KAP SURVEY

SURVEY ON KNOWLEDGE, ATTITUDES AND PRACTICES ON THE RIGHTS OF PERSONS WITH DISABILITIES

Commissioned by: Joint UN Project "Empower for Change"
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List of abbreviations

KAP	Knowledge, Attitudes and Practice
MoE	Ministry of Education
MoH	Ministry of Health
CRPD	Convention on the Rights of Persons with Disabilities
FGD	Focus Group Discussion
GBV	Gender Based Violence
DPO	Disabled People's Organization
CNR	Centro Nacional de Reabilitacao
PRADET	Psychosocial Recovery and Development in East Timor
RHTO	Ra'es Hadomi Timor Oan
CBR-NTL	Community Based Rehabilitation Network of Timor-Leste
AHDMTL	Asosiasaun Halibur Defisiente Matan Timor-Leste
FokuPers	Forum Komunikasaun ba Feto Timor
ALFELA	Asistensia Legal ba Feto no Labarik
SPSS	Statistical Package for the Social Sciences

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1. Executive summary

Introduction

This Knowledge, Attitudes and Practices (KAP) survey is part of the inception of the United Nations project, Empower for Change - Reducing violence and discrimination against women and children with disabilities in Timor-Leste. The Empower for Change project is a joint project of the United Nations in Timor-Leste which works towards enhancing the rights of persons with disabilities to live free from discrimination and violence, and advancing the equal rights of women and girls with disabilities facing multiple forms of discrimination. The project partners with Organizations of Persons with Disabilities (DPOs), State Institutions and civil society towards reducing harmful attitudes that perpetuate tolerance of gendered discrimination against persons with disabilities, and aims to strengthen capacities of service providers to refer and deliver coordinated, inclusive and accessible services, in particular to the coordinating Ministry of Social Solidarity (MSS), the Ministries of Education and Health, the National Rehabilitation Centre, the National Police and the Judiciary. The project is funded by the United Nations Partnership for the Rights of Persons with Disabilities (UNPRPD), for a three-year duration. It is jointly implemented by UNFPA, UNICEF, the UN Human Rights Adviser's Unit (HRAU), UN Women and WHO.

This KAP survey is a part of the research to support establishment of baseline for the United Nations "Empower for Change" project. The research focuses on collecting data and information from the concerned State institutions, DPO's and UN agencies engaged in the project in two areas: 1) on knowledge, attitudes and practices on disability and towards persons with disabilities, and 2) on project indicators to provide a baseline for the project's monitoring and evaluation framework.
This KAP survey covers the first research area, on knowledge, attitudes and practices on the respect for the rights of persons with disabilities and is conducted with key stakeholders of the project.[1]

Survey objectives

The objectives of the KAP survey are to:

- examine knowledge, attitudes and practices of respondents, related to the rights of Persons with disabilities.
- identify and document key gaps in knowledge, attitudes and practices.
- provide knowledge for the design of evidence-based strategies to address identified gaps in knowledge, attitudes & practices as part of the "Empower for Change" project.

Methodology

Data collection and analysis

The methodology used for this KAP survey is a combination of collection of quantitative and qualitative data. The data was collected between 10 and 30 April 2018.

The data was collected from target groups of the project, being service providers in education, health and justice, UN staff and staff of DPOs and Non-Governmental Organizations (NGOs) working in the area of disability and gender.

- Quantitative data was collected through structured questionnaires, distributed to 100 respondents (49 women, 51 men): 67% of the respondents do not have a disability or chronic illness, 16% have physical disabilities, 7% have visual impairments, 8% hearing impairments and 2% have a chronic illness.
- 19% of the respondents work at the United Nations, 29% at government, 23% at DPOs and 29% in civil society, including NGOs implementing gender and disability programs.

[1] Copied from the UNWOMEN project documents.

- Qualitative data was collected through three focus group discussions (FGD) and one in-depth interview. The first FGD was conducted with management staff of referral network organizations (ALFeLA, PRADET and FOKUPERS) (2 women, 1 man), the second FGD was with teachers from the Sergio Vieira de Mello Inclusive Elementary School, Becora, Dili (5 women, 6 men), and the last was with management staff of DPOs (RHTO, AHISAUN, AHDMTL, CBR network and Naroman Ba Futuru) (2 women, 4 men). The in-depth interview was with NCD management staff.

To analyse the data, the questionnaires were entered into Zoho online data creator and reporting system and SPSS (a statistical computer program) has been used as a back-up program. The data from the FGDs was compiled and divided into four sections, in order to be able to compare the data and extract findings.

Key findings and results

The key findings of this KAP survey are summarized as follows:

Summary of quantitative data findings

- In general, more than 80% of the respondents agree that persons with disabilities should have equal rights.
- 58% of the respondents have close friends or family members with disabilities.
- Amongst the respondents from UN agencies, no person had a long-lasting condition like a chronic illness or disability. If the group of respondents is reflective of the overall staff working in UN agencies, it can be concluded that UN agencies have not yet succeeded in including persons with disabilities in the work environment in the UN in Timor-Leste.
- Respondents were asked to list the 5 words they normally use to describe a person with a disability. It is remarkable that staff of DPOs and NGOs working in the area of disability all use the correct terminology for persons with disabilities, whereas government and UN staff and respondents from civil society use many different as well discriminatory terminology. See table 3, page 12 for the words used.
- In the context of the respondent's feelings about people with disabilities, the survey results show that approximately 47.7% are happy to see that people with disabilities participate in the society. Although at the same time 35.6% stated that they also feel sad and pity for them. Only 1.5% of the respondents reported to be afraid and to 9.8% it feels normal to be around persons with disabilities.
  51.2% of the respondents reported to be happy to engage with persons with disabilities and 22.8% will assist the persons with disabilities.
- When asked about feelings in relation to persons with different impairments, such as: physical, mental, sensory and intellectual, survey participants answered that they feel most comfortable with persons with physical or sensory disabilities, however, when it comes to persons with psychosocial impairments (mental problems), only around 30% of the respondents reported feeling comfortable to work or be around them. Whereas 45% of the respondents reported to feel comfortable with persons with an intellectual impairment.
- Some remarkable findings indicate that in general most respondents agree that persons with disabilities can live independently; they can make their own decisions and have the right to vote. Nevertheless, when asked questions related to blood donations, or persons with psychosocial problems having children, respondents are more cautious. And when having to put money for adapting buildings, respondents are very divided. We can conclude that respondents do agree on equal rights for persons with disabilities, but when it comes to the practice, consideration and questions arise.
- In relation to a number of specific questions on UN programmes that were asked to UN staff only, we can conclude that all respondents fully support the rights for persons with disabilities, even if there are costs involved to programming. However, as regards to current practices, UN respondents were divided about whether equal opportunities for persons with disabilities exist in UN projects. 36,9% of

the respondents disagrees or is unsure whether there are equal opportunities for persons with disabilities.

- In relation to gender-based violence (GBV), most respondents agree that women and girls with disabilities are more vulnerable to GBV and that they have equal rights to GBV related services. But at the same time, almost 50% of the respondents agree that women and girls with disabilities should not go outside because of their vulnerability to sexual assaults.
- Over 85% of the respondents agree that persons with disabilities have the same rights as others and should get all the possible treatment and accessibility to services. Also they agree that disability is a social issue that needs to be addressed by all.
- It is remarkable that 6,7% of the respondents still have the belief that disability is a punishment by spirit for the person or his/her families' bad behaviour.

Summary of qualitative data findings gathered through FGDs

- Organisations and service providers are all highly motivated to include persons with disabilities in their services. They agree that persons with disabilities have the same rights as others.
- Interviewed staff of the referral network organizations and DPOs showed specific knowledge on special services to persons with disabilities, while most of government service providers, such as teachers, health workers and legal services are less knowledgeable about special needs of people with disabilities.
- Most of the referral network organizations and DPOs have a well-functioning referral network. The teachers pointed out that they have no referral network at all, as where MoH is now building a referral network information system. The partners from the referral network organizations and DPOs all refer and react adequately and transparently, as where referral through government agencies is very slow and not transparent,
- All 11 teachers working at the Sergio Vieira de Mello School, which is operating an inclusive education programme, expressed concerns about the inclusive education program. They noted that support for, and implementation and objectives of the inclusive education program are not clear and transparent.
- GBV cases are mostly identified by DPOs and disability and gender related NGOs. Violence against women and girls with disabilities is a new focus area for all of them. Services for women and girls with disabilities are being developed together with donors who have started to see the need for programs for women and girls with disabilities. The DPO programs mostly focus on advocacy while NGOs provide more practical services. In government services, including in schools, but also in medical services, there is limited GBV sensitiveness.

- **Barriers:** While there are laws and policies in place to protect the rights of persons with disabilities, barriers to their implementation consist of the absence of regulations, services, budgets and knowledge among government service providers.
  There are many physical barriers for persons with disabilities, and they encounter these daily. Government buildings, including schools, clinics, public buildings, but also shops, banks and ATM's, among other things, are not accessible for persons with disabilities. Additionally, poor road and pedestrians' conditions, poor observance and implementation of traffic rules and inaccessible public transportation challenge persons with disabilities mobility.
  Attitudinal barriers persist. People in general do not have much knowledge about disability and discrimination occurs on daily basis within all services except those of DPOs and NGOs working in the area of disability.

Conclusion

Based on the above, the following conclusions are drawn, categorised in attitudes, knowledge and practices on disability

Attitudes towards persons with disabilities

When it comes to attitude towards the rights of people with disabilities, we can conclude that in theory most people agree on the rights of persons with disabilities. But in the context of daily practice, many considerations amongst persons without disabilities keep arising and keep exclusion in place. A lack of knowledge on disabilities and possibilities on integration, keeps stigma and fears in place.

Knowledge on disability and the rights of persons with disabilities

When it comes to knowledge, again many respondents know the theory about the rights for persons with disabilities, but lack of practical knowledge keeps service providers from providing qualified and equal services and keeps negative attitudes and spiritual beliefs in place.

Aspect of Practice towards persons with disabilities

Although in existing theoretical and regulatory policies, issues are being addressed, in real life practice, accessibility, budget, training, and other related matters are not provided, in order to equip the service providers well.

Recommendations

From the data we extract the following recommendations for the project development.

Attitudes towards persons with disabilities

Since most respondents are very aware of persons with disabilities rights, but disability is not yet included in their daily practices, we recommend to provide a better understanding to service providers and policy makers about the exclusion of persons with disabilities. This building of knowledge and understanding could be provided in practical ways, by facilitating learning through experience, only when people really sense the daily exclusion, which persons with disabilities meet, they will fully understand it and maybe change their attitudes. Making use of visual materials (like picture, video and theatre play) helps to make practices of exclusion more visible and sensible. Even inviting people to work one day hand in hand with a person with a disability, would build great understanding.

Knowledge of disability and the rights of persons with disabilities

It is highly recommended to focus on raising awareness about disability as well as on GBV against women and girls with disabilities to government service providers, including with a view to addressing negative attitudes. In this effort, it is recommended that knowledge that is already available in the referral network be used, since the FGDs showed that the referral network organizations and DPOs staff are relatively well equipped with knowledge.

Practice towards persons with disabilities

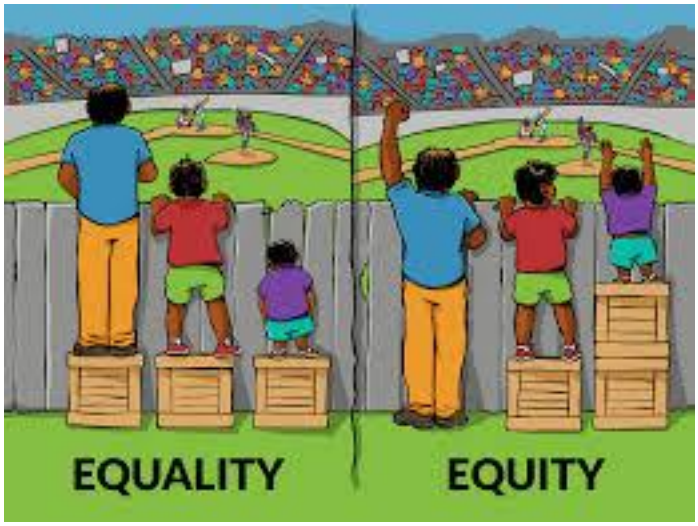
It is recommended to analyse the level of implementation of policies in place on the rights of persons with disabilities, as it appears that these are not put into practice. This includes reviewing the recruitment policies of the UN and government, as from the respondents in the UN, 0% and from those in Government only 17% have a disability. In addition to the policy it is also recommended that the practice of recruitment of persons with disabilities in the UN and government is reviewed and that advocacy is done for better inclusion of persons with disabilities in employment.

Additional recommendations

- It appears that together, officials in government, UN agencies and NGOs and DPOs have a lot of the necessary knowledge available on special services for people with disabilities and provide various services in GBV cases affecting women and girls with disabilities. However, this knowledge and the

services are not coming together or are not necessarily coordinated as the different players operate in different networks. For instance, the disability network is not linked with the GBV network

- We recommend linking of the networks so that the different stakeholders learn from each other, support each other and most importantly, survivors of GBV who have a disability get more adequate services. It is recommended that a focal point identifies gaps in the services within the different institutions and organizations and helps them to develop the lacking services. This focal point can match the different organizations and institutions and take care of the exchange of capacity building and development of disability inclusive services
- In the FGD with DPOs, it was stated that inclusion is very difficult, and requires better coordination and joint work with a strong commitment, especially from government institutions, donors and media.
- It is recommended that greater awareness of the principle of equity for persons with disabilities is built. While people have the same rights, if no specific measures are taken, exclusion can still result. Equity should be the target, not simply equality.



"Interaction Institute for Social Change | Artist: Angus Maguire."

2. The KAP survey

Objective of the survey

This KAP survey is a part of the research to support establishment of baseline for the United Nations "Empower for Change" project. The research focuses on collecting data and information from the concerned State institutions, DPO's and UN agencies engaged in the project in two areas: 1) on knowledge, attitudes and practice on disability and towards persons with disabilities, and 2) on project indicators to provide a baseline for the project's monitoring and evaluation framework.[2]

This KAP survey covers the first research area, on knowledge, attitudes and practices on the respect for the rights of persons with disabilities and is conducted with key stakeholders of the project, including the Ministry of Education, the Ministry of Health, UN agencies, service providing NGO's and DPO's.

The objective of this survey is to:

- Examine the knowledge, attitudes and practices of service providers related to the rights of persons with disabilities.
- Identify and document the major gaps in knowledge, attitudes and practices.
- Provide knowledge for the design of evidence-based strategies to address the identified gaps in

[2] Copied from the UNWOMEN project documents.

knowledge, attitudes & practices within the project of “Empower for Change”.

Study area of the survey/respondents

The survey was narrowed to the stakeholders that will be directly involved in the United Nations “Empower for Change” project, including the Ministry of Health, the Ministry of Education, the composed of the project down to the Dili municipality, where most of the stakeholder organizations’ headquarters are based, and also because the United Nations “Empower for Change” project will focus at the national level in Dili municipality.

Methodology

This section describes the methods used in the execution of this KAP survey, including data collection instruments, the data collection process, data entry and data analysis. The data has been collected from 10 to 30 April 2018.

Based on the objectives, the target respondents and the quality of information sought; the assignment involved as well a quantitative as a qualitative survey method, which were chosen and prepared by the UN Project team.

Data collection tools and process

The data collection tools used for this KAP survey are a quantitative structured questionnaire and Focus Group Discussions as a qualitative method. The questionnaire focuses on collecting attitudes and knowledge from the respondents, as where the focus group discussions were seeking for the practice within the concerned organizations.

Structured quantitative Questionnaire

A structured questionnaire was used as the main tool for this KAP survey to collect quantitative data. Topics in the questionnaire are:

- General information of respondents
- Opinions and feelings towards persons with disabilities
- Opinions and feelings about the rights of persons with disabilities
- Opinions on inclusion of persons with disabilities in UN projects
- Opinions towards gender based violence issues for women and children with disabilities
- General knowledge of the respondents on disability issues
- Knowledge of laws and policies on the rights of persons with disabilities

Questionnaires were distributed with a total of 100 respondents. The respondents got an explanation of the purpose of the questionnaire and they filled out the questionnaire independently.

Most of the respondents were participants at the UN-training on the rights of persons with disabilities, being, UN staff, ministry of education and ministry of health staff and DPO staff members. Other questionnaires were spread amongst civil society and other concerned NGOs.

Qualitative in-depth Focus Group Discussions (FGD)

There were three focus group discussions organized and one in-depth interview, selecting stakeholder groups, which are relevant to the project.

First group: Rede referral, four participants, being management staff from FOKUPERS, PRADET and ALFeLA, focussing on: Opinions towards inclusion of persons with disabilities into their services, referral systems, available care services, barriers in the current practices.

Second group: DPOs, five participants, of which two are the directors of NGOs, Naroman Ba Futuru and CBR Networks and others are staff delegates from RHTO, AHDMTL and AHISAUN. Focusing on: Opinions towards inclusion of persons with disabilities, rights for persons with disabilities towards education and employment, practices on GBV and referrals, and barriers and challenges.

Third group: MoE, eleven participants, being teachers from the inclusive school, Sergio Vieira de Mello, focussing on: Opinions towards inclusion of persons with disabilities in education, knowledge on persons with

disabilities in education, the referral network and barriers and challenges in education.
In-Depth interview: MoH, head of department of the NCD, focussing on: Inclusion of persons with disabilities in health services, knowledge on special persons with disability health issues, practice of referral network, opinions and practice on GBV and encountered barriers.

The discussions were developed, using four main topics for each FDG and asking about attitude, knowledge and towards these topics. The FGD's were held in the UN conference room and in the school of Sergio Vieira de Mello. A special assistant was joining the FDG facilitator to make minutes and the discussion was recorded on audio.

Data entry and analysis

Quantitative data was entered into an online digital database called ZOHO Creator. After the data entry, data was exported to a spreadsheet and cleaned and prepared for data-analysis in ZOHO Reports. We also used SPSS as a back-up system because of the inconsistent availability of internet in Timor-Leste.
To analyse quantitative data, the online digital tool, ZOHO Reports, is used. Relevant tables, pie charts and graphics are developed, showing the outcomes of the quantitative survey.
The qualitative data from the FGDs has been combined and categorized so that conclusions could be extracted. The results are presented in chapters three and four of this report.

Sample characteristics

Sample of respondents for the questionnaires

The KAP survey has been conducted amongst a sample group of service providers for persons with disabilities and/or general services, in the context of issues related to rights, education, health and gender. The survey did not have the purpose to be representative for Timor-Leste, but is especially targeted to the target group of the project "Empower for Change", to provide input for the project development. Respondents were not randomly selected, because the KAP survey is a fundamental input for the baseline and the project development for and the project is specifically targeted to the possible service providers of persons with disabilities.
Therefor, about 80% of the respondents are participants of UN training on the rights of persons with disabilities and were UN, government and DPO staff members. The other 20% of the respondents were sought and found in disability and gender related NGOs and civil society.

Sample of respondents for FGD's

For the Focus Group Discussion's four sample groups were selected. The targeted groups are relating to the targeted groups in the project "Empower for Change". We chose to have in-depth conversations with management staff of GBV service providing NGOs, management staff of DPOs, teachers in the inclusive basic school and management from MoH.

Limitations of the Evaluation

In our observation of the returned questionnaires and during the process of respondents filing in the questionnaires, we must conclude that we have to take into account that;

- Respondents might not really read or understood all the questions well. We conclude this because of some questionnaires show inconsistency in the answers people have chosen. For example respondents point out not to know if they have a long lasting condition. Or in question number five in the questionnaire, people say "I agree" to all questions, although some questions have almost the same value, but are asked in a negative way.
- Respondents might not be acquainted to filling out questionnaires. While sitting together with people as they fill out the questionnaire, we noticed that they feel insecure and they have to think long time before filling in an answer.

- Respondents with hearing and vision impairment, fill out the questionnaire by requiring an assistant or colleague. This happens because there is no braille printing or sign language translator available and may result in less understanding of the context of the questionnaire.
- Due to a time limit it was not possible to pre-test the validity of the content of the questionnaire.
- FGDs data is value limited in the sense that such data mainly represents personal opinions.

3. Quantitative data findings

The quantitative data for this KAP survey has been collected through a questionnaire, which has been filled out by 100 respondents. Since the project "Empower for Change" targets the service providers of persons with disabilities at UN agencies, government and DPOs, we also targeted workers at these institutions for the collection of the data. The data will give us specific insight in people's convictions and attitudes towards persons with disabilities and their knowledge and opinions about the rights for persons with disabilities.
The findings are categorized in four sections, General information about the 100 respondents, attitudes towards persons with disabilities, attitudes towards the rights of persons with disabilities and knowledge on disability related issues.
In the data, within the civil society, are also the respondents of disability and gender related NGOs.

General information about the 100 respondents

Which institution do the respondents work for?

Most respondents work at the government institutions, UN agencies and DPOs. The pie chart below illustrates how the respondents are divided between the concerned organizations.
Within the respondents who choose Civil Society, there is a fair amount of persons working at disability and gender related NGOs. This was not specifically asked for in the questionnaire, but we estimate that around two-third of these respondents work in either gender or disability related NGO's.

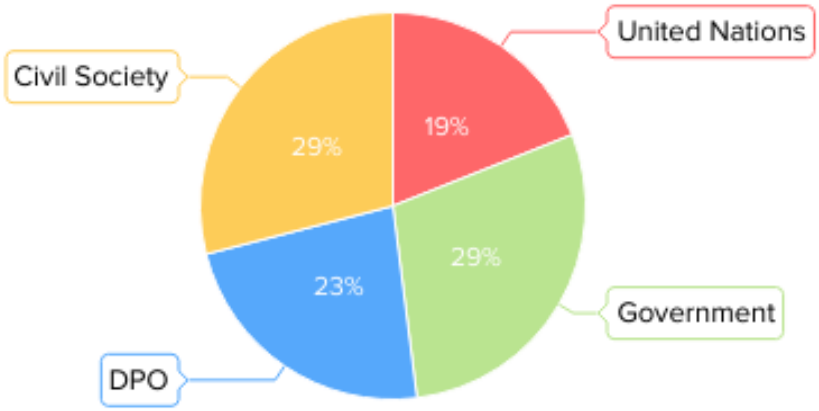


Chart 1, Which institution do you work for?

Age and gender of the respondents

The respondents group is almost equally divided between female and male respondents, 49 are women and 51 men. The biggest age groups of the respondents are 25-34 and 35-49. This can be explained because we are targeting people who are related to their work and these age groups do reflect the ages of the working adults.

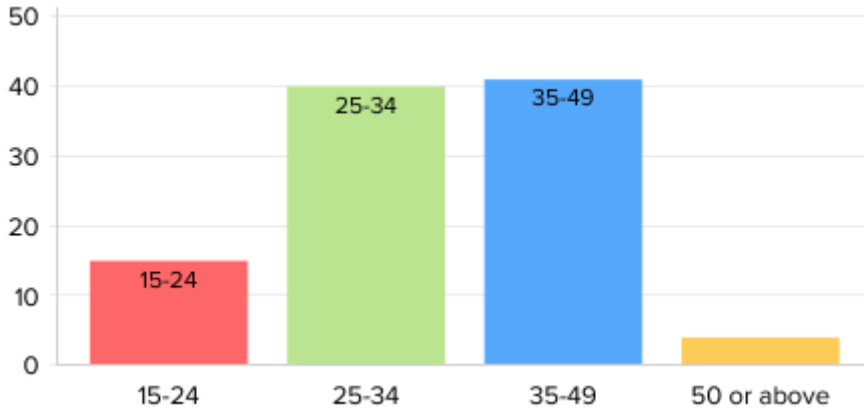


Table 1, What is your age?

Disability related information

Of the total respondents, 67% have no disability or chronic illness. 16% have physical disabilities, 7% have vision impairment, 8% hearing impairment and 2% have a chronic illness.

About 58% of the respondents have a close friend or family member with a disability.

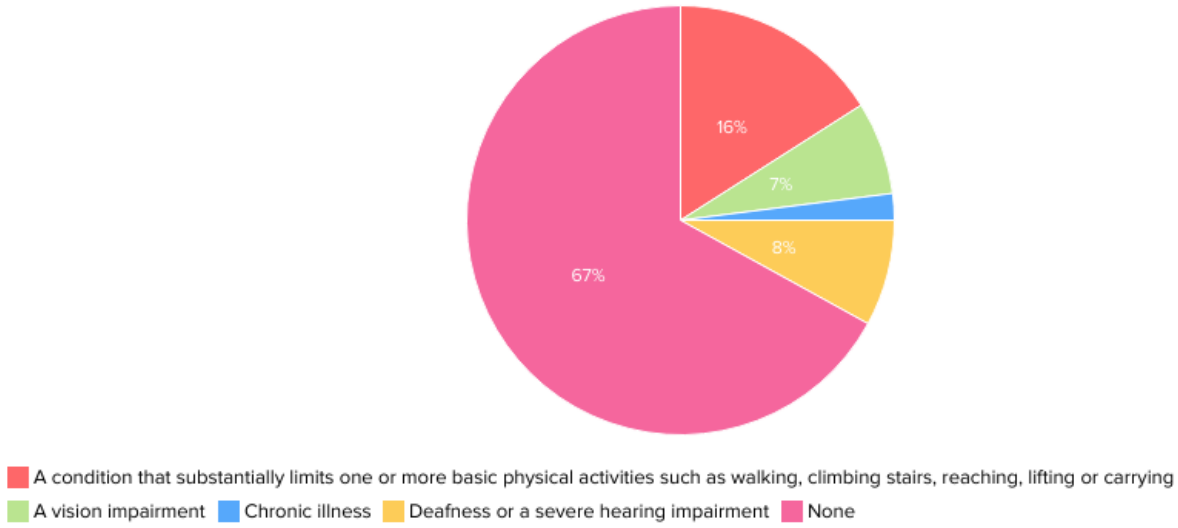


Chart 2, Do you have any of the following long-lasting conditions?

The following table points out that amongst the UN staff, none of the respondents has a disability/long-lasting condition, amongst the government 17%, civil society 35% and DPOs 78%.

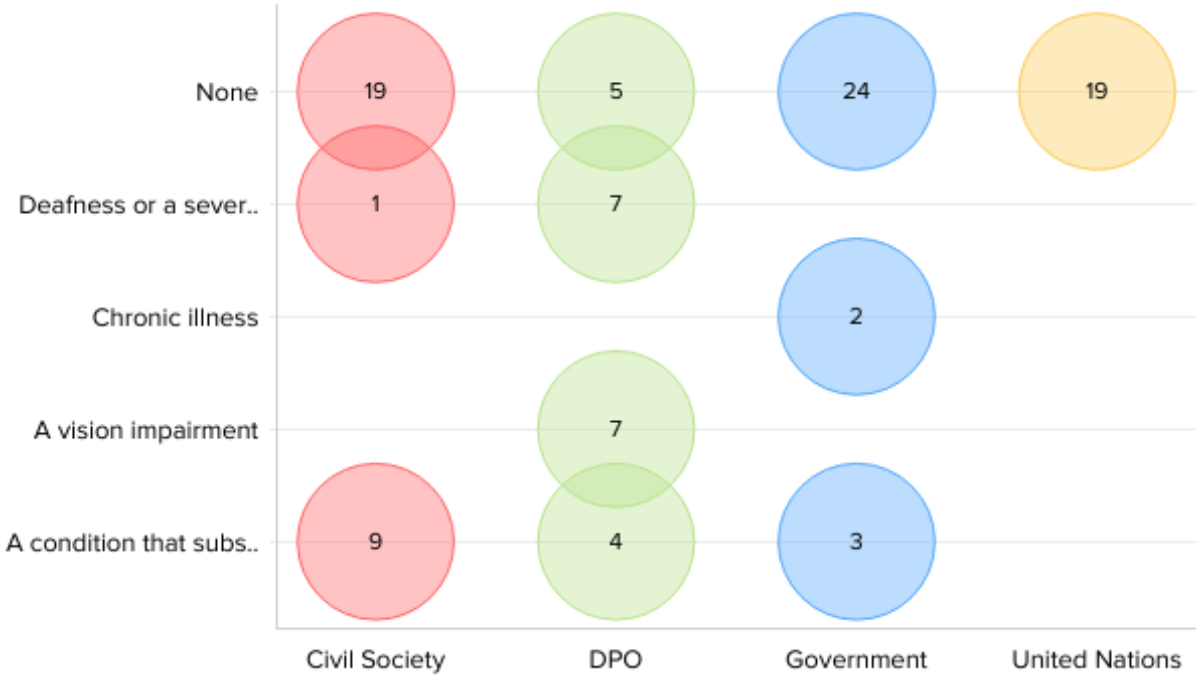


Table 2, Long-lasting conditions related to organization

Attitude towards persons with disabilities

What words do the respondents use for addressing persons with disabilities?

In the context of people's use of terminology for persons with disabilities, it was found that respondents mentioned various types of words, from polite, slightly polite to words that have discriminatory meanings. It should also be noted that the respondents from DPOs and disability and gender related NGOs use the correct words.

The most used words are *"ema ho defisiensia"* and a list of five types of different disabilities, *"defisiensia matan, tilun, fiziku, psikososial no intelektual"*. Other words used, were:

Words by Tetun respondents	Words by English speaking respondents
Alezadu	Disabled
Bulak	Impaired
Tilun diuk	Mental illness
La normal	Physical limitations
Ai kleuk	People with difficulties
Ain no liman falsu	People with special needs
Kadik	Stigmatised
Invalidu	Helpless
	At risk of discrimination
	Challenged
	Limping, deaf, mute
	Mad
	Unfortunate
	Abnormal

Table 3, List 5 words to address persons with disabilities

Feelings and behaviour towards persons with disabilities

In accordance to the pie-chart below, to the question, what people feel when they see or think of a person with a disability, we conclude that most people, 47.7%, are happy to see that persons with disabilities participate in the society. Although at the same time, 35,6%, expressed that they also feel sad and pity for them. Only 1,5% is afraid and to 9,8% it feels normal to be around persons with disabilities. People were able to fill in more than one option and many times persons answered to be as well happy as sad for persons with disabilities.

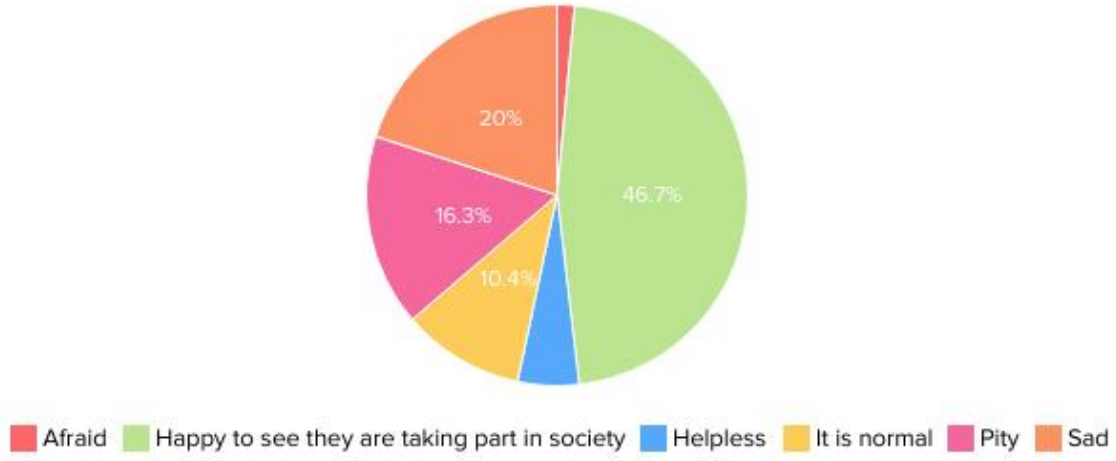


Chart 3, When you see or think about a person with disabilities, what do you feel?

When asking respondents how they act when they are around persons with disabilities, most people feel confident around persons with disabilities. They try to engage, help and alert others. There are still nine persons, who feel uncomfortable, not knowing where to look, avoiding the person, act nervously or stare.

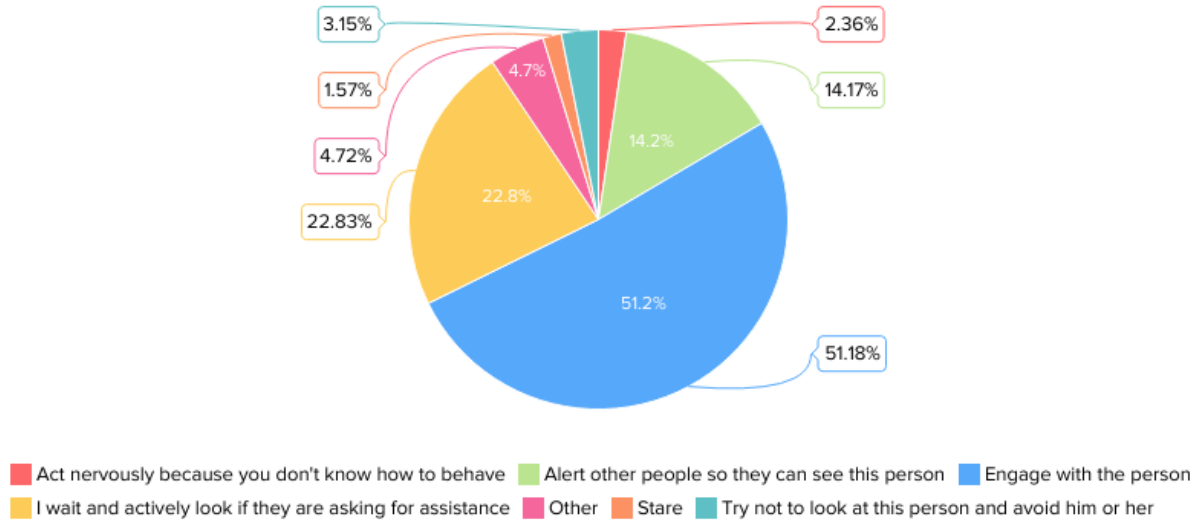


Chart 4, When you are around persons with disabilities, how do you act?

Feelings towards persons with disabilities at work, in the neighbourhood or in the family

We asked the respondents; "How would you feel when persons with disabilities would work with you, be your neighbours or marry into your family?". From the three charts below, we can conclude that for all three questions people feel most uncomfortable around persons with psychosocial problems, followed by persons with intellectual impairment, whereas people feel most comfortable around persons with physical and sensory

impairment. Mostly people who are disabled or have disabled relatives feel more comfortable around persons with disabilities.

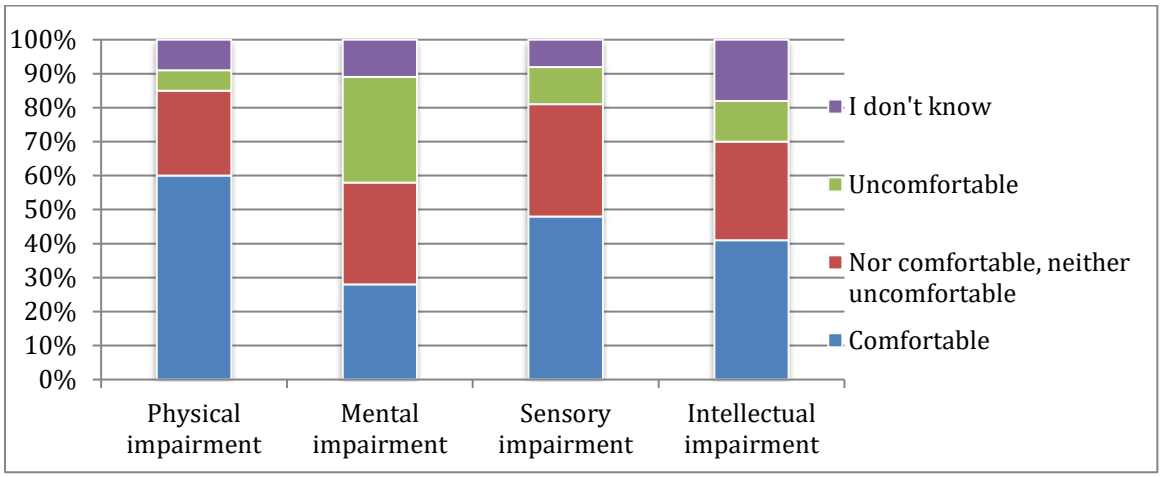


Table 4, How would you feel when persons with disabilities would work with you?

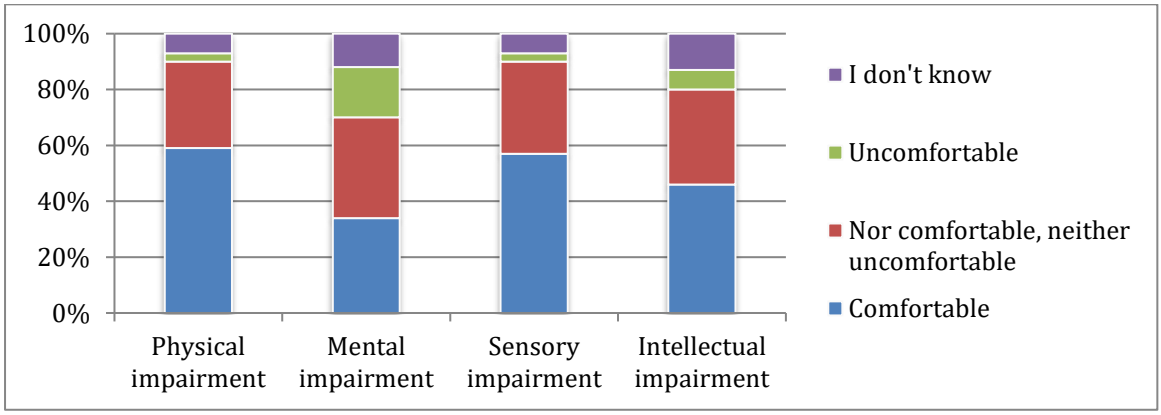


Table 5, How would you feel when persons with disabilities would be your neighbours?

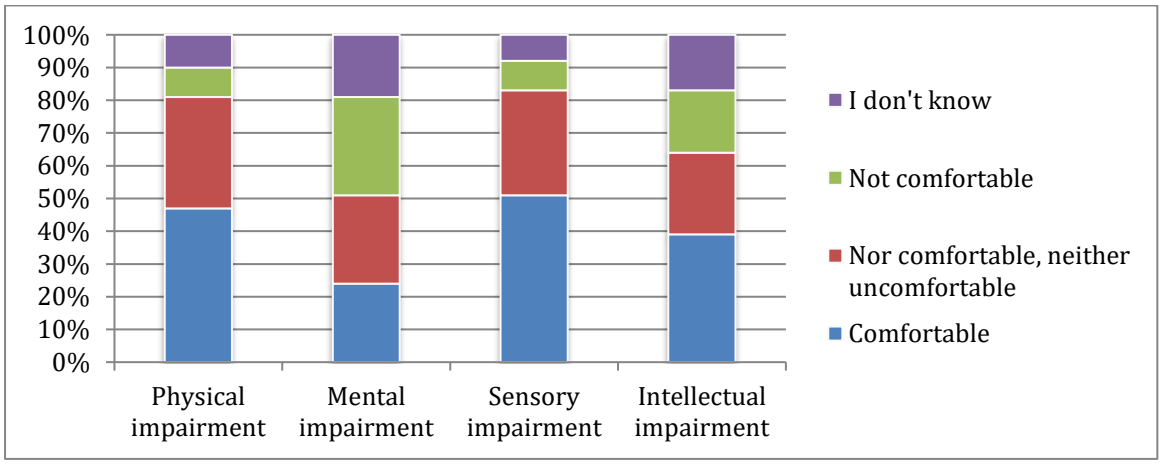


Table 6, How would you feel when people with disabilities would marry into your family?

Attitudes towards the rights of persons with disabilities

General opinions on Rights for persons with disabilities

When asked for their level of agreement with the following questions, the respondents responded as shown in the table below. Some remarkable findings are that in general most respondents agree that persons with

disabilities can live independently, make their own decisions and have the right to vote. Nevertheless, when it comes to donating blood, or persons with psychosocial problems having children, respondents show more consideration. And related to the allocation of money for adapting buildings, respondents are very divided. We can conclude that respondents do agree on equal right for persons with disabilities, but when it comes to the practice, consideration comes in and questions arise.

	I agree	I nor agree Neither disagree	I don't agree	I don't know
a. Persons with disabilities are treated fairly in Timor-Leste.	55,1%	19,4%	19,4%	6,1%
b. Persons with disabilities can make decisions on their own.	70,7%	19,2%	10,1%	0%
c. Persons with disabilities can live independently.	69,7%	16,2%	13,1%	1%
d. Children with disabilities should attend the regular inclusive schools (not special schools)	77%	10%	8%	5%
e. Women with disabilities should have access to reproductive health services.	87%	5%	5%	3%
f. Persons with a physical impairment should be allowed to donate blood.	61%	14%	14%	11%
g. Persons with psychosocial impairment should be allowed to vote.	81%	10%	7%	2%
h. Persons with disabilities should have the right to participate in the decision-making of their Suco.	89%	6%	3%	2%
i. Adapting buildings to allow Persons with disabilities to have access, is too costly.	30,3%	13,1%	35,4%	21,2%
j. Persons with disabilities are as productive as workers who do not have disabilities and they should earn the same.	79%	10%	5%	6%
k. Women with a psychosocial and or mental impairment should be allowed to have children.	54%	21%	14%	11%
l. Men with a psychosocial and or mental impairment should be allowed to have children.	56%	18%	13%	13%

Table 7, opinions on the rights of persons with disabilities

The table below shows the results for the question; "People with disabilities are treated fairly in Timor-Leste", in relation to the organization where respondents work. It is remarkable that even the majority of DPO workers (who are persons with disabilities) agree on this.

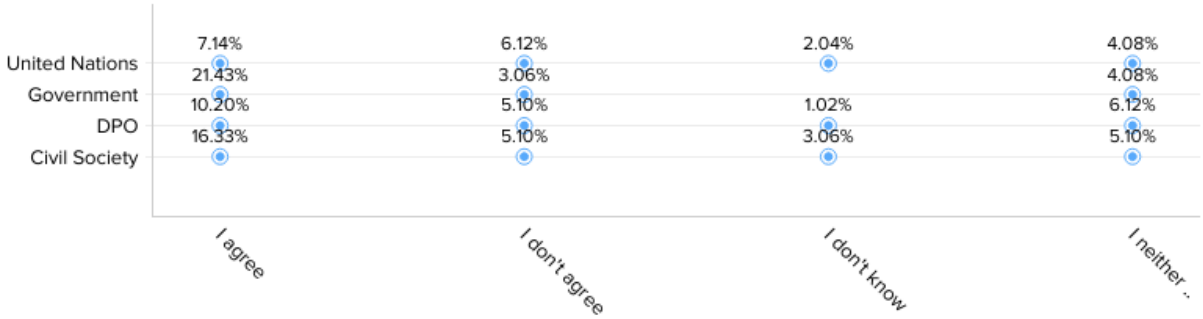


Table 8, persons with disabilities are treated fairly in T-L, related to the organization of the respondents

The rights of persons with disabilities in relation to the UN projects and practice

There were 19 respondents from UN agencies, who were specifically asked for their opinion towards the involvement and rights of persons with disabilities in UN projects.

From the results in the table below we can conclude that none of the respondents disagree on the right for persons with disabilities, even if there are costs or it makes the work more inconvenient. But when it comes to their opinion about the current practice, UN staff is more divided about the equal opportunities for

persons with disabilities, although still a majority considers that UN procedures are allowing persons with disabilities to compete on equal footing.

Respondent's added comments, saying that:

- "Equal participation in key events such as UN Day, offers the ability to contribute to equality and should be used as such".
- "I don't really see in all TOR for recruitment the encouragement for persons with disabilities to apply".
- There is a lack of opportunity for persons with disabilities to access some UN offices/ agencies.

	I agree	I nor agree Neither disagree	I don't agree	I don't know
Persons with disabilities in T-L should have the right to participate in UN project activities, whatever the costs.	73,7%	21%	0%	5,3%
Persons with disabilities should have the right to participate in UN projects, even if it makes other participants uncomfortable.	78,9%	21,1%	0%	0%
Currently, Persons with disabilities in T-L have the same opportunities as others to participate in UN projects.	63,1%	15,8%	15,8%	5,3%
Currently, Persons with disabilities in T-L can compete on an equal footing with persons without disabilities in UN processes like recruitment or tenders.	63,1%	15,8%	15,8%	5,3%

Table 9, The rights of persons with disabilities in relation to the UN projects

Opinions of the rights for women and girls with disabilities

In answer of the following questions about women and girls with disabilities in relation to GBV, respondents mostly agree that women and girls with disabilities are more vulnerable to GBV and they have equal rights to GBV related services. But around 50% agree that women and girls with disabilities should not go outside, because of their vulnerability, showing concern for the women and girls but at the same time also agreeing that they should have less freedom.

	I agree	I nor agree Neither disagree	I don't agree
Woman with disabilities are more at risk of violence and abuse than women without disabilities	70%	11%	19%
GBV survivors with disabilities should have equal access to existing GBV services	81%	8%	11%
GBV survivors with disabilities have more difficulty in accessing GBV services.	59%	23%	18%
Women and girls with a disability should not be allowed to go outside by themselves as they risk rape and sexual assault.	46%	15%	39%

Table 10, Opinions of the rights for women and girls with disabilities

The right way to address disability

Over 85% of the respondents agree that persons with disabilities have the same rights as others and should get all possible treatment and accessibility through services. Also they agree that disability is a social issue that needs to be addressed by all.

	I agree	I nor agree Neither disagree	I don't agree
Disability is a problem to be addressed by the individual who has the disability or by his/her family.	32,7%	11,2%	56,1%
Disability is a social issue of exclusion that needs to be addressed by all.	85%	10%	5%
Persons with disabilities should be given help and sympathy	76%	13%	11%

Persons with disabilities have the same rights as persons who do not have disabilities.	89%	9%	2%
Persons with disabilities should get medical treatment and as much rehabilitation as possible.	88%	8%	4%
Persons with disabilities should be provided with accessible and inclusive services.	87%	12%	1%

Table 11, The right way to address disability

Knowledge on disability related subjects

What causes disability?

In order to find out what people know and what their convictions are, we asked them about the cause of disability. It is remarkable that still 6,7% of the respondents have the conviction that disability is a punishment by spirit for the person or his/her families' bad behaviour.

	Percentage
Birth/genetic factors	33,7%
Accidents	28,3%
Negative attitudes and other obstacles in society that make persons who have an impairment unable to participate in it equally	11,3%
Punishment by spirit for a person's, or his/her families bad behavior	6,7%
Sickness	20%

Table 12, What causes disability?

Which policies and conventions do you know and use?

When being asked about the knowledge of existence and the use of policies and conventions related to the person with disabilities, people reacted as shown in the table. Roughly we can say that one-third of the respondent know the policies and use them, one-third knows about them but doesn't use them and another third doesn't know about them.

	I know it and I use it	**I know it**	**I don't know it**
National policy on the Inclusion and Promotion of the Rights of Persons with Disabilities	42,9%	28,6%	28,6%
National Action Plan on Persons with Disabilities	29,7%	34,1%	36,3%
UN Convention on the Rights of Persons with Disabilities (CRPD)	33%	42,9%	24,2%
UN Convention on the Elimination of All Forms of Discrimination Against Woman (CEDAW)	28,6%	44%	27,5%
Convention on the Rights of the Child	37,4%	45,1%	17,6%

Table 13, Which policies and conventions do you know and use?

4. Qualitative data findings

Qualitative data has been collected through three structured Focus Group Discussions and one interview. This chapter presents the key findings, extracted from the notes and recordings, made during the FDG's and interview.

The discussions were structured, using four concerning main topics for each FDG, being:

1. How are persons with disabilities included in your services and how do you guarantee their rights?
2. How is your referral network?

3. What do you provide for GBV victims with disabilities?
4. What are your main barriers when providing access to persons with disabilities to your services?

The following groups/organization have been interviewed:

- FDG 1, Rede referral; consisted of four participants, being management staff from FOKUPERS, PRADET and ALFeLA.
- FDG 2, DPO's; consisted of five participants, being staff from Naroman Ba Futuru, RHTO, AHDMTL, AHISAUN and CBR Network.
- FDG 3, MoE; consisted of eleven participants, being teachers from the inclusive school, Sergio Veira de Mello, which is identified as an inclusive school.
- Interview MoH, with the NCD department manager

The results per question are as follows:

1. How are persons with disabilities included in your services and how do you guarantee their rights?

The rede referral organizations all include persons with disabilities in their programs. PRADET is specialised in helping persons with psychosocial problems, ALFeLA provides legal assistance on the issues of GBV and FOKUPERS provides assistance and counselling to victims of GBV. To guarantee the right of persons with disabilities, FOKUPERS has a program officer specially focussing on woman with disabilities and all 3 organizations provide advocacy on national law and national policy on the right of persons with disabilities.

The DPOs programs' fully include persons with disabilities, DPOs are led by persons with disabilities and fight for their rights. Most programs focus on inclusion, related to education, justice and livelihood. They describe inclusion as a total involvement of persons with disabilities in life, giving them equal opportunities and motivate them to take their rights.

The teachers point out that Timor-Leste's law guarantees that everyone must access to education and has the same rights. They said: "We believe that all disabled children have the same right to be educated as other children". They guarantee these rights for these children, in trying whatever they can, like, carrying the children up the stairs, treat them with passion and a big heart, but they say: "We love them, we want them to be in our school, but we have a lot of limitations", which makes it hard to guarantee the rights to education for the children.

According to the NCD manager, the health service makes no real exceptions for persons with disabilities. He said: "By law everyone has the same rights to health care, which in practice means that health services and locations are not specifically equipped to include persons with disabilities". Also he mentioned that there is no specific budget allocated for accessibility and training of staff.

2. How is your referral network?

The referral mechanisms of the rede referral organizations are on track. They receive and provide referral to other partners, this is the way to support and complete each other. ALFeLA signed a MoU with partners like, ADTL, RHTO, CNR and PRADET and when ALFeLA needs special service, like sign language, a wheelchair or braille, they connect to their partners in the referral network.

The DPOs have a big network within the disability related organizations and within the gender based organizations to refer to when necessary. Also they are connected to justice agencies that are specialized in their topics. If any cases that need attention beyond their possibilities, they refer to their referral network. The interviewed DPOs say that other NGOs within the network operate very adequately to referrals; whereas referral to MSS take a long time.

The school has no connections with concerned NGOs. There has never been any training about working with children with disabilities from a NGO, neither has MSS or CNR come to offer support. The teacher stated that they feel abandoned by the ministry and that they are struggling to do what they can for the children without help of others.

The NCD manager comments that the network for referral for disability related matters is not build properly yet. At the moment MoH is working on improving the referral network. The referral network for cases of persons with disabilities consists mostly of CNR and PRADET. But in rural area's referral organizations are lacking and MoH staff is lacking knowledge about the referral possibilities.

3. What do you provide for GBV victims with disabilities?

The rede referral organizations observed that mostly man/partners misuse their power, which leads to discrimination and violence to the right of women, women with disability are most excluded and vulnerable to violence. Therefor they provide legal assistance, post-trauma counselling, prevention, economic empowerment and medical assistant. All programs are focussing on GBV or, for PRADET, on persons with psychosocial problems (who are very vulnerable to GBV).

The DPO's are mostly the first to identify GBV cases amongst persons with disabilities, but also just newly focussed on the issue of the discrimination of the women. They see many cases in which women with disabilities are vulnerable to violence and discrimination. For example, recently a student was privately insulted through social media, which included sexual harassment. Other cases are about the husband, who is not responsible to the children, so the women/mother have to stay at home, left without opportunities to develop. The DPOs have not yet developed specific programs for women, but try to be extra aware and involve women more in their running programs. At the same time they try to develop specific programs for the rights of women with disabilities and for advocacy.

The teachers point out that GBV is not really a detected issue at the school. Only once they met a case where a girl with a hearing impairment started to have her first period. But communications problems made it impossible to help her and advise her about it. They have no special knowledge at all about recognising cases and referring network.

NCDs manager points out that there is no specific attention in programs to identify GBV, other than normal doctors survey and normal referring system. Health workers never get extra training on GBV. In the hospital is one focal point (specialized doctor) available for GBV. But referral to this doctor, for a legal valuable examination, always has to go through reporting with the police. This could be a barrier for women, since it is an extra step, especially in very vulnerable cases within family.

4. What are your main barriers when providing access to persons with disabilities to your services?

The rede referral organizations encounter the following barriers:

Physical barriers: are more found in problems of communicating to persons with hearing problems. This is because people from districts never learned sign language, or because of the use of multiple different sign languages.
Institutional barriers: Lack of facilities, there is only one doctor for psychosocial problems available in Timor-Leste. Lack of knowledge with the partners about providing assistance to persons with psychosocial problem. Lack of socialization on the TV/News about GBV especially the right of woman with disability. Lack of knowledge from the judicial actors, (Ministry of Justice's staff) about persons with disabilities. This undermines the fair treatment and decision-making for persons with disabilities right's.

The DPO's face many barriers, as they are those persons with disabilities, who are excluded. The Barriers are:
Physical barriers: Blind persons always depend on others when they want to move around the city. Due to bad road conditions, no clear traffic rules and even bad accessible public transport. For them every activity is a challenge.
Institutional barriers: The education policy, there is no mechanism to support children with disability who have intellectual problem. Even at this moment there is a national policy on disability, involving nine institutions to be working together but it's not working well.
Attitudinal barrier: The way people look at persons with disabilities is mostly discriminative, sometimes using wrong terminology and people look down at persons with disabilities.

The teachers feel themselves in a dilemma, if they don't accept/include children with disability in their school, they will be accused but by including them they feel limited in what they can offer the children. They encounter the following barriers:
Institutional barriers: There is no clear policy or work plan on how to include children in a responsible way. There is no plan for human resource's capacity building, MSS pointed them out as a special school for inclusion but provided no extra care.
Physical barriers: The school, although by MSS pointed as an inclusive school in the inclusive education program, has no accessibility for children with disabilities. There are no ramps, classes are provided on the second floor, toilets are not accessible, the compound is not fenced, which makes it not safe, there are no tools like braille or any other special teaching devices.

The biggest institutional barrier according to the NCD manager is that government policies are in place, but implementation stays behind. MoH has no special budget for addressing persons with disabilities, so the service is within the normal service provided. An attitudinal barrier is that health providers still have a stigmatising attitude towards persons with disabilities, which is because of a lack of awareness because of lack of knowledge. Service providers have not been given specific training on inclusion and attitude to persons with disabilities.
Geographical barrier: is that it is hard for workers in rural areas to have all the necessary expertise available.

Recommendations from the groups

- Provide basic training on disability issues to the new judges at the judicial training centre, because most of them are having lack of knowledge about the Rights of persons with disabilities and the use of the right terminology.
- Be more aware and sensitive to persons with sensory impairments.
- It is urgent to recommend to ministry of education, inclusive education department, and other relevant organizations, like UN Agencies, to provide intensive training in disability areas.
- The teachers are hoping that this kind of discussion or small trainings can be provided more often, as it gives insight and support to their work.
- They recommend to any relevant institution, especially Ministry Education to provide accessibility, clean water, assistive devices, computer/just-talking, provide sign language training or any relevant tools to serve children with disability.
- NGOs and DPOs, try to involve the school in socialization and other knowledge sharing possibilities.
- Institutions should put more energy in involving family into treatment and therapy for persons with disabilities, especially for persons with psychosocial problems.
- Let the project try to reach the president and/or prime minister and ask for political commitment.

5. Conclusion and recommendations

Conclusion

Based on the above, the following conclusions are drawn, categorised in attitudes, knowledge and practices on disability

Attitudes towards persons with disabilities

When it comes to attitude towards the rights of people with disabilities, we can conclude that in theory most people agree on the rights of persons with disabilities. But in the context of daily practice, many considerations amongst persons without disabilities keep arising and keep exclusion in place. A lack of knowledge on disabilities and possibilities on integration, keeps stigma and fears in place.

Knowledge on disability and the rights of persons with disabilities

When it comes to knowledge, again many respondents know the theory about the rights for persons with disabilities, but lack of practical knowledge keeps service providers from providing qualified and equal services and keeps negative attitudes and spiritual beliefs in place.

Aspect of Practice towards persons with disabilities

Although in existing theoretical and regulatory policies, issues are being addressed, in real life practice, accessibility, budget, training, and other related matters are not provided, in order to equip the service providers well.

Recommendations

From the data we extract the following recommendations for the project development.

Attitudes towards persons with disabilities

Since most respondents are very aware of persons with disabilities rights, but disability is not yet included in their daily practices, we recommend to provide a better understanding to service providers and policy makers about the exclusion of persons with disabilities. This building of knowledge and understanding could be provided in practical ways, by facilitating learning through experience, only when people really sense the daily exclusion, which persons with disabilities meet, they will fully understand it and maybe change their attitudes. Making use of visual materials (like picture, video and theatre play) helps to make practices of exclusion more visible and sensible. Even inviting people to work one day hand in hand with a person with a disability, would build great understanding.

Knowledge of disability and the rights of persons with disabilities

It is highly recommended to focus on raising awareness about disability as well as on GBV against women and girls with disabilities to government service providers, including with a view to addressing negative attitudes. In this effort, it is recommended that knowledge that is already available in the referral network be used, since the FGDs showed that the referral network organizations and DPOs staff are relatively well equipped with knowledge.

Practice towards persons with disabilities

It is recommended to analyse the level of implementation of policies in place on the rights of persons with disabilities, as it appears that these are not put into practice. This includes reviewing the recruitment policies of the UN and government, as from the respondents in the UN, 0% and from those in Government only 17% have a disability. In addition to the policy it is also recommended that the practice of recruitment of persons with disabilities in the UN and government is reviewed and that advocacy is done for better inclusion of persons with disabilities in employment.

Additional recommendations

- It appears that together, officials in government, UN agencies and NGOs and DPOs have a lot of the necessary knowledge available on special services for people with disabilities and provide various

services in GBV cases affecting women and girls with disabilities. However, this knowledge and the services are not coming together or are not necessarily coordinated as the different players operate in different networks. For instance, the disability network is not linked with the GBV network

- We recommend linking of the networks so that the different stakeholders learn from each other, support each other and most importantly, survivors of GBV who have a disability get more adequate services. It is recommended that a focal point identifies gaps in the services within the different institutions and organizations and helps them to develop the lacking services. This focal point can match the different organizations and institutions and take care of the exchange of capacity building and development of disability inclusive services
- In the FGD with DPOs, it was stated that inclusion is very difficult, and requires better coordination and joint work with a strong commitment, especially from government institutions, donors and media.
- It is recommended that greater awareness of the principle of equity for persons with disabilities is built. While people have the same rights, if no specific measures are taken, exclusion can still result. Equity should be the target, not simply equality.