



Cover – With his telescope, Fortune can see the blackboard – Zambia (© CBM/argum/Einberger). Above – Cavallo enjoys exploring the hospital with his new walking frame – Zambia.

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# <sup>1</sup>/The Global Picture

While the world is making progress in tackling poverty, people with disabilities are being left behind. CBM's Federation Strategy is driven by some stark facts.



One in seven of us has a disability – that is more than a billion people around the world, 80% of whom live in developing countries.

One in five (20%) of the poorest people living in developing countries have a disability.



There is a vicious cycle of poverty and disability. If you are poor, you are much more likely to have a disability because of lack of access to medical care, clean water and sanitation, and poor nutrition or unsafe working conditions. The discrimination and exclusion faced by people with disabilities leaves them even more vulnerable and likely to become and stay poor.



People with disabilities are negatively impacted by being excluded from health, education and livelihood opportunities - and this exclusion also leads to an additional economic burden for them, their households, and all of society.



Millions of people with disabilities are currently affected by humanitarian crises. People with disabilities are not only the most likely to be affected but the least likely to get help. They are also much more likely than the general population to lose their lives in any type of emergency. People with visual, hearing, physical, or intellectual impairments may be less able to escape from hazards and may have greater difficulty accessing humanitarian assistance.

It is a persistent cycle that millions are trapped in. But the cycle of disability and poverty can be broken.

There are positive signs that issues of disability rights and inclusion are increasingly being recognised as a priority and included in global frameworks and agreements. CBM's work contributes to a number of these global development and inclusion commitments and conventions, most notably:

The Convention on the Rights of Persons with Disabilities (CRPD), which is the global legal framework for realising the rights of persons with disabilities and has been ratified by a majority of states. Adopted in 2006, it obligates everyone involved in national development and international cooperation to be inclusive of all persons with disabilities. It is a driver for change, creating an important space for disability-inclusive development.

The **Sustainable Development Goals (SDGs)**, also referred to as Agenda 2030, which contain 17 global goals and 169 targets focused on the three pillars of sustainable development: social, economic and environmental inclusion for all people throughout the world. This global commitment to leaving no one behind will frame international cooperation and global development efforts for the coming decade.



# <sup>2</sup>/Our Vision

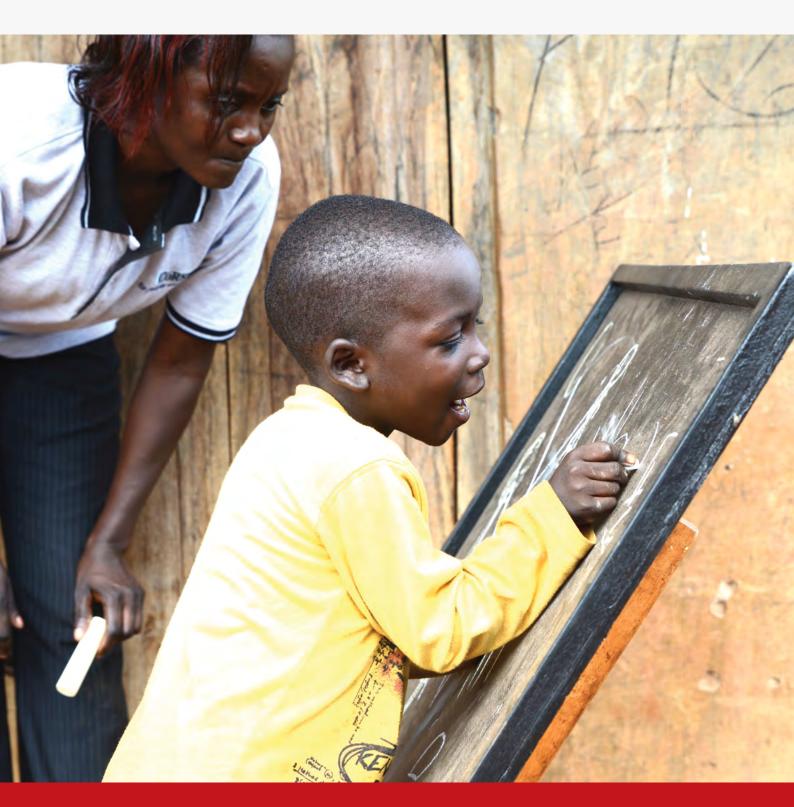
An inclusive world in which all persons with disabilities enjoy their human rights and achieve their full potential.



Two men communicate in sign language – Sri Lanka (© CBM/Lohnes).

## 3/Our Strategic Goals

CBM has four Strategic Goals with targets to be achieved by 2023.



Community worker encourages 6 year-old Augustine to practise drawing and writing – Uganda.

- 1 Strengthen the voice and autonomy of people with disabilities
- Build inclusive, resilient communities



- Build inclusive and sustainable local and national systems and services
- 4 Ensure that populations affected by natural and manmade disasters have access to inclusive humanitarian assistance



# Strengthen the voice and autonomy of people with disabilities



CBM believes people with disabilities and their representative organisations are critical development partners. In that respect, we work in partnership with people with disabilities and their representative organisations to hold governments, decision makers and those in power to account, ensuring people with disabilities are central decision makers, directing their own lives.

- ensure people with disabilities and their representative organisations are central in defining priorities and guiding CBM's advocacy and programming objectives.
- work in partnership with people with disabilities and their representative organisations in our priority countries to contribute to the SDGs and implementation of the CRPD. Our areas of focus include health, education, livelihoods, community development and humanitarian action.
- together with the disability movement, partner with external development partners including governments, NGOs, bi-lateral and multi-lateral agencies to promote and implement disability-inclusive development through the provision of evidence-based technical advice.
- support the disability movement to build the capacity and reach of representative organisations to hold relevant actors to account in the implementation of the CRPD.

## **Build inclusive,** resilient communities



CBM works with people with disabilities, their families, broader civil society and local government to build resilient inclusive communities which can withstand the impact of natural and manmade disasters. Our community development work is based on the promotion of equality and recognition of disability as a part of human diversity so that all members of the community enjoy their human rights and can see the cycle of poverty and disability broken.

- work with the poorest communities and their local governments in our priority countries to build on their existing resources and capabilities to be inclusive and address the specific needs of community members with disabilities.
- support people with disabilities living in the poorest communities to mobilise themselves for mutual support, to raise awareness, and to realise their rights and needs.
- ensure that people with disabilities and their families are able to access person-centred support that enables their participation in family, economic, and community life.
- promote the creation of inclusive health, education, livelihood, and social systems.
- in our priority countries identified as high risk for natural disaster, build knowledge and capacity of partner organisations and the communities in which we work to inclusively prepare for and withstand disasters.

#### Build inclusive and sustainable local and national systems and services



CBM recognises that the best way to ensure that people with disabilities can fully access services such as healthcare, education, or livelihoods for the long-term is for governments to build inclusive structures and services. In order to reduce the inequalities that lead to poverty and exclusion, local and national services need to be available, affordable, accessible, of quality, in line with international standards, and reflect the service users' priorities. In addition, specialised services that meet specific needs of people with disabilities such as rehabilitation or assistive devices, may be needed to ensure full inclusion. Recognising this need, we work to strengthen local and national systems and services in the areas of eye health, ear and hearing care, community mental health, physical rehabilitation, education and livelihoods.

- work with the disability movement and with governments in our priority countries to promote inclusive policies and practices in line with the CRPD.
- facilitate and promote systemic links between services, to ensure person-centred approaches are available at every stage of people's lives.
- prioritise poorest communities and people in most need of services who often have the least access.
- work with service providers and users to ensure that best practice and evidence is applied to the provision of services.

- support equity of access to services, for example advocating for social protection, universal health coverage, inclusive education and universal design.
- support training and capacity development of local personnel in order to build up expertise at national levels.



Wheelchair technician Abdullah assesses Jackson before adjusting the boy's wheelchair – Tanzania (© CBM/argum/Einberger).

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# Ensure that populations affected by natural and manmade disasters have access to inclusive humanitarian assistance and protection



Maximum effectiveness of humanitarian response will not be achieved without including all of society, at all levels of activity. Yet, when it comes to preparing for and responding to the increasing number of natural and manmade disasters happening on a global scale, the capacities, rights, and needs of people with disabilities are not yet fully addressed by the international humanitarian community. CBM is fully committed to support making the humanitarian sector more inclusive and compliant with the CRPD, the Humanitarian Disability Charter, and the Sendai Framework for Disaster Risk Reduction 2015–2030. CBM will therefore adopt a three tier approach: prioritising investments in humanitarian preparedness and operational delivery; policy development through advocacy; and technical advice and support in close collaboration with local, national, and international partners and the disability movement.

- engage in all natural and manmade level 3 emergencies (major emergencies as per the UN classification system) and support level 1 and 2 emergency responses in CBM's core countries and other countries where CBM has a humanitarian focus.
- closely coordinate and collaborate with the international humanitarian community in general, national governments and partners and with Disabled Persons Organisations (DPOs) in particular, to ensure communities most at-risk, and particularly people with disabilities, are better prepared to respond to disasters and have equal access to mainstream relief and recovery programmes.

- prioritise delivery of high quality emergency services in inclusive health (particularly mental health support and physical rehabilitation), cash-based programming and provision of high quality external technical advice to other humanitarian responders to ensure all emergency services are inclusive of people with disabilities.
- take a leading role in developing tools and international policy and guidelines on inclusive humanitarian action for use in the international humanitarian community.



A man affected by typhoon Haiyan talks to a member of the CBM emergency team – Philippines.

## 4/Our Initiatives

We achieve our Strategic Goals by implementing the following core areas of work, known as Initiatives. These are delivered through programmes at the community level which are integrated and combine a range of required interventions, and by ensuring that our work at the community level connects with our advocacy and advisory work at country and global levels and vice versa.



After support and treatment for neglected clubfoot, Sajana, 14, is back at school after years missing out – Nepal.

## 1. Disability-Inclusive Development as our foundation

We undertake advocacy on Disability-Inclusive Development (DID) in partnership with DPOs to hold governments to account regarding their compliance with and commitments towards the CRPD.

We deliver DID technical advice in partnership with DPOs to enable governments and other development and humanitarian actors to make their own policies and programmes fully inclusive.

In addition to our DID advocacy and technical advisory work, all our programmes are underpinned by a DID approach which ensures that CBM is accountable to DPOs in all of our programme and advocacy work.

We do this through having strong programme standards that proactively promote:

- justice, equality, and inclusion of all people with disabilities
- partnerships with DPOs to promote the voice, choice, and autonomy of people with disabilities in all areas of our work
- measures which ensure non-discrimination in line with a right-based approach across all our programmes
- measures to ensure equality for women, men, girls and boys across all areas of our programming
- standards that promote accessibility and universal design principles

#### 2. Inclusive Eye Health

All girls, boys, women, and men have the right to eye health. This includes people living in the poorest communities, people with disabilities and people facing any other cause of marginalisation. Our work in Inclusive Eye Health has three priority areas: strengthening national eye health systems; improving access to comprehensive inclusive eye health services; and eliminating Neglected Tropical Diseases (NTDs).



Jestina holds her three-month old son Ian after cataract surgery to restore his sight – Tanzania (© CBM/Hayduk).

## Community-Based Inclusive Development (CBID)

Our CBID work pursues transformative change in the lives of people with disabilities and their families who live in poverty and face exclusion; at home, in school, at work, and in the community. Our community programme networks link people with disabilities to services and opportunities while facilitating mutual support and self-representation. Communities in which we work are accessible and have increased resilience to disasters both small and large.

Our CBID work supports community mobilisation and social support, livelihoods, education, and health services by incorporating:

- **inclusive livelihoods**, ensuring that men and women with disabilities with low or no income have equal access to mainstream economic activities to sustain their livelihood through fair pay and decent work.
- **inclusive education**, promoting equitable, quality, lifelong inclusive education provision for all with a community-based approach and a specific focus on girls, boys, women, and men with disabilities living in low income settings.
- physical rehabilitation, strengthening health systems, capacity building of professionals in physical rehabilitation and corrective surgery, implementing physical rehabilitation projects, and supporting programmes of early intervention for clubfoot and cerebral palsy.
- ear and hearing care, supporting the role of governments to provide all the services required – at community, primary, secondary, and tertiary level – by girls, boys, women, and men living with, or at risk of, ear diseases or those who are deaf, hard of hearing or deafblind.

## 4. Community Mental Health

Our Community Mental Health work recognises the central role of mental health in wellbeing and quality of life. We work to empower communities and systems to promote good mental health, to recognise and address mental health needs, and to challenge the exclusion of people with psychosocial disabilities.



Community worker reads with 9 year-old Hilda on a home visit – Peru (© CBM/Telemans).

#### 5. Humanitarian Action

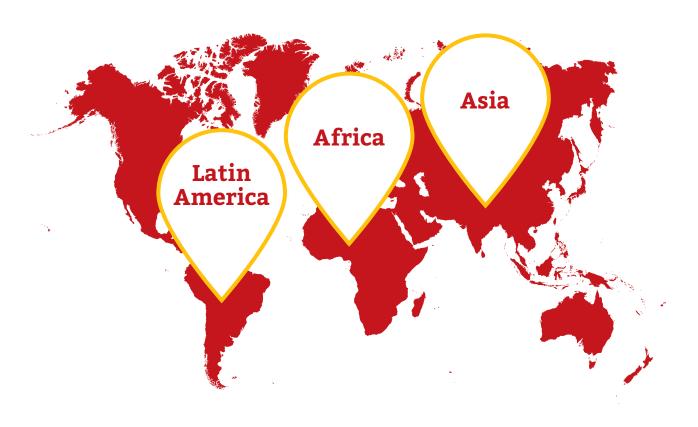
CBM engages in inclusive humanitarian response at operational and international advocacy levels. Supporting local partners and organisations of people with disabilities to prepare and respond to emergencies is CBM's unique contribution in the field of humanitarian action. CBM's emergency work also includes working with mainstream humanitarian organisations to promote and implement inclusive relief and recovery operations.

CBM has built up a broad and deep level of expertise to implement these five Initiatives. We have established a network of relationships with government and civil society partners and have strong alliances with the disability movement in Africa, Asia and Latin America. This positions CBM to be able to promote a whole of life, person-centred approach for people with disabilities living in the poorest communities, but equally an approach that does not just look to address change for the individual but addresses the need to challenge systemic discrimination.

CBM's strategy and approach is underpinned by a commitment to research, knowledge management, and learning. This builds on our long standing partnerships with DPOs, communities, governments, service providers and academics to promote communities of practice that nurture inquiry, learning, and dialogue from the community to the global level. CBM recognises that our Initiatives can only grow and influence change if we are proactive in promoting learning that values local knowledge and lived expertise, at the same time as commissioning research where critical evidence gaps exist.

## 5/Our Geographical Focus

CBM is focusing on those countries in Africa, Asia and Latin America where we believe CBM will have the biggest impact in line with our strategy. Criteria for selection have included the development status of countries according to the standard measures of poverty and vulnerability, the strength of programming in our priority work areas, and the potential for increased impact. In particular, the Federation Strategy requires CBM to work in countries or regions of countries where levels of poverty are highest.



In the priority countries which are the core of our strategic focus we develop a comprehensive country strategy and maintain a country presence with CBM staff on the ground in order to achieve the following:

**Championing and modelling disability-inclusive development** to promote inclusion of people with disabilities in their communities and in all aspects of society, and building a body of evidence that highlights the positive impact of this approach.

Accompanying partners in their monitoring, evaluation and reporting of the projects funded by CBM, designed and delivered in keeping with our strategic country plans.

**Delivering quality technical advice** to ensure high-quality programmes that are driven by innovation and based on learning, building an evidence base of good practice, and modelling and scaling up those approaches that are most effective.

**Investing in and building the capacity** of DPOs, governmental bodies, and civil society organisations to better achieve systemic, transformative change for people with disabilities and their communities in line with the CRPD.

**Acting as a catalyst** in working with and connecting DPOs and partner organisations, governmental bodies, relevant national networks, and other local actors, undertaking advocacy, leveraging synergies, facilitating shared learning, and widening their influence.

**Ensuring upward and downward accountability** by creating linkages with regional and global development and humanitarian frameworks and advocacy priorities whereby local actions are informed by global perspectives and equally also inform global actions in pursuit of the Sustainable Development Goals.

## 6/Our Partnership Approach

Working with partner organisations is central to CBM's vision to ensure context-appropriate and sustainable programmes. To fulfil our aspirations of achieving change, CBM recognises that we must build appropriate relationships and networks for programming, policy, and advocacy. At the field level, CBM is committed to working through local structures wherever possible in order to unite efforts, promote ownership, ensure cultural sensitivity, and build shared responsibility. These partners may be government, national or local providers, international organisations working at local level, or DPOs, organisations of all faiths and none – as long as they are committed to seeking out the voices of people with disabilities as key decision makers in their own development.

Recognising power imbalances, CBM seeks to be clear about not just expectations of its implementing partners, but also what commitments local partners can expect from CBM and this is spelled out in our Partnership Principles document. We seek to complement and build partner strengths and expertise, supporting capacity building at all levels. We recognise that change takes time and we seek to build in sustainable approaches from the start which balance long enough commitment with ensuring we avoid creating dependency.

## Annex to the Federation Strategy 2023: CBM's Theory of Change

CBM seeks transformative change leading to improved quality of life for people with disabilities living in poverty, their families and their communities. Disability and poverty are inextricably linked and perpetuate each other, so we focus on the poorest communities in the world.

CBM seeks this change through three main outcomes:

The reduction of avoidable impairment

People with disabilities are empowered to exercise their rights

The strengthening of inclusive, resilient and equitable communities

These three pathways are closely related, influencing and promoting each other, together contributing to the key outcome of improved lives and reduced poverty.

#### Reduction of preventable impairment

Particularly in the poorest communities, preventable impairment brings an enormous social and economic burden. This can be reduced through strengthening existing health and education systems, and increasing economic, political and social participation. By making effective and good quality services accessible to all, the whole community benefits. We believe in working throughout the life cycle, as investment in early intervention, promotion of safe behaviour, treatment, and rehabilitation all contribute directly to reduced poverty and improved lives.

These outcomes are sustained by working with governments who have a duty towards their citizens. We are also increasing our focus on ensuring people with disabilities are included in disaster risk reduction and response to emergencies.

#### Inclusive, resilient, and equitable communities

The realisation of the rights of people with disabilities relies on changes to the social, legislative, and physical environment. These changes arise from reduced stigma and more inclusive attitudes on one side, and the promotion of inclusive physical and policy environments on the other. CBM seeks to strategically model accessible environments, whilst also challenging discrimination: in CBM's own institutional practise, with private supporters and donors, alliance partners, governments, partner organisations, and DPOs.

## People with disabilities are empowered to exercise their rights

The disempowerment and discrimination experienced by people with disabilities is addressed partly through the strengthening of systems as described above which provides support in two ways (the twin-track approach) - working towards mainstream services and interventions that are accessible to all, and supporting specialised services that meet specific needs of people with disabilities such as rehabilitation, assistive devices, or pharmaceuticals. The outcome is that people with disabilities experience improved educational attainment, better health, mobility and function, and achieve not only increased income but greater economic power.

But this alone will not bring about systemic change. People with disabilities, their families, and communities benefit from realising their rights as enshrined in the United Nations CRPD. CBM works not only to raise awareness and to challenge discriminatory attitudes at all levels, but also to give people the resources and skills to hold duty-bearers to account, address barriers and reduce prejudice, find a strengthened voice, and participate more fully in economic, civil, political, and social opportunities.



Huseni and his classmates at school – Tanzania ( $\bigcirc$  CBM/argum/Einberger).

#### **CBM's Foundation Principles and Approaches**

Challenging attitudes and increasing participation and decision-making by people with disabilities - the rights of people with disabilities are central to CBM's work, starting with the way that people with disabilities themselves perceive their roles and potential, and extending to attitudes and beliefs of families and communities, organisations, national governments, and global institutions. Most of our work begins with raising awareness on the rights of people with disabilities and the barriers faced in accessing those rights, including growing the voice and representation of people with disabilities in all CBM supported initiatives.

Partnership, networks and alliances - we recognise the different capacities that others bring to the table and therefore build alliances and networks in the local, national and global arenas of our work. Central to our approach is working through local partners because we believe they know their own environment, and can bring about lasting change. Our role is to support this work with technical expertise and resources while seeking to influence and inspire action in others. This involves harnessing not only the resources of our generous advocates and supporters, but also governments and other stakeholders in field countries, donor governments, international NGOs, multi-lateral organisations, academic, and public and private sector partnerships which allows us to leverage significantly greater change than CBM's resources alone allow.

## CBM Theory of Change ('Inspiring action and transformative change')



Children enjoy the moment a water hose breaks loose during a school food distribution – Ethiopia ( $\bigcirc$  CBM/Hayduk).



CBM is an international Christian development organisation, committed to improving the quality of life of people with disabilities in the poorest countries of the world.

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