

International Development Committee

Oral evidence: FCDO and disability-inclusive development, HC 1747

Tuesday 17 October 2023

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Members present: Sarah Champion (Chair); Mr Richard Bacon; Theo Clarke; Mrs Pauline Latham; Chris Law; Nigel Mills; Mr Virendra Sharma.

Questions 1 – 42

Witnesses

I: Iryna Tekuchova, Researcher, Fight for Right; Anna Landre, Global Research and Response Lead, Partnership for Disaster Strategies; Ophia Bwanali, Lower Limb Prosthetic Technologist, Leonard Cheshire Zimbabwe.

II: Sunday Isiyaku, Country Director for Nigeria and Ghana, Sightsavers; Kevin Sudi, Kenya Country Team Programme Manager, CBM; Lauren Watters, Director of Delivery and Impact, Able Child Africa.



Examination of witnesses

Witnesses: Iryna Tekuchova, Anna Landre and Ophia Bwanali.

Q1 Chair: This is the International Development Select Committee's inquiry into the FCDO and disability-inclusive development. This is something that the Committee really cares about, because, while Governments often talk a good talk about being disability-inclusive, we find from witnesses we speak to that that does not always happen on the ground. We are looking to really lift the lid and see whether the money that British taxpayers give expecting it to go to people with disabilities actually reaches them, and whether some of the schemes that we are funding that claim to be disability-inclusive are not in reality.

We are asking our witnesses to be very frank with us. We understand that they might want to follow up some things in writing if we are getting a bit too specific in the details, which is absolutely fine. We have two panels. I will ask panellists to introduce themselves—some are in the room and some are remote. If I could start with Ophia, would you mind introducing yourself and the organisation that you work for, please?

Ophia Bwanali: I am Ophia Bwanali. I am currently working for Leonard Cheshire Disability Zimbabwe as a lower-limb prosthetist. I am also an above-knee amputee. I was involved in a traumatic car accident. I am a mother and I am living with a disability. I am working as an activist for Leonard Cheshire Disability where we create opportunities for persons with disabilities in schools and workplaces.

Iryna Tekuchova: My name is Iryna. I am currently pursuing my PhD studies. I explore disability in EU external actions, but today I would prefer to speak to you as an activist. I am a member of Fight for Right, a Ukrainian organisation of people with disabilities, and also part of the volunteer team that, last year, managed to launch a unique emergency response mechanism for people with disabilities. Together with our partners, including Anna, and thanks to her help and that of other volunteers, we managed to save more than 20,000 people with disabilities.

Chair: Amazing.

Anna Landre: I am Anna Landre. I am the global research and response lead at the Partnership for Inclusive Disaster Strategies. I am also doing my PhD here in London at the Global Disability Innovation Hub. That PhD is on creating a global map and database of organisations of people with disabilities, in part so that we can have better, more streamlined and more rapid emergency responses that are inclusive.

Q2 Chair: Could I ask each of you to speak a little about both your work and that of the FCDO on delivering and promoting disability-inclusive humanitarian responses or in conflict situations?



Anna Landre: I often work to ensure that organisations of persons with disabilities, or OPDs, are protagonists in these responses, because we find that, when they are not, responses are out of touch. The FCDO is making really big strides to do that. It is still consistently difficult to locate OPDs, as they oftentimes do not have a website. They might be very well connected with their local community, but not so much with the global community, particularly in humanitarian aid. As Iryna will share a lot more of, they are very powerful in being able to respond, to know the needs and to create efficient and needed projects and programmes. That is a lot of what I try to do at the partnership, because OPDs really are at the heart of a good and rapid response.

Q3 **Chair:** Iryna, when the Russians invaded Ukraine, we were hearing from witnesses that one of the problems with getting local organisations involved was that there was not a map or an audit of where all those organisations were. Is that similar for organisations that work with people with disabilities?

Iryna Tekuchova: Unfortunately, yes, because we have a huge discrepancy between those well-established organisations of people with disabilities that have been functioning for perhaps 30 years, and this new movement of progressive organisations that really try to make an impact in the country. When we talk about the new generation of organisations, they are more keen to network and to get together. That is the experience that we had last year. All international partners that helped us to build the emergency response mechanism were international organisations of people with disabilities, which just contacted us; they wrote to us on Twitter and Facebook. I do not know, Anna, whether you googled us or searched for us.

Anna Landre: Yes.

Iryna Tekuchova: It was really invaluable back at that time, because there was just me—I was the only person outside of the country back at that time—and I had to run this 24/7 for a week, because people were still waiting and needed help; it was a matter of hours or days. A British research initiative showed that, in the first six weeks post the invasion, all international organisations left the country. All humanitarian aid was concentrated in the hands of local NGOs, which organised and delivered help to people in place. There were more than 1,700 newly established initiatives and more than 150 pre-existing organisations, so we were basically left alone, without any help, which is something that we discussed.

We had to reinvent the wheel, which is the most surprising thing, because international organisations that are supposed to know what to do left us. Without wanting to name them, we tried to contact certain prominent international organisations for five weeks, but they did not respond. They did not respond to emails; they did not respond to phone calls. The only one that helped us was an international organisation of



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people with disabilities. This is inspiring and was, for us, also a discovery of power of the disabled community.

Q4 Chair: That is both shocking and depressing, and I hope it is something that we do not see anywhere else. If you cannot learn by getting it wrong, that is a pretty sad indictment.

Ophia, what about in Zimbabwe? How do you find the support for people with disabilities? How do you find the UK Government's projects? Are they reaching the right people?

Ophia Bwanali: I have not worked with FCDO programmes before. There is no partnership with the FCDO.

Chair: We have a little problem with your line, Ophia. What support is there in Zimbabwe for people with disabilities?

Ophia Bwanali: There is support for people with disabilities, but it is minimal, and it is difficult to ensure that it reaches the right people. We have had some disasters. Fortunately, we do not have conflicts in Zimbabwe, but we have natural disasters that are hitting us. We are getting little to no help, especially in marginalised areas. We need to ensure that these are adequate, especially in hard-hit areas, where we were hit by Cyclone Idai in March 2019. A lot of women and girls were affected by this disaster.

Chair: Ophia, we are having a bit of a problem with your line, so we might come back and ask you to write if we have not managed to capture all of that, because what you were saying was really interesting.

Q5 Theo Clarke: Iryna, what are the key measures necessary to ensure disability inclusion in humanitarian and conflict responses?

Iryna Tekuchova: My answer might be simple but hard to implement. Humanitarian action run by people with disabilities and by organisations of people with disabilities is one of the key components in ensuring inclusivity in the whole process. Unfortunately, after two years, OPDs are still excluded from this process. Why does this happen? The UN and other organisations remain the largest distributors of humanitarian aid for Ukraine, but at the same time, UN records show that last year they accumulated around \$4 billion to support Ukraine and only 0.12% of that money went directly to national organisations. This number increased from last year—it is funny, because I like this number—when it was 0.003%.

The example related to FCDO is that, in June this year, it allocated an additional £16 million to support Ukrainians, including those who were affected by the destruction of the Nova Kakhovka dam. It distributed money between three main donors: the Red Cross, OCHA and the International Organization for Migration. Here, I would like to concentrate particularly on OCHA, which is a very interesting example. The UN Office for the Coordination of Humanitarian Affairs operates in Ukraine through the Ukrainian Humanitarian Fund, which has a cluster membership



system. In order to be eligible to get direct finances from OCHA, you have to be an eligible partner. They currently have 130 eligible members, none of which are organisations of people with disabilities, including in the age and disability cluster. What do they do? They invite organisations of people with disabilities to be partners, but partnership status does not allow organisations to claim direct funding.

Q6 **Chair:** Do you think that they are equal partnerships?

Iryna Tekuchova: No.

Q7 **Chair:** Why?

Iryna Tekuchova: Organisations of people with disabilities are just used in order to get knowledge and expertise, but not to be involved in their project implementation process. There might be various reasons for that. OCHA is a complicated and highly bureaucratised mechanism, and it is difficult for newly established organisations of people with disabilities to enter it. However, it should not be an obstacle for such large donors not to take any active measures to include all organisations in the process. You have a cluster on age and disability and you have more than 100 OPD partners, but none of them is eligible to claim finances. That is the issue.

Maybe the FCDO might consider concentrating more finances and think about how to directly install connections with local organisations. We need and crave these connections. We crave stable partnership, we crave support, we crave your expertise. Very often, when you get funding—and this does not relate to the FCDO—through two or three intermediary organisations, you do not have access to the donor. You have no possibility to communicate or use the platform to speak out or to get networking and a connection, which is something that is important.

Q8 **Chair:** So you are a tick box.

Iryna Tekuchova: Without direct distribution, without direct support and without supervision and monitoring, I do not think that we will reach real disability-inclusive humanitarian action.

Q9 **Theo Clarke:** Thank you, Iryna. Anna, in your opinion, how well do UK-funded programmes embed disability inclusion in such situations?

Anna Landre: A lot of progress has been made since the first strategy in 2018, but there is quite a bit to go. The main way that it is measured is the DAC measure, which is a 0 to 1. If you do not mention disability at all, you get a 0. If you mention disability at least once, even if it is a footnote, you get a 1. If you have some sort of significant inclusion—and that is difficult to define—you get a 2. That is far too vague. We need to do much better data collection and much better monitoring and evaluation.

What a lot of aid agencies are doing nowadays is using, say, the past five years of their programme outcomes as an evidence base and saying,



“Where is disability in all of these? What should we be measuring? Did we measure it?” and looking at that and how things are changing or not. That is certainly something that the FCDO should be doing.

It is great that we have implemented, for instance, the Washington group questions. That is a really good start. They ask things like, “How much difficulty do you have walking?” and it will be no difficulty, some difficulty or a lot of difficulty. It goes through five impairment types; but that is not at all diagnostic in terms of type of data. We need to do a lot better. The Washington group questions are a floor, not a ceiling. Data collection is somewhere where there is quite a bit to go, and then it is about having a focal point in the FCDO to say, “We are collecting all of this data. Who is looking at it across programmes? What are we doing with all of that data that we are collecting to ensure that it is leading to change and improvement?”

I also want to underscore what Iryna said in terms of reinventing the wheel every time. That really is what is happening, whether it is the FCDO or quite a few other organisations. With respect to disability, what we do at the partnership is a disability-confident rapid response protocol. First, we look at the pre-emergency disability context in order to get a sense for that. How many disabled people are there and of what types? In what conditions are they living? How many people are institutionalised? Immediately after that, we get in contact with OPDs. It is still a scramble every time with a lot of FCDO programmes, which is a missed opportunity.

Finally, I would speak a bit to the cluster system as well. In the UN cluster, there is an open space for a leader with respect to assistive technology. Right now, in the whole cluster, no one owns that. Because of the UK’s AT2030 programme, which we work with a bit at the GDI Hub, there is an open space for a leader there, and so I would encourage the UK to look to fill that space. Ukraine was the first time that assistive tech was ever delivered in these AT10 kits, and it was only 3,000 pieces of AT.

Q10 **Chair:** What is it?

Anna Landre: There were 10 very simple products, including wheelchairs, shower chairs and incontinence pads. We are talking about low-tech AT, and there were only 3,000 items in total for all of Ukraine.

Chair: For the whole country.

Anna Landre: Yes.

Chair: Wow.

Anna Landre: And it happened only in the last few months, so this was not rapid. It was two and some odd years in.

Chair: That is extraordinary.



Anna Landre: Yes, almost two years in. There is a big gap there.

Finally, we need to do a lot better on institutionalised people. They are consistently getting left behind. The FCDO mentions institutionalisation in the strategy, but there is really no follow-up on that. Institutionalised people are always living in the most horrid conditions in an emergency.

Chair: We heard a lot about children who were in care in Ukraine, but we did not hear anything about adults and older people in care homes, for example. Thank you for raising that point.

Q11 **Mrs Latham:** Iryna, how can the UK make sure that it is really well prepared to roll out disability-inclusive assistance in humanitarian and in conflict situations?

Iryna Tekuchova: I would narrow my answer down into the contextualisation of strategies and programmes. How are they implemented and how are they sustainable? I will give you some general examples, which might be useful for you. For instance, last year, two of the world's largest international donors launched a temporary shelter for people with disabilities and elderly people in a small town close to the Dnipro region, not far from the front line, so it is a good objective, and I am sure that they have their own targets, et cetera.

Part of this project was the purchase of certain equipment as well as conducting certain repair works. Surprisingly, in the list of those repair works, there were no measures to increase accessibility. The facility was a school, and no school in Ukraine is accessible. Nothing was done to increase accessibility. The shelter ran for probably a couple of months, and then they closed the project. They reported properly and efficiently on this, but not only did they not meet the objectives and not help internally displaced people with disabilities in place at this education facility, but it is about the implementation of article 24 of the CRPD on inclusive education. Once every four years, this education facility becomes a polling station, which is an implementation of the right to vote.

It is a general misconception that humanitarian action is one-time aid. It is not true. There is always a component of sustainability that can contribute to long-term results and, while designing and programming any actions, it is better to think about it in advance and to include experts on disabilities before, not afterwards. That is valid too for donors in many cases. Not only do organisations of people with disabilities have to implement it, but donors also have to understand that including the expertise of representatives of the community is essential, because I am pretty sure that this mistake would not have happened if there had been an expert on disability at any stage in the implementation process.

Q12 **Chair:** Many years ago, I got money to build an arts centre, and it was conditional that it was fully accessible and that we had people with disabilities on our design panel to make sure that it was. Anna and Iryna, does the FCDO put similar conditions on its funding? Do you know of



other donors that put similar conditions on their funding?

Anna Landre: The FCDO does to all, to my knowledge—if there are exceptions, I do not know of them—but I am not aware of any follow-up. No one is going to evaluate whether a shelter funded by the FCDO is complying with standards of, in this case, the Equality Act. It is common practice to do that with countries that are large humanitarian donors. The US does that; anything that the State Department or USAID donate to has to be compliant with the Americans with Disabilities Act. There are similar issues with follow-up, though, so that is something that needs to be looked into. For instance, when we were in meetings with the UN cluster system with respect to Ukraine, it was reported that 90% of existing shelters were not accessible, and there were no repercussions for that.

To give a bit of an answer to the last question as well, one of the UK's biggest strengths is its ability to leverage its money and influence to hold the international humanitarian system to account in ensuring that inclusion. Part of that could be done under CRPD article 32, but there is a real absence.

We talked recently about this story where two people who came to us for aid, who were wheelchair users, had called the Red Cross because one of them had a pressure sore. The person who answered the phone at the Red Cross said, "We do not work with people with disabilities. You should call the department for social protection. They handle disability," meaning, "Call the Ukrainian Government," which is at war right now. We ended up helping them, but there should be repercussions for that. That should not be happening.

Chair: That is extraordinary.

Q13 **Chris Law:** Ophia, can you give us an example of how a well-planned disability inclusion policy can have wider benefits in terms of something that is specifically happening in your area?

Ophia Bwanali: When policies are implemented, no groups are left behind. If we look at a situation in Zimbabwe, there are marginalised groups. Especially women with disabilities have no voice. Policies that are introduced can enable women to get involved in decision making, and then people with disabilities will live a life with dignity. They can also contribute to the economy when they are empowered by those policies. People with disabilities are affected when there is implementation of disability-inclusive policies.

Q14 **Chris Law:** Iryna, how important is disaggregated data collection to ensure disability inclusion in humanitarian and conflict situations?

Iryna Tekuchova: It is invaluable. If you really want to target and help a certain group of people, qualitative and quantitative data collection is a must. You cannot imagine how often we get contacted by businesses or international organisations with requests like, "We have 1,000 items. Can you deliver them to people with disabilities living close to the front line?"



That means it is a failed project, because they did not assess whether people really needed the items. We try to ask, “When you put the amount in the project proposal, how did you calculate it? Did you make any assessment? Did you contact local organisations?” They very often have direct access to the community. “Did you ask about the amount?” But the project is running over; they have a thousand items in their store—clothes or whatever—and they need to close the project, but have no one to give it to. Data collection is key, not only to save money but to provide targeted support to people who really need it. Very often, what we think people need and what they actually need are different things. Data collection is a must.

Q15 **Nigel Mills:** Ophia, from your perspective, how well does the FCDO engage with NGOs who are delivering UK aid programmes? Is it better or worse than other partners that you work with?

Chair: Ophia, can you hear us? It is not looking good. Anna or Iryna, are you able to answer that?

Anna Landre: I can speak a bit to that. The UK is better. The UK is certainly one of the leaders, but we are much stronger on rhetoric than we are on implementation, and I do not think that is out of ill will or out of trying to lie. It is that we do not yet have the proper indicators to check what that we are doing is working.

In the FCDO theory of change, there is maybe a level missing between priorities and outcomes in terms of, “How are we getting to that? We have made our priorities, but how are we getting to the outcomes?” in terms of a roles, responsibilities and accountability framework. There really is a lack of concrete actions that will lead to those priorities being realised. You cannot just say in the final sentence, “In our project, we will make an effort to include women and people with disabilities”, because that does not lead to change, so there is a missing layer there of actions and indicators.

Q16 **Nigel Mills:** We recognise the need. We just have not worked out how to do it.

Anna Landre: Yes.

Q17 **Mr Sharma:** Iryna, can you tell us how climate change impacts people with disabilities differently?

Iryna Tekuchova: It is an interesting question, because I personally think that climate change is just another emergency and sphere, alongside war, that requires immediate actions in order to prevent larger negative consequences. Together, war and climate change are certainly toxic problems. However, they can be tackled with common solutions. After all, it is all about accessibility. It is all about giving people equal chances for survival. We do not provide more. We do not provide less. We just try to give equal chances.



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In terms of Ukraine, one of the solutions to these large-scale problems might be the development of comprehensive recovery and reconstruction strategies. We do not need to wait until the end of the war, because reconstruction is an ongoing process in Ukraine. It is just that, unfortunately, we again need international partners to supervise and to help activate multilateral co-operation in order to understand what is going on in a certain region and how these construction works are done, and maybe to use conditionality as a mechanism for financial aid. Unfortunately, at the moment, from what we have seen, we do not witness inclusive reconstruction.

Q18 **Mr Sharma:** Anna, as greater emphasis is placed on combating climate change through development programmes, how can we ensure that disabled people are fully included in this work?

Anna Landre: We know that disabled people are two to four times more likely to be critically injured or killed in the event of a disaster, and we do not have any data that suggests that it is any different in a climate emergency, so it is clear that disabled people are some of those most impacted by climate change and, unfortunately, also by mitigation and adaptation programmes that do not take disabled people into account.

For instance, mitigation policies often ban single-use plastics. Even basic things in the UK, like the banning of straws, has had impacts on disabled people who use that as a drinking aid and cannot use plastic alternatives. We see mitigation policies that are not analysed through a disability inclusion framework compounding the effects of climate change. The same is true of adaptation programmes and policies.

In development, we have gotten a sense for the gender lens. We need to do the same for the disability lens for every project that we are doing. Even in the UK, electric vehicles have been one way of looking at the effects of climate change and changing our behaviour with respect to them, but you see that charging stations are typically not accessible to wheelchair users, so we are not quite there yet. We need to be looking through that lens in our development programmes.

Q19 **Chair:** Ophia, I am sorry that we have not been able to reach you. We will write those questions to you and ask you to respond, because we really want to hear your voice on this. I am sorry that our technology has let us down.

Ophia Bwanali: I can hear you.

Chair: In that case, the panel have, in summary, been saying that the problem is that people with disabilities are not consulted about the projects or included in the delivery of the projects, and that not enough data is being captured before, during and after projects to make them better. Would you agree with that summary in Zimbabwe or do you have examples of where it is working well out there?



Ophia Bwanali: I agree with that. Here in Zimbabwe, they view people with disabilities as people who just need sympathy, so they make decisions for them in their absence. For example, when we are talking about climate change, they are not included in those risk reduction committees. They are just charity cases. They will just be carried wherever they want to go. Women or people with disabilities are excluded. Even when a disaster is coming, the information will get to them last. During Cyclone Idai, some women with disabilities were caught unaware. They had a hearing impairment, so they could not move to areas of higher ground, because the information could not reach them. When they were planning, people with disabilities were not included.

Chair: Thank you very much for that. I am incredibly disappointed and quite angry about what I am hearing, so please be assured that we will be following this up very robustly and championing change whenever we can see it. It is appalling that people with disabilities are not even being asked what they need, let alone delivered it. Thank you very much. We are now going to switch to our next panel, which is all online, so we hope that the signals are better.

Examination of witnesses

Witnesses: Sunday Isiyaku, Kevin Sudi and Lauren Watters.

Q20 **Chair:** Could I start with Lauren? Could you tell us a little bit about yourself and your organisation, focusing on how you promote disability inclusion across UK aid projects?

Lauren Watters: Thank you for having me. Good afternoon, everybody. My name is Lauren Watters. I am here today with two hats on. I am the director of delivery and impact for an organisation called Able Child Africa, which is the leading UK-registered organisation working exclusively for children and youth with disabilities. We work across east and southern Africa with seven partners. I am also here today with my Bond DDG hat on. Bond DDG is a group of 110 UK-registered organisations that work in disability-inclusive development, both disability-specific and mainstream. I will be drawing on both experiences in terms of the UK's development work on disability inclusion.

Q21 **Chair:** Dr Isiyaku, could you introduce yourself and the work of your organisation, and specifically focus on promoting disability inclusion across UK aid programmes?

Sunday Isiyaku: My name is Sunday Isiyaku. I work for Sightsavers in Nigeria. I am the country director for Sightsavers in Nigeria and Ghana. I have been working for the organisation for over two decades. Sightsavers is a avoidable blind and disability rights organisation. Over the years, we have received substantial funding and support from the FCDO. One of the positive aims is disability inclusion in development. We have programmes



that we run to help in terms of ensuring inclusive health in hospitals and facilities, and making them quite accessible.

Also supported as part of that is an inclusive education programme, making sure that children with disabilities have access to mainstream education and that we create awareness and enable policies and laws that promote mainstream inclusion of children with disabilities. We have also worked in terms of a working procedure on economic empowerment, focusing on youth with disabilities, creating an environment for them to be aware that they have the capacity to be able to formally apply for jobs. In doing that, we also engage with employers to promote employee confidence and make them understand that persons with a disability do have the capacity to perform work. That is the broad spectrum of thematic areas.

Q22 Chair: Thank you, Dr Sunday. I have really bad tinnitus, so I have problems hearing. Your sound is very low. While I turn to Kevin, I wonder if you could try to put the sound up on your computer screen, because there is not much that we can do. We can see you beautifully. We just cannot hear you quite as beautifully.

Kevin, we can now see you as well as hear you. I wonder if you could introduce yourself and then talk about embedding disability inclusion within FCDO-funded programmes.

Kevin Sudi: Thank you, madam Chair. My name is Kevin Sudi. I am the programme manager for CBM Global in Kenya, where I work to support the design and delivery of disability-inclusive programmes. CBM Kenya and CBM UK are part of the CBM Global Disability Inclusion federation that works in partnership with people with disabilities to fight poverty and exclusion in the world's poorest communities, and also to prevent blindness, improve health and build inclusive communities.

Q23 Theo Clarke: Lauren, what is your assessment of the FCDO's disability inclusion and rights strategy?

Lauren Watters: It is a big question. The first thing to say here is that there is a consensus among our members from the Bond Disability and Development Group that the strategy is well informed. It is an ambitious framework for approaching disability-inclusive development.

The message that I would like to leave you with by the end of this answer is that there is a strong belief that the approach taken to delivering the strategy falls short of the commitments, which speaks to what one of the panellists said previously, in that the commitments are there, but the how to do it is missing.

We are talking about a big population, which you probably know. We are talking about 1.3 billion people—one in six people globally—who are living with disabilities. The majority of these are living in middle and low-income countries, so there is no doubt that there was a need for a strategy at this level. When it was published, the Bond Disability and



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Development Group welcomed the strategy. We thought that there were many aspects that really demonstrated UK leadership in disability inclusion.

I just want to pick up on a few of these, because they are important. One thing that the UK is really taking leadership on is prioritising meaningful engagement of people with disabilities. Again, this is in terms of what is written in terms of the commitments in the strategy. There are commitments to the formation of and ensuring the sustainability of these groups.

Intersectionality is also a really strong point and something that our members picked up on. There is a really clear understanding of what intersectionality means in the strategy and how different levels of inequalities can compound to make barriers more complex for people with disabilities.

The third point that a lot of our members raised is that girls and women with disabilities came out of that strategy very strongly. There was a clear recognition of the violence that women and girls have a higher risk of experiencing in their lives.

Finally, as was mentioned in the first panel, we were really pleased with the forward-thinking commitment to expand the FCDO's inclusive work on climate change. We know that this is an emerging area. It is going to need vast amounts of investment going forward, and people with disabilities need to be engaged in that conversation, so it was great to see that in the strategy.

As Able Child Africa, we were particularly pleased to see continued big commitments made to inclusive education and data collection in that area and, for the first time, a mention of inclusive safeguarding and a commitment to build up child protection systems.

That being said, it is clear that the "leave no one behind" strategy is front and centre of the disability inclusion and rights strategy, but in a survey that we did in response to this inquiry, 95% of our members said that they were not confident that the FCDO was going to deliver on the commitments made in the strategy as well as in the Global Disability Summit in 2022.

This lack of faith in the realisation of the strategy is largely linked to the cuts, which I know this Committee has looked into. We also know that the results from the equalities and impact assessments were disastrous for people with disabilities. It is also linked to the way that the FCDO has approached the delivery of the strategy. Right now, it is very difficult for us as a sector to really hold the FCDO to account on the commitments that were made in the strategy, because we do not have eyes on that delivery plan. In the survey that I talked about earlier, 100% of our members thought that the survey should be published and made publicly available, but it currently is not.



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As the DDG, we were asked to give top-line feedback on the delivery plan, and we shared some recent feedback, but we were not permitted to share the details of the delivery plan beyond our steering group, which is only six to eight members. Only a very small portion of us and our OPD partners have had eyes on the delivery plan. I can share that written feedback with the Committee, but I will just highlight two points.

The main point was that the delivery plan does not reflect the ambition of the strategy. It just does not match up. It does not align. If it was developed alongside and with people with disabilities, as was promised in the strategy, perhaps that would come out a little stronger. The ways in which the delivery plan has included people with disabilities in that conversation is not clear to us, even though there are commitments to do that.

The second point to raise is that the indicators are very vague. Again, this was picked up on in the first panel, but it seems to be a vein running throughout that we do not have indicators. The targets are not very clear. The language that is used in the delivery plan that we saw use words like "some", "using our voice" or "encourage", but you cannot measure success against those types of phrases. An example of this, if we are being specific, is that the delivery plans will consult people with disabilities where possible or where disability inclusion is relevant to the outcome of a programme, but, in the strategy, it says that the commitment was to mainstream disability across all of our global network in the FCDO, so it does not feel like it aligns.

Chair: Lauren, you are going to have to write to us on the final point. We have a lot of questions.

Theo Clarke: You have answered my second question already, which is whether the FCDO should publish its internal strategy delivery plan, and I have heard from you that you would like that to happen.

Q24 **Mr Sharma:** Lauren, are you satisfied with the accountability and monitoring mechanisms within the strategy?

Lauren Watters: I have spoken to that slightly in the first question. In order for us to be truly accountable and to be able to monitor the strategy, a delivery plan will need to be designed and co-produced with people with disabilities. At the moment, it is quite hard to understand how that has happened, so that is an important thing to say.

As I mentioned, the targets feel quite vague and, again, we have not seen the most recent version of the delivery plan. We do not think that they are measurable or that they will allow us to reach the outcomes that have been stated in the strategy.

It is important to note that there has been a strong move by the FCDO in the development of the external disability board. This is an advisory board that is supposed to be the primary accountability mechanism. It is talked about as such in the strategy. In theory, this structure could



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provide accountability for the strategy and for the delivery plan, but its current format—the way the meetings are run, the information that is provided to its members, and the agendas of those meetings—means that, as a structure, it is unable to hold the FCDO to account in a meaningful way.

Chair: Let me pause you there, Lauren. Thank you very much.

Q25 **Mr Sharma:** I know you have quite a lot to say. Kevin, to what extent are you required to collect disaggregated data on disability as part of your service delivery?

Kevin Sudi: We do collect disaggregated disability data as part of every programme and project that we implement in Kenya and within the CBM federation.

Q26 **Mr Sharma:** Dr Sunday, could there be a benefit to greater disaggregated data collection?

Sunday Isiyaku: There will absolutely be benefits, and the inclusive data charter provides that opportunity. Just thinking back to Lauren's earlier point, the FCDO could start looking in terms of collecting its data and aligning it to the sustainable development goals. That would also provide evidence with which the FCDO can say, "This is how we contribute to the SDGs". That is very important. It is one of the things that we are pushing in country to get Governments and their agencies to start producing and ensuring that there is inclusive data that is disaggregated.

Q27 **Nigel Mills:** Lauren, you talked us through how the Department does not quite mainstream this in all of its work. It has the right idea and then adds it as a footnote at the end of a plan. What would you suggest that it change? Should it be thinking through how to make sure that the project works for disabled people right at the start, rather than adding it in once they have thought through all the rest of it?

Lauren Watters: I will keep it brief. That is a great idea. Everyone on this panel will probably say that, if you want to do mainstream properly, include people with disabilities even when first thinking about the project or what it is supposed to be doing and what its impacts should be. That includes funding calls. If the FCDO is putting out funding calls and trying to deal with a problem, the problem should be defined by people with disabilities and they should be involved in that conversation.

The one thing that I would say is that mainstreaming one in six people across all of FCDO programming is a tall order. You have to be bold and ambitious in your mainstreaming approach. One thing that the FCDO could do is to mirror what is happening in gender. In the women and girls' strategy, we saw a commitment for at least 80% of FCDO's ODA programmes to go towards gender equality, but we have not really seen a similar commitment to mainstreaming disability inclusion across ODA spending. As a sector, we would hope to see something similar. At the



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moment, it seems that that mainstreaming ambition that is talked about in the strategy is not reflected in targets. I could talk about data all day, but I will hand over to the other two and see if they have things to add.

Sunday Isiyaku: I would just like to ask whether it is possible that we look at the strategy and pick out what is required from the terms of reference, which would be used, especially any time a call is going up. That means everybody is forced to look at disability as an issue that must be addressed.

Q28 **Mr Sharma:** Kevin, how have recent aid cuts affected the work of your organisation?

Kevin Sudi: Aid cuts have a very profound impact on our programmes, especially when we are focusing on persons with disabilities. CBM UK projects are among those that are affected, including some that are A-graded projects that are working to improve healthcare access for communities in Bangladesh, for example, where there was a need to respond to Covid-19 and, therefore, a lot of the work around persons with disabilities shut down.

In Kenya, for example, we experienced a reduction in one of our FCDO-supported projects that was working under UK Aid Connect between 2019 and 2021. It was seeking to support persons with disabilities to identify challenges within employment, to create solutions that are sourced from their understanding of their challenges, and to open up spaces for increased employment. The aid cuts mean that some of the organisations that have opened up their doors to try to improve their statistics around employment or to improve accessible employment opportunities all had to reduce the engagement with projects like this. Therefore, some persons with disabilities ended up going home.

These are just some of the examples where we feel that implementing projects that are used to opening up spaces for enhancing inclusion definitely require sustainable efforts. Otherwise, they tend to pull gains back and, at the end of the day, it appears that, especially for groups like FCDO that are taking the lead in enhancing inclusion, and especially with a rights strategy like this one, we are starting off very strongly but then it dissipates in the middle and we end up back in the same square as we started, sometimes with even more negative impact on the people to whom we are trying to provide opportunities for empowerment.

Our call here is that we know that leadership is tough and we understand that. When we say disability-inclusive funding must be seen as a priority, it must not be cut. For this, we need a global leader to sustain inclusion, and I speak for many when I say that I believe that the UK Government are such a leader, especially with this strategy and also as a beginning point on the back of the co-hosting of the GDS summit. We must not relent, and this must be a sustained effort across all programmes.



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Sunday Isiyaku: I completely agree with Kevin on this. We have seen that, when there are cuts, they affect mostly persons with disabilities. If we look at the flagship education programme in India, a lot of the gains had to be compromised because of the cuts. Your guess is as good as mine. The persons with disability always will be the ones to suffer.

Lauren Watters: There are two points to raise. From the DDG perspective, the severe and disproportionate effect of cuts on people with disabilities that the equalities and impact assessment found is a reality for many of our members. It meant that 90% of our members who responded to the survey felt that the UK's leadership on disability inclusion had been weakened as a result of the cuts.

The second point that I would raise is a safeguarding issue. The ways in which the cuts took place, and happened immediately, meant that many youth with disabilities in our projects were identified and exposed in communities, but then did not have the input and support that they were promised in the projects. In reality, this put those youth with disabilities at further risk. There is a real question about the way in which the cuts were gone about and whether they did harm to the populations that they were originally working with, and that is something that we need to take seriously.

Q29 **Theo Clarke:** Dr Sunday, how would you characterise the FCDO's engagement with your organisation during the planning and delivery of development programmes?

Sunday Isiyaku: We have always had a very constructive relationship with the FCDO, especially when it comes to disability programmes. Where we struggle is when we look at thematic areas. We always talk about health or education. Disability is probably not mentioned at all and we miss that opportunity, so it is critical that we begin to look at how we can ensure that disability is part of all calls for ODA and that disability is discussed and measured as an outcome of the deliverables. With that mindset of also focusing on gender and disability, we will find that disability inclusion cuts across all thematic areas. That is an immense problem that we have seen.

Q30 **Theo Clarke:** Could you just tell us a bit about your experience of working with the FCDO, particularly on the grant application process?

Sunday Isiyaku: We have had a relatively very good experience with them in terms of prompt information and relaying that information when we have concerns, and also trying to provide additional information. That has not been a problem. It is just for us to be sure that we have the right information and are talking to the right person. Overall, in terms of grant application, from my experience over the past few years, it has been quite successful.

Q31 **Theo Clarke:** Kevin, I am interested to know about your experience in Kenya. Do you think that the FCDO has done enough to emphasise



disability inclusion when seeking service delivery partners?

Kevin Sudi: There is definitely more that can be done. There are currently open engagements with organisations like ours, but in recent years, especially following the cuts, there has been reduced engagement.

We always used to have FCDO meetings in Nairobi in Kenya that brought actors together, but after the pandemic we have not seen any of that. There are definitely spaces. Putting together an opportunity to give agency and voice to our communities is a key aspect of strengthening the FCDO's ability to deliver on this.

One way to do that would be to ensure that the voices of persons with disabilities in our communities are in the frame from the beginning. At this stage, we are talking about rolling out a strategy that will probably be known in the development sector only by players like NGOs, not by the community members themselves. We can definitely do more to reach our community so that the FCDO's links with our communities and partnerships are much stronger.

Q32 **Nigel Mills:** Dr Sunday, does the FCDO have robust mechanisms in place to safeguard people with disabilities in its aid programmes?

Sunday Isiyaku: They have robust mechanisms. We have worked with them in terms of those robust mechanisms for our programmes. We now need to look at how we can promote inclusive safeguards with other donors particularly looking at GLAD following the session that was held in October 2023. We need to promote the importance of disability-inclusive safeguards, which is what is missing so far.

Q33 **Nigel Mills:** We heard from our previous panel that the UK is, at least in theory or on paper, quite good, but in practice it is not so good. Is the UK better or worse in this area than the other partners you work with?

Sunday Isiyaku: The UK is better because it holds us accountable in terms of general safeguarding, looking at gender-based violence, sexual and reproductive health and those areas. The UK is better. It has kept us on our toes. We have to look at this through a disability lens and ask ourselves how we can work together to promote inclusive safeguarding, but, relative to others, they have taken this approach.

Q34 **Mr Bacon:** Lauren, you mentioned earlier that the delivery plan does not necessarily match the ambition of the strategy. I think those were your words. What causes that? You have intelligent people working in the international development sector, some of whom are civil servants. They are highly qualified; they have been in the space a long time; they know what they are doing. Where is the benefit in writing a delivery plan that does not match up to the ambition of the strategy? Who is helped by that?

Lauren Watters: Yes, it is a really good question. As one of the panellists on the previous panel said, it is not necessarily an intentional



gap. It is probably a reality of the capacity of the teams people are in and the way the FCDO is currently organised. The reality is that the thinking behind the strategy started long before the merger, with the 2018 strategy. The reality of then delivering a strategy across 280 posts within a completely different organism is complicated.

In reality, the budget cuts mean that at the moment the ambition of the strategy probably cannot be fully funded. The team that has to develop the delivery plan probably cannot, in reality, get everything they want into it. They cannot get all of the commitments that were made in the strategy into it. They have to work within the means they have.

Disability is also falling down the agenda slightly in terms of the current context. We are talking about climate, health and gender; disability is not at the forefront of people's minds. Trying to get people to mainstream disability across humanitarian teams and the humanitarian network is a lot more difficult. Putting in hard and ambitious targets in the delivery plan probably does not feel realistic. That does not mean we should not be trying to find ways to do that and to work within the new system.

It is not intentional. A lot of hard work has gone into it, especially with the disability inclusion team. It is probably working with the realities of the cuts and the small capacity of the teams.

Q35 Mr Bacon: You have a touching faith that none of it is intentional. It seems to me the answer to the question, "Who has benefited by this?" is, "No one." Intelligent people in the Department can see that one does not match the other, and so can all the interlocutors in the aid sector. You are setting yourself up to fail, in a sense.

It would make more sense to me to cut your cloth, decide what you are going to do and specify how you are going to do it. If you know what resources you do have as well as those you do not have, you can match that up to the ambitions you are going to deliver, specify how you are going to do it and measure it to make sure what you have done, especially if you are doing it with taxpayers' money, can bear fruit.

You referred to the difficulty in measuring some of the vague phrases that have been used in the strategy. That does not appear to be where we are at the moment. We will be taking evidence from the Department in due course on this.

I want to ask you a little bit about something one of my colleagues mentioned, publishing the internal strategy. It is not published; you cannot get your hands on it. Let us imagine you could. What would be your surmise as to what it would contain that you do not currently have access to? What would it say that they do not want in the public domain?

Lauren Watters: It is not the public strategy; it is the delivery plan.

Mr Bacon: Yes, I am sorry. The internal strategy delivery plan is the thing I am talking about.



Lauren Watters: At a very top level, having access to that plan would rebuild trust with the sector that the FCDO is going to deliver on the commitments outlined in the strategy. At the moment, it feels like there is a lot of good intention but no clarity on how it is going to happen in practice. A really good example of that would be the way the strategy talks about supporting and working with OPDs.

Mr Bacon: With what, sorry?

Lauren Watters: The strategy makes commitments to fund and support OPDs.

Mr Bacon: That is the bit I did not get. The three-letter acronym you are using is the bit I did not get.

Lauren Watters: It stands for organisations of persons with disabilities. These are the representative organisations that were talked about on the previous panel. I am sorry for using acronyms.

We have not seen that happening. We have not seen direct funding becoming available for OPDs. We do not know whether it is coming, when it is coming or in what format it might come in. We do not know whether their plan is to talk to OPDs about that. How is that meaningful engagement going to happen?

If the sector had eyes on the delivery plan, including those OPDs, it would rebuild trust because then they would understand what direction we are going in, the measurable targets we are using and how we are going to ensure success in that area. That is true for all the commitments that are made in the strategy.

There is also a real potential for us, as the civil society sector, to help deliver this. Kevin and Sunday are speaking on the call today. If we know what is in the delivery plan and we are consulted as part of the delivery plan, civil society can really help deliver the strategy. We should be working in partnership in delivering that strategy. If we do not know what the targets are, what the plans are or how those commitments are going to be met, it is very difficult for us to be a partner in that delivery.

Q36 **Mr Bacon:** That is understood. Have you had any indication in your discussions with the Department that that will at any point change? Will the detail in the internal delivery plan be made available to you?

Lauren Watters: In terms of the discussions we have had to date, the Bond DDG steering group, as I mentioned earlier, have had eyes on an initial draft and provided written feedback. I will share that with the Committee. That is six to eight people. The external disability board, which is a small number of people, is supposed to be the body that investigates, questions and holds the FCDO to account on the delivery plan. As I said, those meetings are very packed. They are very complicated. They have a dual role as an advisory board as well. There is not really space for them to hold FCDO to account on that.



As far as I know, there are no plans in the future to make that a publicly available document, no.

Kevin Sudi: One of your questions was around the ambition and how it matches or does not match the delivery. One of the disconnects is that the disability teams that interact with us and that interact with communities are not the people who are making decisions on funding. Therefore, when it comes to matching what is required in terms of resource to the vision that is within the strategy, there is always a disconnect.

However, some projects have had engagements where there has been a better understanding of what is trying to be delivered. For example, you asked questions earlier around safeguarding. We have examples where strong inclusive safeguarding—this was a requirement to gain FCDO funding in a UK aid-matched project in Rwanda, for example—ensured that key staff had basic sign language; patients were oriented in meetings every day; and we had posters displaying key locations with accessible print messaging.

Where there is a connect between the intention in the strategy and the implementation phase and delivery of it, there can be positive gains. We have examples of that. At this stage in time, I would agree with Lauren. The disconnect still exists.

Q37 **Mr Bacon:** I have one final question. Perhaps you could go in turn. I will go to Lauren, Kevin and then Sunday. If you had a magic wand and suddenly you were in control of FCDO budgets—this can be at any given level, either the one you have now or back at 0.7%, 0.9% or whatever other level—what would be your development spending priorities? What would be your top two, Lauren?

Lauren Watters: I will give you one as Bond DDG and one as Able Child Africa to keep it simple. From the Bond DDG perspective, we get this time and time again. It would be quite simply to fund the delivery of the strategy. We really like the strategy. It covers all the bases. We would really just like to see that being delivered with a clear delivery plan and a commitment to the funding behind that. It is a very simple answer, but it is true.

In terms of Able Child Africa, this might be going slightly into the specifics, but we really see a gap in the FCDO's funding for and support of youth with disabilities. We talk about different intersectionalities quite a lot in the strategy, but youth with disabilities gets left out. We would really like to see a clever and innovative way of building up and supporting a whole youth with disability network across the places where FCDO is working.

These are the changemakers. These are the people who are going to the implementing disability rights in the places we work in the future. They are the ones that are going to be dealing with climate change. They are



the ones that are going to be dealing with future humanitarian crises. I would like to see some real kind of focused and targeted investment in youth with disabilities.

Kevin Sudi: The first thing I will do with my magic wand is agree with Lauren, but then I would expand from youth and add all persons with disabilities. They play a key role in ensuring inclusion for their communities, especially around the issues of poverty reduction and improved livelihoods. Again, I agree with Lauren. This is a good response to issues of livelihoods, climate change, the humanitarian issues that are occurring and even just self-development.

In the second stage, I would argue that any international development programme strategy that seeks to leave no one behind has to have at its heart an answer to the challenge of how to reach people with disabilities. If we are talking about inclusion in all its aspects, I would urge the FCDO to contemplate inclusion in everything. It is not a percentage of something. It is not a certain programme focused on inclusion. Rather, it is a cross-cutting issue that should be part and parcel of the work we do. If this were the case, all of us as community members would then be able to contribute meaningfully to the changes the strategy seeks to make.

Sunday Isiyaku: I agree with Lauren and Kevin, but I would just add two things. First, we have to create a pilot and see how this can be inclusive in all thematic areas. If I had the opportunity to have a magic wand, I would take it to full scale to show that, if you have a full-scale test or pilot, you will achieve more impact and more outcome. That is one area the strategy could look at.

Secondly, in a continent like Africa, where a lot of persons with disabilities do not have formal education, I would be exploring the economic empowerment of persons who do not have formal education but who have the desire to be economically independent and contribute to society.

Q38 **Chair:** Kevin, could I come to you? I know your project is really about disability inclusion. You have worked in lots of different areas, such as health, advocacy and peace-building. Our research shows that 35% of FCDO-funded programmes are branded disability-inclusive. Is it just a bolt-on? Is access, inclusion and service to people with disabilities at the heart of all of those projects or is it just a tick-box exercise, as the previous panel implied?

Kevin Sudi: There has been a reality check among development actors. They are slowly moving the needle around inclusion. If you think about the fact that 15% to 16% of any population are persons with disabilities, are we exploring how this can play an active role within all the designs? I still think there is more to be done.

There is definitely no way we can say we are inclusive in our programmes across all countries and all development actors. On average, persons with



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disabilities experience poverty at more than twice the rate of persons without disabilities. These are the statistics that come to us every time. We know that children with disabilities are also two times as likely never to attend school. We have education programmes. What are they actually doing?

There is definitely a point to be made around ensuring that all FCDO programming and funding includes a full disability analysis, data disaggregation and the identification of barriers for people with disabilities and ensures that processes and strategies for inclusion are part and parcel of our day-to-day mode of working. It cannot be a tick-box exercise, where we say our projects are inclusive, check the box and then go and do whatever else the organisation wants to do.

Q39 Chair: Dr Sunday, the thing I am struggling with is, by its definition, UK foreign aid should go to alleviate poverty. For me, in a time of financial restraint, it should be going to the poorest people in the world. On most reckonings, people with disabilities are the least well served and often the poorest in their communities. Should we be arguing for a situation in which every bit of ODA spend is inclusive? For example, if it is an education project or a sexual health project, should we be ensuring that, from the start, people with disabilities are able to access and benefit from those services?

Sunday Isiyaku: I would agree with you, madam Chair. From the moment we start thinking about it, we should make sure that they are involved in the discussions. I will give an example. We run an inclusive education programme in a small district in Nigeria. What was even better was the fact that persons with disabilities were at the forefront, talking about the need to ensure that children who are in small and relatively poor districts are able to attend mainstream schools.

We saw how that impacted positively on the educational sector itself, but it also created awareness for teachers and parents. The parents were able to look at someone with disability coming to them and saying, "This child also has an opportunity to go to school". It inspired them; it motivated them.

The moment we start thinking about these projects, we should involve organisations of persons with disabilities in the discussion. They will tell us how, and they will also help us with the mantra of leaving no one behind.

Q40 Chair: I completely agree with you. Lauren, could I come to you for the final question? We cannot find out the percentage of FCDO funding that goes to projects specifically to support people with disabilities. I do not know whether you know that number. Could you also share thoughts about intersectionality? If there is someone with a disability in a very rural area who is gay, for example, are there specifically funded programmes to support the most marginalised in society?



Lauren Watters: The answer to your first question is no. We did a little bit of analysis for this inquiry. It is in our written submission. We tried to look at the DAC marker for disability, which is the thing that was also mentioned in the first panel. We got a slightly different figure: that 41% of programmes include disability to some extent, but that is not programmes that are focusing entirely on disability. No, we cannot get the data on the amount of money that is being spent solely on disability or the percentage of programming that is focused on disability.

That is a key issue. At the moment, that data is not available. We are all disaggregating data in our programmes—it is a requirement—yet we cannot answer those questions and that data is not available to us. That is a problem.

Chair: We will take it on as a mission to try to get to the bottom of that.

Lauren Watters: Yes, please. In terms of projects that are specifically funded around intersectionality, maybe the other two can speak to this a little bit more. What gets referenced a lot, maybe slightly infuriatingly, is the fact that we are doing a girls' education fund and it has girls with disabilities in it. There you go: there is some intersectionality. That is true to an extent. It is great that we are seeing girls with disabilities included in programmes like that. As you said, they should be anyway. We should not be celebrating the fact that is happening. That should be the basic standard we are expecting.

The question really is about how they are being included. Are they accessing education on an equal basis to others? What barriers have they experienced in that programme? Have we talked to them directly and asked them what their own specific barriers to accessing educational are? If we are talking about intersectionality mainstreaming, are we keeping those children safe in our programmes? Have we thought about the barriers they are experiencing?

There are some examples of programmes that ask for disability inclusion to be involved and they do talk about it. That should be across the board in all programmes, but it is also about how they are accessing those programmes and to what extent they are accessing them on an equal basis to others.

Q41 **Chair:** It just concerns me that there are some very prolific structural, cultural and societal blocks that people have to overcome. Having a school and expecting people to turn up is a very warped reality of what is actually going to happen. It would be interesting to know whether any of you could comment about schemes that are trying to address both the literal barriers—getting people over the doorstep—and the psychological barriers people are facing. It concerns me that a lot of assumptions are being made that just providing a school means that everybody can access it. That is certainly not what we are seeing. Does anybody have anything to add on that?



Kevin Sudi: Yes, I am happy to add on this one. A big part of this lies in the fact there is a disconnect between who is building the school and who will use the school. Sometimes there is homogeneity around the assumption that all students just require the classroom.

In light of Lauren's argument, we have included 10 learners with disabilities, but when you get there you find that there is no teacher equipped with inclusive education training. The learners are there, but they leave. We have seen schools in Kenya where learners have gone back to very specialised schools because an attempt at inclusive education failed. They went there and they did not find that they were catered for in terms of teaching, equipment and the school layout in general.

A big chunk goes back to the questions about how inclusive the design processes are and how inclusive the question of what needs to be corrected or adjusted is. Who wants the school? Whose decision is it? What kind of school is it? What class is it for? Who is participating? Whose voice counts? Once we are able to answer this and ensure there is a heightened level of inclusivity in it, we will be able to provide solutions that are common to all our community members and that are accepted and owned by those community members. From there, there can be an outflow of community change.

Q42 **Chair:** Dr Sunday, I promise that this really is the last question. I am just thinking about schools and Covid. Many around the world went online. Thinking specifically from a Sightsavers perspective, during Covid were any lessons learned in terms of getting children with sight issues their education that could be continued now?

Sunday Isiyaku: To be very honest, Covid did affect schools. The children and the other learners had to stop going to school. One of the lessons we learned was that we have always focused on ensuring that there are teaching and learning aids in schools. We have not always thought about how these children would cope in a situation whereby they needed to learn from home. For me, that was a learning that we discovered. When they went back to school, we found that those who had some ability to learn from home were a little step higher than those who could not.

In terms of when we consider programmes, it is not just about what is there; it is about policies, it is about services and it is about ensuring that inclusion, like Kevin says, is not just in one space but in every space. It is about ensuring that we think about inclusion in whatever we are doing.

Chair: Thank you very much. Panellists, we really appreciate you sharing your experiences and that of your members. You have thrown a lot of issues up into the air that require closer examination. I and my Committee are not at all happy about what we have found. We need to make sure everybody is able to benefit from these opportunities, particularly when it is the British taxpayer that is paying for them and



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rather assuming that everybody can benefit from them. Thank you for all you do to address that. Thank you very much to the Committee for attending this session.