the enrolment of persons with disabilities;
- (f) Following up the application of the disability employment quota by establishing a specialized department in the Ministry of Labour.

In theory, the Labour Inspection Department within the Ministry of Labour is in charge of monitoring non-compliance by carrying out inspections and receiving complaints from employees, including persons with disabilities. The job placement system in the public sector through the Civil Service Bureau (CSB) also gives priority to persons with disabilities over able-bodied counterparts and places them according to their scientific qualification (CSB applicants have to have at least a diploma as a qualification).

The National Agenda and the Executive Programme 2007-2009 for the National Agenda also briefly address the issue of

employment for persons with disabilities. Reducing unemployment among persons with disabilities is one of the general actions promoted by the National Agenda, while the Executive Programme stresses the right to employment in suitable positions for persons with disabilities.

3. Challenges ahead

Access to economic opportunities differs greatly in the public and private sectors. Access to employment, fair pay, accessibility and job security are mainly being provided by the public sector where attempts to integrate persons with physical disabilities into the labour market have been encouraging. When employed in the private sector, persons with disabilities tend to be placed in low-level jobs. However, even in the public sector, employment procedures for persons with disabilities tend to be discriminatory. Specifically, persons with physical disabilities applying for a public sector position at CSB do so through the Humanitarian Cases Division.¹³ There is therefore a need to ensure that persons with disabilities are given a fair chance to pursue a professional career in the public sector.

The introduction of an employment quota and of fines for non-compliance should be an important incentive for the integration of persons with physical disabilities in economic life. However, until now, inspections have not begun and the measures have not been enforced, both in public and private sector institutions. According to HCAPD, raising awareness of the law and helping employers

to enhance physical accessibility is more adequate at this stage. So far, however, awareness-raising campaigns in workplaces have not been organized.

Consequently, the availability of employment opportunities for persons with disabilities remains limited as is the accessibility of workplaces. Informants report that employers tend not to accommodate the workplace to persons with disabilities.

It is important to note, that in the case of employment as in the case of health, education and social protection, information is lacking. For example, data on the employment of persons with disabilities in the private sector or on the salaries of persons with disabilities are unavailable.

F. Social Protection

1. An overview of the situation for social protection

In Jordan, “the incidence of disability is nearly twice as high among the poor as in the richest quintile”.¹⁴ In fact, disability and poverty are interconnected in that causality goes both ways. Poverty can indeed foster disability. For example, poor and deficient nutrition or lack of access to health services can lead to physical or mental impairment. Conversely, disability can trigger poverty by hindering access to social and economic opportunities. Fighting widespread poverty among persons with disabilities requires, among other things, an efficient social protection system.

¹³ The handling of the job applications of persons with disabilities by the Humanitarian Cases Division is currently being discussed by policymakers in Jordan. Considering persons with disabilities as “humanitarian cases” is indeed deemed discriminatory and policymakers suggest that the existing system should be reformed.

¹⁴ World Bank and the Government of Jordan. 2004. *Jordan Poverty Assessment*. Vol. 1 (December).

Though the role of the State in providing social protection is crucial, non-State actors, especially families and charities, are also involved in Jordan. There are five registered NGOs that list persons with physical disabilities as the target group. Their services include charity and educational service, as well as socializing and cultural activities. The total number of direct beneficiaries is an estimated 3,600.

Data by DOS on persons with special needs do not contain information on pensions. The Social Security Corporation, however, does provide data on pensions, including for persons with disabilities. However, the Social Security Corporation categorizes disability in a different way from that of DOS, thereby rendering it difficult to compare, relate and harmonize the data provided by the two agencies.

Specifically, the Corporation differentiates persons affected by disability owing to natural causes and disability arising from work injury. Moreover, it does not differentiate between mental and physical disability. With regard to pensions, it reveals that persons disabled by natural causes and those disabled by work injury represent, respectively, 17.4 and 3.1 per cent of the accumulated number of Jordanian pensioners, compared, for example, to persons of old age who represent 68.8 per cent of the accumulated number of Jordanian pensioners. A gender gap can be detected whereby 89.6 per cent of beneficiaries of pensions for disability due to natural causes and 95.8 per cent of those arising from work injury are men.

2. Sectoral policies and initiatives in social protection

Policies focusing on social protection address the availability of monetary and non-monetary support and their adaptability to the specific needs of persons with disabilities and their families. Law No. 31 states the need to provide persons with disabilities who are unable to work with monthly aid. There are no provisions in the Law referring to pensions.

The National Disability Strategy addresses more extensively the social and financial problems facing persons with disabilities and their families and sets forth the following measures and objectives:

- (a) Ensure that persons with disabilities and their families who live in poverty have access to financial assistance to cover not only their living expenses and protect their family, but also to cover expenses related to disability. This includes financial assistance for the disabled person or for his/her temporary care, including funds for counselling services and appropriate training in some cases;
- (b) Ensure that persons with disabilities have an equal right to property and inheritance and cannot be arbitrarily deprived of these;
- (c) Ensure that legal guardians and financial advisors of persons with disabilities are using the funds in the interest of the health, welfare and comfort of persons with disabilities;
- (d) Ensure that persons with disabilities are able to make use of public housing programmes and insurance programmes available to all Jordanian citizens on an equal basis;

- (e) Ensure that persons with disabilities have the right and access to the retirement funds or part thereof upon the death of their parents;
- (f) Reduce the number of years of service before entitlement to social security, and reduce the retirement age for persons with disabilities who are employed.

It is important to note that the creation of a social safety net for persons with special needs is also an element of the Executive Programme 2007-2009 for the National Agenda.

The National Disability Strategy stresses the role of the family in empowering, protecting and meeting the needs of its members with disabilities. In this framework, the role of the State is to provide moral and material support to those families that do not enjoy the level of social protection and income necessary to meet heavy financial burdens. Equally, State support to persons with disabilities is set forth in the National Strategy for the Jordanian Family, which underlines that providing services to such families is crucial in order to enable family fulfillment. Within that framework, the Strategy promotes the following:

- (a) Raising awareness about the characteristics of persons with disabilities and the needs of their families;
- (b) Providing cognitive and financial support to the families of persons with disabilities;
- (c) Empowering the families of persons with disabilities;
- (d) Providing mechanisms to integrate persons with disabilities into the society.

In addition, the National Strategy for the Jordanian Family sheds light on the need for

State intervention in reforming the legislation regarding providing care to persons with disabilities and improving the services available to children with disabilities and their families.

While gender issues are not addressed by the National Disability Strategy or Law No. 31 in the sections on social protection, the National Strategy for Women in Jordan does mention the need to extend special care and attention to handicapped women in the social field. It suggests, for example, providing these women with special services, including social rehabilitation, in order to facilitate their reintegration into society.

3. Challenges ahead

The availability of social protection measures is clearly addressed by the National Strategy. In fact, approximately 40 per cent of the estimated cost of the Strategy relates to policies for family empowerment and social protection. However, evaluating the extent to which persons with disabilities in Jordan benefit from social protection is a difficult task, especially given the lack of relevant data. The issue of funding for specific social protection programmes is also exacerbated by the absence of references to sources of funding in the Law and the National Strategy.

Accessibility of social protection is a key issue. The Strategy stresses the need to make mainstream social protection measures, including financial assistance, housing and insurance programmes, and retirement, more easily accessible to persons with disabilities. In addition, facilitating access of persons with disabilities in rural and remote areas to social protection must also be set as a priority.

Moreover, gender needs to be accounted for. Old people constitute a particularly vulnerable sub-group, and their access to pensions should be facilitated. In that regard, it is noteworthy that neither the National Disability Strategy nor the National Strategy for Senior Citizens addresses specifically the issue of pensions for senior persons with disabilities.

The work of non-governmental actors raises a number of questions that relate to issues of financing as well as to their approach to social protection. Most NGOs and charities rely on donations from the community. Only AHS clearly displays the ability to establish secure relationships with international donors and the private sector to fund their services. Moreover, the approach of these organizations is based on charity rather than on the protection and fulfillment of the rights of persons with disabilities.

G. Other Policy Areas

By applying the rights-based approach to the situation of persons with disabilities in Jordan, this report has mapped out strengths, weaknesses and gaps in the provision of social services to this vulnerable group. It has looked at the policies, initiatives and challenges facing policymakers in the fields of education, health, employment and social protection. Before turning to the general conclusions and the policy recommendations to enhance the equalization of opportunities for persons with disabilities and facilitate their social inclusion, it is important to note that other fields must be, and sometimes are, addressed by policymakers, including culture, sports, media, accessibility of public spaces, and political and civic life.

Needs in the fields of culture, sports, media and accessibility of public spaces include, among others, enhancing the accessibility of public buildings, parks, stadiums and cultural venues; developing adequate and adapted public transportation; raising public awareness through the media; and creating common events between athletes with disabilities and able-bodied counterparts.

It is commendable that the National Disability Strategy looks into the rights and needs of persons with disabilities in these fields. Further research needs to be conducted in order to assess the adequacy of the policy initiatives and the extent to which they are adapted to the situation of persons with physical disabilities in Jordan.

The enhancement of the participation of persons with disabilities in civic and political life deserves special emphasis. Law No. 31 reaffirms a number of political rights for persons with disabilities, including, for example, the right to run for elections and to participate in public affairs as well as in NGOs. However, persons with physical disabilities are completely absent from such institutions of political representation as the Parliament or labour unions. This lack of political representation is a major hindrance to the development of sound social policies for this group. More generally, it negatively affects the image of persons with disabilities and prevents effective awareness-raising on issues relating to their situation and needs.

Chapter V

Conclusions and Policy
Recommendations

V. Conclusions and Policy Recommendations

A. General Conclusions

Jordan has demonstrated political will and commitment to the development of comprehensive policies aimed at addressing the equalization of opportunities for persons with disabilities. Specifically, it has ratified key international conventions and a regional agreement; issued a law to guarantee the rights of persons with disabilities; and developed a comprehensive strategy that sets forth a wide array of social policy measures and initiatives to be taken in the fields of education, health, employment and social protection. This report has provided an analysis of the policymaking process, content and implementation of these policy initiatives.

A series of conclusions can be drawn from the analysis provided in this paper. One set of conclusions relates to the capacity of Jordanian policies and initiatives to address the issues of availability, accessibility, adaptability and acceptability of social services.

(a) Availability

Availability of specific services for persons with disabilities in Jordan is addressed in the policy documents and encompasses, for example, developing such specific social protection tools as funds for counselling services for persons with disabilities; or making available health services specific to disability, including diagnostic centres. However, in practice, the availability of specific services, especially in the areas of education and employment, seems to deserve further attention.

The National Strategy emphasizes the objective of social integration of persons with disabilities. Following up on this objective requires looking at the accessibility and adaptability of mainstream social infrastructures and services. This means assessing whether the general social services available to the population at large can include persons with disabilities and are adapted to their needs.

(b) Accessibility

Accessibility is clearly the main focus of Jordanian policies and initiatives. Facilitating the physical accessibility of mainstream social infrastructures is one of the most salient aspects of the documents and initiatives examined in this paper. It is particularly emphasized in the fields of education and employment. However, as documented in chapter IV, physical accessibility still remains limited and needs further effort.

Accessibility is also judged by the extent to which the services are affordable. In the field of health care, for example, the existence of free health insurance must be considered a positive step given that it enables persons with disabilities to make unrestricted use of the services the health-care system can provide. However, if the public transport system is not accessible for persons with disabilities and they have to buy transportation services from the private sector, these costs can negatively impact on the affordability of public services even if these are provided for free.

(c) Adaptability

The issue of adaptability is a problematic one. While policy documents mention measures aimed at enhancing the adaptability of education, employment and health services, these services remain generally inadequate for persons with disabilities. Specifically, staff in schools, universities, hospitals and firms lack knowledge and awareness to respond to the needs of persons with disabilities.

One of the main effects of these limited accessibility and adaptability has been the persistence of discrimination towards persons with disabilities in the provision of mainstream social services.

(d) Acceptability

Acceptability, which represents the fourth component of the rights-based approach to the equalization of opportunities for persons with disabilities, is barely discussed in Jordanian policy documents. Acceptability, especially gender sensitivity, has indeed not been integrated yet in social policies that address the rights of persons with disabilities in Jordan. Taking into account acceptability will be crucial if social services are to respond to the specific needs and challenges facing women with disabilities. For example, there is insufficient information to assess whether women with disabilities are comfortable consulting a male diagnostics doctor.

In addition to these conclusions on the content of Jordan's policies and initiatives to equalize opportunities for persons with disabilities, a

series of conclusions on the policy making and implementation processes can also be drawn from the analysis provided in this paper. These processes have shown to have a number of technical limitations.

First, there is a need to enhance the quality and availability of data on persons with physical disabilities. Accurate data on their number, access to social services and needs is lacking. This seriously hinders the design of efficient social policies.

Moreover, the participation of representatives of persons with physical disabilities in the policymaking process deserves to be addressed. This participation is currently weak to non-existent. Incorporating representatives allows for a more accurate picture of the real needs of persons with disabilities.

The issue of institutional cooperation is also critical. The delivery of social services appears to be fragmented and coordination between relevant bodies is often minimal. Moreover, the follow-up of the implementation of policy documents is weak.

Finally, the issue of funding is of pressing concern. Sources of funding for the implementation of Law No. 31 and the National Disability Strategy are not clarified. This renders the implementation of these policy documents problematic.

B. Specific Policy Recommendations

Policy recommendations to enhance the quality of the policymaking process and ensure efficient implementation are set forth below.¹⁵

¹⁵ These policy recommendations were elaborated on the basis of the study conducted and in consultation with experts from governmental and non-governmental organizations and academia in Jordan.

(a) Regarding policymaking

(i) To develop a clear and consistent definition of persons with disabilities and ensure that this definition is in line with international standards and mainstreamed into the policymaking process;

(ii) To gather data, develop statistics and elaborate a national database on persons with disabilities and their social needs in the fields of education, health, employment and social protection;

(iii) To enhance the participation in the policymaking process of representatives of persons with disabilities and of all parties and institutions involved in the fields of education, health, employment and social protection for persons with disabilities;

(iv) To encourage the representation of persons with disabilities in political institutions and organizations, including the Parliament and labour unions.

(b) Regarding implementation

(i) To delineate clearly the responsibilities of all parties and institutions involved in the delivery of social services for persons with disabilities;

(ii) To develop mechanisms of coordination and cooperation for parties and institutions involved in the delivery of social services for persons with disabilities;

(iii) To ensure that funding is available and that sources of funding are clearly set forth for all areas of activity;

(iv) To establish focal points, within all ministries and governmental institutions, including at the governorate level, concerned with ensuring the rights of persons with disabilities and ensure their representation at HCAPD.¹⁶

Policy recommendations to enhance the availability, accessibility, adaptability and acceptability of social services and, subsequently, to facilitate the equalization of opportunities for persons with disabilities are set forth below.

(c) Regarding education

(i) To develop a policy action plan and secure resources to combat female illiteracy;

(ii) To coordinate activities with the Madrasati Initiative and allocate a special budget to enhance the accessibility of existing school buildings, and to provide the facilities for the full and safe integration of students in the public school system as early as kindergarten;

(iii) To increase efforts in adapting curricula to the needs of persons with disabilities;

(iv) To integrate students with physical disabilities in schools closest to their residences, thereby overcoming the problem of transportation;

(v) To enhance the capacities of all concerned members of staff in the Ministry of Education system, including teachers, counsellors and school principals, to deal with students with physical disabilities in the public education system;

(vi) To raise awareness among students and parents on the rights, abilities and capacities of

¹⁶ This could be achieved by integrating responsibility for persons with disabilities into the responsibility of existing focal points in charge of gender equality and/or discrimination.

persons with physical disabilities;

(vii) To create incentives for members of staff to support the integration of students with physical disabilities and other students with disabilities by, for example, establishing an annual award for the most outstanding teachers, counsellors and school principals in student integration;

(viii) To enhance cooperation between the Ministry of Higher Education and Scientific Research and HCAPD, and integrate the Ministry as a member in the Higher Council;

(ix) To include private sector representatives in HCAPD and increase their involvement in developing training curricula with a view to facilitating the integration of persons with disabilities in the private sector.

(d) Regarding health

(i) To enhance the accessibility of health centres and hospitals to accommodate persons with physical disabilities;

(ii) To hire staff specialized in diagnostics in accordance with international standards and measurements;

(iii) To train general and specialized health practitioners in mainstream hospitals and centres in order to enhance their understanding of the needs of persons with disabilities and enable them to treat and accept persons with disabilities among their patients.

(e) Regarding employment

(i) To encourage the private sector to employ persons with disabilities by providing suitable

incentives and exemptions from tax and customs;

(ii) To enforce monitoring measures and apply fines pursuant to Article 12 of Law No. 31;

(iii) To harmonize provisions regarding the employment of persons with disabilities in Article 13 of the Labour Law, and Articles 4 and 12 of Law No. 31 to clarify obligations for employers.

(f) Regarding social protection

(i) To conduct research and gather data on the interconnectedness between poverty and disability in Jordan, with a special focus on social protection needs;

(ii) To enhance the quantity and quality of statistics on insurance and pension coverage;

(iii) To inform persons with disabilities on their rights and on available social protection services, and facilitate their access to relevant offices of public administration;

(iv) To develop gender-sensitive social protection programmes that account for the special needs of women with disabilities and enhance their access to social assistance and social insurance;

(v) To accord special attention to persons with disabilities living in rural and remote areas and ensure their equitable access to social protection services;

(vi) To account for the special needs of seniors with disabilities by mainstreaming their needs in the National Strategy for Senior Citizens.

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