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Andrea Pregel	Collaborating with people with disabilities to conduct accessibility audits in healthcare facilities in low and middle income settings: tools and approaches	Andrea Pregel, Karen Smith, Cristina Abudo Pires, Camilo Moreira, Aurora Antunes	Limited accessibility of health infrastructure represents a major barrier preventing individuals with physical, sensory, intellectual, psychosocial or other impairments from equitably accessing health facilities in low and middle income settings. As part of an inclusive health project in Nampula Province, Mozambique, Sightsavers worked with the Forum of Organisations of Persons with Disabilities of Mozambique (FAMOD), the Ministry of Health and the Ministry of Gender, Children and Social Welfare to develop and test an accessibility audit package. Guidelines, checklists, report templates, training materials and a participatory scoring methodolog were developed by Sightsavers, combining Mozambican accessibility standards with universal design principles and recommendations from the 2010 American with Disabilities Act Standards fo Accessible Design. The package was translated to Portuguese and provincial representatives of FAMOD and the government were involved in the review and field testing of the tools in Nampula. The scoring matrix was developed by participants based on feedback and observations. The accessibility audit package was used in seven public health facilities in Nampula Province. Several barriers were identified, including inaccessible toilets, steep ramps and lack of information materials in accessible formats. Plans for infrastructural renovation were developed based on scores and reports compiled for each facility. Experience from this initiative demonstrates that the accessibility audit package is an effective instrument to assess the level of accessibility of health facilities in low and middle income settings and support planning of infrastructural renovations through participatory approaches.

hearing services in Malawi Methods

However, despite PAR aspiring to ensure the views of marginalised groups are central, disabled

		Population Health, University of Auckland, Auckland, New Zealand	 difficulties navigating their environments, and relied heavily on families to overcome transport challenges. Indigenous communities saw the legacy of transport infrastructure changes as disruptive and damaging, with major consequences for their physical, cultural and emotional wellbeing. Participants in richer neighbourhoods with higher levels of education, computer literacy and systems knowledge expressed more confidence in navigating barriers and advocating for themselves, demonstrating the influences of power, affluence and privilege. Discussion: The findings identify prevalent structural injustices in urban environments and u engage transport professionals and community stakeholders in an active, participatory co-learning process designed to stimulate disability-inclusive transport policies.
Margo Greenwood	Disability-focused community-based participatory research (CBPR): how is methodological learning shaping design and approach?	Margo Greenwood	Background For the last four years, Sightsavers and its partners have been implementing disability-focused community-

			Our experiences show that to join partners with diverse expertise requires much planning, diplomacy, and critical, reflexive thought, while emphasising the necessity of generating local ownership of findings. There also needs to be a translation of knowledge into a catalyst for disability-related policy change. With the right support for community research teams, peer-to- peer interactions enhance richness of data, local ownership and more equal distribution of power. Conclusion CBPR and methodological learning from it is a vital part of working towards the 2030 Agenda. It fosters shared responsibility, mobilizes all available resources and recognizes all as crucial enablers of sustainable development and change.
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Ruth Sanders	Using the Washington Group Short Set for monitoring access to eye care services by people with disabilities.	Ruth Sanders, Programme Monitoring and Evidence Advisor, Sightsavers UK Karen Smith, Senior Monitoring, Evaluation and Learning Advisor, Sightsavers UK Cristina Abudo Pires, Programme Officer, Sightsavers Mozambique Leena Ahmed, Programme Officer,	Sightsavers programmes aim to reduce avoidable visual impairment and ensure that people with disabilities have equitable access to eye health services. We are developing approaches to delivering inclusive eye health services and methods to monitor and evaluate them. One indicator tested in the past few years is the proportion of patients attending services who report a disability. In 2018 we developed new inclusive eye health projects in Bangladesh, Pakistan and Mozambique and measured disability among patients attending the eye care services in these projects. In each country, data were collected from cataract patients over three months using the Washington Group Short Set to determine disability. Using the recommended cut off points (a lot of difficulty or cannot difficulty or cannot difficulty other than seeing. Prevalence of non-visual disability was 39% in Pakistan and 40% in Bangladesh. Women, older people and those attending outreach camps were more likely to report a disability.

		Sightsavers Pakistan Rafiqul Islam, Senior Programme Officer, Sightsavers Bangladesh	their needs. It may be feasible to integrate the WGSS into routine data systems, however, questions around why certain people face more barriers than others remain.
Donna Koolmees	Developing a Needs Assessment Tool for Community Based Inclusive Development (CBID): Assessing and monitoring needs for case management.	Chandalin Vongvilay, Donna Koolmees, Manjula Marella, Wesley Pryor, Fleur Smith, Somphet Keovongxay, Bernard Franck, Samantha Pike, Somphet Keovongxay, Chantavad Nalesouphan	Background 8 <i>#" @</i> els of functioning. Whilst various CBID activities have been implemented in Laos data collection on the individual needs of persons with disabilities has been imprecise and inconsistent. With the USAID Okard CBID Demonstration Model, World Education and Nossal Institute of Global Health developed a CBID U UU

			associations (NPA) and government authorities work together to implement the National Disability Inclusion Policy and Strategy.
Kate Miller	Count Me In, an mHealth app, promotes nutrition and safe feeding for children with disabilities	Kate Miller, Zeina Makhoul, Jon Baldivieso	Children living with disabilities that impact feeding (e.g., cerebral palsy, developmental disabilities), suffer at an alarming rate from preventable malnutrition and dangerous feeding practices (e.g., supine feeding, altered bottle nipples, inappropriate food textures) that place them at risk for aspiration, pneumonia, and premature death. Caregivers are often not equipped with the knowledge and skills to safely nourish them and appropriate tools and services in low-resourced

early childhood settings

We used mixed methods to appraise, adapt and evaluate a disability inclusive training programme for ECDE caregivers in Malawi. Community based participatory methods were drawn on to understand the provision of early childhood development and inclusive education in rural Malawi and adapt an existing ECDE training programme to encourage more disability-inclusive approaches. We conducted a cluster randomised control trial to measure the effect of the intervention on the

	evaluation and communication		Education Research Database (an online open access database hosted by the REAL Centre, Faculty of Education, University of Cambridge), this presentation will critical engage with the processes of how evidence is being generated in relation to addressing issues around education of children/young people with disabilities in the Global South. It will identify patterns of what kind of questions are being researched, kind of methodologies being valued over others, and the role of persons with disabilities in shaping the research agenda. The presentation will conclude with reflections on the critical evidence gaps in the field, as identified by different stakeholders. It will also propose ways in which greater South-South collaborations in generating evidence can contribute to collective advocacy and change in efforts towards making education a reality for all children, including those with disabilities.
Elena Schmidt	Costing inclusive education of children with disabilities: analysis of expenditures of an inclusive education pilot in Senegal	Elena Schmidt, Thomas Engels, Shaneez Chatharoo, Astou Saar, Salimata Bocoum	Background The United Nations Convention on the Rights of Persons with Disabilities states that children with disabilities should have access to an inclusive, quality and free education. However the number of children with disabilities not attending school remains high. Inclusive education is often considered financially challenging for resource poor settings but there is little empirical data to make accurate budgetary projections. This study sought to identify the incremental expenditure of including children with disabilities in mainstream primary schools in Senegal, West Africa. Methods The data was collected from three pilot schools in Dakar, where a total of 290 children - primarily blind or severely visually impaired, were enrolled in mainstream schools in September 2011 -June 2017. The expenditure analysis was conducted retrospectively using accounting systems of the project partners. Results The total expenditure of the pilot over six years was FCFA 548,181,885 (1,077,618 USD). The average expenditure per child with disability academic year was FCFA 765,617 (1,505 US Dollars) ranging from FCFA 3,185,675 (6,760 US Dollars) in year one to FCFA 531,633 (893 US Dollars) in year six. The highest expenditure was for teaching support (40%), followed by education materials/assistive devices (15%). The largest expenditure input was personnel (26.1%) followed by event management (22%). Conclusion

		The study provides useful information, which can be used to make estimates of resources required to scale up inclusive education in Senegal and similar settings. However, more accurate prevalence data and an analysis of education budgetary allocations will be required to facilitate the scale up.
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Nathaniel	Disability and	Nathaniel
Scherer	common mental	Scherer1,
	disorders among	Shaffa
	Syrian refugees in	Hameed1,
	Sultanbeyli, İstanbul	lsotta Pivato2,
	-	Ammar Hasan
		Bek2, Bodour
		Alassil2, Selin

		3 Istanbul Sehir University and Koç University	regression analysis will compare key life areas between people with and without disabilities and/or CMD. Thematic analysis of qualitative data will be conducted. Implications: Results will inform advocacy for and planning of disability-inclusive and specialist rehabilitation and MHPSS services at the local level, as well as inclusive humanitarian action nationally and globally.
Klaus Minihuber	Inclusive Humanitarian Aid for Girls, Boys, Women and Men with Disabilities in Response to Cyclone Idai	Mirian Wester and Judith Baart	In March 2019, cyclone Idai hit Mozambique. It is estimated that 111 thousand girls, boys, women and men with disabilities are affected (INE, FAMOD & SINTEF, 2009). Although there exists some anecdotal information that persons with disabilities are being left out from humanitarian response, no study has been conducted yet that provides empirical evidence on the situation of persons with disabilities in the aftermath of Cyclone Idai. This research aims to address this issue by investigating the common facilitators and barriers experienced by persons with disabilities in accessing humanitarian aid. Qualitative research will be conducted between June and July 2019 in Sofala province, Mozambique. Interviews will be carried out amongst persons with disabilities and caregivers of children with disabilities, who were affected by cyclone Idai. In addition, focus group discussions will be held with staff members of both, governmental and non- governmental organisations involved in humanitarian aid. From this data, inductive analysis will be performed to reveal the themes, patters and meaning that emerge from the various stories. This information will be complemented by a quantitative analysis of secondary data derived from mainstream humanitarian actors on the inclusion of persons with disabilities in their response activities. Research has commenced recently, and analysis and finalization will take place in September 2019. The output will be a policy paper which addresses the common individual and environmental factors that either facilitate or hinder the inclusion of persons with disabilities in humanitarian aid. This will be used to advocate for greater attention towards the situation of persons with disabilities who are affected by disasters.

Daniel Mont

Angel PerezTechnology based solutions for the inclusive employment of solutions for the olsabilities in Bangladesh and KenyaAngel PerezTechnology based SakunthalaAngel Perez; NapPeople with Disabilities in Bangladesh and KenyaAngel PerezTechnology based solutions for the MapaAngel Perez; MapaPeople with Disabilities in Bangladesh and KenyaPerezTechnology based SakunthalaAngel Perez; MapaPeople with Disabilities in Bangladesh and KenyaAngel Perez; MapaPeople with Disabilities in Bangladesh and KenyaAngel PerezPeople with Disabilities in Bangladesh and KenyaAngel Perez; MapaPeople with Disabilities (PwD) experience higher levels poverty and socioecom disadvantages, resulting in low rates of studies to assess the impact of digital and kenya	y 2019. ved and proach, ips across it; with ability ng with ns for the omic ical Inclusion nd
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			 availability of job opportunities within the ICT sector are also influential enablers addressing access barriers to employment. I2i will develop, test and validate promising technology solutions identified to address access barriers to employment. The studies recommends further work be carried to investigate AT usage alongside its existing service range in four areas; adopt an online digital presence; adopt and adapt current AT and technology based solutions; contain AT products, services and systems endorsed by and renowned by PwD; and use available online as well as traditional face- to-face services.
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Bhavisha Virendrakumar	Disability inclusive elections in Africa: A systematic review	Bhavisha Virendrakumar, Elena Schmidt,	

			inaccessible physical infrastructure. Specific interventions to support inclusive political processes were described in several documents but the theory of change underpinning these interventions was generally poorly articulated and the effect of interventions was not reported. Conclusion There is a paucity of high quality studies on political participation of people with disabilities in Africa and particularly the effectiveness of interventions to improve the inclusiveness of political processes. Governments and international NGOs should be encouraged to use rigorous methods to evaluate the impact of interventions they support.
Vladimir Pente	Political participation and disability in Cameroon and Senegal: a cross sectional population based survey	Vladimir Pente; Rachel Murphy; Karen Smith; Ezekiel Benuh; Joseph Oye; Emma Jolley and Elena Schmidt	Background and objective This study aimed to measure the level of political participation of people with disabilities in urban areas of Cameroon and Senegal and investigate to what extent these countries deliver on their legal obligations under the United Nation Convention on the Rights for People with Disabilities. Methods A cross-sectional household survey was conducted in 4 cities in Senegal and 3 cities in Cameroon. Household residents of voting age were eligible for inclusion. Several 0 GBshct

ver, the study also identifies opportunities for improvement in the quality of care,
is by connecting children, caregiver, and other stakeholders, exchanging
iences and knowledge, as well as providing more knowledge and skills for
tors such as local partners and fieldworkers. Thus, the STEP pilot, which stands for
rt Tools Enabling Parents, was initiated for fieldworkers from four Africa(o)5(m)-4(f

burden of caregiving, (characterised by aloneness, challenges, stigma and discrimination), was transformed towards caregiver agency (defined by togetherness, capacity-building, acceptance and well-being). Impacts associated with caregiver
outcomes. Conclusions: This study contributes to the evidence relating to self-help groups recommended in the World Health Organisation guidelines for community-based rehabilitation.

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Morgon Banks	Impact of the Disability Allowance in the Maldives	Shaffa Hameed, Morgon Banks, Sofoora Kawsar, Hannah Kuper	Introduction: Social protection is an important strategy for addressing poverty amongst people with disabilities in many low and middle income countries (LMICs), including in the Maldives. This study aims to assess the impact of the Disability Allowance on poverty, quality of life and participation of people with disabilities and their families. Methods: A quasi-experimental study design was used, with analysis through difference-in- difference. Participants were recruited in 2017 through a nationally-representative population-based survey of disability (Washington Group Extended Set). All participants in the survey identified as having a disability (n=380) were matched by age-sex-location to a person without disabilities (n=331) as part of a nested case-control study. Additionally, new recipients to the Disability Allowance were recruited through routine enrolment (n=171). At endline, participants were revisited and asked similar questionnaries as in baseline. Primary outcome indicators include consumption poverty, quality of life (WHO QOL- BREF) and participation (SINTEF scale).

			health issues. All this indicate challenges for the extreme poor families that have a member with disabilities to graduate out of extreme poverty. The same approach will be replicated at the endline in 2021. At this time, researchers will apply the difference-in-difference methods for measuring impacts of the Project. The first information generated has been used to identify strategies to promote resilient livelihoods.
Meenraj Panthee	Strengthening the voices of Adolescent with disabilities.	Meenraj Panthee (Inclusion specialist), Plan International Nepal.	This research, commissioned by Plan International, CBM and London School of Hygen and Tropical Medicine was carried out by trained adolescents with disabilities having backup support by research experts in the year of 2018. The aim of the research was to understand what was important for the well-being of adolescents with disabilities (AWD) in Nepal. This research gathered information from a total of 52 young people 14-19 years old across four districts in Nepal through in-depth interviews, Focus group discussions and interview with 12 parents and teachers. Some of the key findings: A supportive family is extremely important for AWD. Many feel loved and cared for by their family. For some young people, there is a communication gap, especially for young people who are deaf. Many AWD describe a difficulty in transitioning to secondary school due to distances to travel compared to attending a local primary school. It was found issue of poor quality education, lack of accessibility. Sports activities in schools are not inclusive, or little or no sports is provided to them, even in special school settings. Early Marriage and Disability: Children are vulnerable to many forms of violence and child marriage is one of them. However, there is limited knowledge and understanding of the phenomenon of child marriage among Children with Disabilities; whether it affects them and if so, how? Therefore, an exploratory research was conducted in Nepal sometime ago commissioned by Plan International Norway, first to understand if at all disabled children are affected by child marriage, and if so,how? It was found that a large number of disabled children are impacted by child marriage due to a variety of reasons and hardship is further.

		I will make a detail presentation on findings of here mentioned both researchs along with efforts of Plan International Nepal to use of research findings in the conference.
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Sureshkumar Kamalakannan	Non- Inclusive Health system for Disability Inclusive Development:	

			 products are not affordable. Outdated equipment like axillary crutches and clubfoot boots are still in use. Health System financing: There is not a specific budget or allocation for each states in terms capacity building, training and service provision for PWDs in either public or private health care systems. Leadership and governance: There is no coordinated efforts between the department of health and social welfare. Much of the benefit that is provided are not accessible by PWDs. There is no regulation for institutional training, service provision, practice, professions related to providing care and support for PWDs. Conclusions: The existing health system must be inclusive of a responsive system for Disability rehabilitation and social care for PWDs in India.
Tess Bright	Assessing need for ear and hearing services in Malawi using the rapid assessment of hearing loss survey protocol	Tess Bright, Wakisa Mulwafu, Mwanaisha Phiri, Hannah Kuper, Islay Mactaggart, Jennifer Yip, Sarah Polack	Introduction No previous population-based surveys of hearing loss in Malawi have been conducted. Population-based data is required to plan services. A Rapid Assessment of Hearing Loss (RAHL) protocol has been developed to obtain this data in a more rapid and low-cost manner than conventional all-age surveys. This study aimed to i) estimate the prevalence and likely causes of hearing loss in people aged 50+ in Ntcheu district, Malawi using the new RAHL survey protocol ii) field test the RAHL protocol in a rural African setting. Methods A cross sectional population-based survey was conducted in November 2018. 38 clusters were selected using probability-proportionate-to-size sampling. Within each selected cluster, 30 people aged 50+ were selected using compact segment sampling. All participants underwent a hearing screening using smartphone-based audiometry (hearTest). Thresholds were obtained at 500, 1000, 2000 and 4000Hz. Otoscopic examination alongside a structured questionnaire was used to assess likely causes. Prevalence was estimate

the better ear (pure tone average >25dBHL and >40dBHL respectively). Those who had identified hearing loss or ear disease were asked about previous care-seeking, and barriers to access. The time to complete the protocol on each person was recorded.

Results

hearing loss was 35.6% (95%Cl=31.4- #@ -2.4). The majority was likely sensorineural in nature. The main barriers to accessing services included lack of awareness of need and service availability. Hearing aid coverage was <1%. The survey was completed in 24 days. The median duration per participant was 26.7 minutes (IQR=18.8-75.30).

Conclusion

The need for services in Ntcheu is high. The RAHL is simple, quick and provides information about the magnitude and likely causes of hearing loss which can be used to plan and monitor services.

Participants with vision and hearing loss are being assessed by a clinician to determine cause and service needs, including glasses and hearing aids.

Results:

We will describe advantages and disadvantages of different methods used for estimating

eligible persons with and without risk of disability, for a comprehensive questionnaire. The questionnaire comprised modules about general information and consent, sociodemographics, health information, wellbeing, access to community, and knowledge and attitudes on disability. We used age-appropriate modules for age groups 5-

			Conclusions Stigma affects the physical, economic, and psycho-social well-being of CP children and their families. There is need for a social ecological approach to stigma-targeted interventions at all levels.
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Islay Mactaggart	Water, Women and Disability in Vanuatu: Results from a mixed methods study	Islay Mactaggart, Jane Wilbur, Phil Sheppard, Luke Bambery, Relvie Poilapa, Judith Lakavai, Headly Aru, Sannine Shem	Background: Access to safe drinking water, sanitation and hygiene (WASH) are essential to human health and well

			 the nested case-control study. Only 15% of participants had access to safely managed water, which did not differ by disability status. However, households with a person with a disability were twice as likely to practice open defecation, and persons with disabilities were three times as likely to come into contact with faeces or urine whilst using the toilet. Women and girls with disabilities were twice as likely to miss activities because of their period. Qualitative data collection is ongoing, with results pending for inclusion in this manuscript. Conclusions: Access to safe WASH in Torba and Sanma provinces is low across the population, and lower for persons with disabilities. Inclusive WASH programming is urgently needed to support the whole population and particularly people with disabilities in accessing safe WASH.
Jane Wilbur	Feasibility study of a menstrual hygiene management intervention for people with intellectual impairments and their carers in Nepal	Jane Wilbur, Thérèse Mahon, Belen Torondel, Shaffa Hameed, Hannah Kuper	Background: The Bishesta campaign is a menstrual hygiene management intervention that aims to meet the specific requirements of people with intellectual impairments and their carers. It was designed and delivered in the Kavre district, Nepal. This paper asibility and acceptability. Methods: The Bishesta campaign was delivered to ten people with an intellectual impairment and their eight carers. Data on the feasibility and acceptability of the intervention was collected through: structured questionnaire to participants before and after the intervention, process monitoring data, post-intervention in-depth interviews with all carers; key informant interviews with all facilitators and staff involved in the campaign, as well as ranking of the perceived appropriateness and acceptability of campaign components carers and facilitators. Results: The Bishesta campaign is acceptable for the target groups, facilitators and implementers. Participants used most of the campaign components; these made the target behaviours attractive and enabled participants to carry them out with ease. The campaign was implemented as planned and there have been improvements across all

Conclusion: Within the small sample size, the Bishesta campaign appears a feasible programme to ensure that one of the groups most vulnerable to exclusion from menstrual hygiene management interventions is not left behind.	target behaviours. The focus of this study was feasibility, not limited-efficacy. However, indicative positive outcomes from this small sample were observed.
	programme to ensure that one of the groups most vulnerable to exclusion from

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١	which included awareness raising among staff, teachers and partners and embedded
(disability questions in all monitoring tools and reporting. Teacher professional
(development materials were made more disability inclusive as part of the adaptation.

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Ben Thatcher		

			Sources remit overlaps multiple areas which the conference intends covers. In particular, the management, use and impact of evidence (and other information) e.g. displaying what evidenced exists.
			Happy to answer any more questions on Source, if you find it relevant for the conference.
Sureshkumar Kamalakannan	Barriers in Accessing Public Transport Services by Persons With Disabilities in Hyderabad, India	Lakshmi Archana Yarasani Sureshkumar Kamalakannan	Background: Globally 15% of the population lives with some form of disability. Persons with disabilities (PWDs) experience difficulty in accessing health care services compared to persons without disabilities. Access to transportation is considered a key barrier to access health. This study aimed to assess the barriers in accessing public transport services for persons with disabilities in Hyderabad.

Objectives:

To identify the availability of disabled friendly transport services in Hyderabad, To assess the barriers for PWDs in accessing public transport services

Methods: The study followed a cross sectional m0 g0 1S10.04 Tf1 0 0 1 5(ag)15e(v)-4oak

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International launched to promote inclusion and social justice through sport.								
Implementation: P2I is a 5-day training that has been implemented in refugee camps in								
Jordan and Ethiopia, in emergencies context in Mali and in development context in								
Togo, Uganda, Pakistan, Guinea and Guinea-Bissau. Participants include key actors from education, social, disability, civil society and sports sector, having children, girls and								

4th.rehabilitation needs assessed were; Physical Therapy, Surgical/ Medical, Orthotic/Egbosionu,Prosthetic, Mobility device/ Service, Vocational, Mental Health, Educational, SocialUdoka Donaldwelfare, Housing, and Communication.

		significant concern for their daughter with a disability and had a positive approach to the challenges they faced, though they had difficulties physically accessing services. The study data challenges the predominant dialogue around the intersection between gender and disability in the region, which conveys a double disadvantage.
Shubha Nagesh	Unearthing the hidden young girls with developmental	

the labor market in
the state of Bahia,Veronica
Maria CadenaBrazil: a descriptive
studyLima

The consultations reveal that the delivery mechanism of the government is not that effective which it supposed to be.

There is no interdepartmental coordination to leverage schemes and programs.

Majority of the schemes are unreached to remote parts and rural areas of the country and persons with disabilities from rural areas are deprived of those services and facilities.

The analyses drawn from the findings clearly reveal that CWDs have still difficulty in accessing education due to varie government is not

	inequality and persons with deafblindness	input from ICED, LSHTM and support from IDA.	people with deafblindness are listened to, have access to health, education and training, and are supported to participate fully in the life of their community. The report is framed within the CRPD and is structured in relation to the SDGs. The report presents quantitative and qualitative research on: poverty levels of people with deafblindness (SDG1); health such as the level of additional disabilities (SDG3); education levels and how far children with deafblindess are excluded from school (SDG4); gender issues (SDG5); levels of employment (SDG8); and estimates levels of inequality compared to people without disabilities (SDG10). u by deafblindess is greater than previously thought. Despite impressive achievements by individuals and specialist organisations, the report finds that the issues faced by persons with deafblindness have largely been ignored, and persons with deafblindness o) 8 u among governments, consistent definition and measurement of deafblindness with collection of disaggregated data, as well as additional research.
Goli Hashemi	Barriers to accessing primary healthcare services for persons with disabilities in low and middle- income countries, a meta synthesis of qualitative studies	Goli Hashemi, Hannah Kuper, Mary Wickenden, Tess Bright	Access to healthcare contributes to the attainment of health and is a fundamental human right. Approximately 400 million people worldwide lack access to healthcare services, with a greater proportion of this population belonging to marginalised groups defined by age, gender, income, ethnicity, sexual orientation and disability. Persons with disabilities are believed to experience widespread poor access to healthcare services due to inaccessible environments, discriminatory belief systems and attitudes. Primary healthcare services are believed to meet around 80-90% the healthcare needs of people across their lifetime. While there has been an increasing number of research on access to primary healthcare services for persons with disabilities over the past decade, the qualitative data on these barriers have not previously been systematically reviewed. A systematic review and meta-synthesis of qualitative studies exploring barriers to primary healthcare services experienced by persons with disabilities in LMICs was undertaken. Included studies were analysed using a thematic synthesis approach. 7 not, is influenced by barriers in three core areas: informational, belief system, and

	Conclusion: The studies demonstrate that community-based disability practitioners acilitate access to health, education, livelihoods and social development at local government level.
Minihuber Persons with Disabilities in Southern Nations, Nationalities and Peoples Region, Ethiopia KK KK H G G G G G G G G G G G G G G G G	The Regional Government of SNNPR and the Ethiopian Center for Disability and Development are working together to improve the quality of life of persons with disabilities in the region by targeting multiple aspects simultaneously, such as health, education and livelihoods. A survey was carried out in 2018 to measure the current quality of life of persons with disabilities in SNNPR. We used a translated version of the WHO CBR Indicator questionnaire, and ncorporated the Washington Group Short Set as our measure of disability. Data was collected in ten towns amongst 966 respondents. Key results included: Health. The majority regarded their health to be good (66%), but if they did need health are more than half indicated they were unable to get needed care, mostly due to the cost of the visit. Rehabilitation. Over half indicated needing rehabilitation care, but not receiving any. Mostly due to cost, but also because they did not know where to go, or the facility was oo far away. Only a very small group said that they have a well-working assistive levice. diducation. Most adults have had no schooling or only primary school, with those with togonitive disabilities least likely to have any school. .ivelihood. Adults with disabilities are likely to be self-employed if they have any work at all. 83% say they do not have enough money to meet their needs. A quarter indicate not deciding over their money. Gocial. 65% say they feel respected by their families, and only 38% feel respected by other people. Very few participate in community meetings. Only just over half belongs o a DPO.

			Conclusion. Altogether, quality of life of persons with disabilities seems to be low in all aspects of life. However, large variation is seen amongst different genders as well different levels and types of functioning.
Lauren Avery	Disability, Zika and Social Movements in Brazil	Lauren Avery	The research aims to understand the priorities of the movements and organisations involved in citizen advocacy for children born with Congenital Zika Virus Syndrome (CZVS) in Brazil. The social movements led by families of children born with CZVS has #
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			to public healthcare and
			transport, education and citizenship rights (União das Mães de Anjos, 2019; Damasio, 2016) and the rights of families to receive support as carers (Soares, 2018). The

application of inclusive strategies in a low-resource environment, and the implications of learning from programming for wider system change. Key questions are:

			Specific technical interventions, alongside partners and CBM Country Offices, facilitate involvement and commitment of Ministries of Health. The work of partners will
			Conclusions: This participatory multi-level and multidisciplinary approach has an effective long lasting impact because it is embedded into international and local frameworks and systems.
l Milan M. Markovic	Sexual and Reproductive Health of Women and Adolescent Girls with Disabilities	Gradimir Zajic; UNFPA Serbia, Organization	

	exercise their rights related to SRH, removing barriers to health care services and reducing prejudice in the communities.
	The research has served as a basis for evidence-based advocacy identifying number of recommendations concerning availability of information, access to health services and, awareness and attitudes towards sex, marriage and family.

Lucy Delaney