UNITED REPUBLIC OF TANZANIA

NATIONAL POLICY ON DISABILITY

MINISTRY OF LABOUR, YOUTH DEVELOPMENT AND SPORTS

JULY, 2004
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PREFACE

Since independence (1961) the Government through the Department of Social welfare has been providing services to people with disabilities without a comprehensive policy. The adoption of the National Policy on Disability (NPD) is the outcome of many years of consultations amongst disability stakeholders.

Much as the Government has had no clear policy over the years, Tanzania has been actively involved in both international and local initiatives that address disability issues. At the international level, Tanzania is a signatory to various disability specific United Nations instruments which include the declaration on the Rights of People with Disabilities (1975), Convention on the Rights of the Child (1989) and the Standard Rules on the Equalization of Opportunities for Persons with Disabilities (1993).

At the continental level Tanzania is a signatory to the Plan of Action for the African decade of Persons with Disabilities and a member of African Rehabilitation Institute (ARI). Currently is working with the international community to realize the finalization of a Comprehensive and Integral International Convention on the Protection and Promotion of the Rights and Dignity of Persons with Disabilities.

Locally, Tanzania has taken measures to address the problem of disability from various angles including the national health initiatives to eradicate childhood diseases that cause disablement such as polio, enactment of disability legislations, inclusion of a question on disability in the 2002 National Population and Housing Census and the ratification of the United Nations standard Rules on the Equalization of Opportunities for Persons with Disabilities.
The development of the policy was participatory and the draft document was widely circulated and debated by the stakeholders. At one point the Disabled Peoples Organizations (DPOs) asked the Ministry to withdraw the submitted draft for further input.

Indeed it was withdrawn and the result of this collaborative effort is the comprehensive policy which we are all proud to have.

The policy provides guidelines and sets parameters for services delivery. It is built on a Tanzanian cultural perspective with a strong focus on the development, rights and dignity of people with disabilities.

The challenge before us is an open secret. To translate the optimism embodied in the policy into realism. I would like to invite the support of all stakeholders and in particular people with disabilities themselves, local and international communities to rally around to ensure that the desired outcomes of the much awaited policy are realized.

Finally I would like to thank the staff of my Ministry, the DPOs and all those who in one way or another contributed to having the policy in place.

Prof. Juma A. Kapuya (MP)
MINISTER FOR LABOUR, YOUTH DEVELOPMENT AND SPORTS
DEFINITIONS.

(a) **Disability:**
The loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to physical, mental or social factors.

(b) **Person with Disability:**
An individual whose prospects of obtaining and retaining an employment are greatly reduced due to known physical, mental or social factors.

(c) **Rehabilitation:**
Combined efforts in the domains of health, education, psychology and work, which are intended to raise the functional level of a disabled person so as to enable him/her, take part in the normal life of the community.

(d) **Resettlement:**
A self fulfilled and integrated life of a disabled person in the community.

(e) **Community Based Rehabilitation (CBR):**
An all level coordinated process and strategy of enhancing the quality of life of people with disability.

(f) **Integration:**
Level of involvement and acceptance of disabled persons in the community.

(g) **Equalization of opportunities for persons with disabilities:**
Provision of equal opportunities and services to people with disabilities along side the non-disabled.

(h) **Work:**
Any legal activity that enables a person with disability live independently.

(i) **Technical Aids/Appliances:**
Appliances which assist the functional ability of a disabled person.
Chapter One

1.0 Introduction:

Disability is the loss or limitation of opportunities to take part in the normal life of the community on an equal level with others due to temporary or permanent physical, mental or social barriers. Such a loss or limitation could be aggravated by community's perception of disabled people.

In Tanzania and elsewhere in the Diaspora disability is associated with prejudice and negative attitude. People with disabilities are viewed as worthy of pity, dependent and as such not an integral part of the community they live. This view is contrary to basic human rights. The constitution of the United Republic of Tanzania firmly states that all human beings are equal and are entitled to equal rights irrespective of colour tribe, gender and religion. United Nations Resolution No. 27 (a) (iii) of 20 December 1948 states that all human beings are born free with equal rights and dignity.

In line with this resolution human beings have the right to use the society and its resources for their development and protection. Since a person with disability is also a human being he/she is equally entitled to these rights. The United Nations has also passed several other resolutions on the rights of people with disabilities.

1.1 Important Events Preceding the Policy:

In the last two decades prior to 1981 service provision to people with disabilities had no clear policy. General government pronouncements e.g the Arusha Declaration provided the direction for services to disabled persons. The proclamation of 1981 as the International Year of Disabled Persons (IYDP) gave the necessary impetus to the government which took the following steps: -
(a) Cabinet paper No. 19 of 1981. This Cabinet Paper has two parts: Part one discusses problems of services provision to disabled persons in the absence of a clear policy. Part two delineates responsibilities of caring for disabled persons to government institutions, families, relatives, local government and non-governmental organizations. The Cabinet Paper emphasized the objective of service provision as the protection of disabled persons’ dignity.

(b) Act No. 2 of 1982 (Disabled Persons Employment)
This Act was enacted as a result of Cabinet Paper No. 19 of 1981. Major provision of this Act include:-

- Enabling disabled persons to secure employment through quarter scheme and reservation of posts.
- Establishment of the National Advisory Council which advises the Minister on matters relating to services for disabled persons.

(c) Act No. 3 of 1982 (Disabled Persons Care and Maintenance)
The Act also results from Cabinet Paper No. 19 of 1981. The Act provides and designates responsibilities of caring for disabled persons to families, relatives, local government, central government and non-governmental organizations.

(d) Official recognition of DPOs by the Government.
In 1981 the government recognized DPOs operating in the country. The government also recognizes that DPOs are representative forums for people with disabilities.
1.2 The Situation of People with Disabilities:

The August 2002 Population and Housing census carried a question on disability. The official results are not yet known. However, according to World Health Organization’s formula of 1 in 10 being persons with disabilities, Tanzania with the Population (2002) of 34,569,232 is estimated to have 3,346,900 people with disabilities distributed as follows:

<table>
<thead>
<tr>
<th>%</th>
<th>Number</th>
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<tbody>
<tr>
<td>Physically Impaired</td>
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<tr>
<td>Visually Impaired</td>
<td>27</td>
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<tr>
<td>Hearing Impaired</td>
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<td>Intellectually Impaired</td>
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<td>Others</td>
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Globalization, indebtedness and changes in the world economic order has greatly affected the social and economic life of the majority of people. In Tanzania the unfavourable economic situation has affected the availability of such services as health, education and employment opportunities. The most affected however are people with disabilities particularly in the following areas: -

1.2.1 Health

Despite efforts to prioritize immunization to children, health services are by and large inaccessible to the majority of people particularly to people with disabilities.

Most disabilities result from, among others poor health conditions, lacks of immunization against disabling diseases and inadequate care of expecting mothers. Diseases of expecting mothers and birth complications may cause disabling conditions to the mother or the child. Mother and child health programmes greatly reduce the incidence of disability in the community. Widespread poverty amongst disabled people and their
families limit them from accessing required technical aids which would assist them to easily reach health facilities. As a result the majority of people with disabilities particularly in the rural areas are unable to access health services.

1.2.2 **Early Intervention:**
There is a need for early identification of children with disabilities. Early identification followed by appropriate intervention has a chance of eliminating occurrence of a disability or minimizing its impact later in life. Unfortunately Tanzania does not have a national programme for early intervention which would have assisted the identification of children with disabilities in their respective communities. The fact that parents still hide their children with disabilities pushes them further away from accessing appropriate services.

1.2.3 **Mental Health Services:**
Various social and economic hardships are known to have caused mental health problems to a sizeable number of people. Apparently the life situation of the sufferers is dangerous to themselves and to those around them. Besides no agency seems to be responsible for their identification, treatment and care.

1.2.4 **People with Disabilities and HIV/AIDS:**
People with disabilities have similar sexual desires as the non-disabled and are equally affected by the pandemic. Unfortunately awareness campaigns against the spread of the disease exclude disabled persons. Most disabled persons are poor and have little education to enable them access information on HIV/AIDS. The available campaigns against the disease are not disability friendly for example all written information is in ordinary print and non in Braille for the visually impaired. Likewise spoken information is not simultaneously translated into sign language for the benefit of the hearing impaired.
Lack of technical aids generally is a drawback to most people with disabilities as it limits their chances of accessing information on HIV/AIDS and thus being more prone to infection for lack of knowledge.

1.2.5 Education:

Society’s prejudice against children with disabilities is known to have psychologically affected their ability to realistically cope with their environment. Much as education is essential for the development of a child’s potentialities, some parents still perceive children with disabilities as a burden and opt not to send to school.

Educational system in the country does not allow for equal access for children with disabilities. Almost all school facilities at all levels are inaccessible. Teacher education and school curriculum as well do not incorporate the needs of disabled persons. As a result of the above, children with disabilities enrolled for primary one is less than one percent. This figure is lower in secondary schools and higher learning institutions.

1.2.6 Skills Training:

Acquisition of skills is an important prerequisite in the life of a person with disability. Skill leads to employment and therefore, self-sufficiency and independent living. Despite this reality most skills training facilities are inaccessible to people with disabilities. In addition cost sharing policy limits the majority of would-be trainees who cannot afford the same. Skills training institutions for people with disabilities lack the capacity to train competent individuals who can compete in the open labour market.
1.2.7 Employment:
An individual’s capacity to work and lead an independent life is an expression of one’s dignity. In our society the capacity to work has been associated with complete functional ability of the body. Disability is associated with lack of ability and most people with disabilities see themselves in the same light. The end product of this scenario is the difficulty persons with disability find themselves in accessing work.

In an attempt to address this anomaly the government enacted a Disabled Persons (Employment) Act. No. 2 of 1982. The legislation however has not provided a solution to employment problems of people with disability due to changes in the economic climate and globalization.

1.2.8 Care:
At any time in the life of a society there will be some individuals whose capacity to lead an independent life is either reduced or absent and have no one to care for them. Circumstances leading to this include:

(i) Failure by relatives to care for an individual due to their own impoverishment or disregard of a disabled person.

(ii) Being away from one’s domicile and cutting off ties with relatives such that when he/she becomes old and in need of care none is available to provide.

(iii) Severe disabling conditions that require all round care put a lot of strain on relatives. Such a situation calls for institutional care. Generally institutional care services are inadequate and lack essential amenities and qualified personnel. Government decision to place institutional care under Local Authorities and non-governmental organizations brings this service not only closer to the recipients but also provides a good chance for its improvement.
1.2.9 **Accidents and Compensation:**
Economic development goes hand in groove with industrial growth and improved communication network. Accident involving transport facilities and at workplaces cause disabling conditions to people. Besides an increase in the number of accidents that cause disabilities, the victims find it difficult to claim compensation. Where the same is paid it is not commensurate to the degree of disability.

1.2.10 **Older people with disabilities:**
Old age is accompanied by reduction in physical and mental functioning. An older person with disability has little capacity if any, to participate in community activities.

1.2.11 **Technical Aids:**
People with disabilities require technical aids to enhance their functional ability. Such aids include white cane, hearing aids, and writing frame with stylus, hats and sunglasses. Other technical aids are tricycles, motorized three wheelers, modified car and Braillers. Despite their importance to disabled persons they are not readily available.

1.2.12 **Accessibility:**
There is a cause and effect relationship between disability and environment. Almost all public buildings are built to cater for the needs of the non-disabled. Stairs, narrow doors and toilets are inaccessible to the majority of disabled persons.
On the other hand road construction and transportation facilities are designed to suit needs and lifestyle of non-disabled persons leaving a disabled person unable to relate favourably with his/her environment.

1.2.13 Awareness creation:
The widespread prejudice and negative attitude towards disability and persons with disability in our society is mostly culturally motivated. The birth of a child with disability is associated with superstitions or some misfortune. Negative attitude of the community towards disability and persons with disability is one of the major barriers against the integration and equal participation of disabled persons in the life of the community. Often times disability is perceived as a problem and a person with disability as unable and dependent.

1.2.14 Human Rights and Legal Protection:
The current laws were enacted without consideration of the differential needs of persons with disabilities. The administration of such legislations as relating to construction where stairs are preferred to ramps or information where persons with disabilities have no access to Braille prints or sign language interpretation. The two disability specific legislations have serious shortcomings. These legislations are: -

(i) Disabled Persons (employment) Act No. 2 of 1982:
This Legislation requires employers to employ 2% (persons with disabilities) of every 50 employees in an establishment. Political and Social economic changes have made these legal provisions difficult to enforce.
(ii) Disabled Persons (Care and Maintenance) Act No. 3 of 1982:
This Act provides to local authorities to own and provide institutional care to disabled persons. The government however yet to provide mechanisms that would allow local authorities to assume this role.

1.2.15 Disabled Persons Organizations and Pro- disability Institutions:
Provision of services to people with disabilities requires adequate resources. Participation of non-governmental organizations in service provision assists the government in providing comprehensive services. The Ministry responsible for these services is however unable to coordinate the activities of relevant NGOs since their registration process does not involve this Ministry.

1.2.16 Subvention to DPOs and Pro – disability Institutions:
Disabled persons organizations as representative bodies for people with disabilities are weak managerially and financially. The government has the responsibility to empower DPOs and pois so as to enable them perform their roles.

1.2.17 Development fund for persons with disabilities:
The majority of people with disabilities are poor and their life circumstances are besieged by barriers. Their participation in income generation is minimal and is not included in the current national poverty reduction strategies. Generally, persons with disability have not been sufficiently sensitized to access and benefit from public funds allocated to special groups like the youth and women.
CHAPTER TWO:

2.0 VISION AND POLICY DIRECTION:
Tanzania values human rights and equality of all citizens. Every citizen has the right under the law to participate freely in activities beneficial to himself/herself and the society as a whole. Every citizen, including people with disabilities have an equal right to receive basic needs from the society.

Despite their impairment, people with disabilities are a resource which if and when appropriately developed could be of greater benefit to themselves and the community at large. There is therefore a grave need to identify their capabilities and talents and devise strategies to develop them.

The National Policy on Disability aims at providing conducive environment for people with disabilities to engage in productive work for their development and the utilization of available resources for improved service delivery.

2.1 Objective of the National Policy on Disability:
The policy aims at improved life situation of people with disabilities by undertaking the following actions:

- Encourage the development of people with disabilities.
- Empower families of people with disabilities.
- Review/amend legislations that are not disability friendly
- Improve service delivery.
- To allow the participation of people with disabilities in decision making and implementation of important activities in the society.
To enable families of people with disabilities and the society at large to participate in decisions and implementation of important disability friendly activities.

2.2 Special Groups:
In the delivery of services the policy identifies the following priority groups:

- Women with disabilities
- Children with disabilities
- Older people with disabilities.
CHAPTER THREE:

3.0 POLICY STATEMENTS:

3.1 Policy Issue: Awareness creation:
Negative attitude of the society towards persons with disabilities is a barrier that limits their participation in activities that are developmental to themselves and the society.

It is important that this negative perception is corrected by availing people with disabilities every opportunity that would ensure that they lead productive life equal to the non-disabled.

Policy Statement

| A mechanism would be put in place to create public awareness on the needs, rights, abilities and contribution of people with disabilities in the society. |

3.2 Policy Issue: Information Sharing
Information on available services is an important part of service provision to people with disabilities. The development of people with disabilities and their effective participation in the daily life of the community depends in large part on the information available to them. Unfortunately the present service provision paradigm does not include availing information to people with disabilities and their families.
Policy Statement:

(1) People with Disabilities, their families and agencies shall be provided with information on available services.

(2) Important information to the public shall be accessible to people with disability in their various categories.

3.3 Policy Issue: Health Services

Poverty and poor hygiene conditions cause different disabling conditions. Most disabilities however could be prevented through improved hygiene. Public health programmes must emphasize on prevention and education in environmental management and nutrition.

Policy Statement:

The existing basic health programmes and public education should be strengthened.

3.4 Policy Issue: Early Intervention:

Early intervention forestalls onset of disability later in life. Early identification followed by treatment has the potential of eliminating onset of disability and or reduce the impact of disability in adult life. Early intervention is therefore an all time solution to the problem of disability. Despite its importance only a negligible percentage of disabled children are reached.
Policy Statement:

A mechanism that involves stakeholders shall be instituted to ensure early intervention of children with disabilities.

3.5 Policy Issue: Mental health services:
Diseases and economic hardships have resulted into mental health problems for a sizeable number of people in the society. The life situation of mental health patients is dangerous to themselves and others around them. Medical services to mental health patients must take into consideration early identification and treatment.

Policy Statement:

Law enforcement agencies and health personnel shall institute a programme to provide early identification and treatment to mental health patients.

3.6 Policy Issue: People with Disabilities and HIV/AIDS
People with Disabilities have sexual desires just like the non-disabled. Yet awareness creation programmes on HIV/AIDS are not accessible to people with disabilities. There is a need to ensure that strategies used to create awareness to the public on HIV/AIDS are accessible to people with disabilities of various categories.

Policy Statement

A mechanism shall be put in place to ensure that awareness creation programmes on HIV/AIDS are accessible to people with disabilities.
3.7 **Policy Issue: Technical Aids:**
Effective participation of an individual with disability in the life of the community largely depends on availability of technical aids. Despite their importance, they are not readily available and people with disabilities and their relatives have no information on where to get them. When available on market they are too expensive for the majority of people with disabilities to buy. Under these circumstances people with disabilities fail to effectively participate in the activities of their communities.

**Policy Statement:**

(i) The government in collaboration with DPOs will ensure that people with disabilities are provided with information on availability of technical aids.

(ii) The government in collaboration with stakeholders will provide technical aids to people with disabilities who have no means to buy them.

(iii) The government shall waive fees for technical aids imported into the country and those manufactured in the country.

(iv) A mechanism shall be put in place to ensure the production of low cost technical aids in the country.

3.8 **Policy Issue: Education:**
Education is key to the development of children with disabilities’ potential. The education policy emphasizes the availability of early learning and basic education to all children aged 7 years and that children with disabilities will be given a priority. Despite this commitment the educational system is inaccessible to children with disabilities.
**Policy Statement:**

The government in collaboration with stakeholders shall provide a conducive environment for inclusive education that takes care of special needs of disabled children.

3.9 **Policy Issues: Skills Training:**
Skills training enable a person with disabilities to work and lead an independent life. Skills training offered in vocational training centers for people with disabilities is inadequate and do not provide the competence required to enable people with disabilities work independently. Besides the training environment is not adequately accessible.

**Policy Statement**

(i) The government in collaboration with stakeholders shall improve skills training and facilities for people with disabilities.

(ii) Skills training for people with disabilities will integrate the non-disabled trainees.

(iii) A programme shall be instituted to identify and develop talented people with disabilities.

3.10 **Policy Issue: Employment:**
Work is crucial for an individual’s development and dignity. The majority of people with disabilities in the country live in poverty because they cannot access work due to their disability and competition in the labour market.
3.11 Policy Issue: Accessibility:

Effective participation of people with disabilities in their community life largely depends on environmental accessibility. The use of various technical aids enhances functional ability of people with disabilities. On the other hand construction of public buildings, roads, play grounds and such services, as public phones and water tapes does not take into consideration differential needs of people with disabilities thus making these facilities inaccessible.

Policy Statement:

(i) The government in collaboration with stakeholders shall take measures to ensure people with disabilities are availed with work tools and seed money to enable them establish/improve their income generation projects.

(ii) The government in collaboration with stakeholders review the Disabled Persons (Employment Act No. 2 of 1982).

3.12 Policy Issues: Care:

In the life of every society there are individuals who for some reason cannot lead independent lives and have no one to fend for them. The government has the responsibility to provide protection for them. Institutional care for people with disabilities shall however be a last resort.
Policy Statement:

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<th>The government through local authorities and in collaboration with non-governmental organizations shall provide institutional care to eligible people with disabilities.</th>
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<td>The government in collaboration with non-governmental organizations shall put in place mechanisms for awareness creation amongst families and the society in general on their responsibility to provide care to relatives with disabilities.</td>
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3.13 Policy Issue: Community Based Rehabilitation:

Institutional care of people with disabilities has the following disadvantages: -

i) Targets fewer people
ii) Uproots people from their areas of usual domicile
iii) Separates people with disabilities from mainstream community life.
iv) Evokes negative attitude.

On the other hand provision of rehabilitation services in the community has the following advantages: -

(i) Serves a large number of people with disabilities of various categories at one and the same time.
(ii) Community based
(iii) Integrates the non-disabled
(iv) Builds solidarity between people with disabilities and the non-disabled.
Policy Statement

The government shall ensure that public institutions provide services to people with disabilities in the same manner as they provide to the non-disabled except where necessary.

3.14 Policy Issue: **Integration:**
Integration is the degree of participation of people with disabilities in the life of the community. The concept of integration presupposes the use of the same institutions used by the non-disabled to serve people with disabilities.

Policy Statement:

The government shall take measures to ensure that community based rehabilitation (CBR) is adopted as a strategy and method of service delivery to people with disabilities.

3.15 Policy Issue: **Sport:**
Participation in sports activities enables an individual to:

(i) Build physical fitness and mental alertness.
(ii) Instill discipline and self defence.
(iii) Demonstrate abilities.
(iv) Build relationships.

People with disabilities have the right to participate in sports activities in the same manner as the non-disabled. As a matter of fact participation in sports activities is therapeutic for people with disabilities since disabilities tend to be corrected as one participates in sport.
Policy Statement:

The government shall ensure that people with disabilities participate effectively in sports activities. Furthermore sports associations and stakeholders shall ensure that inclusion of people with disabilities is part of their development programmes.

3.16 Policy Issue: Religion:
Participation in religious activities is a basic right to an individual regardless of his/her condition.

Policy Statement:

(i) Religious institutions shall ensure that people with disabilities participate effectively in religious activities.

(ii) Religious institutions shall be sensitized to ensure that religious facilities are accessible and information regarding religious activities reach people with disabilities of various categories.

3.17 Policy Issue: Transport and Road Safety:
Disabled persons experience difficulties in the use of transport facilities. Most facilities, for example buses, and roads are not accessible to disabled persons.
3.18 Policy Issue: Accidents and Compensation

Persons who get impaired as a result of road or workplace accident have difficulties in obtaining compensation. Where the same is paid it is not commensurate to the degree of impairment suffered. The workman’s compensation Act has shortcomings since it does not accommodate unemployed persons of the informal sector. In addition compensation is paid in respect to selected parts of the body.

Policy statement:

The government in collaboration with stakeholders shall review the workman’s compensation act so as to:

(i) Ensure that compensation paid is commensurate to the degree of impairment sustained.

(ii) Ensure that compensation is paid in respect of impairment rather than body parts.
3.19 **Policy Issue: Human Rights and Legal Protection:**

People with disabilities like other citizens have the right to respect, acceptance, employment and care. The society in general is insensitive to the needs of disabled persons and have in most part shown negative attitude towards them.

**Policy Statement:**

The government in collaboration with stakeholders shall review legislations, which are insensitive to the needs of disabled persons.

3.20 **Policy Issue: Staff development**

Service provision to persons with disabilities requires a pool of trained and experienced personnel. The majority of available personnel have not had the relevant training.

**Policy Statement:**

The government shall take measures to ensure that personnel involved in service delivery to people with disabilities receive professional training.

3.21 **Policy Issue: Information, Statistics and Research**

Reliable information is an important tool in the provision of services to persons with disabilities. Unfortunately there is a serious lack of data and information in this service area.
Policy Statement:

In order to address this anomaly, the government and stakeholders shall sensitize government agencies, individuals and non-governmental organizations to conduct various researches in this service area.

3.22 Policy Issue: Disabled Persons Organizations:
Disabled Persons Organizations are an important force in the society. They are representative bodies and a forum for persons with disabilities to voice their opinions needs and determine their own development destiny.

Policy Statement:

The government shall encourage the establishment of DPOs and improve their working environment.

3.23 Policy Issue: Pro - Disability Institutions.
The government acknowledges the role of non-governmental organizations in the provision of services to people with disabilities. The government will continue to cooperate with non-governmental organizations to ensure that services provided adhere to required standards. The current registration requirements for associations that provide services to people with disabilities have serious shortcomings.
3.24 Policy Issue: Development fund for persons with disabilities:
Disabled persons are among the impoverished people in the society. They are also an unharnessed resource. There is a need to create a conducive environment for them to utilize existing institutions for income generation.

Policy Statement:

The government shall establish a Disabled Persons Development Fund so as to enable them participate effectively in income generation and bring about their own development.
3.25 Policy Issue: Subvention to DPOs and pro – disability Institutions.

DPOs and pro – Disability Institutions have the potential to forge a partnership that brings about development to persons with disabilities. These organizations have no finances and largely depend on donor assistance. The government has the responsibility to recognize and encourage them for the commendable work they are doing.

Policy Statement:

The government shall ensure that DPOs and ODPs receive subvention as an incentive for the services they provide.

3.26 Policy Issue: International Cooperation:

Service provision to people with disabilities is a relatively new area in our country and the resource base available is insufficient to sustain comprehensive service delivery. There is a need for Tanzania to learn from countries experienced in this service area. As a member of the international community Tanzania has the obligation to cooperate with other nations.

Policy Statement:

The government shall forge relations with countries and institutions that in Africa and elsewhere so as to improve and sustain service delivery to people with disabilities in the country.
CHAPTER FOUR:

4.0 STAKEHOLDERS RESPONSIBILITIES:
People with disabilities have the right and equal opportunity for development and receive the same services from the society as the non-disabled. Their participation in the life of the community must target on reduction or elimination of dependency.

In order to focus on development and improved service to people with disabilities in the implementation of this policy, the following shall be the responsibilities of principal stakeholders.

4.1 The Central Government
- Supervise service provision to people with disabilities.
- Review relevant legislation so as to bring about development to people with disabilities.
- Ensure participation integration and equal opportunity for people with disabilities in their daily life.
- Encourage local authorities and NGOs to provide services to people with disabilities.

4.2 Local Authorities
- Assessment of people with disabilities and their needs.
- Provide protection to people with disabilities.
- Provide basic needs.
- Include people with disabilities in the planning and implementation of income generating programmes.
- Identify NGOs that provide services to people with disabilities and coordinate their activities.
4.3 Families/Village Communities

- In collaboration with local authorities and NGOs, families/village communities shall provide protection to people with disabilities.
- In collaboration with local authorities and NGOs, families/village communities shall plan and implement income generation activities.

4.4 Non-governmental Organizations

- In collaboration with local authorities NGOs shall identify people with disabilities and their needs.
- To provide material assistance to people with disabilities in collaboration with local authorities
- To provide protection to people with disabilities
- In collaboration with local authorities, NGOs shall sensitize and ensure the participation of people with disabilities and their families in the planning and implementation of income generation activities.