

**2023**

**DISABILITY  
MAINSTREAMING POLICY  
COUNTY GOVERNMENT OF BUNGOMA**

# **COUNTY GOVERNMENT OF BUNGOMA**



## **DEPARTMENT OF GENDER, CULTURE, YOUTH AND SPORTS**

### **DISABILITY MAINSTREAMING POLICY 2023**

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## **LIST OF ACRONYMS**

CBR: Community-Based Rehabilitation

CRPD: Convention on the Rights of Persons with Disabilities

CSO: Civil Society Organization

CWD: Children with Disabilities

DPO: Disabled Persons Organization

ICT: Information and Communication Technology

IEC: Information, Education, and Communication

ILO: International Labour Organization

NCPWD: National Council for Persons with Disabilities

NGO: Non-Governmental Organization

PWD: Persons with Disabilities

SDGs: Sustainable Development Goals

UNCRPD: United Nations Convention on the Rights of Persons with Disabilities

## DEFINITION OF TERMS

**Assistive and support devices:** Refers to implements, tools, equipment and machines, workstations, the work environment or adjustment in work organization, work schedules, sequence of work and breaking down work tasks to suit the needs of all KIST members living with disability.

**Assistive Devices:** includes implements, tools, equipment, taped texts, audio, visual and pictorial recording, Braille equipment and materials, tactile equipment, orthopedic appliances and other devices and machines of whatever kind for Persons with Disabilities for their sociocultural, , economic, civil, political well-being of persons with disabilities;

**Assistive Services:** refers to any specialized service provided for persons with disability for their political, economic, socio-cultural, civil well-being.

**Disability Mainstreaming:** Disability mainstreaming means a strategy through which concerns, needs and experiences of Persons with disabilities are made an integral part or dimension of the design, budgetary allocation, implementation, monitoring and evaluation, and reporting of policies and programmes in all political, economic and societal spheres so that Persons with disabilities benefit equally and inequality is not perpetuated.

**Disability:** Limitation, hindrance, difficulties or reduction of full and effective participation in society on an equal basis with others on account of long term physical, mental, intellectual or sensory impairment, condition or illness in the interaction with various social and environmental barriers.

**Inclusive education:** includes educating students with disabilities in chronologically age appropriate general and inclusive education classes in the schools or least restrictive environments and in regular classrooms and ensure that they receive specialized instruction delineated by their individualized education programs within the context of the core curriculum and general class activities regardless of types or severity of disabilities, to the maximum extent possible

**Internal mainstreaming:** This concerns institutions' workplace, mainly the employees and internal procedures. It is related to institutional policies, guidelines and activities addressing disability among employees and immediate family members. Internal mainstreaming is effected when an agency puts in place work place policies that address needs of Persons with disabilities and others.

**External mainstreaming:** Means adapting core functions of an institution to respond to related needs of Persons with disabilities through responsive targets, policies and strategies. The external domain is the organization's mandate and routine work targeting the population it serves. (Targets the general public, people outside a particular institution)

**Legal capacity:** means the ability to hold rights and duties under the law and to exercise these rights and duties;

**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 on an equal basis with others.

**Reasonable accommodation:** means necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to Persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms;

**Social Protection:** measures aimed to address of vulnerable members of the society to ensure that they are cautioned against falling into extreme poverty and to ensure that they have a decent standard of living.

**Universal design:** Means the design of products, environments, programmes and services to be usable to the greatest extent possible, without the need for adaptation or specialized design, including assistive devices for particular groups of Persons with disabilities necessary.

**Multiple disabilities:** persons who have more than one impairment which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

**Severe Disability:** Persons with extreme disabilities that make them require continuous full time care.



## **FOREWORD**

The County Disability Mainstreaming Policy aims at guiding the implementation of the Disability Strategies, legislations and programmes in both the public and private sector in Bungoma. It provides the framework for implementation of the disability agenda as provided for in the Constitution, the Disability act of 2003, the National Disability Policy, the United Nations Convention on the Rights of Persons with Disabilities and other applicable legislations locally and internationally. The Policy elaborates the disability mainstreaming provisions or strategies under various thematic areas implemented by various County Government Departments, Private sector and Non-Government Organizations.

It shall be the responsibility of every County Government institution both at the county, Sub-County and Ward level to identify the relevant internal as well as external disability mainstreaming measures under various themes and formulate action plans within the organization's Annual Disability Work Plan. This Policy defines the internal mainstreaming measures as those that cut across the institutions under the various thematic areas, while the external mainstreaming measures are specific to the institutions. The County Disability Mainstreaming Policy aims at promoting accessibility to buildings and built environment, employment and work, and services by the Persons with disabilities and also ensuring that issues of legal capacity for persons with disability are addressed.

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## **ACKNOWLEDGEMENT**

The Department of Gender, Culture, Youth and Sports has Designed, Developed and formulated a Standard, **Bungoma County Disability Mainstreaming Policy 2023** for the CGB. The broad goal of the policy is to inspire county pride and to support the deepening of our shared identity. The goal of disability mainstreaming is to realize maximal and sustainable enjoyment of human rights by the persons with disability. We are grateful to **H.E the Governor Kenneth Lusaka** for providing exemplary leadership and clear development direction articulated in this policy. We wish to recognize our **CECM** for her leadership, the Directors for their administrative contributions during the process and all the other staff of the department for their technical backstopping in developing this policy document. We thank the team of consultants, the Departmental Technical Management Committee (TMC), County Technical Working Group (CTWG) and the departmental stakeholders including the public for a job well done in the Designing Development and Formulating the policy. The Disability mainstreaming policy shall be used to:

- I. Promote the inclusion of Persons with disabilities in the social, economic and political developments’
- II. Enhance efforts for equalization of opportunities for Persons with disabilities.
- III. To facilitate removal of barriers that hinder the participation of Persons with disabilities.
- IV. Facilitate assessment of the implications for Persons with disabilities of any planned action, including legislation, policies and programmes in the Departments, Sub-County and wards.

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## CHAPTER ONE: INTRODUCTION

### 1.1. Background Information

According to Kenya's Constitution 2010 article 260 "Disability" is an evolving concept that results from the interaction between a person's impairment and barriers that hinder their full and effective participation in society on an equal basis with others. "Disability" includes any physical, sensory, mental, psychological or other impairment, condition or illness that has or is perceived to have a substantial or long-term effect on an individual's ability to carry out ordinary day to day activities". As reported in the World Report on Disability, Persons with Disabilities (PWD), in countries around the world experience higher rates of poverty and inequality than people without disabilities. This is attributed to low access to development opportunities and resources. Males at all ages have higher levels of disability, and the prevalence increases dramatically across the world in people older than 60.

Persons living with disabilities in Bungoma are not as complacent as commonly portrayed by some developmental agencies and media. They are a people who try to better their standards in the ways they know best. The desire or passion to develop is there, what is lacking is capacity to tap into the resources at their disposal. For instance, to gain in economies of scale or bolster bargaining power, based on their meagre resources, some people have coalesced into either self-help groups or community based organizations. Understanding their efforts and appreciating them is a crucial preliminary step towards changing the rural society where they live. There have been some interventions from development agencies. However, from our observations, most of these agencies, operating in Western Kenya, tend to focus more on empowering urban communities while giving nominal attention to the rural community. If problems of the rural community were fixed, the problems of the urban centers (resulting from massive rural- urban migration to beg) would be substantially reduced. This policy endeavors to inculcate disability issues in development planning in the county.

## 1.2 Status of Disability Mainstreaming in Kenya

The NCPWD champions disability mainstreaming in public and private sector institutions through training, advocacy, and sensitization and accessibility audits. The training covers disability at workplace and in the community. Further, the training target persons with disability and disability mainstreaming committees. The disability mainstreaming efforts by the NCPWD aim to promote access to employment opportunities by the Persons with disabilities; access to organization's services by the Persons with disabilities as well as physical access to the organization in question. Generally, promotion of access to employment opportunities by the Persons with disabilities and physical access are guided by the standardized policy and legislative provisions. For instance, according to the Persons with Disability Act 2003, 5% of job opportunities in public institutions should be reserved for persons with disability. Further, all buildings and built environment are expected to be designed in such a manner that they do not present physical barrier to access by the persons with disability. The NCPWD monitors public agencies to observe these legal requirements. However, this has met some challenges. Many public organizations have not comply with the provision of the law that reserves 5% of employment opportunities for persons with disability. Moreover, even in instances where there is intention to comply, low skill levels and requisite experience among persons with disability hinder enforcement of this provision. Similarly, the NCPWD does not have adequate resources to audit the organizations and enforce the law that promotes accessibility. For instance, the NCPWD is able to audit 20-100 organizations in a year out of the over 1000 agencies that need to be audited. Further, there is also low organizational and management capacity by Disabled Persons' organizations, inadequate funding for Persons with disabilities programmes as well as low level of awareness on disability which results in maintenance of prevailing negative attitude. All these challenges have significant adverse impact on disability mainstreaming efforts and results. Nonetheless, the recognition of the positive impact of disability mainstreaming into national development practices remains an all-time impetus for the mainstreaming efforts.

## 1.3 Approach to Disability Mainstreaming.

### 1.3.1 Levels of Mainstreaming

The disability mainstreaming will take place at two levels as elucidated below;

- I. **Internal mainstreaming:** This concerns institutions' workplace, mainly the employees and internal procedures. It is related to institutional policies, guidelines and activities addressing disability among employees and immediate family members. Internal mainstreaming is effected when an agency puts in place work place policies that address needs of Persons with disabilities and others. The work place policies give forth to strategies and work plans through which actual activities are implemented targeting employees and family members. Internal mainstreaming is considered as an entry point for mainstreaming in the external domain.
- II. **External mainstreaming:** Means adapting core functions of an institution to respond to related needs of Persons with disabilities through responsive targets, policies and strategies. The external domain is the organization's mandate and routine work targeting the population it serves. (Targets the general public, people outside a particular institution) In Kenya, disability mainstreaming has been modeled around establishment of disability mainstreaming committees in Government Ministries and Departments to provide focal point in all matters that concern disability in those institutions. The work of those Disability Mainstreaming (DM) committees is to ensure programmes in those institutions have an element of disability right from the designing of the programmes, planning, budgetary allocation, and implementation, monitoring and reporting. The disability mainstreaming is analyzed in terms of targets with clear indicators in the performance contracts. Progress in the implementation is reported in performance appraisal. The external Disability Mainstreaming measures are unique to thematic areas targeted for disability mainstreaming.

### **1.3.2 Sectoral Policies, Strategies, Legislations**

The vehicles of disability mainstreaming are sectoral and institutional disability mainstreaming policies, strategies and legislations. Disability components in these frameworks guarantee sustainable enjoyment of human rights by the Persons with disabilities.

### **1.3.3 Organizational Programmes and Service Delivery**

Enjoyment of the human rights is actualized through programmes and service delivery by the organization that mainstreams disability into its mandate. Clear disability mainstreaming criteria and indicators are developed and incorporated into programmes and service delivery systems. The indicators are monitored and reported upon regularly during the overall programme and service delivery exercise

### **1.3.4 Procedure of Disability Mainstreaming**

- I. **Training/Sensitization of Institutional staff on disability issues:** Understanding disability issues is critical to disability mainstreaming. The institution should invite the NCPWD to carry out sensitization on disability issues with a view to identifying pertinent issues for their internal and external mainstreaming.
- II. **Constituting Disability Mainstreaming Committee:** The institution should constitute a Disability Mainstreaming Committee. This is the committee that is in charge of the overall mainstreaming activities in the organization. In its composition, 30% of the members should be persons with disability.
- III. **Develop Disability Mainstreaming (DM) policy:** The Disability Mainstreaming Committee spear-heads the formulation of institutional policy of disability mainstreaming. The policy will detail, among others, the specific policy position on critical issues such as employment, transport, discrimination, etc. It will then specify the actions/measures that will take to address the issues elucidated in the policy positions. The policy will also have a section on work plan to implement the policy measures stipulated.

The policy does also have a monitoring and evaluation plan for purposes of measuring progress and determining the value of the mainstreaming efforts made.

- IV. **Allocate financial resources for implementation of the policy:** Financial resources are required for the implementation of the policy work plan. Ensure that money is allocated for this cause.
- V. **Develop Disability Mainstreaming implementation work plan and Monitoring & Evaluation Plan:** The monitoring and evaluation plan helps the DM committee to monitor the progress and assess the worth of the mainstreaming process NATIONAL DISABILITY MAIN STREAMING STRATEGY (2018-2022) 18 vi. **Implement Internal Disability Mainstreaming Measures:** Implement the internal mainstreaming measures as foundation for external mainstreaming measures.
- VI. **Implement External Disability Mainstreaming Measures:** Implement the external mainstreaming measures depending on the thematic area under which the mandate of your organization falls (refer to chapter five for disability thematic areas).
- VII. **Carry out monitoring and evaluation of the implementation process:** Using the progress monitoring tools developed collect data on the monitoring indicators periodically and analyze the data to compile progress report. Similarly, carry out periodical evaluation of the process to assess the value of the mainstreaming process. ix. Report to the National Council for Persons with Disabilities on performance on progress and worth of mainstreaming process: Report the progress on disability mainstreaming (both internal and external) based on the monitoring and evaluation reports carried out to the NCPWD

#### **1.4. Key Challenges Faced by PWDs**

Persons With Disabilities face a number of challenges which hinder their full participation in social, political and economic development at the national, regional and international levels .key amongst these challenges are: stigmatization of Persons with Disabilities in society; poor access to education which causes high levels of illiteracy; poor policy address by leadership; negative attitude and portrayal of Persons With Disabilities in the society; high levels of poverty amongst PWDs; a culture of abuse towards PWDs including discrimination at home, in education, employment, health, leadership, politics, decision making process, and public transport system; inadequate data on PWDs; and high costs associated with disabilities which is aggravated by exorbitant service providers. There is also low organizational and management capacity by disabled persons' organizations, inadequate funding for Persons with Disabilities programmes as well as low level of awareness on disability which results in low attitudinal change.

#### **1.5. Vision Statement**

To create an inclusive and empowering society where persons with disabilities in Bungoma County thrive, participate fully, and enjoy equal opportunities in all aspects of life.

#### **1.6. Mission Statement**

To promote DM and ensure the rights, well-being, and socio-economic inclusion of persons with disabilities in Bungoma County development plan through collaboration, advocacy, and sustainable policies, we strive to eliminate barriers, provide accessible services, and foster a culture of acceptance, equality, and empowerment for all."

#### **1.7 Policy Goal**

The overall goal of the County Disability Mainstreaming Policy on Accessibility and Disability Rights is to spark action across the county and carry out the county's international, regional and national obligations on accessibility and enhance the quality of lives of Persons with Disabilities, (PWDs) in the County.



## 1.8. Policy Objectives

The policy identifies thirteen (13) strategic objectives to increase DM in the county. They are to:

- I. Promote equality and eliminate discrimination of PWDs on ground of disability
- II. Ensure that PWDs effectively fully participate in political and public life on an equal basis with others.
- III. Reduce obstacles and barriers to build environment and Ensure that public transport is accessible to different categories of PWDs
- IV. Ensure reservation of at least 5% employment opportunities in both public and private sectors are reserved for PWDs.
- V. Promote and ensure access to justice by PWDs on equal basis with others
- VI. Provide continuous reliable data on PWDs for policy formulation, planning and service delivery and access to ICT
- VII. Promote and improve access of social services; health, education and social protection.
- VIII. Advocate for the best interest of children with disabilities on an equal basis with others

## 1.9 Principles Underpinning Mainstreaming

Disability mainstreaming aims to contribute the achievement of the overarching goal of addressing disability as a development issue. Hence, the following principles elucidated in the National Disability Policy 2018, shall underpin disability mainstreaming:

- I. **Equalization of opportunities;** measures provided in the policy are to ensure that Persons with disabilities are accorded opportunities on an equal basis with able-bodied persons through affirmative action.
- II. **Human rights approach to the disability agenda:** The principle underscores the conscious departure from the ethos of charity to the articulation of human rights and development approach to disability concerns. Hence, the approach provides for protection from discrimination based on real or apparent grounds.

- III. **Accessibility:** Accessibility should remain an underlying consideration in the built environment, information and services.
- IV. **Gender:** Disability mainstreaming should be beneficial to men, women, boys and girls with disabilities alike.
- V. **Uphold respect for inherent dignity, Equal opportunity, Non -discrimination, Accessibility; Full and effective participation and Inclusion**
- VI. **Twin Track Approach:** A twin focus on disability mainstreaming and empowerment is promoted. This means that disability is mainstreamed into all strategic development practices while at the same time focusing on supporting specific disability initiatives that empower persons with disability. The result of this is equal rights and opportunities for persons with disability.

## **CHAPTER TWO: LEGAL FRAMEWORK AND POLICY FRAMEWORK**

### **2.1 Legal Framework**

#### **2.1.1 Overview of the Constitution of Kenya**

The Constitution contains a substantially improved and modern Bill of Rights, which assigns State obligations to provide and facilitate the enjoyment of socio-economic and civil rights for rights holders. It represents a real change in the protection of the right to equality and non-discrimination in Kenya and stands out as the supreme legal framework that spells out equality for all persons. This set a firm foundation for policy and legislation on disability in accordance with the universal standards for the promotion and protection of fundamental human rights and freedom for Persons with Disabilities (PWDs).

The Constitution secured the rights and entitlements of PWDs in a number of ways. Key amongst these is entrenchment of disabilities rights under Article 54 of the Bill of Rights and Devolution. The latter is a significant development since a majority of PWDs are found in local communities within the 47 Counties. By virtue of Article 2 of the Constitution, the United Nations Convention on the Rights of Persons with Disabilities (UN-CRPD) is applicable as law in Kenya. The purpose of the Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity. The Constitution recognizes the Kenya Sign Language, Braille and other communication accessible to persons with disabilities (Art. 7) as part of the official languages.

Article 27(4) of the Constitution provides for non- discrimination. It prohibits direct or on indirect discrimination against any person on any ground including disability, religion, conscience, belief, culture, dress, language or birth. Additionally, Article 28 promotes respect and protection for human dignity of every person. These provisions are milestones in the fight for the rights of vulnerable and marginalized persons in

Kenya. They seek to facilitate participation in public life, particularly for women, Persons with Disabilities and minority groups.

### **2.1.2. Overview of the Kenya Vision 2030**

The Vision 2030 is Kenya's long term development agenda. It aims to make Kenya a globally competitive and prosperous country by transforming it into an industrialized middle income nation, providing high quality of life for all its clients in a clean and secure environment. The Vision is anchored on three pillars: the Economic pillar which aims at by attaining an annual growth rate of 10 per cent per annum and sustaining it through the Vision period; the Social pillar which seeks to build a just and cohesive society with social equity in a clean and secure environment; and a Political pillar which aims to realize an issue based, people centered, result oriented and accountable democratic system. These Pillars are based on key Foundations for Socio-Economic Transformation.

The Vision 2030 recognizes that Kenya's disability mainstreaming is dependent upon improving the lives of vulnerable groups. This will be carried out by ensuring that all persons have equal opportunities to participate in the country's social, economic and political development. The Vision recognizes that vulnerable groups face multiple challenges in their daily lives and such as high levels of poverty and various forms of deprivation. The specific strategy on PWDs in Vision 2030 to enable this is by up-scaling trainings for persons with disabilities and special needs, and full implementation of the Disability Fund.

### **2.1.3. PWDs Issues in the Context of the Medium Term Plan**

The Medium Term Plan (MTP) 2020-2022 is the second of five-year development plans for the implementation of the Kenya Vision 2030. The theme of the Plan is "Transforming Kenya: Pathway to Devolution, Socio-Economic Development, Equity and National Unity." It is set on the backdrop of the implementation of the Constitution and the formation of a new government in 2013. The Second MTP emphasizes the need for sustainable programmes for PWDs by focusing on improving their livelihoods. It takes stock of key achievements during the period of the First MTP

such as the establishment of the National Fund for Persons with Disabilities, provision of assistive devices, bursaries and training to PWDs and introduction of disability mainstreaming in the public sector.

Despite these milestones, the MTP notes that the increase in the numbers of vulnerable groups in need of social protection remains a big challenge. Key programmes outlined in the Plan to address the various challenges faced by PWDs include: support to Persons with Albinism (PWA); scaling up of the National Development Fund for PWDs; implementation of the 30 per cent procurement preference for PWDs; and disability mainstreaming (with focus on inclusion and accessibility). Key policy and legal reforms proposed in the Second MTP are: finalization and implementation of the Disability Act Amendment Bill, 2012; finalization and implementation of the Affirmative Action Policy on PWDs; development and implementation of the National Disability Mainstreaming Strategy; and implementation of the Accessibility Action Plan.

#### **2.1.4. The United Nations Convention on the Rights of PWDs**

The United Nations Convention on the Rights of PWDs (UN-CRPD) is a legally binding international human rights instrument which aims to promote, protect and ensure the full realization and equal enjoyment of human rights and fundamental freedoms by Persons with Disabilities, and to promote respect for their inherent dignity. Kenya ratified and acceded to the UN-CRPD on 30<sup>th</sup> March, 2007 and 19<sup>th</sup> May, 2008 respectively. The country is therefore bound to implement the Convention. The UN-CRPD is a human rights instrument with an explicit, disability mainstreaming dimension. It provides a paradigm shift from the medical and charity model of disability to social model where disability is viewed as socially constructed issue and recognizes that the existence of barriers constitutes a central component of disability.

The Preamble to the CRPD acknowledges that disability is “an evolving concept”, but also stresses that “disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and

effective participation in society on an equal basis with others”. To that extent, the CRPD proposes a new framework for understanding of disability and human rights based on the six key principles of: respect for inherent dignity, individual autonomy and independence; non-discrimination; full and effective participation and inclusion in society; respect for difference and acceptance of persons with disabilities as part of human diversity and humanity; equality of opportunity; and accessibility.

#### **2.1.5. The Persons with Disability Act, 2003**

The PWDs Act No.14 of 2003 was enacted in December, 2003 and came into effect by legal notice number 64 of 16th June; 2004. The Act was a ground-breaking civil liberty law tailored to fit the Kenyan context and recognized the multi-faceted nature of disability. It provides for education, employment, health, accessibility, transport, sports and recreation, adjustment orders and social security for Persons with Disabilities. The Act also reinforced the understanding of disability as a human rights and development priority and provides a legislative framework for access to services and inclusion of Persons with disabilities in all facets of life. It provides for the achievement of equalization of opportunities by prohibiting discrimination in employment, education, buildings, transportation, sports and health among others.

A key provision of the PWDs Act, 2003 was the establishment of the National Network for Persons with Disabilities as a State Corporation to champion for the rights and equalization of opportunities for Persons with Disabilities nationally, regionally and internationally, as well as the interface between the three. To this end, the Network committed to work more closely with inter-governmental departments, national, regional and International organizations so as to increase efficiency and synergies in carrying out its mandate.

#### **2.1.6. The National Disability Policy 2006**

This National Disability Policy of 2006 aims to improve and promote participation, equality and empowerment of persons with disabilities in Kenya in the all spheres of social, economic and political life. It aims at achieving overall integration of persons with disabilities into the national development process without any discrimination.

The Policy also envisages the dissemination of a simplified version of the Persons with Disabilities Act and the development of a strategy to monitor it; the dissemination of the draft National Plan of Action at national and county levels. The Policy is under review to align it with the Constitution and the UN-CRPD.

## **2.2 Policy Framework**

This Policy has developed policy statements as well as strategies both of which are necessary for the development of specific mechanisms for effective implementation of each policy area. This County Disability Mainstreaming Policy include eight priority areas for policy action as follows:

- I. Prevention, Early Detection, Intervention and Rehabilitation
- II. Inclusive education
- III. Training and employment
- IV. Access to build environments and public transport
- V. Access to information, communications, and assistive technologies
- VI. Support the development of self-help groups and organizations for persons with disability and related family and parental associations
- VII. Women and Youth with disabilities

### **2.1.2. Access to Health Services.**

Young children with disabilities require access to early intervention services, including early detection and identification (within the first 5 years after birth). This process may be supplemented by support and training to parents and families to facilitate the maximum development of the full potential of their disabled children. Failure to provide early detection, identification and intervention to babies and young children with disabilities and support to their parents results in secondary disabling conditions limiting for the rest of life the children's capacity to enjoy educational opportunities. Subsequently it will increase health and welfare costs to the State in the long term. The provision of early intervention should be a combined effort of Education, Health, particularly the primary care workers, and the department of GCY&S.

Many of the causes of impairments and injuries are preventable through increasing level and quality of antenatal care, increasing women health education, developing safe living/work place environments, improving safety measures in the community, including road safety, which can decrease disabilities associated with traffic accidents. Similarly, improving immunization and eliminating malnutrition and iodine deficiencies and good awareness of balanced diet and other daily practices to improve health can also decrease the incidence of certain types of disabilities. For example, vaccination should be made compulsory. In brief, much focus should be placed on prevention, rather than cure using multidisciplinary approach with local leaders employed and other communication tools such as video cassette especially for intellectually impaired people.

Greater awareness needs to be created, particularly in remote communities of the country about how disabilities can be prevented through community health practices. One effective approach in rural areas is Community Based rehabilitation (CBR). CBR models developed in other low income countries such as Indonesia are closely linked to early intervention measures. CBR workers and primary health workers are trained in the early identification and referral of infants with disabilities in both rural and urban areas. In the context of this policy, rehabilitation is defined in accordance with the Standard Rules. It concerns not only those with physical impairment but extends to people with visual impairments, those with hearing impairments and people with intellectual disability. There is need therefore, for specific provisions for each category of disability.

Provisions for people with physical disability for example, should include orthopedic rehabilitation centers; physiotherapy services; and orthopedic, assistive and mobility devices. These services should be close to a regional or provincial hospital with orthopedic surgical services so that the local population has easy access. They could be located ideally, in cities with medical teaching faculties such as in Kabul, Mazar, Herat, Kandahar and Jalalabad. Future services should provide for an expansion in orthotics as this is underserved.



All patients have the right to receive devices. Devices should be well-made, well-fitting, of local materials whenever possible and repairable locally. Appropriate technology should be standardized throughout the country. A mechanism for national standardized should be created with relevant experts in collaboration with DOH. People with visual impairment on the other hand, require services including visual assessment, rehabilitation (orientation and mobility daily living skills, manual dexterity skills, communications skills, social skills and recreation), family and community integration, counseling and mobility devices including canes and guide dogs.

People with hearing impairments require services include hearing assessment provision and fitting of hearing aids, maintenance and repair of hearing aids and rehabilitation (communication skills, social skills and integration). Regional/provincial/district resources centers for hearing impaired could include research, training, and development of educational and other materials, special education for special cases. Finally, people with intellectual impairments require services including assessment of the capacity of learning ability and level of development, daily living skills, social skills, manual dexterity skills, and social integration. Mental illness should be referred, if needed, including cases of epilepsy. Community-based approach to mental health is advantageous (i.e. education of the community on mental health issues, and how to support people with mental health problems and when to refer them). To enhance enjoyment of good health by persons with disability the CGB shall deploy the following policy measures:

- I. Focus on Prevention of disability Rehabilitation measures by:
  - a. Early detection and intervention
  - b. Counselling and medical rehabilitation
  - c. Assistive devices
  - d. of rehabilitation professionals
- II. Train, equip and facilitate health service providers to effectively provide health-care services to Persons with disabilities.

- III. Provide regular treatment to Persons with disabilities who are dependent on medication to preserve or improve their level of functioning.
- IV. Enforce the legal provision on informed consent to health services provided to Persons with disabilities.
- V. Sensitize parents, guardians, caregivers and peer support on the importance of serving as intermediaries where the need for consent from a person with disability is required.
- VI. Educate Persons with disabilities on their health rights including right to consent for any treatment.
- VII. Provide information on health services to persons with disability in accessible formats including braille, Kenyan Sign language and other augmentative methods of communication.
- VIII. Provide reproductive including HIV&AIDS health-care to Persons with disabilities.
- IX. Provide medical cover to all Persons with disabilities who are not provided for elsewhere.
- X. Provide expedited attention to Persons with disabilities at medical facilities.
- XI. Provide medical aid to Persons with disabilities who are not able to contribute to health insurance.
- XII. Provide adequate, accessible and affordable quality mental health -care and alternative therapies in the mental health-care field.

### **2.2.2. Inclusivity to Access Education**

Education is a basic socio-economic human right and all children, including children with disabilities, have a right to education. The lack of proper education remains the key reasons for poverty and exclusion of all children from wider community affairs, both those with disabilities and the non-disabled. Lack of education and marketable vocational training for children and youth with disabilities results in an absolute lack of opportunities for further personal development. It diminishes their access to employment, other income generating activities and business development. A human rights development approach to disability has significant implications for the way in which education is provided for disabled people. Educationists tend to classify people with impairments according to kind of impairment. Disabled learners are then either placed in special schools or classes, or totally excluded from the educational opportunities. Policy objectives for the education of disabled children and adults include education for all - to facilitate equal access of persons with disability to education including community activities and equity in education provisions at all levels; to develop a single educational system for all, that will provide for the needs of all learners within an inclusive environment; to facilitate capacity buildings of all stakeholders, both institutional and human resources; and to provide educational provision including materials within an accessible environment.

All people living in Bungoma County shall have equal access to education opportunities, regardless of their disabilities. Every learner has her/his own interests, abilities and learning needs. Respect for diversity shall be emphasized and promoted. The county government of Bungoma shall;

- I. Provide appropriate educational support such as personal assistants, psychosocial support, learning material, appliances, financial and other appropriate services to encourage inclusive education.
- II. Carry out early identification, educational assessment and appropriate placement of children with disabilities.
- III. Provide skills upgrading and training opportunities to teachers in all schools to work with children with disabilities.

- IV. Introduce common unit on disability in middle and higher level of institution of learning.
- V. Carry out monitoring, supervision and quality control in all schools to ensure that children with disabilities are provided for without discrimination
- VI. Provide continuing and adult education for Persons with disabilities Develop and implement the county Inclusive education policy.
- VII. Ensure Inclusive education financing for children with disabilities from ECDE
- VIII. Establish and implement feeding program for children with disabilities program is enhanced in all ECDEs
- IX. Public awareness/education in regard to disability can be increased by use of media, radio, TV and TV sign language, magazine and newspaper articles etc.
- X. A department of “Special Needs” should exist and function actively within the Department of Education in collaboration with the department of GCY&S.

### **2.2.3 Access to Training and Employment Opportunities**

Persons with disability have a right to decent work. Decent work is productive work in conditions of freedom, equity, security and human dignity. Persons with disability have unique differences and abilities and they should have the right to choose what they want to do based on their abilities, not on their disabilities. They require the same educational, vocational training, employment and business development opportunities available to all. Some may require specialized support services, assistive devices or job modifications, but these are small investments compared to lifetimes of productivity and contribution. Vocational training and employment issues must be considered within the context of the full participation of persons with disability in community life and within the macro context. Persons with disability must also be regularly and actively involved in initiatives related to employment and training, not just as consumers but also as advocates, designers and providers of services. Services for employment support, including vocational training opportunities, must be accessible to all people without discrimination on the basis of gender, age, disability, religion, or political affiliation. All employment support

initiatives for persons with disabilities must respond to a genuine market need: The county government of Bungoma shall;

- I. Sensitize persons with disability on the importance of technical, vocational and entrepreneurial skills
- II. Train service providers, stakeholders, community members on skills to work with Persons with disabilities.
- III. Establish adequate numbers of training institutions that are inclusive and responsive to the needs of persons with disability.
- IV. Develop regulations for vocational training and rehabilitation of Persons with disabilities.
- V. Integrate national norms and standards for the training, testing and certification of Persons with disabilities at all levels
- VI. Provide training for Persons with disabilities in specialized, modern and market orientated skills.
- VII. Provide working kits to parents, caregivers and volunteers caring for Persons with disabilities
- VIII. Provide career counselling and peer mentorship opportunities for Persons with disabilities ensure that there is equally consideration in giving PWD an equal employment opportunity.

#### **2.2.5. Access to build environments and public transport**

The inclusion of persons with disability into society necessitates free barriers environment that accommodates the diversity of needs, and enables the entire population to move around freely and unhindered and this includes accessible information system. For this reason, a clear and comprehensive policy on accessibility must be developed and be based on universal design ideals (Rapley, 2003). Accessibility standards in Bungoma Kenya are still neglected and the whole issue of barrier free society is still under discussion. There are a number of barriers, which prevent persons with disability from enjoying equal opportunities with non-disabled people. For example: structural barriers in the built environment;

inaccessible service points; inaccessible entrances; poor town planning; and poor interior design. It must be emphasized that barriers also include communication barriers i.e. oral language is a barrier for sign language users.

Inaccessibility to the built environment is still a major barrier, which prevents persons with disability from actively participating in social and economic activities. A building code having requirements for access for persons with disability is urgently needed. Universal design approaches that provide for greater accessibility for all people have proven to benefit not only persons with disability but also many other sectors within the society including older people, pregnant women and parents with young children. Physical barriers prevent full participation and reduce the economic and social contribution and productivity of disabled people. Investments in the removal and prevention of architectural and design barriers are increasingly being justified on economic grounds in many developed economies, particularly in areas most critical to social and economic participation (e.g. transport, housing, education, employment, health care, government, religious activities, commerce, leisure and recreation). It is important to note that not only facilities but also services should be accessible in their entirety. In this connection listening to opinions of persons with disability should be an important part of a staff training curriculum and the various services.

Persons with disability have rights to identify and take part in removing the disabling barriers against their inclusion. This can best be done through their NGOs. For policy planning purposes, it is important to know what provisions already exist and made accessible for persons with disability and what improvement can be made on existing ones. Equally important is to know what new provisions which should be made available. Provisions for free barriers society include policies such as existing legislation on accessibility, local regulation, international statements etc. as well as accessible services such as mentioned earlier. Services include those relating to public use such as education, transport, employment, etc. and those pertinent to private use such as home adaptation, car adaptation etc. To enhance unhindered and safe movement of persons with disability The County Government of Bungoma shall;

- I. Ensure Access to build environments and public transport for people abled differently in the County.
- II. The Department of Public Works (DOPW) to develop technical specifications on access engineering and design requirements in consultation with GCY&S and other agencies;
- III. GCY&S to conduct an awareness-training workshop on disability access issues. Technical documents can be translated and disseminated widely.
- IV. Accessible and disability friendly environment `
- V. Undertake sustained sensitization and awareness campaigns among public transport operators and stakeholders on the needs and challenges of Persons with disabilities.
- VI. Implement the accessibility and usability standards with appropriate safety measures.
- VII. Allocate appropriate parking lots for Persons with disabilities in public and private car parks.
- VIII. Train Persons with disabilities and their assistants on use of mobility devices in relation to transport.
- IX. Facilitate access by Persons with disabilities to quality mobility aids, devices and assistive technologies at affordable costs.

#### **2.2.6. Access to information, communications, and assistive technologies**

Effort needs to be directed to the development and dissemination of Sign Language, Braille, finger Braille and other forms of communication. Without access to such forms of communication, people with visual and/or hearing impairments may be deprived of the basic human right to language and communication in their everyday lives. Afghan sign language should be further developed and the sign language dictionary should be extended. Communication tools also include the provision of training on best coping skills for families with disabled members, especially those cases with severe disability or intellectual impairments.

Assistive devices are essential for improving the mobility of people, the overall quality of life and in ensuring greater independence. For example mobility support for the blind can greatly enhance their independence. The greatest challenge lies in the rural areas where mobility issues are most difficult to address and assistive devices are most difficult to deliver because of the lack of services and follow-up to train people in their uses. The CBR approach however, works best in such areas reaching out for persons with disability and their families. Research should be the basis for the design and provision of communication and assistive technology support for disabled people. Individual needs should be carefully considered. Technical devices should be supported by disability sector with law to make them affordable to everybody. In the Policy Statement, The County Government of Bungoma shall;

- I. Train staff and management in ICT sector on pertinent disability issues
- II. Sensitize the public and service providers on use of disability friendly language.
- III. Advice the National Government to exempt from duties, taxes and other levies on equipment and materials used in the production of information in accessible formats for Persons with disabilities.
- IV. Provide incentives to services providers such as public and private broadcasters, media outlets, and institutions of learning, research institutions and libraries which provide user friendly information to Persons with disabilities.
- V. Sensitize educators and employers to provide assistive communication equipment such as talking computer software and tape recorders to learners and employees with disabilities according to their needs
- VI. Ensure that public websites are accessible to persons with various disabilities.
- VII. Develop and implement a county Disability Assistive Technology policy to ensure access to information, communications, and assistive technologies for people abled differently in the County.

#### **2.2.7. Disability Mainstreaming and Self Help Groups**

Persons with disability are the most qualified to advocate for themselves and other disabled people. Self-help organizations of persons with disability are the best



informed and most motivated to speak out on their own behalf concerning the formulation and implementation of appropriate disability policy, legislation and strategies, which in return will ensure their full participation in civil, political and socio-economic and cultural life and enable them to contribute to the development of their own communities. Self-help organizations provide an effective means through which collective capacity-building and empowerment of persons with disability can be achieved, through strengthening their lobbying power to advocate with governmental and other civil society and their active participation in decision-making processes. Persons with disability have a right to participate in family and community decision making and community affairs at all levels including within the village, district administrations and national Government. Persons with disability also have a right to participate in the private sector and all kind of civil society; including religious entities and other non-governmental organizations and members of these organizations must address how they can include disabled people.

Integrating persons with disability in development strategies has economic and social benefits at all levels. Persons with disability tend to be excluded from the process of planning and decision making. In order to achieve equal participation, persons with disability must play a vital role in the formulation of national policy on all kind of sectoral issues (e.g. health, education, transport, housing, etc.) that affect their lives directly. The family is at the center of Afghan community life, and family members including parents, particularly mothers, wives and grandparents are usually the most sustainable and only source of support and care for disabled people. They often need financial support in order to improve the living conditions and livelihood opportunities of the family. The important role that caregivers play in the community should be recognized. Care givers need support from the wider community for the important role they play. This may include the training and provision of information and equipment.

In brief, discussion by various stakeholders including disabled Bungoma residents has pointed out the need for different kind of self-help groups representing the interest of persons with disability and their allies. Regional and local representation

including representation on the Constitutional Commission was also recognized as important in the development of grass roots action for future disability movement in Bungoma Kenya. The County Government of Bungoma shall;

- I. Support the development of self-help groups and organizations for persons with disability and related family and parental associations
- II. Strengthen the Bungoma County Disability Empowerment Fund through funding.
- III. Issue grants to disability groups to support their activities
- IV. Awareness raising programmes to be developed by GCY&S targeting local administrations and aiming at raising the profile of disability issues highlighting the abilities of persons with disability and the potential benefits of their self-help groups to wider development process;
- V. Departments, other government agencies and local governments to include disability in their policies, programmes and activities;
- VI. The GCY&S takes leading role in supporting various self-help groups including regional initiatives;
- VII. The GCY&S disseminates information to members of self-help groups;
- VIII. The GCY&S ensures the representation of disabled people, their families, government officials from various sectors, and other service providers on the National Disability Commission;
- IX. The GCY&S develop awareness raising programmes for local/village communities on disability rights issues;
- X. Department of Health (DOH) and GCY&S in consultation with other key stakeholders to develop information packs for care givers;
- XI. The DOH and the GCY&S agree on how to gather data on who is providing care for disabled people;
- XII. Community health workers to be trained on how to monitor and record needs and share information with GCY&S.

### **2.2.8. Women and Youth with disabilities**

Women and youth with disabilities are often exposed to poverty more than men with disabilities and face discrimination within the family. Women and youth need to have equal access to health care, education, vocational training, employment and income generation opportunities, and to be included in social and community activities. Women and youth with disabilities encounter all kinds of discrimination as they are exposed to greater risk of physical and sexual abuse and often are not given adequate sexual health and reproductive rights advice. These issues need to be addressed not only through this policy, but also through the broader context of gender mainstreaming and women in development policies. They should actively involve and include women and youth with disabilities and empower women and youth, at the grassroots level. Such policies must, in particular, assist families to gain an adequate income so they can meet the needs of their disabled children.

Introducing and enforcing legislation is of utmost importance to protect the most vulnerable, including disabled women and youth. Legislation must focus on all forms of discrimination against disabled women and youth including sexual, physical and mental abuse, and the need to provide gender equal opportunities in education, health and employment. One important strategy is to mainstream gender and disability into all government programmes, especially in the GCY&S and other line Departments. Further, support for the self-employment of disabled women and youth, including in the farming community is needed together with all kind of capacity building support including communication support where applicable. Supporting self-help among disabled women and youth is a priority. The County Government of Bungoma shall;

- i. Ensure protection of rights and support for women and youth PWDs in the County.
- ii. The GCY&S to conduct community workshops on human rights and vulnerability of girls and women with disabilities;

- iii. The GCY&S conduct training workshops for health, welfare and police on ‘rights’ of most vulnerable groups in remote communities against violence and possible abuse;

## **CHAPTER THREE: POLICY IMPLEMENTATION AND INSTITUTIONAL FRAMEWORK**

### **3.1. Policy Implementation**

The Department of Gender, Culture, Youth and Sports through the Directorate of Disability shall be responsible for disability mainstreaming. It shall also spearhead the mobilization, coordination and implementation of the policy in collaboration with other stakeholders. The county will disseminate this strategy to all target actors for mainstreaming at the county, sub-county and ward levels. The implementation will also take into consideration the National Disability Policy, Disability Action Plan, Persons with Disability Act, 2003, disability mainstreaming manuals and any other relevant literature on disability. The policy is organized in such a manner that it will guide the target actors in mainstreaming the disability agenda. To guide the implementation of this policy, the County Government in collaboration with non-state actors shall develop a County Plan of Action. The County plan of action shall be aligned to the Sustainable Development Goals (SDGs), the Kenya Vision 2030 and Departments sectorial development plans.

### **3.2 Policy Institutional Framework**

The policy proposes the creation of committees at various levels for oversight and coordination of disability mainstreaming programmes as follows:

#### **3.2.1 County Disability Council for Disability Mainstreaming (CSCDM)**

At County Level, a County Disability Council for Disability mainstreaming (CDCDM) will be established. This council shall be chaired by the CECM in charge of Disability mainstreaming while the Director for Disability mainstreaming shall serve as the Secretariat to the council. The Council shall consist of the following members appointed by the CECM -

- I. Not more than eleven persons nominated in a manner approved by the CEC member for GCY&S.
- II. Five members nominated by organizations representing persons with various categories of disabilities;

- III. Members representing the Ministries responsible for the following
  - a. Education;
  - b. Health;
  - c. Finance and Economic planning;
  - d. Roads and Housing;
  - e. One member representing the County Attorney General

The major role of this committee will be to provide overall coordination, oversight and advisory to disability mainstreaming programmes in the county. The composition of the CSCDM will include the CECM)/chief officer, Director for Disability, representatives of relevant County Government line departments and agencies, Civil Society Organizations (CSOs), Persons with Disability/Youth/Older Persons and Voluntary Involving Organizations (VIOs) and County Disability mainstreaming Partners (CDMPs).

Other responsibilities for this Council will include;

- I. Spearheading the formulation, interpretation, dissemination and review of disability mainstreaming -related policies;
- II. Oversee the implementation of the National Action Plans developed to implement the policy; ensure quality control and professionalism in disability mainstreaming work;
- III. Creation of linkages, coordination and collaboration with other Government and related agencies in the implementation of disability mainstreaming programmes;
- IV. Monitor and evaluate disability mainstreaming programmes at the County and lower levels of governance and ensuring that Social Impact Assessment (SIA) is incorporated in all the disability mainstreaming projects planned for implementation.
- V. It will also be responsible for resource mobilization and capacity building of lower level committees, community groups and organizations through the funds raised from the registration of community projects and groups.

### **3.2.2 Sub County Committee for Disability Mainstreaming (SCCDM)**

At the sub County level, sub County Committees for Disability mainstreaming (SCCDM) will comprise of the Sub County Coordinator of Disability mainstreaming (CCDM); a representative of the County Commissioner; County relevant heads of departments from national and County Government s; representatives of sub-County disability mainstreaming committees; CSOs and disability mainstreaming partners. Representation should ensure inclusion of Persons with disability, older persons and youth. The Department for Disability mainstreaming shall provide the Secretariat to the committee while the Chair will be elected from the members of this committee. The role of this Committee will be mainly supervisory of the lower level committees and resource mobilization. Other roles and responsibilities for this Committee will include;

- I. Dissemination of policies and programmes on disability mainstreaming ; coordinate mobilization and create awareness on development programmes and emerging issues in disability mainstreaming ;
- II. Monitor community projects funded by the County Government funds such as County Government grants and other devolved funds and coordinate collaboration with other relevant Government agencies, development partners, NGOs, CSOs, FBOs and disability mainstreaming partners.

### **3.2.3 Ward Committee for Disability mainstreaming (WCDM)**

At the Ward level the Committee will comprise of the Ward Disability mainstreaming Officer, a representative of Assistant County Commissioner, and relevant heads of departments from the National and County Government s, Disability mainstreaming Partners (DMPs) and community members. Other members will be drawn from CBOs, FBOs, and VIOs and should ensure inclusion of Persons with disability, older persons and youth. The role of this Committee will be mainly resource mobilization. The Department for Disability mainstreaming shall provide the Secretariat to the committee while the Chair will be elected from the members of this committee.

### **3.3 The Role of Stakeholders in Disability mainstreaming**

The Department responsible for disability mainstreaming recognizes the role played by other partners in promoting disability mainstreaming. These partners include both state and non-state actors.

#### **3.3.1 State Actors (National and County)**

The role of these actors in the implementation of the policy will be to;

- I. Provide leadership, oversight and policy direction
- II. Ensure existence of adequate policy, legal and institutional frameworks
- III. Enforce implementation of the policy and programmes in a coordinated and integrated way
- IV. Provide funding for disability mainstreaming programmes
- V. Set, maintain and ensure standards and professionalism in SD practice
- VI. Facilitate effective collaboration in the implementation of SD programmes
- VII. It must ensure that people are aware of their rights and entitlements in SD
- VIII. Ensure availability of necessary community support and infrastructure
- IX. Facilitate capacity building for effective planning, implementation, monitoring and management of SD programmes

#### **3.3.2 Non-State Actors**

These include; CSOs, FBOs, VIOs, development partners, private sector and other disability mainstreaming partners. Their role in the implementation of the policy will be to;

- I. Provide additional financial and technical support to Government
- II. Provide checks and balances to the Government to ensure implementation of the policy
- III. Ensure inclusion of all categories of communities and vulnerable groups
- IV. Lobbying and advocacy for the policy
- V. Compliment Government interventions



### 3.3.3 Communities

The role of the communities is to;

- I. Participate in the design and implementation of SD programmes for ownership and sustainability
- II. Provide home grown solutions to address community needs and challenges in SD
- III. Contribute material, labour and financial support for implementation of SD programmes
- IV. Lobby for the implementation of the policy
- V. Participate in monitoring and evaluation of SD programmes and projects
- VI. Be custodians of community assets and resources

## **CHAPTER FOUR: POLICY MONITORING AND EVALUATION**

### **4.1. Monitoring, Evaluation and Reporting**

Monitoring, Evaluation and Reporting (MER) will form an integral component for the successful implementation of this policy. This will be an inbuilt component in the proposed community programmes, interventions and initiatives. MER will help the implementers to examine the link between the proposed interventions, initiatives, corresponding budget allocation and resultant output and outcomes. Monitoring will involve routine tracking of key elements of policy implementation and the expected outcomes. Evaluation will help in determining the value of the specific milestones of policy implementation and achievements. Reporting will bring out the lessons learnt for feedback, action and sharing with other stakeholders for improved programming, efficient and effective implementation. Coordination of MER will be provided by the Department responsible for disability mainstreaming through periodic reporting. Participatory monitoring will be done at and by all levels, namely the County, Sub County and Ward committees respectively and at the community.

### **4.2 Policy Evaluation**

An evaluation of the policy shall be conducted every 3 to 5 years to assess impact of the Policy and benefits accruing for the PWDs. The Directorate of youth in National and County Governments shall develop mechanisms using formal and informal channels, print and electronic media in developing a robust and multifaceted communication strategy for the Policy and the programme activities to all relevant stakeholders. This will also include capacity building of PWD organizations on the Policy and the roles in implementation, monitoring and evaluation and impact assessment. The Directorate of youth shall also facilitate the communication of results for PWDs interventions annually and develop an Annual Gubernatorial Report on The Status of PWDs in the County.

## **CHAPTER FIVE: POLICY COMPLIANCE AND REVIEW**

### **5.1. Compliance**

All stakeholders shall comply with this Policy to ensure effective implementation of this programme. Compliance in this Policy is adhering to guidelines, standards, operating procedures and regulations. All Public Sector Institutions, Civil Society and Private Organizations that are registered with Government and handle public funds will be required to comply with the provisions of this Policy. Standards set out in this Policy document that guide the implementation processes shall be applicable across the County Government structures.

### **5.2. Compliance Requirements and Obligations Shall Include:-**

- I. Reporting obligations according to agreed formats;
- II. Abiding by the principles of the policy
- III. Abiding by the agreed quality, quantity, time and standards. (These shall be defined and agreed with stakeholders)

### **5.3. Non-Compliance**

Non-compliance to this Policy shall be managed in accordance with the relevant legal and regulatory provisions.

### **5.4. Review of Policy**

The established policy will be revisited every five years so as to test the success of the vision, goals and objectives targeted during implementation. The monitoring and evaluation will be done against a series of criteria that would effectively measure the level of success so that lessons learnt are documented, modifications needed are addressed and responses to current demands are fulfilled.