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### List of Abbreviations

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<tbody>
<tr>
<td>BOC</td>
<td>Bhutan Olympic Committee</td>
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<td>BSL</td>
<td>Bhutanese Sign Language</td>
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<td>CBR</td>
<td>Community Based Rehabilitation</td>
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<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
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<td>CSOs</td>
<td>Civil Society Organizations</td>
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<td>CSOA</td>
<td>Civil society Organization Authority</td>
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<td>DDM</td>
<td>Department of Disaster Management</td>
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<td>DPOs</td>
<td>Disabled Persons Organisations</td>
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<td>DT</td>
<td>DzongkhagTshogdu</td>
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<td>ECCD</td>
<td>Early Childhood Care and Development</td>
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<td>ECB</td>
<td>Election Commission of Bhutan</td>
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<td>GT</td>
<td>GewogTshogde</td>
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<td>GNHCS</td>
<td>Gross National Happiness Commission Secretariat</td>
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<td>ICT</td>
<td>Information and Communications Technology</td>
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<td>IEP</td>
<td>Individual Education Plan</td>
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<td>LGs</td>
<td>Local Governments</td>
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<td>MoE</td>
<td>Ministry of Education</td>
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<td>MoH</td>
<td>Ministry of Health</td>
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<td>MoHCA</td>
<td>Ministry of Home and Cultural Affairs</td>
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<td>MoIC</td>
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<td>MoLHR</td>
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<td>MoWHS</td>
<td>Ministry of Works and Human Settlement</td>
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<td>NCWC</td>
<td>National Commission for Women and Children</td>
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<td>NGOs</td>
<td>Non-governmental Organisations</td>
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<td>RGoB</td>
<td>Royal Government of Bhutan</td>
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<td>RUB</td>
<td>Royal University of Bhutan</td>
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<td>SAARC</td>
<td>South Asian Association for Regional Cooperation</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<td>SEN</td>
<td>Special Educational Needs</td>
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<td>UNCRPD</td>
<td>United Nations Convention on the Rights of the Persons with Disabilities</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>WHO</td>
<td>World Health Organization</td>
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1. Background and Rationale

In accordance with the philosophy of Gross National Happiness, Bhutan continues its pursuit of inclusive socio-economic development. Its development policies and plans are geared towards meeting the needs of all sections of the society including those that are marginalized or vulnerable.

The commitment towards inclusive development is also reflected in the Constitution of Kingdom of Bhutan. Article 7 (Fundamental Rights) Section 15 of the Constitution states that ‘All persons are equal before the law and are entitled to equal and effective protection of the law and shall not be discriminated against on the grounds of race, sex, language, religion, politics or other status’. In addition, Article 9 (Principles of State Policy) Section 22 of the Constitution also states ‘The State shall endeavour to provide security in the event of sickness and disability or lack of adequate means of livelihood for reasons beyond one’s control’.

Despite all the commendable efforts and socio-economic progress there are still sections within the society including persons with disabilities, who have missed out on the benefits of development and opportunities for participation due to a variety of reasons and are still in need of targeted support from the Royal Government of Bhutan (RGoB). The Population and Housing Census of Bhutan (PHCB) 2005 reported that about 3.4 per cent of the country’s total population is living with disabilities; however, there is very little information and studies conducted on disability to inform on the nature, type of disabilities and challenges faced by persons with disabilities. Persons with disabilities often face significant levels of discrimination and stigma in their everyday lives. As a result, many are not visible in society, and are prevented from participating in their communities and families. Women and girls with disabilities are at particular risk as they live with double discrimination. Hence, in the 11th Five Year Plan (2013-2018) ‘addressing the needs of the vulnerable groups’ was identified as one of the sixteen National Key Result Areas (NRKAs). This was done to ensure the benefits of socio-economic development reach the most disadvantaged and vulnerable sections of the population, and in the process enhancing their standard of living and quality of life. This is also in line with the global commitment to ‘Leave No One Behind’.
Persons with disabilities were identified as one of the vulnerable groups in need of additional interventions from the RGoB. Towards this end, based on the recommendations of the GNH Commission meeting, the government directed GNHC Secretariat to spearhead the formulation of the policy for persons with disabilities. In addition, the Vulnerability Baseline Assessment conducted by GNHC Secretariat with support from the UNDP, also recommended the drafting of a legislation for persons with disabilities. Furthermore, meeting the needs of persons with disabilities and ensuring their meaningful participation as members of society also feature amongst international commitments such as the United Nations Sustainable Development Goals (SDGs), UN Convention on the Rights of the Persons with Disabilities (UNCRPD), the Sendai Framework on Disaster Reduction 2015-2030, the Incheon Strategy to “Make the Right Real” for Persons with Disabilities in Asia and the Pacific and the SAARC Social Charter at regional level.1

2. Definition
For the purpose of this policy the definition of persons with disabilities will broadly be based on the Convention on the Rights of Persons with Disabilities (CRPD) which reads ‘Persons with Disabilities’ includes those who have long-term physical, mental, intellectual or sensory impairments; which in interaction with various barriers may hinder their full and effective participation in society. The definition will also be based on the World Health Organization (WHO), which describes disabilities broadly covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual’s involvement in life situations.2

3. The guiding principles
3.1 Non Discrimination:
The policy emphasizes a rights based approach to programming by pursuing to minimize stigmatization and discrimination which act as a barrier to persons with disabilities and their families in accessing services. The rights of persons with disabilities should be promoted, respected, and protected at all time by all service providers.

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1 World Health Organization http://www.who.int/topics/disabilities/en/
2 World Health Organization http://www.who.int/topics/disabilities/en/
3.2 Diversity & Inclusiveness:
Persons with disabilities are not a homogenous group. This policy recognises that the experience of disability varies according to personal and environmental factors. Some persons with disabilities are more vulnerable than others such as women with disabilities, children with disabilities, older persons with disabilities and thus the necessity of the policy to be responsive to different concerns and vulnerabilities. It also emphasizes the need for inclusion of persons with disabilities in any programme, policy and plan design, implementation, monitoring and evaluation.

3.3 Disability Mainstreaming:
Disability-inclusive development refers to inclusion of disability perspective in all areas of development, and inclusion of persons with disabilities in development processes, emphasizing the need for inclusion of persons with disabilities in any plan, policy and programme design, implementation, monitoring and evaluation.

3.4 Participation:
This policy is anchored on active participation/involvement of persons with disabilities, their caregivers or their representatives in planning, implementation, monitoring and evaluation of plans, policies and programmes at all levels.

3.5 Gross National Happiness:
This policy will be guided by the philosophy of GNH which places people in the centre of the development process.

4. Vision
Empowered persons with disabilities living in an inclusive society.

5. Scope
The policy covers all persons with disabilities, their care givers, and service providers.
6. Objective

The policy seeks to improve the lives of persons with disabilities through the following objectives:

6.1 Empower persons with disabilities and ensure their participation as equal members of the society and in socio-economic development process.
6.2 Promote inclusive development through mainstreaming disability initiatives in plans, policies and programs in all sectors.
6.3 Improve access to opportunities and services for persons with disabilities.
6.4 Improve the socio-economic condition of persons with disabilities and their family.
6.5 Change attitude and behaviour of society towards persons with disabilities.

Policy Interventions

7. Education

Education is a basic socio-economic human right, and all children, including those with disabilities have a right to education. The lack of proper education remains one of the key reasons for poverty and exclusion of children from wider community affairs, both those with disabilities and without disability. The lack of education and marketable vocational training for children and youth with disabilities results in a deficit of opportunities for further personal development and increases their marginalization and vulnerability. It diminishes their access to employment, other income generating activities and business development. To realize education for all and in particular to all the children with disability the following policy interventions are proposed:

7.1 Access
7.1.1 The RGoB shall progressively remove environmental and informational barriers to education through the provision of home to learning place accessibility, accessible infrastructure, accessible learning spaces and accessible safety and evacuation systems.
7.1.2 The RGoB shall develop strategies to make reasonable accommodation within existing educational infrastructure, and incorporate universal designs in new educational infrastructure.

7.1.3 The RGoB shall make reasonable accommodations to increase access to early education, school, vocational, tertiary and lifelong education through inclusive admissions policies, inclusive approaches and SEN programmes, as well as strengthening access to the specialized institutes.

7.1.4 The MoE shall ensure girls with disabilities have equal access to education at all levels.

7.2 Financial and Other Forms of Support

7.2.1 The RGoB shall provide financial or other form of support to children with disabilities who face financial barrier to education.

7.2.2 The RGoB shall provide additional budget to schools enrolling students with disabilities based on the number of students with disabilities and home-based support service programme.

7.2.3 The RGoB shall provide adequate budget to schools with SEN programmes to enable them to extend special educational support to other schools within their Dzongkhag/Thromde.

7.2.4 The RGoB shall provide special approvals and tax or other incentives to procure assistive devices and technologies, educational technology and equipment, special teaching and learning materials, stationary and customized equipment and materials required for persons with disabilities from other countries.

7.2.5 The MoE shall collaborate with other relevant agencies including local governments and CSOs to develop home-based support service options for children with disabilities and families who are unable to attend school.

7.3 Human Resource and Capacity Building

7.3.1 The MoE shall have a long-term strategy for recruitment, capacity development and retention of inclusive and special education teachers.

7.3.2 The MoE in collaboration with RUB shall enhance courses to train all teachers in teaching children with diverse needs in the schools through pre service teacher training institute.
7.3.3 The MoE shall provide additional teachers in schools with SEN Programmes and specialized institutes, to enable adequate support to student with special educational needs.

7.3.4 The MoE shall develop a system of recruiting and training teacher assistants who will assist teachers in a classroom that has students with disabilities.

7.4 Removal of Attitudinal Barriers

7.4.1 The MoE shall conduct awareness and sensitisation programmes to all teachers, students, families and the community on working with children with disabilities and their diverse needs, focusing on inclusive values and principles, not just knowledge and skills, to minimise attitudinal barriers for persons with disabilities.

7.4.2 The MoE shall ensure all educational institutes develop inclusive policies on child protection to ensure the prevention of violence, abuse, neglect and discrimination of children/persons with disabilities.

7.4.3 The MoE shall review all educational policies to ensure they are inclusive, and shall support schools/institutes and other relevant educational agencies to review their policies.

7.5 Early Identification and Intervention

7.5.1 The MoE shall institutionalize and strengthen identification and intervention programmes, including effective training of ECCD facilitators in all ECCD centres and schools in collaboration with the MoH and relevant organisations.

7.5.2 The MoE shall make educational intervention programs available to children from birth or diagnosis. The MoH shall coordinate with MoE in ensuring all children with disabilities have access to such programs.

7.5.3 The MoE shall strengthen the ECCD program and strengthen efforts to ensure all children including those with disabilities are covered under the program.

7.5.4 MoE shall develop specific ECCD supports for children with different disabilities including access to sign language from moment of diagnosis for children who are deaf, and specific developmental supports for children with a visual impairment.

7.5.5 Data collection from birth or date of diagnosis should be implemented jointly between MoH & MoE.

7.6 Learning, Assessment and examination
7.6.1 The Royal Education Council shall develop relevant curriculum statements for students who are unable to access the general curriculum due to disability, that focus on functional literacy and numeracy and relevant life skills, and transition into adult learning and employment.

7.6.2 The MoE shall ensure all students with disabilities who require additional support to have an IEP.

7.6.3 The MoE shall ensure Teaching and Learning to be designed to meet the individual needs of all students, including adaptations, accommodations and modification to learning activities, resources and materials. Additional resources shall be made available to meet the students’ needs.

7.6.4 Appropriate accommodations (seating, timing, scheduling, and presentation format and response mode) shall be made available to students with disabilities in assessment and examination in equitable ways to ensure all students are able to demonstrate their learning. Students who are not accessing the general curriculum shall have formative/continual assessment as defined within their IEP.

7.6.5 Students with disabilities shall be placed in an age appropriate setting and promoted with their peers. They shall be provided with support to ensure that it is the best place for the student to learn and progress psychologically, socially, emotionally and academically with their peers.

7.6.6 Alternative educational pathways (including additional time for completing educational program) shall be made available to students with disabilities who are unable to complete their educational programs at the same rate as their peers.

7.6.7 The MoE with relevant agencies shall develop accreditation systems that recognise the learning and achievements of students with disabilities. Accreditation shall be recognised nationally for employment and further training opportunities.

7.6.8 The MoE shall take into consideration advancement of the rights of the children and women with disabilities in all education policies, plans and programmes related to persons with disabilities.

7.7 Information Management

7.7.1 The MoE shall collect and maintain qualitative and quantitative disaggregated data on children with disabilities in schools including by disability type, cause of disability, sex, and age.
8. Health

Persons with disabilities are often susceptible to additional health conditions as a result of their primary disability. For example, precursors of common chronic diseases, such as physical inactivity, obesity, hypertension, and high cholesterol, are more prevalent among persons with disability than those without. Despite these higher health risks, persons with disability are often overlooked by health promotion and disease prevention efforts. The RGoB recognizes that persons with disabilities have the right to enjoy the highest attainable standard of health without discrimination on the basis of disability. Hence, the policy will seek to ensure that persons with disabilities have access to affordable and quality health care services that are gender sensitive and age appropriate.

8.1 Access

8.1.1 The MoH shall take all necessary measures to ensure access to the highest available standard of health services for persons with disabilities.

8.1.2 The MoH shall take appropriate additional measures to ensure women and children with disabilities have full and equal access to the highest available standard of health services.

8.1.3 The MoH shall take appropriate additional measures to ensure persons with disabilities who live on their own have full and equal access to the highest available standard of health services which may include periodic home visits by the health professionals

8.1.4 The MoH shall ensure that healthcare services are inclusive of persons with disabilities and that the health professionals are disability and gender knowledgeable and sensitive.

8.1.5 The RGoB shall take all appropriate measures to ensure access for persons with disabilities and their families/caregivers to healthcare services and health-related rehabilitation by progressively removing physical, informational, attitudinal and knowledge barriers.

8.1.6 The MoH shall improve access to all health infrastructure and services by providing reasonable adjustment in existing infrastructure and adopting universal designs in new infrastructure.
8.1.7 The MoH shall develop and implement a strategy for provision of health services to persons with disabilities taking into consideration needs of women and children at all levels (identification, promotion, prevention, curative and rehabilitation).

8.1.8 The MoH shall ensure access to appropriate health-related habilitation and rehabilitation services by persons with disabilities and their family members.

8.1.9 The MoH shall institute mechanisms for affordable transportation to access healthcare, habilitation and rehabilitation services by persons with disabilities.

8.1.10 The MoH shall ensure persons with disabilities and their family members have access to information related to healthcare and rehabilitation services.

8.1.11 The MoH shall ensure access to Assistive Technologies including assistive devices, wheelchairs, orthoses and prostheses for persons with disabilities.

8.1.12 The MoH shall promote CBR to provide services to communities within which persons with disabilities live.

8.1.13 The MoH shall provide persons with disabilities with the same range, quality and standard of free or affordable health care and programs as provided to other persons in the area of sexual and reproductive health and population-based public health programs.

8.1.14 The MoH shall introduce measures to assist persons with disabilities in accessing health facilities and services. These could include introduction of a dedicated counter or unit for persons with disabilities in the referral hospitals or providing interpreters for hearing impaired, or giving priority to persons with disabilities.

8.1.15 The MoH shall take into consideration the specific needs of the children and women with disabilities in providing health care services.

8.2 Financial and other forms of support

8.2.1 The RGoB shall come with suitable mechanisms to subsidize or cover the additional out of pockets costs associated with persons with disabilities accessing health services.

8.2.2 The RGoB shall provide tax incentives for assistive devices required by persons with disabilities.

8.3 Prevention, early Identification, Intervention and rehabilitation

Prevention:
8.3.1 The MoH shall ensure that persons with disabilities are included in all levels of preventive public health programs – primary, secondary, and tertiary prevention of diseases and disabilities.

8.3.2 The MoH shall ensure that children with disabilities and their families/caregivers have access to complete immunization schedules, child development, and prevention of disease programs.

8.3.3 The MoH shall ensure access to preventive programs such as reproductive and adolescent healthcare provided by health workers who are knowledgeable and gender sensitive to women and girls with disabilities.

8.3.4 The MoH shall ensure that all preventive health messages and information are made available in accessible formats to persons with disabilities at all times including during the times of endemic and pandemic disease outbreaks.

8.3.5 The MoH shall develop policies and plans to improve universal health coverage through public health and primary healthcare programs.

8.3.6 The MoH shall establish diagnostic services for disability with appropriately trained professionals in key areas of disability including cognitive disabilities.

*Identification and Intervention:*

8.3.7 The MoH in collaboration with relevant stakeholders shall develop appropriate strategy for prevention and reduction of disabilities.

8.3.8 The MoH in coordination with relevant stakeholders shall develop strategy for early identification and detection of diseases, impairments and disabilities and early provision of appropriate intervention.

8.3.9 The MoH shall develop framework whereby early intervention and treatment services are provided as close as possible to communities within which persons with disabilities live.

8.3.10 The MoH shall collaborate with other relevant agencies including local governments and NGOs to develop home-based support service options for children and families who are unable to avail health services.

*Rehabilitation Services:*

8.3.11 The MoH shall strengthen and extend provision of habilitation and rehabilitation services, including community based rehabilitation, and assistive technology in the country.
8.3.12 The MoH shall ensure that health-related habilitation and rehabilitation begin at the earliest possible stage, and are based on the multidisciplinary assessment of individual needs and strengths.

8.3.13 The MoH shall strengthen habilitation and rehabilitation services by promoting the availability, knowledge and use of assistive devices and technologies, designed for Persons with disabilities.

**8.4 Healthy Ageing**

8.4.1 The RGoB shall promote programs for healthy ageing to reduce risk of disabilities due to old age and minimise the impact of existing impairments that may be compounded by old age.

**8.5 Human Resource and Capacity Development**

8.5.1 The MoH shall ensure availability of adequate number of professionals for provision of specialized services to persons with disabilities.

8.5.2 The MoH in collaboration with relevant agencies shall build capacities for individual families and caregivers on how to care for and interact with persons with disabilities.

8.5.3 The MoH shall promote the development of initial and continuing training for professionals and staff working in habilitation and rehabilitation services.

8.5.4 The MoH shall strengthen capacity and build adequate number of disability-trained researchers in a range of disciplines.

8.5.5 The MoH shall provide disability related awareness and training program to healthcare workers.

8.5.6 The MoH shall integrate disability education into undergraduate and continuing education for all healthcare professionals.

8.5.7 The MoH shall develop leadership capacity in the field of disability and rehabilitation among relevant health professionals.

**8.6 Information Management**

8.6.1 The RGoB shall support the collection of appropriate and internationally comparable data on disability, and promote multi-disciplinary research on disability.

8.6.2 The MoH shall ensure all health-related information are inclusive of persons with disabilities and are made available in accessible formats.
8.6.3 The MoH shall encourage inclusion of persons with disabilities in health care surveillance especially related to healthcare needs, barriers, and health outcomes for persons with disabilities.

8.6.4 The MoH shall collect update and document disaggregated disability related data including by disability type, cause of disability, sex, and age.

9. Economic security

Despite numerous initiatives by the government and CSOs, persons with disabilities remain less likely than others to be employed or establish businesses. To protect the right of persons with disabilities to work and start their own business, on an equal basis with others; which includes the right to the opportunity to gain a living by work which is freely chosen or accepted in a labour market and work in an environment that is open, inclusive and accessible to persons with disabilities, the following policy interventions shall be considered by the government:

9.1 Employment

9.1.1 The RGoB shall design and provide incentives/rebates for all individuals and business entities employing persons with disabilities.

9.1.2 The RGoB shall design and provide appropriate incentives to encourage agencies both in the public and private sectors in creating a conducive work environment and accessible facilities for persons with disabilities, irrespective of whether persons with disabilities are employed or not.

9.1.3 The MoLHR in collaboration with relevant agencies shall develop self-employment programs for persons with disabilities taking into consideration the needs of women and girls.

9.1.4 The MoLHR in collaboration with relevant agencies shall introduce vocational and need based training programs for persons with disabilities including women and girls.

9.1.5 The RGoB shall ensure equitable access and opportunities for persons with disabilities for employment in the civil and private sectors.

9.1.6 Special qualification levels to enter into the civil service shall be considered for persons with disabilities in identified areas of need.
9.1.7 The RGoB shall design and provide through reasonable accommodation conducive work environments and provision of accessible facilities for persons with disabilities in government offices.

9.1.8 The RGoB shall ensure access to decent work with equitable pay and good working condition for women and girls with disabilities.

9.1.9 The RGoB shall develop appropriate rules and regulations to prevent all forms of discrimination and exploitation including financial, towards persons with disabilities including women and girls in employment in both the private and civil sector.

9.1.10 The RGoB shall promote and monitor sheltered/supported employment for persons with disabilities.

9.1.11 The RGoB shall facilitate skills based employment for persons with disabilities.

9.2 Support and Enabling Environment for business opportunities

9.2.1 The RGoB and relevant agencies shall provide training programs to persons with disabilities and their family members in developing business (entrepreneurship) skills and Vocational skills development.

9.2.2 The MoLHR shall include and support persons with disabilities and their family members in the entrepreneurship and business opportunities programs.

9.2.3 The RGoB and relevant agencies shall create awareness among persons with disabilities, their family members and general community on skills development programs and opportunities.

9.2.4 The RGoB shall provide appropriate incentives for businesses owned and run by persons with disabilities. These could include appropriate tax incentives, or providing space to persons with disabilities in government/public facilities.

9.2.5 The RGoB shall provide assistance obtaining business licenses by persons with disabilities as and when required.

9.2.6 The RGoB and relevant agencies shall facilitate provision of concessional loans to persons with disabilities for initial establishment of business.

9.3 Human Resources and Capacity Development

9.3.1 The RGoB shall ensure equitable access and opportunities to training programs and professional advancement for persons with disabilities including women and girls.

9.3.2 The RGoB shall develop the capacity of the trainers training persons with disabilities.
9.3.3 The RGoB shall provide training programs for employers on how to support employees with disabilities including women and girls in both the private and civil sector.

9.4 Information, Awareness and Advocacy

9.4.1 The RGoB shall create awareness and advocacy on employment and business opportunities for persons with disabilities.

9.4.2 The MoLHR, CSOs and other relevant agencies shall collect update and document disaggregated disability related data including by disability type, cause of disability, sex, age, employment type, trainings availed and training programs for persons with disabilities.

10. Caregivers, Families and Communities

Family caregiving is typically at the core of what sustains persons with disabilities, and caregivers often make major sacrifices to help loved ones remain in their homes. Being an unpaid caregiver for one’s family members with disability is common in Bhutan with growing number of persons with disabilities and lack of institutions providing the required care. Persons with disabilities need help with tasks such as housekeeping, meal preparation and transportation. Although the amount of care most caregivers provide to children/adult family members and friends is modest, the responsibilities can be demanding and can present financial risks. In order to support and encourage family caregivers the policy proposes the following intervention:

10.1 Decision making

10.1.1 All agencies in the public and private sector shall ensure participation of parents, caregivers, and representatives of persons with disabilities in making decision about children with disabilities.

10.1.2 Adults with disabilities shall be enabled to make their own decisions where possible, however recognition shall be given to an appointed family member or caregiver as surrogate decision maker when the concerned individual is unable to make his/her own decision.

10.2 Family/caregiver’s involvement in service provision
10.2.1 All service providers shall collaborate with families/caregivers in planning and providing services to persons with disabilities.

10.2.2 Relevant government agencies and NGOs shall coordinate and jointly develop service options for assessment, diagnosis, planning and implementation of services for persons with disabilities.

10.3 Support for family and caregivers

10.3.1 The RGoB and CSO’s shall provide counselling and support services for families/caregivers of persons with disabilities.

10.3.2 The RGoB shall explore options to support travel and accommodation for persons with disabilities and their caregivers to enable access to health and education services.

10.3.3 The RGoB shall explore the provision of financial and/or other forms of support to families/caregivers to defray all or part of the additional costs of caring for a person with disabilities.

10.3.4 The RGoB shall provide financial or other form of support for the development of a caregiver system to facilitate availability and hiring of caregivers for persons with disabilities in need of short-term support.

10.3.5 The RGoB shall support the development and provision of respite opportunities for families/caregivers of persons with disabilities.

10.3.6 CSO’s and Disabled People’s Organisations shall encourage and support family/caregiver/parent networks and forums to enable families to support each other.

10.4 Community

10.4.1 The RGoB including Local Governments shall create greater awareness and enhance acceptance of persons with disabilities in their community through targeted programs and initiatives.

10.4.2 Relevant agencies shall encourage communities to assume a greater role in caring for and supporting persons with disabilities.

10.4.3 The RGoB shall recognize the Deaf Community as a cultural/linguistic minority in Bhutan and provide appropriate support.

10.4.4 The RGoB shall provide financial or other forms of support to encourage integration between the hearing and Deaf Communities through wider learning of Bhutanese Sign Language.
10.5 **Information and communication**

10.5.1 Relevant agencies shall provide timely and accurate information to families/caregivers about identification and diagnosis of disabilities, early intervention and referral processes, in accessible language, with clear focus on the child’s development and capabilities.

10.5.2 All service providers shall ensure information about services for children and persons with disabilities is widely available to all families/caregivers.

10.5.3 The RGoB and CSOs/Disabled People’s Organisations shall provide forums for families/caregivers to share information and advocate for their needs and the needs of persons with disabilities.

10.5.4 All relevant agencies including CSOs shall collect, update and document disaggregated disability related data including by disability type, cause of disability, sex, age, and service provided to persons with disabilities.

11. **Protection and Access to Justice**

Persons with disabilities must be afforded the same rights as all other Bhutanese. It is imperative to ensure that persons with disabilities have access to justice so that they are not excluded or marginalized by our justice system. Given the variation in the types and degree of disabilities the justice system will face complex challenges to address these issues, however, protection and access to justice can be improved by removing physical and architectural barriers, developing capacities and establishing proper institutional arrangements. The RGoB shall ensure effective access to justice for persons with disabilities on an equal basis with others, by making reasonable accommodations to remove all attitudinal, environmental and other barriers.

11.1 **Access**

11.1.1 The RGoB shall make reasonable accommodations to make laws available in formats accessible to persons with disabilities.

11.1.2 The RGoB shall ensure all existing infrastructure related to the provision and administration of justice including courts, police stations, detention centres and jails and shelters for victims of violence are made accessible for persons with disabilities through reasonable accommodation.
11.1.3 The RGoB shall ensure all new infrastructure related to the provision and administration of justice including courts, police stations, detention centres and jails are made accessible for persons with disabilities through adoption of universal design.

11.1.4 The RGoB shall ensure support for persons with disabilities in all procedures in justice system. The support includes, but not limited to, legal aid, provision of sign language interpretation, communication assistant, translation of documents into accessible formats.

11.1.5 The RGoB shall undertake appropriate legislative, administrative, social, educational, and other measures including review and revision of existing laws, regulations, customs and practices to protect persons with disabilities from all forms of exploitation, discrimination, violence and abuse.

11.1.6 The RGoB shall ensure access to justice/protection/shelter services for women and girls with disabilities.

11.2 Protection

11.2.1 The NCWC and other relevant agencies including CSOs shall provide training and awareness to families/caregivers on the protection of persons with disabilities including children and women, and on the rights of the persons with disabilities, appropriate behaviour towards persons with disabilities, and understanding how to recognize, respond to and report abuse and neglect.

11.2.2 The RGoB shall support provision of information and education to all relevant people/group on how to avoid, recognize and report instances of exploitation, violence and abuse against persons with disabilities.

11.3 Human Resources and Capacity Development

11.3.1 The RGoB shall support appropriate training for those working in the field of administration of justice for persons with disabilities, including police and prison staff.

11.3.2 The RGoB shall provide support towards training lawyers and interpreters to enable them to assist and represent persons with disabilities.

11.3.3 The RGoB shall train members of judiciary and other related agencies on administration of justice, provision of protection service and management of cases concerning persons with disabilities including those related to women, girls and children with disabilities.
12. Disaster risk reduction and mitigation

Persons with disabilities face higher risks as compared to the general population and are disproportionately affected by disasters. Available data reveals that the mortality rate of the disabled population is two to four times higher than that of the non-disabled population in many disaster situations.\(^3\)

12.1 Access

12.1.1 The RGoB shall ensure all new public infrastructure shall be designed and constructed with emergency exits, alarm systems and signage that are accessible and appropriate for all including persons with disabilities.

12.1.2 The RGoB shall ensure reasonable accommodations are made to existing infrastructure to ensure accessible emergency exits, appropriate alarm systems and signage for persons with disabilities.

12.1.3 Local Governments shall plan for and ensure adequate accessibility before, during and after disaster for persons with disabilities.

12.1.4 The MoHCA will ensure provision of appropriate equipment related to emergency and disaster are available and accessible to persons with disabilities.

12.1.5 Integration of needs of persons with disabilities into disaster management plans and programmes

12.1.6 The DDM shall ensure all disaster management and contingency policies and plans at all levels are inclusive of the needs of persons with disabilities including women and girls and their caregivers at all levels of government.

12.1.7 Disaster Management awareness programs shall include relevant information on the needs of persons with disabilities and shall ensure maximum participation of persons with disabilities and their caregivers. These should take into consideration the specific needs of women, girls and children with disabilities.

12.1.8 The formulation of disaster management and contingency plans at all levels shall involve persons with disabilities including women and girls and their caregivers to

address the specific needs of persons with disabilities within their community/institution.

12.2 Human Resources and Capacity Building
12.2.1 The MoHCA shall train disaster response and management personnel on meeting the needs of persons with disabilities including women and girls before, during and after disasters.
12.2.2 Disaster management committees at all levels should include adequate representation from persons with disabilities including women, girls and children and/or their caregivers and remain up to date on the needs of persons with disabilities in their community.
12.2.3 The MoHCA shall provide training to persons with disabilities and their caregivers on individual planning, risk reduction, management and response for emergencies and disaster.

12.3 Information and Communication
12.3.1 All Disaster related policies, plans and programs shall be made available in accessible formats and Local Government shall ensure persons with disabilities in their community have access to and understand relevant information.
12.3.2 The MoHCA shall explore and introduce alternative and appropriate early warning systems for persons with disabilities.
12.3.3 The RGoB shall ensure provision of appropriate communication systems during emergencies and disasters for persons with disabilities.
12.3.4 Local Governments shall maintain a register and mapping of persons with disabilities who may need assistance, for use during emergencies and disasters including for planning.

Physical accessibility

13. Built Environment

It is important that built up environments are universal design based, barrier-free and adapted to fulfil the needs of all people equally. The needs of persons with disabilities coincide with the needs of the majority, and as such, planning for the majority implies planning for people with varying abilities and disabilities.
13.1 Access

13.1.1 The RGoB shall make reasonable modifications to all existing public buildings to make them accessible to persons with disabilities.

13.1.2 The RGoB shall implement the guidelines for construction of disability friendly infrastructure for persons with disabilities, and review and revise the guidelines as and when required.

13.1.3 The RGoB shall allocate adequate budget for rehabilitation and modification of existing public infrastructures.

13.1.4 The RGoB shall ensure that all new public buildings incorporate universal designs and features that make it accessible to all people including persons with disabilities.

13.1.5 The RGoB shall come up with innovative mechanisms to encourage the private buildings to incorporate disability designs and features that provide access to persons with disabilities.

13.1.6 The MoWHS and Local Governments shall be responsible for ensuring that all public buildings are accessible to persons with disabilities.

13.1.7 Local Governments shall ensure that all public building such as DT/GT Halls, Community Centres and Lhakhangs are made accessible to persons with disabilities with reasonable modification on existing structures, and incorporate universal design into new structures.

13.2 Human Resource and Capacity Building

13.2.1 The RGoB shall conduct awareness workshops among engineers, architects, contractors, and all those involved in building infrastructure both in the private as well as public sectors on meeting the needs of the persons with disabilities with respect to disability friendly infrastructure.

13.2.2 The RGoB shall conduct awareness workshop for managers and caretakers of facilities in interacting with and caring for persons with disabilities.

14. Public Transport

The availability of accessible public transport is critical for persons with disabilities in order for them to participate fully in community life, education, employment and the economy and it can have a significant impact on the quality of life. The public transport in Bhutan is
highlighted as the major barrier to inclusion of persons with disabilities. The policy proposes to address this issue to ensure that persons with disabilities have the same opportunities as others and improve their quality of life.

14.1 Access
14.1.1 The RGoB shall ensure all public transport infrastructure and equipment are made accessible to persons with disabilities.
14.1.2 The RGoB shall ensure all public transport policies, plans and systems take into consideration the needs of the persons with disabilities.
14.1.3 The RGoB shall explore issuing driving licenses to persons with disabilities who meet other prerequisites.

14.2 Human Resource and Capacity Development
14.2.1 The RGoB shall ensure planners, proprietors, managers, inspectors, frontline staff are trained on supporting, interacting with, and caring for passengers with disabilities.
14.2.2 The RGoB in collaboration with relevant stakeholders shall conduct awareness and advocacy programmes focused on providing assistance to passengers with disabilities.

14.3 Financial and Other Forms of Support (Affordability)
14.3.1 The RGoB shall introduce mechanisms to subsidize the cost of public transport for persons with disabilities.
14.3.2 The RGoB shall provide tax exemption or other incentives for importing mobility aids and vehicles designed for persons with disabilities.

14.4 Information and communication
14.4.1 RGoB shall collect data information on accessibility of public transport and establish audit system

15. Information, Communication and technology
Knowledge and information should be accessible for persons with disabilities, and communicating in any consultation is vital for their full participation and involvement in the mainstream society. Examples of methods of communications are: spoken, written, graphic, symbolic, electronic and sign language, most of which can be made effective for persons with
disabilities through Assistive Communications Devices which can be software or aids that are used to help persons with disabilities communicate. Examples of assistive communication devices are: text readers, amplifiers, screen magnifiers, captioning and interpretation.

15.1 **Access**
15.1.1 The MoIC in collaboration with relevant agencies shall develop guidelines for provision of online services and public information for persons with disabilities.
15.1.2 The RGoB shall ensure that there is proper signage in all public infrastructure including through use of tactile communication.
15.1.3 The RGoB shall recognize and adopt a standardized Bhutanese Sign Language (BSL) for the deaf community of Bhutan.
15.1.4 The RGoB shall support further research and documentation of BSL.
15.1.5 The MoIC shall ensure improved access for persons with disabilities to public broadcasts by promoting use of alternative formats, captioning and sign language.
15.1.6 The RGoB shall ensure all policies and laws are available in accessible formats.
15.1.7 The RGoB shall ensure that emergency communication have voice and text, and other options.
15.1.8 The MoIC shall promote use of ICT by persons with disabilities.

15.2 **Human Resource and Capacity Development**
15.2.1 The RGoB shall train and appoint sign language interpreters for provision of services to persons with disabilities.
15.2.2 The RGoB shall conduct capacity building and advocacy program for Web/mobile/application developers to make online services/information accessible to persons with disabilities.
15.2.3 The RGoB shall build capacities through increased investment in universal design to enhance access to information.

16. **Participation in cultural, spiritual, recreation, leisure and sport activities**
The unique ability of sports to transcend linguistic, cultural and social barriers makes it an excellent platform for strategies of inclusion and adaptation. Furthermore, the universal popularity of sport and its physical, social and economic development benefits make it an
ideal tool for fostering the inclusion and well-being of persons with disabilities. The following are the proposed policy intervention for fostering sports, spiritual, leisure and recreation for persons with disabilities:

16.1 Access

16.1.1 The RGoB shall improve access for persons with disabilities by making reasonable modifications to existing sports and recreational facilities and also by integrating universal designs in new facilities.

16.1.2 The RGoB shall support relevant agencies in promoting awareness and advocacy to change the perception of the society towards participation of the persons with disabilities in sporting events.

16.2 Participation

16.2.1 The RGoB shall promote the participation of persons with disabilities including women and girls in all sporting and recreational activities.

16.2.2 The RGoB shall organize and promote sporting and recreational activities specifically for persons with disabilities such as national or Dzongkhag level Paralympics.

16.2.3 The RGoB shall support provision of professional instructors and coaches for training persons with disabilities taking into consideration the needs of women and girls with disabilities.

16.2.4 The RGoB shall support participation of persons with disabilities in national and international sporting events.

16.3 Finance and other forms of support

16.3.1 The RGoB shall provide tax or other incentives for import of specialized sports equipment and materials for use by persons with disabilities.

16.3.2 The RGoB shall design appropriate incentives for private organisations/individuals engaged in promoting or implementing activities related to sports and games related to persons with disabilities.

16.3.3 The RGoB shall recognize and provide incentives for persons with disabilities who win awards in National/International events equally with other award winners.

16.4 Institutional Arrangement
16.4.1 The MoE, MoH, MoWHS, LGs, BOC, CSOs, private parties and the lead agency shall develop sports and games related polices, plans, and programmes for persons with disabilities.

16.4.2 The BoC and its associated federations, the MoE, MoH, and CSOs shall be responsible for the implementation of all sports and games related polices, plans, and programmes for persons with disabilities.

**Inclusion in decision making**

**17. Policy and Planning**

It is imperative that persons with disabilities are included in all decisions and process that affect them. The Royal Government of Bhutan will consult persons with disabilities or their representatives in the development and implementation of any legislation, policies and programmes, and in other decision-making processes concerning issues relating to persons with disabilities.

**17.1 Participation**

17.1.1 All agencies shall ensure that persons with disabilities and/or their representatives are consulted and encouraged to participate in making plans, policies, and decisions.

17.1.2 Local governments shall involve Disabled People’s Organisations, organisations associated with persons with disabilities and persons with disabilities and/or their representatives in planning and decision making.

17.1.3 The RGoB shall encourage the participation of women and girls with disabilities as leaders and decision makers.

17.1.4 The RGoB shall ensure that the needs of women and girls with disabilities are mainstreamed in all development policies and plans.

17.1.5 Local governments in collaboration with Disabled People’s Organisations, organisations associated with persons with disabilities, persons with disabilities shall create awareness on importance of participation in planning, policy and decision making.

17.1.6 The GNHC shall ensure Disabled People’s Organisations, organisations associated with persons with disabilities, and persons with disabilities are involved in formulation of national plans and policies.
17.1.7 RGoB shall develop innovative mechanisms to involve participation of persons with disabilities including women and girls with disabilities in meetings. This could include use of technology or simple mechanisms such as focus groups discussion.

17.1.8 The RGoB shall ensure adequate financial resources to promote participation of persons with disabilities in planning, policy and decision making.

18. Political Participation

When barriers are removed, voters with disabilities are afforded their full rights as citizens. The government, in order to continue to guarantee persons with disabilities the ability to effectively participate in political and public life on equal basis with others, directly or through a freely chosen representatives, including the right and opportunity for persons with disabilities to vote and be elected, should consider the following:

18.1 Access

18.1.1 The ECB in collaboration with relevant agencies shall support and promote persons with disabilities being politicians.

18.1.2 The ECB in collaboration with relevant agencies shall ensure all polling stations, voting devices and materials are accessible to persons with disabilities.

18.1.3 The ECB shall explore alternative ways of enabling persons with disabilities to vote including by postal ballots and mobile polling stations.

18.1.4 The ECB shall provide necessary assistance and support to all persons with disabilities during election process.

18.1.5 The ECB in collaboration with other agencies shall make efforts to provide supported decision making during electoral process.

18.1.6 The ECB shall encourage participation of women and girls with disabilities in the political process.

18.2 Human Resource development

18.2.1 The ECB shall train Election Officials for provision of specialized services to persons with disabilities including women and girls with disabilities.

18.2.2 The ECB shall encourage the participation of persons with disabilities including women and girls with disabilities in the electoral process.
18.2.3 The ECB shall develop strategies to increase the participation of persons with disabilities during election process.

18.3 **Information and communication**

18.3.1 The ECB shall ensure that any public broadcasts/announcement geared for persons with disabilities related to elections be made in formats that is accessible wherever possible (for example sign language, audio, braille, caption, large print and easy to read, etc.)

18.3.2 The ECB shall review rules and regulations (Act) to facilitate participation of persons with disabilities in election at all levels.

18.3.3 The ECB shall collect data and information on accessibility of polling station, voting devices and material for persons with disabilities including persons with visual impairment.

**Management**

19. **Institutional Arrangement**

The overall institutional arrangement to implement this policy has to be designed to effectively and efficiently implement the policy measures stated in this policy. The institutional arrangement should also foster coordination and cooperation between different sectors and CSOs to have synergies from their efforts.

19.1 **Institutional Set Up**

19.1.1 The Cabinet shall identify an existing agency or a new agency to serve as the lead agency for the overall coordination of all disability related policy, plans and programs.

19.2 **Formulation, Coordination and Implementation**

19.2.1 The lead agency shall coordinate the formulation, review, revision, and implementation of policies, plans, programs, networking and other developments related to disability issues both at national and international level.

19.2.2 The lead agency in collaboration with relevant agencies and LGs shall coordinate formulation and implementation of the action plan for this policy.
19.3 Sectoral Responsibilities
19.3.1 Sectors shall formulate sectoral policies, plans, and programmes in collaboration with the lead and other relevant agencies in line with this policy and its associated action plan.
19.3.2 Sectors and LGs shall be responsible for implementing sectoral policies, plans, and programmes for persons with disabilities.

19.4 Networking
19.4.1 The lead agency shall establish and enhance the network for knowledge sharing and capacity building in providing support services for persons with disabilities.

19.5 Resource mobilization
19.5.1 The lead agency and other agencies shall follow existing procedures for the mobilization of adequate resources to implement the National policy for Person with Disability and the action plans.

19.6 Awareness and Advocacy
19.6.1 The lead agency shall coordinate and support awareness and advocacy programs on disability issues.
19.6.2 The lead agency in collaboration with other relevant agencies shall conduct awareness and sensitisation programmes to change the mind-set of persons with disabilities about themselves.

19.7 Human Resource Development
19.7.1 The lead agency shall coordinate, cooperate and collaborate for development of human resource and capacity towards providing quality and effective services to persons with disabilities.

20. NGOs/CSOs/Disabled People’s Organisations
NGOs/CSOs have extensive expertise in working with and for persons with disabilities. Using a partnership strategy, the government can benefit from their expertise and capacity. The CSOs can supplement and complement the efforts of the government in improving the
lives of persons with disabilities. They can also engage corporate partners, on behalf of persons with disabilities. For this the following interventions are proposed:

20.1 Support and Collaboration
20.1.1 The RGoB shall cooperate and collaborate with Disabled People’s Organisations and CSOs to develop policies and plans and to implement programs and projects related to persons with disabilities.
20.1.2 CSOs shall supplement the government initiatives to address issues on disability including creating awareness and advocacy.
20.1.3 The RGoB shall facilitate establishing linkages between International Agencies and local CSOs related to persons with disabilities.
20.1.4 The CSOA shall certify “Disabled People’s Organisation” and support them.

21. Data and Information
Valid, reliable and relevant disability data are essential for formulation of evidence-based disability and rehabilitation policies, plans, and programs. Standardization of data allows for regional and international comparisons, which in turn facilitates the monitoring of progress in the implementation and effectiveness of policies. Reliable and relevant data allow government and stakeholders to identify strategies needed to improve the health and well-being of persons with disabilities. The following interventions are proposed to streamline data collection and management:

21.1 Coordination, Collection, Processing, Dissemination, and Use of data and information
21.1.1 The RGoB shall ensure evidence based decision making of plans, policies and programs related to persons with disabilities using available data.
21.1.2 The RGoB shall establish a mechanism/framework for coordination, collection, processing and dissemination of data and information related to persons with disabilities. This could be through the use of existing mechanisms.
21.1.3 The RGoB shall mandate the statistical offices to maintain disability related data in the repository at the national, ministerial/agencies and Local Government level.
21.1.4 The NSB shall standardize and clear surveys for collection of data related to persons with disabilities as per the statistical standards set by the statistical authority.
21.1.5 The RGoB shall develop strategies for information sharing between government agencies and CSOs.

**21.2 Human Resource development**

21.2.1 The RGoB shall train relevant officials in the collection, processing and dissemination of data and information related to persons with disabilities.

**22. Finance**

Persons with disabilities continue to face exclusion and discrimination in their communities, including in areas of education, employment and healthcare. Evidence indicates that the promotion of inclusive development for persons with disabilities is beneficial for all in development. In order to ensure inclusive and necessary support services for persons with disabilities (including social protection aimed at the full inclusion of persons with disabilities), it is important for the development programme to include persons with disabilities. This includes adequately financing for disability-relevant services and support.

**22.1 Access**

22.1.1 The RGoB shall ensure adequate budget provision in implementing the plans and policies for persons with disabilities.

22.1.2 The LGs shall ensure adequate budget provision in implementing LG plans and policies for persons with disabilities.

22.1.3 The RGoB shall collaborate with financial institutions to ensure that persons with disabilities have equitable access and opportunities to all financial and banking services.

22.1.4 The RGoB shall provide reasonable disability allowance (Conditional Cash Transfer for Education and seeking employment and livelihood) for children with disabilities and persons with disabilities who are not employed.

22.1.5 The RGoB shall promote the institutionalization of a disability pension and insurance Schemes for persons with disabilities.

22.1.6 The RGoB shall encourage financial institutions, corporate and private sectors to extend their corporate social responsibilities for the welfare of persons with disabilities including provision of special saving and loan schemes.
22.1.7 The RGoB shall institute a National Disability Trust Fund to ensure the services for persons with disabilities are more sustainable.

23. Monitoring and Evaluation

23.1 Monitoring and Evaluation

23.1.1 The monitoring and evaluation of the policy will be based on the implementation of the action plan developed by the lead agency.

23.1.2 The lead agency shall conduct periodic monitoring and evaluation of plans, programs, and policies related to persons with disabilities.

23.1.3 Sectors shall conduct periodic monitoring and evaluation of their own plans, programs and activities related to persons with disabilities.

23.1.4 Sectors shall periodically report on the progress of implementation of programs and activities based on Annual Performance Agreement.

24. Review and Revision

The Lead agency in collaboration with other relevant agencies shall review this policy at least once in every five years and revised if required.