Submission to the
Department of Social Development
on the
Draft National Disability Rights Policy

Introduction

The SACBC Parliamentary Liaison Office welcomes this opportunity to engage the Department of Social Development on this important matter of social policy. Those with disability frequently experience marginalization and isolation. While South Africa ratified the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in 2007, and despite various policies and laws that protect the rights of persons with disabilities, the majority of people with disabilities in South Africa have been excluded from the mainstream of society. The National Disability Rights Policy (NDRP) strives to bring about the inclusion of all persons with disabilities and to sets out the measures which government will undertake to uphold the rights of those with disability.

This policy framework works through twelve policy directives. The NDRP will in effect replace the White Paper on an Integrated National Disability Strategy (INDS) and will integrate into its policy the UN Convention on the Rights of Persons with Disabilities (UNCRPD). It also seeks to align with the provisions of the Continental Plan of Action for the African Decade of Persons with Disabilities with South African legislation and policy frameworks on the NDP. This demonstrates an attempt by government to integrate the various international and national core documents into one policy framework, which is to be welcomed.

The NDRP is built on the following principles aimed at the mainstreaming of disability.

- Breaking access and participation barriers

- Reducing compounded marginalisation
- Empowering persons with disabilities
- Sustainable independent living in the community
- Strengthening the representative voice of persons with disabilities
- Building a disability rights-responsive public service
- International co-operation

Definitions and Terminology

Importantly, the NDRP regards disability as "imposed by society when a person with a long-term physical, psycho-social, cognitive, neurological and/or sensory impairment is denied access to full participation in all aspects of life; and when society fails to uphold the rights and specific needs of individuals with impairments. Persons with disabilities are therefore persons who – as a result of a temporary impairment – are unable to either gain access, or when obstacles are placed to the achievement of such equal opportunities".

Moreover, it is clear from this definition that disability cannot be regarded only as a health problem. It is a complex phenomenon, reflecting the interaction between features of a person's body and features of the society in which he or she lives. Overcoming the difficulties faced by people with disabilities requires interventions which remove environmental, economic, educational and social barriers. This is especially so for people who experience more than one disability.

It is essential to remember that a person with disability is not defined by their condition, and reference to their disability should not depersonalise them. There has been a gradual shift in the understanding of disability. Many derogatory terms previously used to describe disability are falling into disuse – 'retarded', 'cripple', 'spastic', 'dumb', 'mental', 'idiot'. One such example of this increased sensitivity is the term 'spastic', which refers to stiff and rigid muscles which results in compromised mobility; it is now correctly referred to as 'cerebral palsy'.

Access and Participation

Policy directive 6.2, which focuses on breaking access and participation barriers, stipulates that all public and private institutions should provide reasonable accommodation support measures, including appropriate forms of assistance and support, public signage in Braille, alternative communication, and professional sign language interpreters.

This is a welcome initiative and must be recognized for its inclusionary merits. However, the cost involved and the time it will take to be implemented are cause for concern. How will all these institutions be motivated to implement these communication measures? Furthermore, all public and private institutions should promote access for persons with disabilities to new information and communications technologies and systems, including the internet, through the design, development, production and distribution of accessible information and communication technologies and systems at an early age.

The provision of appropriate assistive devices and services to all those with disability is key. Be it spectacles, hearing aids, walking frames, wheelchairs, or computer programmes that facilitate communication, assistive devices are vital the enablement of those with disability.

The alignment of programmes between the Dept of Basic Education and the Dept of Social Development is essential. Such a collaboration, particularly with regard to technology, is essential in providing these services in all schools. Furthermore, a South African Sign Language Authority should be established to ensure the recognition of South African sign language and training, and that the accreditation of South African sign language interpreters for all official languages be recognized.

This must be acknowledged as a great way to move forward and acknowledge all language users in South Africa. This section also recognizes the universal design of the policy as it seeks to create a South African Braille Authority and a Universal Design Access Authority that co-ordinates the institutionalization of universal design access.

While our policies should indeed aspire to universal standards, we face enormous challenges in terms of implementation. Evidence suggests that people with disabilities face barriers in accessing the health and rehabilitation services they need. Their needs may require the co-ordination of various health and social services which are not necessarily available at the same institution, or are simply too far away. Ideally, a wheelchair for a person with quadriplegia should be custom made so as to provide the correct measurements for the user's height, weight and degree of mobility and so provide as much support and comfort as possible. A child would need to have successive wheelchairs as he or she grows. Wheelchairs in rural areas have to transverse difficult terrain, resulting in punctured tyres. Access to transport that is able accommodate wheel chairs is also a necessity.

Conclusion

Mainstreaming disability is about overcoming barriers that 'dis'able. It requires supporting families to better enable them to care for their disabled member. This support may be very practical, such as

the finance required to make adjustments to the family home for a wheelchair; or the provision of respite care which gives the primary caregiver a break when the disabled family member requires 24-hour care. Social work services should be available to do case management and counselling. Mainstreaming disability is fundamentally about transformation – of our buildings, transport systems, schools and other educational facilities, health care and social services, as well as our language.

For further information please contact

Angelique Thomas

SACBC Parliamentary Liaison Office

Cape Town

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angelique@cplo.org.za