

**COMPREHENSIVE DISABILITY POLICY FRAMEWORK
FOR KOSOVO**

A. INTRODUCTION

People with disabilities in Kosovo, who, according to international estimates could number as many as 150 000 (this figure is a best estimate and needs verification), live in circumstances of poverty, isolation and stigma. Their experience has been exacerbated by the conflict and displacement which has prevailed in Kosovo in recent years.

People with disabilities in Kosovo have been organised for many years under the auspices of Handikos, a local non-governmental organisation. Handikos has been the main provider of relief and rehabilitation services to people with disabilities and has established a network of community centres and local active groups of disabled people.

A number of international NGOs, including Handicap International (designated by the United Nations Mission in Kosovo as the international 'lead agency' on disability), The Danish Council of Organisations of Disabled People, WHO, OXFAM, the Finnish Ministry of Foreign Affairs and others, have been supporting Handikos' work in Kosovo through the years of conflict and now in the peace process.

Guided by the significant changes in international thinking towards a human rights approach to disability, Handikos is engaged in a process of advocating for the full participation and equality of people with disabilities in Kosovo society. The process occurs within the context of the current reconstruction initiatives and establishment of provisional institutions of self-government and concomitant policy development processes in Kosovo.

The promulgation of the Constitutional Framework for Provisional Self-Government on 15 May 2001 by the Special Representative of the Secretary General provides for a human rights-based system of government in Kosovo precluding discrimination on any grounds. While disability is not specifically mentioned in the Constitutional Framework, the provisions on rights and freedoms in international instruments such as the Convention on the Rights of the Child and others which do specifically deal with disability are declared 'directly applicable in Kosovo as part of (the) Constitutional Framework'.

UNMIK established a Task Force on Disability in December 2000 within its administration, with the primary task of developing a comprehensive disability strategy for Kosovo, in line with the UN Standard Rules on the Equalisation of Opportunities for People with Disabilities. The disability strategy will amplify the human rights approach to disability intended in the Constitutional Framework.

The Task Force includes representatives of Handikos, other disability groups, Handicap International, and representatives of a number of key Joint Interim Administration Service departments. The development of the Comprehensive Disability Policy Framework will be a participatory process involving people with disabilities and other stakeholders and role-players.

The objective is to provide disability groups in Kosovo with a voice in policy planning to ensure that the needs of disabled people are taken into account whenever policy is being formulated. Proposals have been made (subject to the availability of resources) for the

establishment of a Disability Office in the Office of the Prime Minister with the task of implementing the Comprehensive Disability Policy Framework at all levels of government in Kosovo. It is also intended that the current UNMIK Task Force on Disability will be transformed into a Disability Council, to serve as a consultative, advisory and monitoring structure on disability matters.

B. SITUATION ANALYSIS

B.1 Prevalence of Disability in Kosovo.

There is a serious lack of reliable information on the nature and prevalence of disability in Kosovo.

Statistics are unreliable for the following reasons:

1. there are different definitions of disability;
2. there is a serious lack on knowledge on different disability types;
3. different survey technologies are used to collect information;
4. there are negative societal attitudes towards people with disabilities;
5. there is poor service infrastructure for people with disabilities in rural areas, and violence levels (in particular areas at particular times) have impeded the collection of data, affecting the overall picture.

Some useful statistics are, however, available from the United Nations Development Programme (UNDP). The UNDP estimates that, in 1990, 5,2% of the world population was experiencing moderate to severe disability. This ranged from 7,7% in so-called developed countries to 4,5% in less developed areas. WHO's statistics are more general and refer to the entire range of impairments, not just moderate and severe, and they suggest a range of 10 to 15% in developing societies, with a higher prevalence level in developed countries.

In the education sector, the enrolment of children in Kosovo at the end of 1999/2000 school year was estimated at 400.000. Given most conservative estimates of severe levels of disability (1%), the likely incidence of children with disabilities is 4000. Currently, there are fewer than 500 children and youth in the 14 schools and classes that exist for students with disabilities.

It is critical to note that disability does not only affect the disabled individual but also the family and the immediate community. Thus the impact of disability is greater than the above figures would suggest.

B.2 Exclusion

The exclusion experienced by people with disabilities and their families is the result of a range of factors, for example:

- political and economic inequalities;
- violence and war;

- social attitudes which have perpetuated stereotypes of disabled people as dependent and in need of care or not even worth caring for and not being regarded as a resource to society;
- a professional bias towards specialized and segregated services, often for people with specific impairments, that assume that people with disabilities can not be socially or economically integrated into mainstream society; and
- a weak legislative framework, which has sanctioned and reinforced exclusionary barriers in a wide variety of areas (e.g. employment, education).
- lack of access to education means that many adults with disabilities are poorly educated and therefore unable to participate fully socially and economically

Legislation has contributed to the social exclusion of people with disabilities. First, legislation often fails to protect the rights of people with disabilities and, second, through legislation, barriers are created to prevent people with disabilities from accessing equal opportunities.

One of the main reasons why legislative discrimination continues to take place is that discrimination is not always obvious merely from reading a statute. Problems often arise when the law or statute is applied. These include:

- the way regulations governing specific acts are drawn up;
- the way acts and/or their regulations are administered;
- inappropriate and/or ignorant interpretation of the law, and
- poor monitoring of the law
- inadequate provision for access to the law.

Exclusion leads to a number of outcomes including:

- an increase in poverty
- decreased access to education
- increased unemployment
- an increase in illiteracy

An important factor that must be taken into account is the tendency of society to view people with disabilities as a single group. Thus, people in wheelchairs have become the popular representation of people with disabilities. This ignores the diversity of disability and the variety of needs experienced by people with different types of disability.

In addition, it must be recognized that there are sectors within the disabled community, which have experienced greater discrimination than others e.g. women with disabilities, children with disabilities, people with intellectual and mental disabilities, people with disabilities who have been displaced by violence or war. These sectors have experienced, and still experience, comparatively higher levels of exclusion from the social, economic and political environment. This demands special targeting in order to redress past and present inequalities. Special attention must also be given to understanding and addressing the conditions, which have led to the extreme vulnerability of these sectors.

B.3 Approaches to Disability

Disability is often viewed as a deficit, a negation of what a “normal” life should be, and the experience of disability has often elicited extreme discomfort, fear and superstition in all types of society, ancient and modern. This ignorance and fear in its extreme forms has often resulted in conscious and unconscious denial and extinction of disability, as in fascist and Soviet-era systems but also in democratic societies where disability was and still is something to be ashamed of and hidden.

The Medical and Charity Model

The Medical and Charity Model of Disability views disability as an individual affliction that can be cured or alleviated by means of specialised professional intervention. Thus, disability has historically been regarded predominantly as a health and welfare issue and state intervention has, therefore, largely been channeled through medical and welfare institutions. The professional orientation, whether medical or welfare, is primarily a technical one which sees the problem as belonging to the individual with a disability and which needs to be clinically ‘repaired’ or fixed, rather than seeing the primary source of exclusion and discrimination as being based outside the person with a disability. The responsibility for ‘caring’ for disabled people has thus generally fallen on specialised, segregated institutions funded by government and/or civil society. There has been little or no commitment to addressing disability in other areas of government responsibility.

In addition, the Medical and Charity Model of Disability means that organisations for people with disabilities are usually controlled by non-disabled people who provide services to people with disabilities and are concerned with creating a more ‘caring’ environment for different groups of disabled people. Their aim was usually to provide treatment, or to create alternatives to begging or ‘hiding away’. The philosophy was that disabled people were not to be hated or feared, but rather to be pitied or helped as part of the ‘deserving poor’. Generally, ordinary needs for equal respect, treatment and dignity were not taken into account.

The social attitudes that resulted from the perception of disability as a health and welfare issue have invaded all areas of society. The ‘need for specialised care’ has resulted in disabled people and their families being isolated from their communities and mainstream activities. Dependency on state assistance (or neglect by) has disempowered people with disabilities and has seriously reduced their capacity and confidence to interact on an equal level with other people in society. This has prevented them from accessing fundamental social, political and economic rights.

The Social and Human Rights Model

The Social and Human Rights Model of Disability views disability as a public issue requiring a societal response. People with disabilities have come together to mobilise and organise themselves. Their aim is to build a strong civil movement of organisations controlled by disabled people themselves. Central to the disability rights movement is the

assertion of disability as a human rights and development issue. This leads to a recognition and acknowledgement that disability is a normal part of life, that people with disabilities are equal citizens and should therefore enjoy equal rights and responsibilities. This implies that resource allocation must be needs based and must ensure that every individual has equal opportunities for participation in society.

In addition to rights, people with disabilities should have equal obligations within society and should be given the support necessary to enable them to exercise their responsibilities. This means that society must raise its expectations of people with disabilities.

A human rights and development approach to disability focuses on the removal of barriers to equal participation and the elimination of discrimination based on disability.

The Social and Human Rights Model of Disability suggests that the collective disadvantage of disabled people is due to a complex form of institutional discrimination. This discrimination is fundamental to the way society thinks and operates. The circumstances of people with disabilities and the discrimination they face are socially created phenomena and have little to do with the impairments of disabled people. The disability rights movement believes, therefore, that the 'cure' to the 'problem' of disability lies in restructuring society and the fears, myths and stereotypes that underlie society's response to disability.

The Social and Human Rights Model of Disability implies a paradigm shift in how the meaning of disability and how to respond to it is constructed. Thus:

- the experience of disability is seen as normal, as a routine part of life, not as an aberration or necessarily an experience that needs to be prevented or even changed. Hence, some deaf people will choose not to have cochlear implants because it would rob them of their unique cultural identity.
- It is the stairs leading into a building that disable the wheelchair user rather than the wheelchair.
- It is the inability of the ordinary schools to deal with diversity in the classroom that forces children with disabilities into special schools.
- Deaf people are handicapped by non-Deaf people who do not speak sign language and the solution is for others to learn sign language, not for the deaf to be cured, speak, or learn to read lips.
- Persons with disabilities applying for jobs need to be considered fairly, and provided with essential reasonable accommodations such as a ramp, software, an on-the-job coach, or an interpreter.

The Social and Human Rights Model therefore emphasizes two things: the shortcomings of society in respect of disability, and the abilities and capabilities of people with disabilities themselves.

This results in an approach that requires that resources be made available to transform so-called 'ordinary' amenities and services to not discriminate and to cater for a more diverse

environment. Especially in a post-conflict context such as Kosovo, the Social and Human Rights Model implies that the reconstruction and development of our society involves a recognition of and intention to address the developmental needs of disabled people within a framework of inclusive development.

The paradigm shift (from the medical to the social/rights model) has come about largely through the development of strong organisations of disabled people (DPOs). Central to the concept of the social model of disability is the principle of self-representation by people with disabilities through DPOs. In addition, it implies a change in the way financial support is provided by government. Services must be provided in a context of personal, social and economic empowerment, not dependence.

C. International Scenario

1981 was declared the International Year of Disabled Persons by the United Nations. The most important outcome of the International Year of Disabled Persons was the adoption of the World Programme of Action Concerning Disabled Persons during the UN Decade of Disabled Persons (1983-1993). The purpose of the World Programme of Action was to promote effective measures for the prevention of disability, rehabilitation and the realization of equal opportunities for persons with disabilities.

The UN facilitated the drafting of the Standard Rules for the Equalisation of Opportunities for Disabled Persons to provide governments with clearer guidelines on actions to be taken. The Standard Rules were adopted by the UN General Assembly on 20 December 1993.

Aims of the Standard Rules

The aims of the standard rules are as follows:

1. They imply a strong moral and political commitment by the State to take action for the equalization of opportunities for persons with disabilities.
2. They offer an instrument for policy-making and action. The purpose is to ensure that all persons with disabilities can exercise the same rights and obligations as other citizens.
3. They outline crucial aspects of social policies in the disability field, and provide models for the political decision-making process required for the attainment of equal opportunities.
4. They propose national mechanisms for close collaboration between the States, organs of the UN, NGOs and OPDs

Objectives of the Standard Rules

The objectives of the Standard Rules are to:

1. stress that all action in the field of disability presupposes adequate knowledge and experience of the conditions and special needs of persons with disabilities;
2. emphasize that the process through which every aspect of the organisation of society is made accessible to all is a basic objective of socio-economic development;

3. outline crucial aspects of social policies in the field of disability, including, as appropriate, the active encouragement of technical and economic cooperation;
4. provide models for the political decision-making process required for the attainment of equal opportunities, bearing in mind: widely differing technical and economic levels; the fact that the process must reflect keen understanding of the cultural context within which it takes place, and the crucial role of persons with disabilities in it, and
5. propose national mechanisms for close collaboration among states, the organs of the UN system, other intergovernmental bodies and organisations of persons with disabilities.

The Standard Rules on the Equalization of Opportunities for Persons with Disabilities and the World Programme of Action Concerning Disabled Persons will be the guiding documents in developing, implementing and monitoring the Comprehensive Disability Policy Framework.

In addition to the Standard Rules, there are several important international documents that pertain to the human rights model of disability. These are:

The Conventions on the Rights of the Child, 1989:

- Right of a disabled child to education and training to achieve the greatest degree of self reliance and social integration possible
- Education shall aim at developing child's personality, talents and mental and physical abilities to the fullest extent

The Jomtien World Declaration on Education for All, 1990:

- Education for all
- Individual differences are accepted as a challenge not as a problem

D. A Comprehensive Disability Policy Framework

D.1 Vision: A Democratic, Human Rights Society

In a democratic, human rights-based society, the needs of all citizens constitute the basis for planning and policy, and the general systems and institutions of society are accessible to all. By organising the structures of society so that they function in a way that meets the needs of all, society mobilises the potential of all its citizens and, consequently, strengthens its developmental potential.

People with disabilities are a natural and integral part of society as a whole, and should have opportunities to contribute their experience, talents and capabilities to national and international development. As Kosovo faces the enormous challenge of safeguarding ethnic and minority rights, people with disabilities need to ensure that they are included in the process of building a society for all where citizens regardless of their diverse origins and abilities are able to exercise their rights and responsibilities.

While the democratic structures being developed in Kosovo provide the framework for participation of people with disabilities, defining, translating and monitoring the human rights of disabled persons into specific measures and programmes remains a major challenge. The Standard Rules are the main instrument guiding public policy in the direction of ensuring the human rights of disabled persons. They will also assist Government in creating an enabling environment that will lead to the full participation and equalization of opportunities for persons with disabilities at all levels of society.

D.2 Objectives

The broad objectives of the *Comprehensive Disability Policy Framework* include:

1. the facilitation of the integration of disability rights, values and practices into government developmental strategies, planning and programmes;
2. the development of an integrated management system for the coordination of disability planning, implementation and monitoring in the various line functions at all spheres of government;
3. the development of capacity building strategies that will enhance Government's ability at all levels to implement recommendations contained in the *Comprehensive Disability policy Framework*.
4. a programme of public education and awareness raising aimed at changing fundamental prejudices in Kosovo society.
5. the development of local structures such as a Disability Council and pilot projects linking strategy and policy developments with operational planning initiatives involving all role-players (OPDs), government, the private sector).

D.3 Principles

Principles upon which the Strategy is based include:

- Self Representation

A fundamental principle that informs the outlook of the disability rights movement in Kosovo and internationally is the right to self-representation. This means that the collective determination and wisdom of disabled people must be used to inform the strategies of the government. In recognizing this principle, the government acknowledges the role of organisations of persons with disabilities and their representatives in the decision-making processes. This will ensure that decisions taken and implemented will be appropriate for persons with disabilities.

- Integration

Historically, disability issues have been addressed in a piecemeal, fragmented way. This has been one of the key factors contributing to the marginalisation of disabled people and the dire poverty in which the majority find themselves. If the needs of disabled people are to be effectively addressed, disability must be fully integrated into the principles, strategies and activities of all government programmes. This will ensure that the effects of the past as they have affected disabled people will be eradicated in a sustainable process of reconstruction.

Sustainability

The funding of the *Comprehensive Disability Policy Framework*, as part of reconstruction and development, should be integrated with potential long-term sources of finance whether from the public or private sector. All policies and plans developed need to be cost-efficient.

E. POLICY GUIDELINES – THE WAY FORWARD

E.1 Public Education and Awareness Raising

One of the greatest hurdles disabled people face when trying to access mainstream programmes and create new approaches are uninformed experience and negative attitudes. It is these “fears, myths and stereotypes” that lead to the social exclusion and marginalisation of people with disabilities. The changing of attitudes is not something that happens automatically or spontaneously, rather it is a complex process.

The Policy Objective is:

To implement public awareness programmes that create a positive and accommodating environment in which diversity is respected and valued.

Strategies for public education and awareness raising include:

- Positioning, or branding, disability rights as an aspect of valuing difference with common goals to what Kosovo is trying to do across all ethnic communities. The value of disability is that it is a common experience shared across communities, which means it can be communicated as an opportunity for communication and collaboration.
- The development of a multi-sectoral integrated disability awareness strategy which would send this message to the different communities through a variety of media.
- Implementation of disability awareness projects for journalists and the public broadcaster including the disability rights message as opposed to the “pity” and “heroic” images and the positive use of role models from all groups;
- Disability awareness programmes within every line function in government;
- Increased visibility of people with disabilities in the media and in society.

E.2 Prevention

One of the cornerstones of disability policy is prevention which integrates a human rights approach that all life has value, that all people have choices with regard to reproductive rights, and that many impairments can be prevented or mitigated with appropriate detection and planning.

The Policy Objective is:

To develop primary and secondary prevention programmes that limit diseases and accidents that cause disability.

Strategies for prevention include:

- Healthy lifestyle promotion in the home, at school, in the workplace and on the sports field.
- Protective measures such as immunisation, protection against accidents, and protection against occupational hazards.
- Avoidance of conflict, war and violence and the pursuit of peace initiatives.
- Decrease in poverty through targeted improvement in the educational, economic and social status of the poor.
- Improved health services including early identification and interventions, genetic counseling informed by international human rights norms and best practices, and effective emergency medical treatment.
- A reduction in occupational and environmental accidents through the adaptation of the environment.
- The adoption and implementation of legislation and regulations to prevent accidents at work and on the roads.
- Development of advisory groups in rural areas.

E.3 Health Care

Appropriate, accessible and affordable health services at primary, secondary and tertiary level are essential to the equalisation of opportunities for people with disabilities. Such services should include family medicine and community home care, in-patient, physical and rehabilitation services and should be offered in co-operation with NGOs and DPOs. Special forms of assistance, offered on an outpatient basis or at home, are preferred to hospital care. It is believed that such an approach will increase access to comprehensive, extensive medical and mental health services.

Services developed need to be consistent with other documents/policies such as the Health Policy for Kosovo, the Mental Health Policy for Kosovo and the Proposal for Physical Medicine and Rehabilitative Policy and Strategy in Kosovo.

The Policy Objective is:

The development of a comprehensive universal health care system, at all levels of care, that is sensitive to the general and specific health care needs of people with disabilities and aligned with the emerging health policies in Kosovo.

Strategies include:

- Measures to identify and reduce discrimination on the basis of disability in the health sector.
- Comprehensive free health care for all people with disabilities, including free access to assistive devices and rehabilitation services.
- Specialised medical rehabilitation services accessible to all, especially those injured as a result of violence, and which promote functional rehabilitation and integration as quickly as possible back into the family and community, not into long-term specialised and segregated residential, social and living support services.
- To develop norms and minimum standards for the building of health facilities and rehabilitation centres to ensure barrier-free access.
- Appropriate communication strategies at service-delivery points must ensure equal access for people with communication, visual or hearing disabilities.
- Training programmes for medical and allied health personnel must be developed to facilitate an understanding of the implications of the delivery of health services within the Social and Human Rights Model.
- Collaboration with the education sector in provision of assistive devices and services for inclusive education

E.4 Community Based Rehabilitation

The Social and Human Rights Model of Disability proposes a more central role for disabled people in the planning, development, implementation and monitoring of rehabilitation services. There will, in other words, be a shift in power away from professionals towards people with disabilities. This implies service delivery that meets the expressed needs of people with disabilities in a holistic manner. Community-based rehabilitation (CBR) should, therefore, form the basis of the rehabilitation strategy.

The Policy Objective is:

Raising awareness of CBR and creating access to appropriate rehabilitation services founded on the CBR approach through ongoing development of the Handikos network.

Strategies for rehabilitation include:

- Development of curriculum and appropriate training of community workers including primary therapy, psycho-social occupational rehabilitation and prevention.
- Development of a decentralised service delivery system through support of the Community Centres,
- Inter-sectoral collaboration and the local level referral system
- Provision of appropriate and affordable assistive devices.
- Partnerships between people with disabilities and professionals that address the
- real needs of people with disabilities.

E.5 Barrier Free Access

The way in which the environment is developed and organized contributes to a large extent, to the level of independence and equality that people with disability enjoy.

In society there are a number of barriers, which prevent disabled people from enjoying equal opportunities with non-disabled people. For example: structural barriers in the built environment;¹ inaccessible service points;² inaccessible entrances;³ poor town planning;⁴ poor interior design and poor public transport

It must be emphasised that barriers also include access to information and communication i.e. oral language is a barrier for sign language users.

Key access concerns in Kosovo are:

- Public as well as private buildings are inaccessible for people with disabilities
- Planning professionals do not recognize the specific details which are needed in providing a barrier free environment.
- NGO's and other agencies do not have a clear policy on environmental access. The result is that clinics and other public buildings are presently being built without provision for a barrier free environment.
- Building and accessibility Standards are required
- Lack of specialists/expertise in the field of barrier free access.
- Lack of legislation for accessibility based on European standards
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Costs are often cited as the reason for the failure to provide a barrier free environment. However, when accessibility is incorporated in the original design, the additional cost does not generally exceed 0,2% of the overall cost of development.

The Policy objective is:

To create a barrier free society that accommodates the diversity of needs, and enables the entire population to move around the environment freely and unhindered and to have access to information in a usable form i.e. Braille, sign language.

Strategies include:

Some mechanisms are required to ensure the policy goals are achieved i.e.

¹ For example, stairs, inaccessible toilets and bathrooms, inaccessible elevators, uneven pavements, high kerbstones etc.

² For example, shop and bank counters, public mailboxes, public telephones etc.

³ For example, the entrance in most modern supermarkets etc.

⁴ For example, narrow pavement areas, lack of demarcated special parking, lack of accessible streets etc.

- Intersectoral collaboration to ensure that accessibility cuts across Ministries and their departments.
- Personnel training
All relevant staff in the ministries and in the local municipalities should attend and complete a course on barrier free access to expose them towards the needs of people with disabilities. Professionals involved in the building industry should complete a course as well.
- Intersectional collaboration for the development of communication systems accessible to people with visual, hearing and communication disabilities
- Self Representation
To plan an accessible environment it is essential to be aware of the different types of disabilities. It is therefore important to involve people with disabilities and their organizations in the planning process as early as possible. People with disabilities know best what problems are arising from the lack of a barrier free access.

In order to achieve the policy objective, it is recommended:

- That the European Concept for Accessibility is adopted as the building norms and standards with regards to accessibility
- Barrier free access design of all buildings leased by all departments, including the development of a barrier-free clause for all lease agreements
- Development of a wide spectrum of barrier-free design expertise at central, regional and local level
- Effective implementation and administration of existing and new legislation, especially at municipality level
- To develop an appropriate and effective monitoring mechanism, inclusive the Organisations of Persons with disabilities(OPDs), especially at municipality level
- To ensure that appropriate curriculum and handbooks which focus on norms and standards for accessibility are in place by the relevant ministry as a part of the professional training of architects, engineers and town planners,
- Training for professionals and workers
- To develop norms and standards as well as monitoring mechanisms to ensure accessibility in the tourism industry.
- Development of appropriate technology in accessibility and training

Several issues concerning accessibility can be addressed and implemented even before laws and regulations protecting the rights of disabled people are formulated and adopted. The Working Group on Accessibility has recommended that local authorities take immediate actions to address the following issues:

- Provide parking spaces for people with disabilities⁵ in all parking areas in the municipality.
- People with disabilities should be issued a permit to park in:
 1. Areas which are normally restricted, i.e. government buildings, areas with special security requirements and etc.⁶
 2. Areas where parking is not allowed and is considered a traffic rules violation.
- Letterboxes must be placed in visible and accessible sites on pedestrian route areas.⁷
- Place waste-bins so that wheelchair users and persons of short stature can reach them.
- Public phones should be placed at the level that is accessible to wheelchair users, persons of short stature and people with visual impairments.
- Develop and distribute among disabled people a map of the municipality with all accessible buildings marked.
- Ensure that agencies/organizations addressing needs of disabled people and/or represented by disabled people are involved in urban planning and approval of project proposals on reconstruction.⁸
- All buildings and infrastructure under construction and reconstruction should be fully accessible

⁵ Parking facilities must be provided for disabled people and marked accordingly. The bays must have a plane, firm surface with as little slope as possible, i.e. corresponding to the minimum gradient for drainage. Parking bays for disabled people are acceptable if the following requirements are met: the bays have a minimum width of 3.50 meters or the bays are placed next to pedestrian routes or public spaces providing space for getting in and out of the car. Parking bays for disabled people should be placed as close to the main entrance as possible.

⁶ The local municipality should issue the paper to people with disabilities.

⁷ There must be an unobstructed space of min 0.50 m, measured horizontally, in front of and on either side of the wall-hung letter-boxes. A wheelchair user or a person of short stature must be able to get right up to the letter-box and the slot must not be more than 1.30 m above ground level.

⁸ It is, however important to ensure that advice is sought from the legitimate representatives of disabled people's organizations to ensure that a representative and not a personal viewpoint is obtained. Prior to a building project or public works project of a certain size, a local plan is usually prepared in accordance with the rules of the Municipality Planning Act. Since it is important to ensure as early in the planning phase as possible that external environments are accessible to people with disability, local authorities are requested to include requirements concerning this in local plans.

E.6 Transport

There is a need for rapid progress in developing a public transport system that is flexible and accessible for all people of Kosovo and, as this is done, access for people with disabilities needs to be systematically and creatively implemented. Without this, people with disabilities will continue to remain largely 'invisible' and unable to contribute to, or benefit from, the services and commercial activities available to most of their fellow citizens.

The Policy Objective is:

To develop an accessible, affordable multi-modal public transport system that will meet the needs of the largest numbers of people at the lowest cost, while at the same time planning for those higher cost features which are essential to disabled people with greater mobility and communication needs.

Strategies include:

- Implementation of a disability awareness and orientation component for the transport industry.
- Processes to develop accessible commuter systems should include participation by all stakeholders.
- As rolling stock is rebuilt and integrated back into the sector, this is a moment when access for persons with physical disabilities can be built in to the rehabilitation of buses, trains etc., again to optimize cost effectiveness.
- Experience in transition and developed economies indicates that specialized accessible transport systems (so called, “dial a ride”) to augment the mainstream system may be required. This option should be considered only when a long-term mainstream option has been thoroughly analysed.

E.7 Education

A human rights and development approach to disability has significant implications for the way in which education is provided. Educators tend to classify people with disabilities according to disability. Disabled learners are then either placed in special schools or classes, or totally excluded from any educational opportunity on the grounds that they are "too severely disabled". This naturally results in illiteracy and low skills especially amongst adults with disabilities, contributing significantly to high levels of unemployment and poverty.

The existence of the parallel system of education in Kosovo from 1991 to 1999 reflects the high value placed on education in the region. The lack of provision for children with disabilities is all the more disturbing in this context. In March 2000 there were 445 children in special schools catering for intellectual disability and visual and hearing impairment.⁹ It is estimated that 80% of children of school going age with disabilities are

⁹ “Education in Kosovo: From Crisis to Recovery and Transformation” by Professor Michael Daxner (March, 2000) UNMIK, Department of Education and Science

out of school. The traumatic experiences of war and displacement would also suggest high levels of special need among pupils within schools. A major focus on inclusive education would benefit not only disabled learners but also others who experience barriers to learning and participation.

As it is well known, all educational sectors were highly affected during the parallel system (1990-1998). The quality of education decreased and the exposure to Western models ceased for more than 10 years. As a consequence of the fluid and sensitive situation after the war, together with the historical and cultural traditions of the education in Kosovo, any reform implementation will be neither easy nor uncontroversial. As far as the education system and inclusive education issues are concerned, most of the international and local studies highlight the following general problems:

- Educational policymaking and strategic planning in education are at their initial points.
- The Education System is under-regulated, functioning mostly against ad-hoc regulations.
- The size and the structure of the school population are still uncertain.
- Both children and teachers have experienced and witnessed violence and death.

The international movement for inclusive education draws on The Salamanca Statement and Framework for Action adopted at the World Conference on Special Needs Education 1994, which states that:

“those with special educational needs must have access to regular schools which should accommodate them within a child –centred pedagogy capable of meeting their needs.

Regular schools within this inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all; moreover, they provide an effective education to the majority of children and improve the efficiency and ultimately the cost-effectiveness of the entire education system”

It is within this inclusive orientation that provision of education to children with disabilities should take place within Kosovo. However, inclusive education is not only about provision for children with disabilities but rather about a fundamental change in the way we view diversity in the classroom and in the broader society. Inclusive education focuses on identifying and removing barriers to learning and participation. Instead of trying to make the individual more “normal”, there is an emphasis on making the environment more “normal” for the individual. Barriers for learners with disabilities could include inaccessible buildings. However, barriers go further than this to extend to an inaccessible curriculum, language barriers, low expectations, negative attitudes and stereotypes around disability and other forms of difference. Barriers to learning can also arise from socio-economic factors such as poverty or class. An inclusive education system would focus on moving or removing these barriers in an ongoing attempt to establish education for all.

The term special need in education is also one which is broader than relating just to disability. It describes any educational provision that needs to be made in addition to the normal provision in order to meet specific individual or “special needs”. Thus it is possible that a child with a disability may not require special provision (for example, a child who has a mild physical disability). A child with no disability might, however, require special provision (for example, children who have been traumatised by war).

It is also important to distinguish between mainstreaming and inclusive education. Mainstreaming occurs when a child with a disability is placed in a mainstream classroom with little or no change to the classroom or the curriculum. The child will only be able to cope in this environment if he or she has achieved to a high enough level despite his or her disability. The child must fit the system. Inclusion of children with disabilities or special needs is mostly concerned with the basic human right of the child to be educated amongst his or her peers. In order to achieve this right for all children, schools and the education system must change to be more accommodating. The system must fit the child. For example, it would be very difficult to mainstream a child with a severe intellectual impairment because they would not be able to function at the same level as the rest of the class and they would not cope with the regular curriculum. But it would be possible to include this child where learning outcomes are fitted to the child’s needs. This would require a flexible curriculum and individualised goals. We would need to change our expectations from making the child more normal to ensuring their maximum participation throughout life.

Disabled children and their parents have very little or no choice in accessing quality education. Experience internationally has shown that the barriers for children with disabilities accessing education in the regular education system can only be addressed through supportive legislation and active lobbying. This legislation would include the acknowledgement of the basic human right of every child to access education that is non-discriminatory.

Education has traditionally concentrated on years spent at school and, to a lesser degree, on tertiary education. Links with the world of work and training have been weak. Changes in educational policy are of particular importance to the future economic empowerment of people with disabilities.

Early childhood development and learning provides children with disabilities with access to early intervention and socialisation opportunities from an early age.

The Policy Objective is:

The facilitation of equal access to education and the development of a single education system that will cater for the needs of all learners within an inclusive environment.

Strategies include:

- The development of a clear inclusive policy that includes all stakeholders and which is understood

and accepted at school level and by the wider community.

- Curriculum development in regular schools to ensure flexibility, addition and adaptation according to the needs of individual learners, regardless of the category to which they seem to belong.
- On-going pre-service and in-service teacher and support teacher training.
- Parent empowerment programmes to encourage parent involvement in assessment and decision-making concerning their children. These programmes need to occur in conjunction with the sensitisation of professionals to this need.
- Appropriate technology development in education and training.
- Adequate and appropriate education support services to all learners.
- Earlier access to education for all learners, but in particular for learners with special education needs.
- Links between education and the world of work need to be strengthened
- Effective and relevant research.
- The enactment of legislation that promotes non-discriminatory access to education within a single inclusive education system.
- Appropriate methods to assess and identify children with disabilities.
- Transport systems to ensure that children with disabilities reach educational institutions.

E.8 Employment and Economic Empowerment

Unemployment and the lack of economic activity are fundamental problems affecting the majority of people with disabilities and their families. At the same time, unemployment at levels which have been as high as 70% is affecting the entire Kosovo society at this time during its reconstruction. People with disabilities will no doubt experience higher levels of unemployment. The overall thrust of this section is to assure integration of disabled people into the economic reconstruction of Kosovo, not to create a separate or segregated approach.

First of all, disabled people need to be visibly participating in what employment and enterprises are developing – just as the UNMIK administration currently seeks to secure the greater participation of women - to convey the image and experience that it is possible for disabled people to be economically productive. For example, we know that persons with disabilities are not specifically included in Civil Service recruitment efforts and few managers or employees know whether there is an existing policy to accommodate persons with disabilities. Secondly, experiences in other countries have shown that it is necessary to enact legislation expressly designed to remove barriers which lead to discrimination against disabled people in the workplace and in economic development. This should include, for example, affirmative action programmes and processes to support diversity in employment and procurement. For example, while current regulations address ethnic and gender balance, they do not have any specific policy provisions that ensure the fair recruitment, hiring and promotion of persons with disabilities into the ranks of its own civil service.

In addition to formal sector employment, the global trend, especially in transitional and emerging economies, is to assure that people with disabilities also have access to and

support in starting their own entrepreneurial enterprises, either through individual, cooperative, or NGO related initiatives.

Wealth creation is also required for the development of investment capital and operating funds for economic and other disability development. Creative self-generation initiatives by OPDs, including both income and equity generation especially when former state assets are being privatised or major foreign investment is generated, need to be supported through legislation, policy, seed funding and human resource development strategies.

The skills and organisational capability to create effective placement, enterprise development, and income/wealth creation structures, require economic development skills among government, DPO and private sector partners.

The Policy Objective is:

Creating conditions to broaden the range of employment and economic development options for people with disabilities in order to narrow the income gap between non-disabled and disabled people.

Strategies include:

- Providing people with disabilities with a range of employment, income generation and economic empowerment opportunities aimed at meeting differing needs and offering real possibilities for economic choices.
- Raising awareness amongst people with disabilities of their potential and their opportunities
- Inter-sectoral collaboration between Government Departments, DPOs and the private sector focusing on disability employment and entrepreneurship.
- Specific programmes for personnel working in placement/personnel/ recruitment and all employers to ensure that they understand the options available in the placement and promotion of disabled job-seekers and workers.
- The enactment of legislation that promotes a policy of anti-discrimination, affirmative action and equitable employment levels for disabled workers in both the public and private sectors and ensures fair assessment of people with disabilities.
- The establishment of support programmes for disabled entrepreneurs through developing specialized personnel within the mainstream support services that understand and are sensitive to the needs of disabled entrepreneurs.
- The promotion of disability participation through targets and sanctions in infrastructure development and industrial reconstruction (for instance, in the Trepeca complex, both as employees and as subcontractors), privatisation or commercialization of State and socially owned enterprises, economic

development and foreign direct investment initiatives. It is suggested that this promotion take the form of quantifiable objectives, such as employment or procurement levels of 10% to people with disabilities.

- Representation of people with disabilities on government bodies and councils
- Assuring that the vocational education initiatives in place in Kosovo are accessible to people with disabilities, again through assuring minimum levels of participation by disabled students, such as 10%.
- Given the primary role of agricultural development, exploration of how agricultural work, including processing, can accommodate people with disabilities, should be included in the overall agricultural development support currently underway in Kosovo.
- Provision of suitable transport systems.
- Development of a database capturing the work and skill status of people with disabilities

E.9 Access to Goods, Facilities and Services

There are substantial inequities in the levels of access to goods, facilities and services offered to persons with disabilities in comparison to those offered to persons without disabilities. The majority of persons with disabilities experience discrimination when they attempt to access goods, facilities and services. Service providers may simply refuse to provide a service, may offer a lower standard of service or a less favourable service to persons with disabilities. The foregoing are forms of discrimination and exclude persons with disabilities from participating fully in the economy and market as a whole and also benefiting from such goods, services and facilities.

The Policy Objective is:

To ensure persons with disabilities have equitable access to goods, services and facilities and to place the onus on service providers to ensure that all reasonable steps are taken to ensure persons with disabilities can access their goods, services and facilities.

Strategies include:-

- The adoption and implementation of legislation and regulations to enshrine the principle that it is unlawful for people who provide goods, facilities or services to the public to discriminate against people with disabilities and to provide a legal framework to ensure that service providers treat people with disabilities the same way they would treat other people, when offering or providing a service or facility.
-

- The publication of a Code of Practice containing practical advice for service providers to better enable them to provide acceptable access and services to disabled people.
- Ensuring that persons with disabilities have recourse to the law when they have complaints about such discrimination by providing via all available means, including community based contacts and organisations.
- All personnel within the Public Sector who are engaged in any form of service delivery, provision of facilities or goods to the public to undertake appropriate training to ensure equitable access for persons with disabilities.
- All service providers within the Private Sector to undertake compulsory certification training to better facilitate equitable access to such goods, facilities and services by persons with disabilities.”

E.10 Participation in Public Life

It is the fundamental human right of all persons to participate in public life. This right is enshrined in terms of Article 25 of the International Covenant on Civil and Political Rights of 1994. However, in practice, persons with disabilities often experience barriers in exercising their rights to participate in the election process or otherwise have a voice in the political realm.

At the most basic level, voter registration sites and polling centers can be inaccessible to persons with disabilities. At another level, society may consider that the vote of a person with disabilities is not of a particular importance or that their participation as an election candidate is not valid. This is a matter of removing not only the physical barriers but also negative perceptions.

The Policy Objective is:

To ensure persons with disabilities have equitable access and opportunity to play a full part in the electoral process and political life.

Strategies include:-

- The adoption and implementation of national legislation and regulations to enshrine the principle that persons with disabilities have equitable access and opportunity to play a full part in the electoral process and political life.
- The adoption and implementation of mandatory national standards regulating and ensuring equitable access to electoral services for electors with disabilities, be that within existing Voter Registration Sites and Polling Stations or by virtue of mobile teams offering election services at home or other suitable venue.
- The issuance of guidelines to electoral administrators on all aspects of access to electoral services to support the mandatory national standards.

- Provision of posters and equipment in voter registration sites and polling stations to allow large print posters of the ballot paper to be displayed and for
- simple ballot paper templates or polling aids to be provided in polling stations, thereby benefiting persons with partial sight.”

E.11 Human Resource and Skills Development

A basic prerequisite for development is the capacity of society to use its own resources to sustain itself. Yet the majority of people with disabilities find themselves in a state of underdevelopment due to past and present discrimination in accessing opportunities. Human resource development (HRD) is one of the key elements that can be used to break the cycle of poverty and underdevelopment.

The Policy Objective is:

The development of the capacity of people with disabilities to participate more effectively in: the economic development of their communities and the society as a whole; governance; and the monitoring of the equalisation of opportunities for people with disabilities within their local communities, at regional and at central level.

Strategies include:

- The transformation of mainstream vocational training services to provide more accessible and inclusive training for people with disabilities.
- Skills development of people with disabilities by deepening their specialised capabilities so that they are able to access incomes through formal sector jobs, through small businesses or community projects.
- Provision of Adult Basic Education programmes.
- Providing people with disabilities with 'learnerships' (opportunities to gain employment experience in actual work situations). This may require adjustments to the built environment and the acquisition of specialised equipment and technology for training and assessment.
- Development of appropriate training standards by accommodating the specific training needs of disabled trainees
- Through positive action, disabled employees should be given the right to take part in upgrading courses, training programmes on new technologies, and training on paid educational leave on an equitable basis.
- Pre- and in-service programmes need to be developed for the orientation and training of vocational instructors in disability-related matters.

E.12 Social Welfare

The social worker's office is a key access point to the service-delivery system for a large percentage of people with disabilities. Unfortunately, the fragmented nature of the service-delivery system and the clinical and treatment orientation of much social worker training and professional attitudes often leads to a lack of personal and community level

empowerment as well as effective referral to other sectors. This means that the social welfare system has to deal with community level reconciliation and reconstruction and

personal and community level empowerment as well as focusing education, employment, transport and housing related issues to the needs of people with disabilities.

Changing to the Social and Human Rights Model implies that welfare services need to be designed to facilitate independence in society, rather than dependence on welfare services. The current Social Assistance Scheme needs to be taken into consideration in this area.

The Policy Objective is:

The provision of social welfare services that aim to integrate people with disabilities within all activities in their communities.

Strategies include:

- Reorientation and training of social welfare workers leading to a restructuring of social welfare services.
- Community development through the support for and strengthening of disabled people organisations.
- Community development through the participation of all sectors of society in all community development initiatives, i.e. integrated community development processes.
- Development of personal assistance services to enable people with severe disabilities to direct their own lives and to exercise their rights to choice and dignity within their own homes.
- Development of community integrated services for persons with more significant disabilities that provide meaningful social and economic activity and lead to independence and empowerment.
- De-institutionalisation of institutions such as the Special Institute at Shtime through re-establishment of contacts between the individual residents with their families and local community.

E.13 Social Security

Where a structure of social security exists, the system needs to be analyzed with regard to how not to create unneeded dependence and how to promote social integration and economic independence.

The Policy Objective is:

The analysis and development of economically rational systems of a social security safety net that also promotes social integration and economic independence.

Strategies include:

- Analysis of the existing system and the evolving development of a social welfare and pension system by the Department of Health and Social Welfare, with particular attention to its incentives/disincentives for empowerment, integration and employment.
- Development of pilot projects that demonstrate alternative approaches to social security, for example, promoting access to small business opportunities, which balance the safety net requirements with incentives for economic initiative.
- System wide implementation of an alternative social security system.

E.14 Housing

The majority of people with disabilities have very little hope of accessing independent housing. Existing dwellings/housing and environments are often inaccessible due to poor design, infrastructure and overcrowding.

Housing schemes very seldom make provision for barrier-free design, thereby excluding people with disabilities from obtaining housing or visiting relatives and friends.

As deinstitutionalisation (e.g. the Special Institute at Shtime) is in the process of occurring, special plans need to be developed with regard to the housing needs of the residents who will leave the institutions.

The Policy Objective is:

To provide people with disabilities and their families with safe shelter and accessible dwellings of their own through equitable access to a range of options.

Strategies include:

- Residential Facilities which are accessible, again at specific levels such as 10% of rental stock.
- Ownership of homes which are accessible, again at specific levels such as 10%.
- Provision of a variety of options with regard to housing, including residing with family/relatives, in communal housing and on own.

E.16 Cultural and Creative Activities, Sport and Youth

People with disabilities experience the same need for cultural and creative activities, sport, and recreation as their non-disabled peers. Sport and creative activities are generally regarded as vital components in the integration of people with disabilities into society. Sport is often a vital component in the successful rehabilitation and inclusion of people with disabilities. Cultural and creative activities provide an opportunity for self-expression as well as providing normalising and stabilising experiences, offering

entertainment and stimulation, alleviating boredom and in some cases providing support to cope with trauma.

Sport and cultural activities at school level are critical for the development of physical qualities, as well as for the development of self-esteem, self-expression, courage and endurance. It is therefore vital that sport at school level receives urgent attention.

The policy objective is:

To develop and extend sporting and cultural activities for people with disabilities so that they can participate in sport for both recreational and competitive purposes.

Strategies include:

- The development of trainers/coaches familiar with sport and arts and culture for disabled people.
- Creating accessible sporting and cultural facilities.
- Public education programmes to make the public, people with disabilities (especially those living in rural areas), sponsors and sport and cultural administrators aware of the different forms of sport and cultural activities for disabled people.
- Sport for disabled people should be 'mainstreamed' as far as possible to increase sponsorship value. In other words, it should be promoted jointly with mainstream events.
- Inclusion of disabled people into interventions aimed at unleashing the creative potential of individuals.

E.17 Statistics

It is important that all data gathering, research and information dissemination reflects the fact that disability - its classification, definition and measurement - necessarily encompasses biomedical aspects as well as social, economic and political ones. For this reason, people with disabilities should form an integral part of the research and data gathering process.

Government, NGOs/DPOs and the private sector need different types of information on disability to enable them to plan and target their resources where they are most needed.

People with disabilities should have access to full information on personal health, education and social aspects affecting their lives. All strategies and mechanisms developed to make information accessible to citizens should be available in a format accessible to people with disabilities.

The Policy Objective is:

To develop and maintain an information system that is based on the Social and Human Rights Model of Disability.

Strategies include:

- Data collection in conjunction with national censuses and household surveys, undertaken in close collaboration with, amongst others, universities, research institutes and DPOs. Better coordination of disability-focused research that investigates the gaps between people's physical or mental conditions and their resources/capacity (personal, economic, social), and the environment (geographic, architectural, social, political) in which they live, work and play.
- Development of a database to provide information on the medical causes of disability, services, existing research, needs of people with disabilities and the incidence of impairment.
- Promoting access for people with disabilities to all information that affects their lives.

F. LEGISLATION AND POLICY

Legislation, if correctly administered, can be used to promote the rights of people with disabilities. However, the enactment of law may not be sufficient to ensure the realization of rights. Thus, there is a need to establish institutions and mechanisms to promote and protect human rights. Legislation does, however, provide an important reference point for redress and offers enforceable support.

F.1 Policy objectives

Legislation, whether it is stand-alone or whether it forms part of other legislation, must be based on the principles enshrined in the Constitutional Framework. It must ensure equality, non-discrimination and protection for people with disabilities. Existing legislation must be scrutinised for compliance with the constitutional principles.

The development of anti-discriminatory legislation must be two-pronged in its approach. First it must seek to address past inequalities by means of equalising opportunities, while controlling any tendency towards further discrimination. At the same time, it must champion the principles of the Constitutional Framework and other international human rights instruments.

F.2 Strategies

All legislation should be framed within the context of the agreed policy objectives relating to disability. Thus:

It must involve the disability sector in discussion with regard to proposed legislation
It must seek inter-sectoral co-operation amongst all public and private sector stakeholders.

G. IMPLEMENTATION

To ensure the coordination and implementation of the Comprehensive Disability Policy Framework into government policies, it is recommended to have an Office of Disabled People within the Government structures, located in the Prime Minister's Office. The purpose of the location of the Office in the Prime Ministers Office is to ensure that it has sufficient access to all government departments and to ensure that it impacts positively on all government legislation, policies and programmes.

Furthermore, the current UNMIK Task Force on Disability will be transformed into a Disability Council as a permanent consultative structure for government, supported by, and working closely with, the Disability Office.

The functions of the Disability Office will be:

- To facilitate, co-ordinate and monitor the implementation of the Comprehensive Disability Policy Framework;
- To provide a link between Government and civil society via the Disability Council;
- To develop a management system for the co-ordination of disability planning, implementation and monitoring in the various departments;
- To be the Secretariat for the Disability Council;
- To provide advice to the Prime Ministers Office on disability matters;
- To ensure wide public education, as well as capacity building for the disability movement and government departments to implement the Comprehensive Disability Policy Framework;
- To facilitate the development of legislation;
- To facilitate and co-ordinate public awareness programmes aimed at changing fundamental prejudices in society;
- To facilitate budget analyses to identify whether sufficient resources are targeted towards disability, and particularly towards the integration and empowerment of disabled people;
- To facilitate financial resources in support of the implementation of the Comprehensive Disability Policy Framework.

It is essential that municipalities develop implementation plans at local level to realise the strategies outlined in this policy document.

H. MONITORING

Monitoring is an essential element in the upholding of human rights. Monitoring can be used as a corrective tool against the violated rights of people with disabilities. It can also be used to measure trends and patterns of discrimination.

While all monitoring structures in Kosovo should include the monitoring of the rights of people with disabilities in their mandates, the proposed Disability Office and Disability Council will have a special responsibility for this task.

The Disability Office, being situated at a central location within Government, and having the responsibility for co-ordinating the implementation of the Comprehensive Disability Policy Framework, will clearly be the key structure within Government to monitor not only the implementation process, but also its impact and the human rights of people with disabilities in general.

The Disability Council, having participation by civil society stake-holders as well as key Government departments, will also have an essential monitoring role.

Finally, as is international practice, the Kosovo disability rights movement in the form of Handikos will always take to itself a key role in monitoring, as the voice of people with disabilities in Kosovo.

APPENDIX 1

**ENGLISH-ALBANIAN TERMINOLOGY ON
IMPAIRMENTS, DISABILITY AND BARRIERS TO
PARTICIPATION**

1. Preferred Terminology

Language is a powerful tool and the terminology can have the effect of labeling persons with impairments, stereotyping them, discriminating against them, and ultimately creating a culture of non-acceptance of diversity. Words which are connected to negative stereotypes, or which are designed to evoke pity, should be avoided. A person's impairment should be referred to only when it is relevant to do so. It is important that terminology reflect a definite shift in philosophy away from the present medical/individual approach to disability. The language needs to reflect that the difficulties individuals experience are related to the social environments in which they are living and learning. Here are a few examples of the preferred terminology:

- Use *impairment* not *handicap*. The word *handicap* derives from the phrase *cap in hand*, referring to a beggar, and is despised by most people with impairments. Other terms to avoid: *physically/mentally challenged*.
- Although some people with impairments prefer the terms *physically challenged* or *different abled*, these should not be used generally
- Avoid *suffers from*, *afflicted with* or *victim of*, all of which cast impairments as a negative. *Suffers from* indicates ongoing pain and torment, which is no more the case for most people with impairments as it is for most people without impairments. *Afflicted with* denotes a disease, which most impairments are not. *Victim of* implies a crime is being committed on the person who has an impairment.
- Do not use *wheelchair-bound* or *confined to a wheelchair*. People see their wheelchairs as convenient modes of transportation, not prisons, and the *bound/confined* phrase belies the fact that many people with motor impairments engage in activities without their wheelchairs, including driving and sleeping. The proper phrase is *uses a wheelchair*.
- Use *able-bodied* or *persons without impairments*. The terms *normal* and *whole* are inappropriate and inaccurate.
- Most impairments are not a disease. Do not call a person with an impairment a *patient* unless referring to a hospital setting. In an occupational and physical therapy context, *client* or *customer* is preferred.
- People who consider themselves part of Deaf culture refer to themselves as *Deaf* with a capital *D*. Never use the terms *Deaf-mute* or *Deaf and Dumb*. Deaf people are not mute, but they communicate with sign language.
- Avoid *deformed*, *deformity* and *birth defect*. A person may be *born without arms* or *has a congenital impairment*, but is probably not defective.
- Use *people first terminology*. Thus we talk about a *person who has Down Syndrome* rather than a *Down Syndrome person*. This places the emphasis on the person, rather than on the impairment. Avoid *mongol* or *mongoloid*.
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- Avoid *mentally retarded, insane, slow learner, learning disabled and brain damaged*. Use *people first terminology* as in *a person with an intellectual impairment, or person with emotional problems*.

2. General Terms

accessibility (hyrje e përshtatshme) – refers to barriers in the environment that exclude people from participation. Barriers affect many more people than those who obviously have impairments. The aged, pregnant women, mothers with prams and people with chronic illnesses are daily impeded by architectural barriers as are those on crutches and wheel chair users. Accessibility also refers to access to the written and spoken word for the visually and hearing impaired and those who are illiterate.

assistive devices (mjete ndihmëse) - tools that are used by people with physical impairments or sense impairments to overcome the barriers that limit their participation in ordinary activities.

barriers to participation (pengesa të qëndrimit) – these are barriers that prevent people with impairments from full participation in society. They include:

- attitude barriers (e.g. stereotypes of persons with impairments as dependant and in need of care),
- physical barriers (pengesa fizike) such as architectural barriers i.e. design of buildings, urban and rural infrastructure that exclude wheelchair users, elderly people, parents pushing a pram etc.,
- communication barriers (pengesa shoqërore) that exclude persons with impairments from enjoying equal access to information with people without impairments. For example, lack of provision of braille and sign language will exclude persons with visual impairment and the Deaf from participation.

disability - is considered a form of oppression and refers to the disadvantage or restrictions of activity caused by a contemporary social organisation which takes little or no account of people who have physical and other impairments and thus excludes them from the mainstream of social activities (Davis 1996; Abberly 1996).

early intervention (ndërhyrje e hershme) – a partnership between families and service providers designed to maximise the development of children with disabilities from birth to 3 years.

environmental accessibility (përshtatshmëri, arritshmëri, aksesibilitet i mjedisit)-encompasses both accessibility of the built environment and accessibility in terms of access to information/ communication. In terms of policy planning accessibility means measures taken to ensure barrier free environment.

identification (ekzaminimi diagnostik) - the gathering of information about a person by observation, interview, and formal testing, to determine whether the person has an impairment.

impairment is an objective description defining any loss in terms of psychological or physiological structure or function, such as hearing loss, a spinal cord injury or brain damage.

inclusion (njësi e prëfshirjes) – the value system which holds that all individuals, regardless of their disability, are entitled to participate in the recreational, employment, social and educational activities of their community alongside their peers. It is a philosophy which seeks to move away from segregated provision of services for people with impairments and seeks to ensure that individuals are supported in their full participation in community life.

Inclusive education – is the provision of education within the inclusive value system. It is about:

- acknowledging that all children and youth can learn and that all children and youth need support
- enabling education structures, systems and learning methodologies to meet the needs of all learners
- respecting differences in learners, whether due to age, gender, ethnicity, language, class, impairment, HIV status etc.
- changing attitudes, behaviours, methodologies, curricula and environments to meet the needs of all learners
- maximising the participation of all learners in the culture and the curriculum of educational institutions and minimising the barriers to learning

individual education plan (plani individual i edukimit) – a written plan for a student's individual education program, which is tailored to his/her unique learning needs. It specifies appropriate goals and procedures for the learner with special needs through consultation between parents and teachers.

regular school (shkollë e rregullt) – the community school which provides education for children who belong in that community.

segregation (segregacion) – an action of separating a group of people from the rest of community, esp. because of their impairments and treat them differently.

special education (edukim special) - the educational process designed to meet the individual learning and developmental needs of a pupil. It is a service and not a place and can be provided in a variety of settings, including regular and special schools.

special needs (nevoja të veçanta) – needs which an individual might have that should be met if the person is to be able to participate fully in community life

special school (shkollë speciale) – a school designed for students with impairments.

3. Impairments

3.1 Physical Impairments

Dëmtimet fizike

Physical impairment refers to congenital or acquired damage to muscles, nerves, bones or skin leading to difficulties in reduced mobility and sensibility performing activities of daily living such as: getting around, personal care, dressing, eating, cleaning etc. It can be associated with general weakness, pain, hyper tone and spasticity.

Assistive devices for persons with physical impairment

- **orthosis** (ortoza ose ortetikë) – supportive appliance that can be applied to or around the body in the care/treatment of physical impairment.
- **prosthetics and artificial limbs** (proteza dhe gjymtyrë artificiale) – an artificial substitute for a missing part.
- **splints** (longetë) – an appliance used to support or immobilize a part while healing takes place or to correct or prevent demormity.
- **orthopedic shoes** (këpucë ortopedike)
- **electric wheelchair** (karrocë elektrike me rrota)
- **manual wheelchair** (karrocë manuale)
- **toiletchair** (karrige tualeti)
- **cushions for a good sitting position** (jastëkë për pozitë të mirë të së ulurit)
- **walking stick** (vijë të ecur)
- **special tools for writing/in kitchen/personal care like thick pencils, long handle on the watertap, etc.** (mjete të veçanata për të shkruar/në kuzhinë, për kujdes personal si lapsa të trashë, dorzë të gjatë për kyqëse uji, etj)
- **respirator** (respirator, -i)
- **walking frame** (korniza për ecje)
- **crutches** (paterica, -t)
- **adjustments to vehicles** (përshtatje e mjeteve transportuese) – special arrangements, which enable the access and use of a car and public transportation for the persons with impairments.
- **a ramp** (platformë) – a slope that joins two parts of building, when one is higher than the other. Ramps are needed to make building accessible for a person who uses a wheelchair.

3.2 Visual Impairment

Dëmtimi i të pamurit

The loss of sight may be total or partial. *Blind (i/e verbër)* refers to total loss of vision. Blind persons might experience difficulty in mobility and knowing where things are, doing some activities of daily living, writing, reading and following visual signs or commands.

Severe visual impairment, low vision or *visual impaired* are more accurate for persons who have some degree of sight, but who have for example a limited range of sight and focus that cannot easily be corrected with spectacles. It usually requires very specialised spectacles, braille or large print, and other equipment to assist them to compensate for their low vision.

Assistive devices for persons with visual impairment

- **braille** alphabet (alfabeti i Braille, -it) - a system of reading that uses raised dots to signify letters and numbers.
- **braille writing tools** (mjete të shkrimit në kuadër të alfabetit Braille)
- **guide dog** (qeni udhëzues) – a dog trained to help a person in moving
- **magnifying glass** (syze zmadhuese)
- **magnifying reading equipment** (pajisje zmadhuese për lexim) – an optical equipment magnifying written text to the screen.
- **specialised computers** (kompjuterë të specializuar) – e.g. a computer, which translates written text into braille and vice versa or a computer, which gives spoken feedback for the writer (speaking computer).
- **talking book** (libër folës) – a tape that can be listened by a person with visual impairment
- **white cane** (shkop i bardhë) – a mobility equipment

personal assistant (ndihmës personal) - a person, who assists a person with an impairment in daily activities, and/or education and in working.

3.2.3 Hearing Impairment

Dëmtime të të dëgjuarit

Deaf (shurdhësi, -a) – a total hearing loss. A person who was born Deaf uses sign language as a mother tongue. Some Deaf people also learn to speak and to read speech by observing the speaker's face. They also learn to read and write the language of the hearing community.

Deafned person (i shurdhuar, -i) - a person, who has lost his/her ability to hear totally after learning the spoken language. A person is able to speak.

hearing impairment (dëmtim i të dëgjuarit), **hearing loss** (humbje e të dëgjuarit) – terms that refer to all degrees of hearing loss from slight to profound.

sign language (gjuha e shenjave) – hand and body language used by totally Deaf people to communicate with others. It is the language that is acquired naturally as a mother tongue by the Deaf.

Assistive devices for persons with hearing impairment

- **flashing light** (dritë sinjalizimi) – works like a door bell, indicates if there is someone at the door.
- **hearing aid** (mjet ndihmës për të dëgjuar) - an apparatus, usually electronic, to amplify sounds before they reach the inner ear. A hearing aid can assist people who are hard-of-hearing to communicate *more easily* with hearing people.

interpreter (interpretues, -i) – is a person, who helps to break down communication barriers between the Deaf community and the hearing people by translating sign language to oral language and *vice versa*.

3.2.4 Intellectual Impairment

Dëmtime intelektuale

Intellectual impairment refers to intellectual ability and self help skills that are significantly below the expected level for an individual's age. Impairment manifests before age 18 and is likely to continue indefinitely. According to the degree of intellectual impairment, there are difficulties in three or more areas, including: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency, as well as the continued needs for individual help.

Intelligence tests (I.Q.) and intellectual ability tests are used to determine individual's level of intellectual ability, compared to a representative selection of the whole population. I.Q. tests can be subject to bias and provide only a narrow view of the individual's ability. A qualified psychologist who can account for bias, or behaviour that might affect the results, must perform them. In addition to I.Q. tests and interviewing, other additional tests and information are needed in order to determine an individual's intellectual level, and especially strengths and learning-potential in different areas. The assessment of a child is also based on reference to someone who knows the individual well, such as his or her parents. Assessment of a person with intellectual impairments should never be done solely for the purpose of placement. It should be used as a mechanism to identify appropriate interventions which can promote the individual with an intellectual impairment's ability to learn and participate in the life of the community.

functional skills (shkathtësitë funksionale) – skills enabling a person with intellectual impairment to live with some degree of independence in the community, i.e. sign recognition, basic reading, signing one's name, simple form filling, money handling, time-telling.

intelligence, I.Q. (intelegjenca, IQ) - Intelligence tests (I.Q.) are used to determine the individual's level of intellectual ability compared to representative selection of the whole population. I.Q. tests do not describe person's learning potential. Intelligence tests are very limited as they ignore a range of abilities such as creativity, interpersonal skills, perseverance etc.

delayed development (zhvillimi i vonëshëm)- the person with an intellectual impairment shows delayed development globally across the range of development processes (language, motor, emotional and physical as well as intellectual). However, development continues throughout the life span and many individuals with intellectual impairment reach levels of development that were initially thought to be impossible for them.

memory difficulties (vështirësi të kujtesës) – individuals with intellectual impairment have great difficulty with memorising factual information. Their memory for life events or episodic memory is much stronger.

Special needs of persons with intellectual impairment

human rights- individuals with intellectual impairment have had their human rights infringed in many respects. Their control over their sexuality, their finances and other important life choices has been compromised through the stereotype of total incompetence. They need to be supported in making choices and in controlling their own lives within a context of human rights for all citizens.

classroom aide – a child with intellectual impairment might require the support of a classroom aide for the teacher in an inclusive education system

job coach – an adult with an intellectual impairment might require a coach to assist them in adapting to the routine and the job requirements when starting employment in the open labour market.

supporter – an individual with intellectual impairment may require from time to time a supporter who can help them to express their views and support them in advocacy for access to their human rights.

simplified reading materials – materials which require a low ability of reading but are concerned with adult topics need to be developed. For example, a beginning level reader that focuses on financial management can assist the individual with intellectual impairment.

3.2.5 Emotional and Behavioural Difficulties

Vështirësi emocionale dhe të sjelljes

Emotional and behavioural difficulties cause trouble at home, at school and in society. Persons who are affected are in conflict with themselves and others. They have problems in coping with various aspects of daily life, forming and maintaining relationships, in getting over difficult feelings like powerlessness, fears, and anxieties.

In some cases, people may also have problems in perceiving or interpreting reality, e.g. to see and hear things that do not exist. Treatment includes counselling, family support, personal assistance and medication that is needed to enable the person with a chronic psychiatric impairment to live independently in the community.

maladaptive behavior, social adjustment (adaptim i vështirësuar social) – behavior that obstructs the development of socially appropriate behaviours and social acceptance of the person in society.

aggressive behaviour (sjellje agresive) - ready or likely to attack or quarrel. It can be an external indicator of emotional turmoil.

anxiety (ankth, anksozitet) - a chronic state of tension, which affects both mind and body.

challenging behaviour- behaviour that presents a challenge to the effective functioning of the particular environment in which the individual is participating (vështirësi në sjelljes). The behaviour of the individual is outside the norm of what is expected in a given situation

depression (depression) - the state of being sad and without enthusiasm or hope.

phobias (fobi shoqërore)

post-traumatic stress disorder, PTSD (çrregullim stresi posttraumatik) - a disorder in which a previously experienced stressful event is re-experienced psychologically many times, associated with anxiety and fear.

rehabilitation (rehabilitim) - re-education, particularly where an individual has been ill or injured, to enable them to become capable of daily activity.

3.2.6 Multiple Impairments

Dëmtime të shumëfishta

Multiple impairments are concomitant impairments, such as intellectual impairment – orthopedic impairment etc. Individuals with multiple impairments often experience great difficulty in gaining full participation in community life. Special efforts are needed to include them in the mainstream of community activity.

4. **Speech, Communication, Language, and Mathematical Problems**

Probleme të të folurit, të komunikutimit, të gjuhës dhe matematikore

Speech, communication, and language problems are the most common difficulties for children. Speech difficulties vary from mild articulation problems to total mutism. Language problems occur first as a delayed development of speech, and during school age as reading, writing, and mathematical learning-difficulties.

Learning disability occurs in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, or in mathematics. A child with a learning difficulty is unable to profit from regular classroom methods and materials without special educational help. He/she is, or will become, an underachiever. Learning

difficulties are exhibited mildly or severely with perception, conceptualization, language, memory, motor skills and control of attention.

This section does not include children who have learning difficulties which are primary the result of visual, hearing, physical, or intellectual impairment, or emotional and behavioural difficulties.

Some terms concerning speech and learning difficulties

attention-deficit disorder, ADD (çrregullim i mungesës e vëmendjes) – a condition determined by difficulty in focusing on information, and sustaining attention. The person is seems to be like a *dreamer*.

attention-deficit/hyperactivity disorder, ADHD (çrregullim i mungesës e vëmendjes / çrregullim i hiperaktivitet) – a condition determined by difficulty in focusing on information, sustaining attention, and hyperactive behavior.

aphasia –adults experience a limitation of their ability to communicate verbally as a result of a stroke or brain damage resulting from traumatic injuries.

autism (autizëm) – self-absorption, a serious mental condition that develops in childhood, in which one has serious difficulties to communicate or form relationships with others because of excessive rigidity. In spite of problems, the person might have significant strengths.

communication problem (problem komunikimi) – a problem in receiving auditory input, using language, or producing speech such that the process of exchanging ideas and expressing feelings affected.

expressive language problems (probleme gjuhësore në të shprehur) – difficulties in expressing oneself verbally

receptive language problems (probleme gjuhësore në të kuptuar) – difficulties in receiving and understanding verbal or written communication

dyslexia (disleksi, -a) – A syndrome in which a person has unusual and persistent difficulty in learning the components of words and sentences, in intergating segments into words and sentences, and in learning other kinds of of representational systems, such as telling time, direction, reasons.

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DISABILITY POLICY IN EDUCATION IN KOSOVO

(Draft policy paper to be part of the “Comprehensive Disability Policy Framework for Kosovo”)

1. INTRODUCTION

A human rights and development approach to disability has significant implications for the way in which education is provided. Educators tend to classify people with disabilities according to disability. Disabled learners are then either placed in special schools or classes, or totally excluded from any educational opportunity on the grounds that they are "too severely disabled". This naturally results in illiteracy and low skills especially amongst adults with disabilities, contributing significantly to high levels of unemployment and poverty.

Disabled children and their parents have very little or no choice in accessing quality education. Their struggle to access education in the mainstream with their peers is well documented. Experience internationally has shown that the barriers for children with disabilities accessing education in the regular education system can only be addressed through supportive legislation and active lobbying. This legislation should include the acknowledgement of the basic human right of every child to access education that is non-discriminatory.

Education has traditionally concentrated on years spent at school and, to a lesser degree, on tertiary education. Links with the world of work and training have been weak. Changes in educational policy are of particular importance to the future economic empowerment of people with disabilities.

In order to discuss education policy with respect to individuals with disabilities, we start with a definition of what is meant by special needs education and inclusive education because the understanding of these concepts varies. For the purposes of this policy document we take the following definitions:

“Inclusive education and training:

- *Is about acknowledging that all children and youth can learn and that all children and youth need support*
- *Is about enabling education structures, systems and learning methodologies to meet the needs of all learners*
- *Acknowledges and respects differences in learners, whether due to age, gender, ethnicity, language, class, disability, HIV status etc.*
- *Is broader than formal schooling and acknowledges that learning also occurs in the home and the community, and within formal and informal manners*
- *Is about changing attitudes, behaviours, methodologies, curricula and environments to meet the needs of all learners*
- *Is about maximising the participation of all learners in the culture and the curriculum of educational institutions and minimising the barriers to learning”*

(South African Education White Paper 6: July 2001)

Thus inclusive education is not only about provision for children with disabilities but rather about a fundamental change in the way we view diversity in the classroom and in the broader society.

The term special need in education is also one which is broader than relating just to disability. It describes any educational provision that needs to be made in addition to the normal provision in order to meet specific individual or “special needs”. Thus it is possible that a child with a disability may not require special provision (for example, a child who has a mild

physical disability). A child with no disability might, however, require special provision (for example, children who have been traumatised by war).

It is also important to distinguish between mainstreaming and inclusive education. Mainstreaming occurs when a child with a disability is placed in a mainstream classroom with little or no change to the classroom or the curriculum. The child will only be able to cope in this environment if he or she has achieved to a high enough level despite his or her disability. The child must fit the system. Inclusion of children with disabilities or special needs is mostly concerned with the basic human right of the child to be educated amongst his or her peers. In order to achieve this right for all children, schools and the education system must change to be more accommodating. The system must fit the child. For example, it would be very difficult to mainstream a child with a severe mental disability because they would not be able to function at the same level as the rest of the class and they would not cope with the regular curriculum. But it would be possible to include this child where learning outcomes are fitted to the child's needs. This would require a flexible curriculum and individualised goals. We would need to change our expectations from making the child more normal to ensuring their maximum participation throughout life.

Inclusive education focuses on identifying and removing barriers to learning and participation. Instead of trying to make the individual more "normal", there is an emphasis on making the environment more "normal" for the individual. Barriers for learners with disabilities could include inaccessible buildings. However, barriers go further than this to extend to an inaccessible curriculum, language barriers, low expectations, negative attitudes and stereotypes around disability and other forms of difference. Barriers to learning can also arise from socio-economic factors such as poverty or class. An inclusive education system would focus on moving or removing these barriers in an ongoing attempt to develop welcoming centres of learning in which all individuals can learn and participate.

All people should have equal access to education opportunities, regardless of their disability/ies. Every learner has her/his own capabilities and learning needs. Respect for diversity should be emphasized and promoted. All people should have access to all possible educational and socially normal environment opportunities; receive education and training in as normal an environment as possible; ensure equity for learners with disabilities within an inclusive environment.

The basic ideas of inclusive education can be found in many previous international policy documents:

Conventions on the rights of the child 1989

- Right of a disabled child to education and training -> to achieve the greatest degree of self reliance and social integration possible
- Education shall aim at developing child's personality, talents and mental and physical abilities to the fullest extend

The Jomtien World Declaration on Education for All 1990

- Education for all
- Individual differences are accepted as a challenge not as a problem

The Standard Rules on the Equalisation of Opportunities for Persons with Disabilities 1993

- Educational authorities are responsible for the education of persons with disabilities in

integrated settings: educational planning, curriculum development and school organisation.

Salamanca Statement and Framework for Action adopted at the World Conference on Special Needs Education 1994

-Schools should accommodate all children regardless of their physical, intellectual, social, emotional, linguistic or other conditions.

-“Special education needs” refers to all those children and youth whose needs arise from disabilities or learning difficulties

-regular mainstream schools provide the most cost-effective means of achieving education for all

2. CURRENT SITUATION OF SPECIAL EDUCATION IN KOSOVO

The present *policy paper* is issued at a point when the situation in Kosovo is still to be considered complex. Political tension and serious social and economic problems within Kosovo itself and in the whole region have not ceased to exist despite the changes in the Federal Republic of Yugoslavia (FRY), the international efforts to stabilise the region and the work done by various humanitarian organisations since June 1999.

In such a context, this policy paper is aimed at fostering IE in the framework of the mainstream education system in Kosovo by improving school facilities, human resource development and institutional capacity building. This process is not only dependent on the possible changes occurring in its external and internal political and social environment. As such, it will carefully avoid taking a biased approach, and it will be developed and will support all groups – ethnic and professional, local and international, administrative and non-governmental bodies, special needs/disabled people and their local organisations.

In terms of process and outcomes, the policy aims at being flexible, inclusive, encouraging participation and real ownership of all those directly involved. The underlying philosophy of this policy paper is including disabled people at all levels of the education reform process starting from the design, planning, implementing and assessing, up to the decision making one.

2.1. Government and Sectoral Policies

2.1.1. Institutional and Administrative Structures. Department of Education and Science

As far as education is concerned, immediately after the war (1999), a UNMIK Department of Education and Science (DES) was established in March 2000, with a staff composed of local and international educators. DES is in charge of educational administration and school management throughout Kosovo, with the subsequent Regional Administration and two international education officers in each of the five KFOR zones. The municipalities constitute the traditional local government institutions. An international UNMIK Municipal Administrator directs them, on a provisional basis. Special needs and inclusive education is part of this arrangement. At the moment, DES has an important involvement in improving special needs and inclusive education through the Finnish Support to the Development of Education Sector in Kosovo (FSDEK), financed by the Ministry for Foreign Affairs of Finland and implemented by a group of highly qualified experts. At the same time DES plans to hire by the end of September 2001 a local Special Needs officer that will work on conceptual, educational policy and administrative issues of Special Needs/Inclusive Education. This is an important step forward in the current difficult financial situation of the education sector.

2.1.2. Current State and Policies for Special Needs/Inclusive Education¹⁰

In September 2000, DES has prepared a document concerning Special Needs/Inclusive Education (SN/IE) in Kosovo.¹¹ The major objective mentioned in the document is “to provide appropriate education for those with special needs and to ensure that children with special disabilities are included in accessible, quality education in Kosovo”.

According to this document (p.1), “the enrolment of children in Kosovo at the end of 1999/2000 school year was estimated at 400.000. Given most conservative estimates of severe levels of disability (1%), the likely incidence of children with disabilities is 4000. Currently, there are fewer than 400 children and youth in the 11 schools and classes that exist for students with disabilities.

We need to also take into account here that there are probably many children in regular education who have special needs that are not being met. Many of these would relate to the aspects of diversity mentioned in the definition of IE above, but there are also many children with undetected disabilities – hearing impairments, visual impairments and emotional disturbances are likely to be undetected. It would seem therefore that identification and meeting these needs in regular schools should also be included in a policy for inclusive education.

Starting from the data offered by the same document as well as the field visits and analysis carried out by the FSDEK team there are three major areas of existing provision for disabled – hearing, vision, and intellectual impairment. There are five special needs schools in Kosovo. Each type of impairment has one or two residential schools (Pristina – for intellectually impaired; Prizren – one for hearing impaired and one for intellectually impaired; Peja – for visually impaired; Mitrovica – for intellectually impaired).

A hospital school in Stimje has been created in September 2000 for a small number of intellectually impaired children. In addition, schooling for disabled is supported by a certain number of attached special classes in mainstream schools (Pristina, in the case of hearing impairment; Gjilan – various impairments; Mitrovica with a small SN school for Serbians).

There is no systematic provision for those with physical disability (e.g. children with cerebral palsy, chronic illness or disease, amputees) or for children with learning disabilities. There is yet no inclusive education provision in Kosovo, although there are some isolated cases in mainstream schools where attached special needs classes are working (Pristina, Gjilan).

The main educational policy principle underlying the work of DES concerning disabled is that of inclusion, according to which mainstream schools will be required to adapt to accommodate a range of diverse needs and abilities. Their ability to meet the needs of learners with disabilities

¹⁰ See for a historical perspective, Fetah Bylykbashi, *Special Needs Education in Kosovo: a short history* (in Albanian). Presented during the *Seminar on Special Needs Education*, October 25, 2000 (unpublished paper).

¹¹ See *Special Needs Education – September 2000: an Overview*, Pristine, 2000.

should be measured against the levels of support that a particular learner requires, rather than by category of disability. The category of disability is a medical concept that is not appropriate for measuring educational needs. However, DES is aware of the fact that this will be a long and difficult process (current estimates mention approximately 10 years) and its implementation can only be done according to a 'step by step', gradual approach.

The following policy measures are seen as basic in the framework of such a vision:

- to strengthen the existing structures (i.e. special needs schools/classes) for those with intense support needs. A careful consideration of the ways in which these existing structures can support inclusive education should be undertaken so that the strengthening supports inclusion rather than the development and strengthening of a separate system of education.
- to build awareness and acceptance throughout the mainstream while marshalling adequate and appropriate support for children, youth and their teachers.

In such a context, DES is envisioning two main steps. At the moment, DES is at Step 1, while attempting to overlap a little with Step 2:

- **Step 1** aims at rehabilitating some residential schools, opening a school for children at a psychiatric institution; planning a hospital school, preparing schools for children with severe physical impairment, as well as organising a series of in-service training sessions for the staff in those schools (carried out mainly by international NGOs or projects, FSDEK included). Care should be taken to ensure that children's needs are not identified according to the type of disability but according to the support needs of children. These centres can be developed for individuals with high support needs.
- **Step 2** is aimed at convincing the University of Pristina that all short-term and conventional courses in teacher pre- and/or in-service professional development should include deliberate instruction on and about the principles of inclusion. It also envisages supporting reintegration of children who require low levels of support.

In July 2000, UNMIK DES has developed the concept of Lead Agencies. This initiative is a new one for the educational setting in Kosovo. The Lead Agencies are being seen as main policymaking and co-ordinating bodies in different sectors even though they are not the only founders of the activities in the areas in which they are co-ordinating. DES UNMIK has invited different international organisations and projects to act as Lead Agencies for different sectoral educational policies. The Finnish Support to the Development of Education Sector in Kosovo (FSDEK) has been appointed as Lead Agency for this domain of interest. At the same time FSDEK has developed a fruitful cooperation with UNICEF, the Lead Agency for Curriculum Development and CIDA – Canada, the Lead Agency for Teacher Training. The excellent co-operation and coordination among these three organizations is one of the best chances for sustainable further changes in the education sector.

2.1.3. Current State and Policies for Human Resource Development and Institutional Capacity Building

Restructuring pre- and in-service human resource development, as well as institutional capacity building of schools – SN/IE issues included - are considered at the moment as crucial in designing future global and sectoral educational policy in Kosovo.

As far as *pre- and in-service teacher training* is concerned, up to September 2000 there was no institutional structure that could cope with the training of teachers for SN/IE issues. However, a series of local and international organisations and NGOs (i.e. UNICEF, Handicap International, Handikos, Oxfam a.s.o.) have started the in-service training of teachers for special needs and inclusive education under UNMIK supervision immediately after the war.

Started in September 2000, FSDEK is currently implementing the first long-term and systemic project in the domain of professional development for special needs/inclusive education¹². In the framework of this project three main components will be carried out up to 2003: (a) Educational policy development and support; (b) Professional Development for future trainers, administrators and policy makers for the domain; (c) Training for school improvement and development processes. Up grading training packages and underlying follow-up sessions for inclusive education have been already carried out between November 2000–September 2001 in the framework of this project.

At the same time, it was for the first time with this project that the training content has been agreed with local and international players (DES, Handikos, Oxfam, principals and teachers from mainstream and special needs schools/classes, disabled people and their organisations etc.). DES as well as other local and international partners (UNICEF, Handikos etc.) has explicitly considered these activities as being the most complex input in human resource development for inclusive education since 1999.

2.2. Background studies

There are a few general and sectoral educational policy documents that can be taken into consideration when designing the Special Needs/Inclusive Education Policy under the UNMIK DES. These can be divided into the following three clusters:

a. Analyses. General educational policy documents. The British Council (August 1999), UNMIK (March 2000), Ministry for Foreign Affairs of Finland (April 2000) and the World Bank (Europe and Central Asia Region Unit (August 2000) have developed the most relevant documents up to now. As for special needs/inclusive education, Handikos – one of the most important local NGOs - has carried out important work in order to identify special needs/disabled people. The database provided as well as other statistics is expected to be relevant sources of information, since the Present concept paper focuses on fostering inclusion educational policy.

b. Studies concerning SN/IE in Kosovo. Due to the support given to Kosova Education Center (KEC) by the Finnish Ministry for Foreign Affairs, a special education adviser to KEC wrote the first report on SN/IE in August 2000. There is also a report carried out by a local expert from DES on the history of SNE in Kosovo. Those studies identify problems and priorities and as such they can encourage complementary approaches in fostering inclusive education.

¹² See *Towards Education for All. Finnish Support to the development of Special Needs and Inclusive Education in Kosovo. Project Document (Implementation plan and budget)*. FSDEK – Pristina, Ministry for Foreign Affairs – Helsinki, January, 2001 (unpublished paper).

c. *UNMIK – education policy documents and reports*. Starting with the implementation of the *Secretariat of Education* under the UNMIK Civil Administration the first policy papers have been issued in September, then in December 1999 (see “UNMIK Strategic Plan – Education Sector” and “Interim Arrangements for the Conduct of School education in Kosovo”). The documents set up short-, medium- and long-term objectives, the education sector goals, further

strategy steps, and framework for action. These papers mention the importance of future institutional capacity building and human resources development, teacher education included.

(d) As Lead Agency for Special Needs Education, FSDEK has prepared and presented to DES a “Draft Policy Paper on Special Needs and Inclusive Education in Kosovo: Current State and Prospects” in February 2001. This document has been at the basis of any further policy development for special needs education in Kosovo.

2.3. Problems to be addressed

2.3.1. General educational problems

As it is well known, all educational sectors were highly affected during the parallel system (1990-1998). The quality of education decreased and the exposure to Western models ceased for more than 10 years. As a consequence of the fluid and sensitive situation after the war, together with the historical and cultural traditions of the education in Kosovo, any reform implementation will be neither easy nor uncontroversial. As far as the education system and special/inclusive education issues are concerned, most of the international and local studies highlight the following general problems:

- Educational policymaking and strategic planning in education are at their initial points.
- The Education System is under-regulated, functioning mostly against ad-hoc regulations.
- The size and the structure of the school population are still uncertain.
- Both children and teachers have experienced and witnessed violence and death.
- Special Needs Education (SNE) is far to attain appropriate standards while *inclusive education practically does not exist*.

2.3.2. Problems concerning special needs/inclusive education

Generally speaking, after the war and the educational crisis of the nineties sectoral statistics indicate that *the SN/IE in Kosovo was among the poorest in Europe*. The crisis added some more problems. Statistics show a relatively high level of mild and high incidence disabilities. No educational provision is available for impaired youngsters over 14.

In order to identify, analyse and address special problems of inclusion of disabled, the FSDEK team that works in this domain has undertaken the following activities:

- (a) process- and problem-oriented seminars aiming at identifying issues and priorities in the domain (with representatives of local organisations of the special needs/disabled people);
- (b) workshops or meetings with all actors involved in the process of policy development and implementation (representatives of different donors or organisations active on the field);
- (c) participation in concrete policy making bodies (the FSDEK project is represented in the *Task Force for preparing an educational policy document concerning the inclusion of disabled*, in the Lead Agencies for Curriculum development, Teacher Education, Vocational Training, as well as in the co-ordination committee of local and international NGOs);

- (d) needs analysis of teachers, students, parents, schools; field visits in mainstream and special schools/classes; interviews; observation in concrete educational settings.

The general educational problems identified and analysed during these activities can be clustered under the following categories:

- problems relating to the educational environment and infrastructure (buildings, physical facilities, equipment, services, access of disabled)
- problems relating to governance (institutional structures; institutional, team and individual tasks; division of tasks among institutions, including inter-linking mechanisms like referrals, incentives, efficient use of resources, better policies, planning, and control)
- problems relating to staff, staffing/training (knowledge, skills, and practices).

2.3.3. Problems to be addressed by the further policy for SN/IE

The activities carried out during the situational analysis reached a consensus according to which – in order to foster inclusion in the mainstream system - the need of improving policy making, human resource development and institutional capacities constitutes an absolute priority¹³. Concerning this aspect eight main problems have been identified during the preparation phase. They are all relevant for the further policy development and implementation:

1. The first problem: *the inadequate political, legal and institutional framework concerning inclusion as well as human resource development that can foster inclusion*. A common feature in many transition systems – and Kosovo is not an exception - is reforming education without a clear and coherent underlying policy and vision. Policy for special needs/disabled people is lacking coherence and consistency. Policy-making is carried out without a real partnership of all those concerned, and first of all that of disabled people. A coherent policy making, human resource development and institutional capacity building project – and the FSDEK is an example of that – will be, without any doubt, the background and the starting point for the development of large-scale medium- and long-term sectoral policy concerning inclusion. While this is clearly a difficult situation in which to work, there are hidden opportunities here. The implementation of inclusive education requires comprehensive development of the entire education system. The fact that advocates of IE will be able to participate in general policy development means that they will be able to entrench principles of inclusion in general education policy.

2. The second problem: *the lack or low quality of facilities and infrastructure for SN/IE* (schools, classroom, materials, supplies etc.). The limited capacity of the special schools, particularly in rural areas has resulted in the majority of learners from these areas being excluded from many education opportunities, because the regular schools do not facilitate integration.

According to the CRIC studies (Monitoring of families with handicapped children in the Municipality of Pristina, 8 June 2001) school attendance of children with disabilities among the age group 7-14 is 57 %. In other parts of the country situation is probably worse. There are estimations that even 80 % of children with disabilities, of school-going age, are not attending school. The illiteracy rate, poverty, generally associated with disabilities and low skills among

13 “Teacher training is a priority for UNMIK and its partners. The urgent needs relate to minority education, support for in-service training and training for teachers of special needs children.” (Michael Daxner, *Education...*).

adults with disabilities is therefore high. This contributes to a high level of unemployment among disabled people.

3. The third problem: *the low quality of in-service training institutions, activities and subsequent training curricula* for teacher education or institutional capacity building towards inclusive approaches. Except of FSDEK, there is no evidence of any type of needs analysis and short- or medium-term of planning of these activities. The system has no professional teacher trainer in this domain. The first trainers will be prepared through the same FSDEK project. School-based training activities of the staff are rare and the quality of those that take place is questionable.

4. The fourth problem: *the inefficient teaching skills and knowledge, especially of skills in coping with diversity in the framework of the teaching/learning process*. To a great extent, these originate from the poor basic education provided to teachers in universities and teacher colleges, the quasi-total absence of any specific training for IE, and from the old-fashioned - socialist - 'culture of defectologists' in the domain. Inclusive education can be seen as little more than good teaching practice that is responsive to the individual needs of learners. Therefore, improved general training for active learning can impact on IE and training in IE can promote better teaching practice.

5. The fifth problem: *inadequate educational provision that could support teachers in order to cope with war-generated behaviours and trauma* as well as post-war educational problems. Many children have suffered directly or indirectly from the horrors of war and hate during the recent conflict. The school system as a whole and teachers in particular are facing a challenge of how to cope with this essential problem, basically an inclusion one. There is a shortage of educators who would be capable of identifying the special and diverse educational needs and finding appropriate ways to deal with these issues *as part of mainstream teaching and learning*.

6. The sixth problem: *the low status, inadequate certification and low public perception of the teachers that work with disabled*. Most of the teachers graduated from general teacher training courses in the university or teacher training colleges. They did not have any kind of professionalisation as SN or IE teachers during their job history. Sometimes, this situation affects not only the perception other professionals and the public has of these teachers but it implies a negative impact on their own self-image and self-esteem.

7. The seventh problem: *the low public attitude and awareness concerning disability and difference*. Old-fashioned, poor attitudes or lack of interest of most of the teaching staff, parents, general public and community towards disability issues and inclusion principles and the almost non-existent steering mechanism with few social incentives affects the quality of educational provision. To a great extent, the root of the problem originates from the old mentality according to which impaired students are not simply different but they are "inferior" and they constitute a "problem" better to be avoided. It is clear that any type of policy-making and human resource development for inclusive approaches should focus on awareness raising, community work and disabled input in policy making in order to gradually change public perception and increase participation.

8. The eighth problem: *the low material motivation for human resource development, upgrading training and institutional capacity building*, even if teachers are eager to professionally develop their skills and knowledge. The present monthly income of teachers is 240 DEM. Principals or those who have a university degree have higher salaries. There are also only limited possibilities to get a new job or responsibility after such personal development. Not only that training is not rewarded; there is also no incentive system encouraging better quality work.

2.4. Stakeholders and beneficiaries

This sequence intends to present a summary of the main findings concerning the possible stakeholders and beneficiaries of this policy in its development and implementation.

Education policy makers. The main stakeholder and beneficiary of the future policy development and implementation will be UNMIK DES as the main body responsible for education reform in Kosovo. It is well known that the future policy development and implementation – that starts from the needs and interests of special needs/disabled students - takes

into account the priorities of the education reform in Kosovo as defined by UNMIK DES together with local and international partners. The future policy development and implementation process is expected first of all to offer a frame of reference for further education policy in the domain of inclusion as well as in that of teachers' professional development for inclusive approaches.

Teacher training providers. The University of Pristina and different teacher training colleges will provide local expertise in planning and developing training curricula for inclusion, as well as in offering professional trainers for the training. The university can also offer its training premises, and different other facilities. The University can even select future professional staff for inclusive education from the pool of trainees participating in the future policy development and implementation activities.

Local and International organisation of disabled and disabled people. In Kosovo, there is not any culture of disabled participation in designing policy and strategy for their community, education sector included. As a member of the *Task Force on Disabled*, the FSDEK is the co-ordinator for the development of an educational policy for including disabled in mainstream education system. All local organisations are represented in the Task Force and the involvement of disabled in designing such a policy is the most relevant in the history of this community.

Special needs schools are important stakeholders and beneficiaries of the policy development and implementation process as they are at the moment the only one where a clear interest for inclusive education can be seen. The policy development and implementation process intends to see these schools as possible resource centres for further inclusive education practices (in fact, the same applies in many developed countries, including Finland). These schools can offer support in selecting the best trainees for the human resource development component of the process.

Mainstream schools constitute the best educational settings for piloting or practising new inclusive education and even school improvement procedures that encourage inclusive education. At the same time mainstream schools are important providers of information concerning everyday classroom activity that can nurture the process of developing and gradually adapting the curriculum for the ongoing professional development process. Those mainstream schools (at least one in each region) that will develop appropriate inclusion models and procedures will be encouraged to gradually become educational resource centres aimed at promoting the idea of inclusive approach. Finally, mainstream schools are of course the main beneficiaries of the policy development and implementation process.

Teachers. Mainstream and special needs schools do not have enough specialised staff, like professionalised teachers, logopedists, psychologists, pedagogues a.s.o. However, teachers can be considered important stakeholders, as they are the first that can promote new ideas and

procedures, for instance those related to inclusive education. Teachers can also play a special part in raising public (parents and community) awareness concerning the improvement of inclusive educational provision in Kosovo and promoting disabled concrete participation in planning their own education. It is very clear that teachers constitute direct beneficiaries of the policy development and implementation process. Teachers can also be an important resource in the school where they combine their problem solving skills in teaching and learning support teams. These teams can build the schools' capacity to address barriers to learning within the school itself before they call on outside support.

Disabled students can be considered stakeholders and beneficiaries as well. Stakeholders, as they should be involved as partners and actors in designing and implementing their own education and by their direct participation in improving everyday teaching and learning process in the classroom. Beneficiaries, as the outcome of fostering inclusive philosophy and practices in the classroom will develop positive attitudes towards difference, and will foster tolerance as well as give them access to education and therefore opportunities for economic independence in later life..

Parents and local communities. Other stakeholders and beneficiaries are the parents and local communities, central and regional education authorities. They would like to be more involved in designing the education program for their children. As a consequence, parents and community will be considered as important support to improving the quality of educational interventions. Community is also of utmost importance in raising awareness concerning the relevance of inclusive education as an important sector of public education. The international experience shows that education systems can be very resistant to IE. Parents are important advocates for their children in getting access to education. In order to fulfil this role, they need enabling policy to be in place and support from parents' organisations

NGOs and other international projects (the World Bank and the Canadian International Development Agency - CIDA) are relevant stakeholders. Their co-operation could be important in: developing a coherent education policy for the inclusion of disabled in the mainstream system. This can happen by selecting the trainees for the human resource development courses, designing and gradually up-grading training curricula, developing medium- and long-term training strategies, and involving all relevant actors for the policy development and implementation process. Partner NGOs and organisation will participate as trainers and organisers of different activities.

The Kosovo Serbian system of education for disabled (even if represented by a single school in the Serbian enclave of Mitrovica) can be listed as a separate stakeholder, since there are differences in priorities and interests compared to the ethnic majority.

3. POLICY OBJECTIVES FOR THE EDUCATION SYSTEM

3.1 Education for all

- To facilitate equal access **and participation** of disabled people to education, community activities, and equality in education provisions at all levels.
- To guarantee equal access and to raise awareness about education for all, in accordance with human rights principles.
- The enactment of legislation that promotes non-discriminatory access to education within inclusive education system.

3.2 Inclusive education system

- To develop an inclusive education system (single educational system) for all, that will meet the needs of all learners within an inclusive environment.
- To facilitate early access to education for all learners, especially learners with special educational needs and disabilities. To include the children with special needs in the pre-school institutions to allow as early intervention as possible.
- To have a comprehensive curricula for all. To engage the Special Needs Education teachers and other stakeholders in the development of the curricula.

3.3 Capacity building in education/IE

- To facilitate capacity-buildings for all stakeholders, both institutional and human resources.
- To organize in-service and pre-service teacher training about inclusive education. To support and empower parents, and to enhance the level of co-operation and awareness among stakeholders
- To support teachers to work in inclusive settings.
- To facilitate effective and relevant research in the field.

3.4 Educational provision

- To provide necessary educational tools, support, and space suited to effective learning.
- Appropriate technology development in education training
- Adequate and appropriate education support to all learner

4. TARGET GROUPS

The target group is all persons with disabilities and special educational needs regardless of gender, ethnic group, religion, political opinions, urban or rural environment, or severity of impairment. Special attention should be given to access to education at all levels, including: disabled adults especially women; children; people with intellectual impairments or mental disabilities, orphans; ethnic minority groups; hospitalized and institutionalized children and young people; and persons with disabilities living in rural areas.

6. REQUIREMENTS FOR THE EDUCATION SYSTEM IN KOSOVO

Special needs in education and training exist even outside the classroom. Special needs in education include support in the form of life skills and independence training, special equipment, and access to the curriculum. Traditionally, education is concentrated on years spent in schools and not so much on tertiary education. Education should equip people with disabilities with the skills necessary to access the labor market. Links to the labor market and training have so far been weak. Changes in educational policy are of significant importance to the future empowerment and raising of the economical status of people with disabilities.

Early intervention for the benefit of all age groups within the inclusive environment is very important for the development of an integrated society. The main concern of persons with disabilities, regardless of the age include access to educational settings, lack of transportation and negative public opinion towards the persons with disabilities.

To meet the objectives for an inclusive education system the following elements are necessary:

- A) Early Childhood Intervention:
Early childhood intervention and learning provide children with disabilities with access to education, assistance and socialization opportunities from an early age.
- B) Primary Education
Free compulsory education should be provided to all school children. Community support should be guaranteed to the families who have a child with disabilities.

Where the regular school system cannot yet adapt to meet the educational needs of children with high support needs, they should have access to special classes or schools. This, however, should always be with the aim of preparing students for education in the regular school system as soon as possible. The pupil in special school should maintain close links with his / her local communities.

- C) Secondary Education
The institutions of higher education are presently undergoing transformation in which the needs of the persons with disabilities should be taken into account.

Special attention should particularly be given to providing vocational training in all schools, in order to assist students with needed skills.

- D) Adult Education and Training
Access to adult education and training is the cornerstone to the economic liberation of adults with disabilities.

The policy guidelines for Adult Education and Training should provide provision for the special needs of adult learners with disabilities.

- E) Higher Education
Institutions of Higher Education are currently undergoing a period of transformation. New Faculties and studies are being introduced.

Access to higher education is a cornerstone to ensure that disabled people enjoy equal opportunities.

The policy guidelines for Higher Education should reflect increased co-operation and partnership between higher education and other social institutions.

Greater responsiveness to a wide range of social and economic needs.

7. POLICY RECOMMENDATIONS

In order to achieve the policy objectives, it is necessary to take action in key areas:

To develop a clear policy that includes all stakeholders and which is understood and accepted at the school level and by the community.

To develop institutional structures, such as effective collaboration mechanisms between the Department of Education and Science, the municipality, school and disabled people organizations.

To raise public awareness of the needs, rights, and opportunities of persons with disabilities (through media, publications a.s.o.).

To provide education for all children with disabilities within mainstream education with provision made in specialized settings for children with high support needs.

To develop a curriculum that ensures flexibility and adaptation according to the needs of individual learners, irrespective of their disabilities.

To provide adequate textbooks as well as teaching learning materials for disabled children.

To guarantee on-going training in special and inclusive education for professionals, such as teachers, directors, administrators, and planners (by ensuring among others the translation of relevant professional literature into Albanian)

To encourage parental involvement in assessments and decision-making that concerns their children.

To provide appropriate education -support services including appropriate technology, to all learners with disabilities.