SUPPORT UNIT FOR GENDER EQUALITY

A Review of Disability Inclusion in the Australian NGO Cooperation Program: Findings Report

October 2024

Document History

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Acronyms

ACFID	Australian Council for International Development
ALWS	Australian Lutheran World Service
IAG	CBM Inclusion Advisory Group
ANCP	Australian NGO Cooperation Program
APR	Annual Performance Report
CBID	Community-Based Inclusive Development
CoP	Community of Practice
CRPD	Convention on the Rights of Persons with Disabilities
DAC	Development Assistance Committee
DPO	Disabled People's Organisation (also called OPD)
GEDSI	Gender Equality, Disability and Social Inclusion
IMR	Investment Monitoring Report
IWDA	International Women's Development Agency
MEL	Monitoring, Evaluation and Learning
NGO	Non-Government Organisation
ODA	Overseas Development Assistance
OECD	Organisation for Economic Co-operation and Development
OPD	Organisation of Persons with Disabilities (also called DPO)
SOGIESC	Sexual orientation, gender identity, gender expression and sex characteristics
WASH	Water, Sanitation and Hygiene
WGSS	Washington Group Short Set of Questions
WVA	World Vision Australia

Executive Summary

In 2024, DFAT commissioned a review to explore performance in, barriers to and opportunities for integrating disability equity and inclusion across the Australian NGO Cooperation Program (ANCP). This report presents the review findings and recommendations to strengthen disability equity and inclusion within ANCP.

The review found that accredited ANCP non-government organisations (NGOs) are largely demonstrating a strong and active commitment to disability equity within projects, and are working to promote inclusive practice. Most agencies are showing moderate and improving performance on disability equity. Reflecting the wider sector, disability equity is integrated into the thinking and practice of ANCP NGOs: they are developing and using guidance documents and policies; building capacity on disability equity within their organisations as well as supporting their implementing partners; adapting programming models; measuring impact; and critically evaluating their progress and reflecting on challenges and successes. Some are engaging with Organisations of Persons with Disabilities (OPDs), however this remains an area of overall weakness. Good practice is being demonstrated: examples have been identified that if replicated, could generate stronger disability equity and inclusion outcomes in ANCP projects, and these are included throughout the report.

A key feature of ANCP is its sheer scale and diversity. While its flexibility as a funding source is one of its strengths overall, this also means that diverse agencies from small to large are implementing across dozens of countries and cultural contexts, in multiple sectors, and with widely varying partnering and implementation approaches.

While core principles required for disability equity should be consistent across projects (including a human rights based approach, leadership and decision-making by people with disabilities, meaningful engagement with OPDs, identifying and addressing barriers to inclusion, and supporting preconditions for inclusion), the diversity within ANCP means the practices needed to implement these can differ widely across projects. What works for large agencies may be impractical for small agencies; what is effective in densely populated urban contexts may not be effective in remote and sparsely populated islands. Coupled with this is the fact that best practice in disability equity is still emerging – the sector is to some extent 'learning as we go'. Other key factors impacting achievement on disability equity include limited engagement with OPDs, or engagement that does not always achieve the needs and expectations of OPDs for meaningful partnering; the availability of funding, resources and technical advice; the need to address multiple cross-cutting issues within projects; levels of support from DFAT Posts; and capacity gaps on disability equity within implementing partners, as well as to a lesser extent within NGOs.

Collection and use of data

Quantitative data provided by NGOs to DFAT indicates that performance has increased against some ANCP indicators (including partnering with OPDs) and remained largely stable or increased modestly on others – including reported rates of participants with disabilities, at around two to three per cent.[1] Although these are low compared to global estimates of disability prevalence, the reported rates across ANCP are likely to underestimate the real percentage of participants with disabilities reached by ANCP projects, due to a wide variation in data collection processes and challenges in obtaining accurate data. NGOs nevertheless recognise that they need to further improve rates of inclusion, and many are working to actively target groups who have lower rates of inclusion or who are harder to reach, including due to stigma and discrimination.

Women and girls with disabilities have somewhat lower rates of inclusion than men and boys with disabilities, likely a reflection of the greater disadvantage and marginalisation they face. Children with disabilities are included at lower rates than adults with disabilities, although this may reflect that lower numbers of children are included overall in ANCP. There is little data available about other particularly marginalised groups including those with stigmatised impairments such as psychosocial or intellectual

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1   The previously reported decline in participants appears to be incorrect, based on available data: this issue is further clarified in this report.

impairments, as well as people with diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC).

Recommendation 1: Strengthening reach to under-represented and marginalised groups

NGOs to implement strategies to increase the proportional and meaningful inclusion of women and girls with disabilities; and strengthen approaches to inclusion of people with stigmatised or severe impairments, children with disabilities, and people with disabilities with diverse SOGIESC. Measures could include:

- Target inclusion of women and girls with disabilities within gender programs and activities; and support strengthened engagement of women and girls with disabilities within OPDs.
- Investigate the experiences of people with diverse SOGIESC, including specific approaches to strengthening their inclusion.
- Share learnings and provide technical support on inclusion of children with disabilities.
- Undertake more intensive efforts to engage people with a wider variety of impairments, and address stigma and discrimination, noting this can require additional resources.

Projects that achieve the threshold for *significant* and *principal* OECD DAC (Development Assistance Committee) markers on disability demonstrate progressively and significantly better performance on disability inclusion and equity compared to those with a *not targeted* marker, according to the available measures. In the most recent year, *principal* projects reported 24 per cent of participants as people with disabilities, compared to four per cent for *significant* and two per cent for *not targeted*. Projects taking a twin-track approach also have higher rates of participants with disabilities.

Recommendation 2: Targeting disability inclusion

DFAT to introduce ANCP portfolio measures to promote an increase in the total number of ANCP projects with *principal* and *significant* DAC markers on disability. This could include support for disability-specific measures, targets, tailored technical advice, and support for design processes.

Ongoing strengthening of data on the participation or inclusion of people with disabilities is a long-term process. While important, this is only one measure of effectiveness. Too much reliance on this indicator does not give a full picture of achievement across the program, does not tell us whether inclusion is meaningful, and can conceal variations in practice. Monitoring, evaluation and learning (MEL) processes and collection of data and information can be streamlined and broadened to provide a more nuanced understanding of achievements on disability equity, and to better gather good practices for dissemination and sharing.

Recommendation 3: Collection and use of data

ANCP MEL modifications to include streamlining and refining of data collection, moving beyond a focus on disaggregated participant data and including strengthening the collection of qualitative data to ensure meaningful information on disability is gathered from all projects regardless of their disability marker. Measures could include:

- Review and revise current disability indicators, including considering removal of indicators G.06 and G.09.
- Add Tier 2 indicator 10 'Number of organisations of persons with disabilities (regional/national/ state/local) receiving capacity building support' to the ANCP indicator set, in line with reporting requirements under Australia's International Development Policy Performance and Delivery Framework.
- Ensure quantitative and qualitative information is collected from all projects, regardless of disability marker, and used to assess progress on meaningful inclusion of people with disabilities.

- Provide strengthened guidance on approaches to disaggregation by disability within ANCP projects, including where accurate or consistent data is not available.
- DFAT to collate and lead on disseminating good practice examples and learnings from Annual Performance Reports, mid-term reviews and evaluations, including in collaboration with the ANCP Community of Practice and ACFID Disability Community of Practice.

Resourcing and support

Disability equity is a process as well as an outcome and maintaining strong practice on inclusion requires ongoing focus and commitment. Smaller agencies in particular can struggle to fund additional disability inclusion measures, even where there is a strong will to do so.[2] ANCP programming is also likely to be approaching a point where the 'low-hanging fruit' of disability equity is being achieved; more intensive efforts will be needed to fully include multiply marginalised and hard-to-reach groups, which will also require further funding and resources. These groups include women and girls with disabilities, people with stigmatised or complex impairments, including psychosocial and intellectual impairments, and people living in remote areas.

Recommendation 4: Resourcing and support

DFAT to recognise the different resourcing challenges faced by agencies, in particular smaller agencies, and explore options to expand centralised funding and technical and capacity-building support for disability equity across the ANCP portfolio. Measures could include:

- Make additional funding available for small- and medium-sized ANCP agencies for disability inclusion, where strong initial progress has been achieved and need for further activities to expand inclusion is demonstrated.
- Ensure that agencies have sufficient funding to meet additional considerations on disability equity which may emerge from the forthcoming International Disability Equity and Rights Strategy.
- Explore mechanisms to prioritise small agencies in provision of ANCP-funded or low-cost technical advice.
- Improve generation and sharing of sector- and context-specific resources and good practice examples and tailored technical support.
- Develop ANCP-approved training materials on disability equity that could be rolled out by agencies with partners and project participants.

The role of DFAT Posts in promoting disability equity

There is room for a stronger involvement from DFAT Posts in promoting and supporting disability equity. Where Posts have strong capacity on disability and engage actively with projects and partners, including in-country OPDs, this is valued by partners and serves to drive good practice. However capacity and performance amongst Posts remains varied, and there is a need for greater engagement and sharing of learnings across Posts.

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2   For the purposes of this review, small agencies are those which were in the lower third of ANCP recipient NGOs on the basis of a composite index of their ANCP budget and number of ANCP projects. Going forward, small NGOs within ANCP can be considered as those that are base accredited NGOs, which receive a fixed annual grant (currently $277,000), as well as some fully accredited NGOs which receive somewhat larger grants but where this comprises most or all of the organisation's total funding (including non-ANCP sources).

Recommendation 5: DFAT Posts

Where feasible, DFAT Posts to take on an increased role in promoting disability equity in key countries, supporting connections between ANCP agencies and national OPDs, sharing local resources and context information, and providing opportunities for agencies to collaborate and share learnings. Taking on this role may require additional resources, and participation of Post personnel in knowledge development and in sharing good practice and learning.

OPD engagement

Current levels of OPD engagement do not represent adequate performance, and this is a key area of risk. Engagement with OPDs is a core component of disability equity within international development – both to promote the empowerment of people with disabilities and fulfil obligations for full inclusion under the Convention on the Rights of Persons with Disabilities (CRPD), and as a mechanism to drive inclusion within projects. OPDs are clear on what they value in engagement with NGOs: long-term, meaningful partnerships that empower OPDs to meet their own priorities as well as engage in projects, provide reliable core funding and support, and include strong capacity-building approaches.

There are examples of strong practice within ANCP projects regarding OPD partnerships. There are also examples of engagement approaches which OPDs consider tokenistic, or which do not fully meet their needs. However, 70 per cent of projects still do not report engaging with any OPD, including 56 per cent of those being projects with disability with a *principal* marker – this is a gap that is acknowledged by NGOs and which needs addressing.

Elements of the structure and operation of ANCP, such as high compliance requirements for partners and relatively short-term project cycles, make effective partnering between projects and OPDs challenging. Requests for partnership put high demands on OPDs, which are often small, underfunded organisations and have limited resources to meet ANCP requirements. Existing monitoring processes also do not effectively capture qualitative outcomes on OPD partnerships.

Recommendation 6: OPD engagement

DFAT to work with NGO ANCP managers and OPDs to develop an approach to supporting and strengthening partnerships between OPDs and NGOs, to promote long-term meaningful engagement. Measures could include:
- Examine and address the impact of compliance requirements for different types of OPDs.
- Support cross-ANCP OPD partnerships which include an explicit focus on capacity-building and empowerment.
- Support the needs and priorities of OPDs, including adequate core funding.
- Support new and emerging OPDs, including those which represent women and girls with disabilities and more complex or stigmatised impairments.
- Increased NGO understanding of the role of OPDs and the distinction between OPDs and service providers.

These recommendations require resourcing, and resourcing needs are likely to increase with the anticipated ambition of the forthcoming International Disability Equity and Rights Strategy. ANCP-portfolio wide approaches that acknowledge and respond to the diversity of ANCP patterns and their contexts are needed to elevate practice, beyond the first plateau of having disability equity and inclusion acknowledged and responded to, to it becoming an integral component of all NGO projects and practice.

1.   Introduction

1.1   About the Australian NGO Cooperation Program

The Australian NGO Cooperation Program (ANCP) is DFAT's key partnership program with Australian non-government organisations (NGOs). Established in 1974, ANCP provides funding to accredited Australian NGOs to implement projects consistent with the goals of Australia's development program. ANCP NGOs are also required to contribute a 20 per cent match of their own funds towards their ANCP projects.

In 2022–23,[3] ANCP provided total funding of A$142.3 million[4] to 59 NGOs, which in turn contributed $40.3 million in match funding. In that year, 402 projects were implemented across 53 countries in the Pacific, South and West Asia, the Middle East, Africa and Latin America and the Caribbean. Cumulatively, these projects worked with over 2,300 local partners and benefited 5.9 million people.[5]

ANCP funding provides considerable flexibility, allowing NGOs to implement across a wide range of countries as well as sectors, including education, health, food security and civil society strengthening. Typically, projects are implemented over three or four years, with some projects then extended for a further period. Cross-cutting issues including gender equality, disability inclusion[6] and environment are expected to be addressed by all ANCP projects.

In order to receive ANCP funds, NGOs must gain and maintain DFAT accreditation, demonstrating capacity and performance against a range of indicators, including incorporating 'disability inclusive practices including contextual analysis of barriers for people with disability, opportunities to enable inclusion and targeted M&E'. They may seek base or full accreditation, the latter requiring agencies to meet additional indicators including having a disability inclusion policy and undertaking 'periodic assessment of its own and its implementing partners' disability inclusion practice'.[7] Agencies must be reassessed at least every five years.

1.2   Disability and policy context

Approximately 16 per cent of the world's population have a disability.[8] As set out in the CRPD, disability occurs when impairments, in interaction with various barriers, hinder a person's full and effective participation in society on an equal basis with others. These include physical, communication, institutional and attitudinal barriers. Disability encompasses a range of impairments, including physical, psychosocial and intellectual impairments, and sensory impairments including people with vision impairments and those who are Deaf or hard of hearing. Understanding is also emerging about impairments such as autism and other conditions related to neurodivergence.

While disability is extremely diverse and people's experiences will vary widely, across the world, **people with disabilities have poorer health outcomes, lower education achievements, less economic participation and higher rates of poverty than people without disabilities.**[9] This is due to the barriers they face in accessing their rights. Factors such as gender, age, impairment type and living in a rural or urban location, interact with disability to multiply marginalisation. In particular, women and girls with disabilities face additional discrimination.

Article 1 of the CRPD sets out the rights of people with disabilities to 'full and equal enjoyment of all human rights and fundamental freedoms.' Article 32 sets out the responsibility of ratifying countries to ensure that 'international cooperation, including international development programmes, is inclusive of and accessible

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3   This and other similar references refer to a single financial year, spanning July to June of the two stated years (i.e. July 2022 – June 2023).
4   All figures are in Australian dollars unless otherwise stated.
5   All figures from DFAT, 2022–23 Australian NGO Cooperation Program Performance Snapshot.
6   The terms 'disability inclusion' or 'disability-inclusive development' are widely used. However, the forthcoming DFAT strategy refers to 'disability equity and rights'. Reflecting this shift, both 'disability inclusion' and 'disability equity' are used within this report.
7   DFAT (2018), Australian NGO Accreditation Guidance Manual.
8   World Health Organization (2023) Global report on health equity for persons with disabilities.
9   World Health Organization and World Bank (2011) World Report on Disability WHO.

to persons with disabilities.'[10] This is echoed by Australia's 2023 International Development Policy, which notes that 'For development to be effective, people with disabilities must be partners on an equal basis'.[11]

The International Development Policy also notes that Australia will 'continue to be led by the experiences and expertise of people with disabilities when designing and implementing development activities', and 'support an active and leading role for people with disabilities and their organisations at all stages across the development program'. It commits to collecting disaggregated data, including by disability as well as gender and 'other relevant aspects of social inclusion', in monitoring progress within Australia's international development program.

Current practice on disability-inclusive development is guided by the Development for All 2015–2020 strategy.[12] The existing policy recognises that 'to be effective in reducing poverty, development must actively include and benefit people with disabilities.' A new International Disability Equity and Rights Strategy is forecast to be released in 2024, which will set out Australia's commitment to and evolving priorities and approaches on disability equity and rights into the future.

In addition to this emphasis on disability equity and rights, Australia's aid program also has a strong focus on other policy priorities including gender equality, climate change, broader social inclusion approaches, and locally led development. Requirements and expectations for ANCP agencies to strengthen practice are increasing across these areas.

What is disability-inclusive development?

Disability inclusion refers to both the **process** of actively ensuring that development activities are fully inclusive of and accessible to people with disabilities; and the **outcome** of people with disabilities benefiting on an equal basis to all others.

Australia has adopted a 'twin-track' approach to disability-inclusive development. This encompasses both **mainstreaming approaches**, ensuring the inclusion of people with disabilities in general development efforts across all sectors; and **disability-specific or targeted approaches**, which seek to address the specific needs of people with disabilities to support their inclusion and empowerment.[13] Disability-specific approaches might include support for self-help groups or OPDs, early intervention for children with disabilities, or supporting access to assistive devices.

Measures to achieve and progress disability-inclusive development include: addressing barriers to inclusion; supporting active and meaningful engagement by people with disabilities and their representative organisations (OPDs) in all aspects of development programming; and ensuring the preconditions to inclusion are met. While there is some variation in how different agencies define pre-conditions, the pre-conditions common across most existing frameworks are accessibility, assistive technology, support services, social protection, non-discrimination, and community-based inclusive development (CBID).[14]

2.   Background to the Review

2.1   Aims and scope

This review was triggered in part by concerns about a 'decline in quantitative and qualitative indicator performance on disability across the ANCP, compared with pre-COVID times'.[15] The review was therefore commissioned to explore barriers and opportunities for integrating disability inclusion across ANCP.

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10   United Nations (2008), Convention on the Rights of Persons with Disabilities.
11   Commonwealth of Australia (2023), DFAT, Australia's International Development Policy.
12   Commonwealth of Australia, DFAT (2015) Development for All 2015–2020: Strategy for strengthening disability-inclusive development in Australia's aid program, May 2015.
13   DFAT, 'Disability inclusion in the DFAT development program: Good practice note', April 2021.
14   CBM Australia, 'How pre-conditions to inclusion changed the life of one young man in Fiji', 25 June 2024.
15   SURGE Tasking Note, Support Unit for Gender Equality (SURGE) Special Tasking Note.

This review was guided by five questions (see box below; additional sub-questions are detailed in Annex 1, Methodology). The review is focused on the process of disability inclusion, noting that disability inclusion can also refer to an end state or outcome. Assessing outcomes other than those measured through existing quantitative indicators was beyond the scope of this review, particularly as it was not within scope to engage with in-country partners or to review individual reports and evaluations.

For the purposes of the review, 'participants' and 'participants with disabilities' largely refers to those identified as project participants or beneficiaries through ANCP quantitative data collection. However, it is useful to note that more broadly, full participation by people with disabilities refers to their inclusion in all aspects of activities which impact them, including involvement in leadership and decision-making.

'Performance' on disability equity refers to explicit and active efforts to progress disability inclusion, at a project, program or organisational level, which are in line with accepted good practice on disability-inclusive development – including taking a rights-based approach; promoting leadership and decision-making by people with disabilities, including through engagement with OPDs; addressing preconditions to inclusion; and identifying and addressing barriers to full inclusion for diverse people with disabilities.

Performance was measured using available quantitative data on activities and reach of ANCP projects to people with disabilities collected through reporting, including discussion of the usefulness and limitations of this data and quantitative and qualitative evidence. A review period from the 2019–20 to 2022–23 financial years was used for analysis of quantitative data, while interviewees were asked to reflect primarily on recent practice.

Review Guiding Questions

1. What does the data tell us about recent trends in performance on disability inclusion within the ANCP?

2. What do ANCP Partners, DFAT, OPDs, and other stakeholders identify as the key factors driving the observed trends?

3. What are good practices and innovations in how Australian NGOs and their implementing partners are addressing disability inclusion in their ANCP projects at different stages of the project cycle?

4. How can disability inclusion and its measurement be strengthened in ANCP?

5. How can good practices and lessons be shared, both in and outside of the ANCP?

2.2   Methodology

The review methodology was designed to inform development of findings with practical application to ANCP, relevant to the key review questions. Data processes included collation and analysis of performance data included in SmartyGrants (DFAT's ANCP management system), an ANCP partner survey, and semi-structured interviews through which the experience and perspectives of DFAT, technical advisory and coordination bodies, sampled Australian NGOs, and organisations of people with disabilities (OPDs) were explored.

NGOs were purposefully sampled to reflect a mix of sizes, including both small and large agencies but skewing towards larger number of projects and budgets in order to give greater breadth of findings. The sampling also reflected a mix of approaches to disability inclusion, indicator performance, sectors, and organisational types. Small single-sector or single-country agencies were not interviewed. Further, proportionally fewer smaller agencies responded to the survey. Therefore, the review findings reflect more strongly the experiences of larger and medium-sized agencies but are also informed by the experiences of small agencies.

In accordance with principles of people with disabilities being at the centre of disability-inclusive development practice and research, the Pacific Disability Forum (PDF) provided advice on the review framework, and an advisory consultant from the Indonesian disability movement, Ms Ida Putri, provided

ongoing advice and reviewed some content. This should not be taken as endorsement or otherwise of the review findings by these parties.

Further detail on the methodology, including limitations, is included at Annex 1: Methodology.

3. Review Findings

These findings are presented against the key review questions. Good practice examples have been identified that may generate stronger disability equity and inclusion outcomes in ANCP projects and these are included throughout the report.

3.1 What does the data tell us about recent trends in performance on disability inclusion within ANCP?

NGOs submit Annual Performance Reports (APRs) to DFAT in which they report against a large set of indicators. Data is recorded in SmartyGrants, DFAT's information management system, mentioned above.

All data on project participants[16] is disaggregated by disability and sex, using categories of adult or child, and within these further categorised as male, female and X for either non-binary or unknown. Country and sector information is recorded at a project level, and data is provided against four indicators that are specific to disability equity:

▪ G.06 Number of people who received disability support services specific to their needs.
▪ G.07 Number of Disabled Persons Organisations (DPOs) actively involved with the project.
▪ G.08 Number of people trained in disability awareness and inclusion.
▪ G.09 Number of people trained in delivery of disability support services.

This data allows for a range of analyses of performance and trends. This section summarises key findings related to the quantitative data analysis performed using SmartyGrants outputs for each of the review years provided by DFAT.

3.1.1 Participation by people with disabilities as participants in ANCP projects

Key finding: While recorded participation of people with disabilities in ANCP projects is low, the analysis does not support the assertion that there is a downward trend in participation by people with disabilities.

A concern about a falling participation of people with disabilities was one of the prompts for this review. The 2022–23 ANCP Snapshot report noted a 'downward trend in the percentage of total participants with a disability,'[17] and reported figures indicated a decline from eight per cent in 2019–2020 to 2.4 per cent in 2022–23. More detailed analysis of SmartyGrants data suggests that **there is not a consistent downward trend in this indicator** as was previously thought, due to two factors:

- Recalculation of SmartyGrants data for 2020–21 and 2020–22 yields different rates to those previously reported in 2020–21 and 2021–22.

- One outlier project disproportionally inflated the participation rate in the base year (2019–20) – as detailed in footnote 18 and further in Annex 2.[18]

Recalculated figures suggest that the percentage of people with disabilities reached by ANCP projects has instead stayed broadly stable over this period, at around 1.8 to 2.6 per cent (Table 1).

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16 Over the study period, the terms 'beneficiaries' and 'participants' have both been used. This report refers only to participants, recognising a shift in language towards this term.
17 DFAT (2023), *2022–23 Australian NGO Cooperation Program Performance Snapshot*.
18 ANCP17-PRG10010-PRJ134, Integrated Control of Neglected Tropical Diseases in Nigeria Phase Two, implemented by CBM Australia, reported over 4.8 million participants in 2019–20, or nearly 41 per cent of all ANCP participants that year. Of these participants, 15 per cent, or over 723,000, were reported as people with disabilities. This is 77 per cent of all reported participants with disabilities for the entire ANCP program that year.

Before this recalculation was made, informants who were asked about the perceived fall in performance did not feel that a decline accorded with their understanding of ANCP performance on disability equity. This included accreditation assessors, agencies themselves, and those with knowledge of disability equity approaches within the sector. Amongst some DFAT interviewees, there was an understandable sense of frustration at this perceived issue; the erroneous findings may have coloured perspectives on disability performance within ANCP to date.

Table 1   Recalculated data on ANCP participants with disabilities

Year	Recalculated per cent of total ANCP participants with disabilities
2019–20	1.8 – 3.2 per cent[19]
2020–21	2.1 per cent
2021–22	2.6 per cent
2022–23	2.4 per cent

This issue is explained in further detail in Annex 2.

Further to this it is noted that across the study period, between 21 per cent (in 2021–22) and 37 per cent (in 2022–23) of participants with disabilities recorded for all ANCP projects were reached through projects managed by CBM Australia. This is unsurprising, given the organisation's focus on people with disabilities coupled with being one of the larger ANCP agencies. However, this finding suggests that care needs to be taken in interpreting findings for all of ANCP based on aggregate trends. Rather, measures of variance may be more useful – for example the number and share of organisations that report participation of people with disabilities that is over or under the average,[20] or an agreed threshold. Further, while participation data is important, it is not a sufficiently strong indicator of performance on its own and should be complemented by qualitative data.

Participation of people with disabilities by sex and age

Analysis was conducted on the gender split of participants with disabilities, combining men and boys with disabilities, compared to women and girls with disabilities.[21] In absolute numbers, there were more females than males with disabilities in all years except 2020–21, as well as in total over the full review period. However, women and girls with disabilities were proportionately less likely to be participants than women and girls generally. As shown Table 2, in over the full review period women and girls made up 57 per cent of total direct participants, but women and girls with disabilities were 51 per cent of the total direct participants with disabilities.

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19   The figure of 3.2 per cent excludes the participants recoded against this outlier project; while the lower figure of 1.8 per cent excludes all CBM projects for that year, as they made up 88 per cent of all reported participants with disabilities and included other projects with large participant counts which could be considered outliers.

20   Over the review period the average rate of participation of people with disabilities reported by agencies was five per cent in 2019–20 and four per cent in subsequent years. Other outlier agencies with large reach but small rates of people with disabilities affected the aggregate figure – e.g., in 2020–21 UNICEF and Fred Hollows Foundation together reported 50% of total ANCP participants, but rates of participants with disabilities at 0.1% and 0% respectively. If these agencies are excluded, this year's aggregate figure on participation by people with disabilities is around 4.2%.

21   This excluded the relatively small number of adults and children with disability for whom sex was not identified – which is understood to largely represent those for whom this information was not collected, rather than those with non-binary or other identities.

Table 2   Numbers and share of participants by sex and disability

	Direct participants			Direct participants with disabilities		
	Total	% male	% female	Total	% male	% female
2019–20[22]	11,839,856	43%	57%	952,919	49%	51%
2020–21	8,951,792	45%	55%	192,413	51%	49%
2021–22	5,458,705	43%	56%	140,750	47%	52%
2022–23	5,913,309	39%	61%	144,026	47%	53%
Total	32,163,662	43%	57%	1,430,108	49%	51%

This highlights that women and girls with disabilities may be benefiting at lower rates from ANCP projects than men and boys with disabilities, likely reflecting broader patterns re inclusion of women and girls with disabilities within development programs. This concurs with qualitative information from NGO and OPD interviewees, many of whom highlighted **women and girls as a group that is particularly hard to reach**. Women and girls with disabilities face multiple sources of marginalisation, due to gender discrimination. Gender empowerment is also a strong focus of ANCP programs; however, there is evidence that women and girls with disabilities can be left out of mainstream gender activities or not meaningfully included.[23]

Across many contexts women and girls with disabilities are at much greater risk of gender-based violence, are less likely to attend school, and have lower rates of education. NGOs and OPDs cited issues with including women and girls with disabilities. Several OPDs across different contexts identified that women and children with disabilities were harder to identify and to reach through program activities, as they were often kept at home or within the family and faced attitudinal barriers. They can be more reluctant to engage in project activities due to shyness, cultural attitudes or isolation. In specific activities such as reproductive health, social attitudes such as beliefs that women with disabilities are not sexually active, may also be a barrier to inclusion. Efforts to further strengthen disability equity within ANCP can include particular focus on the inclusion of women and girls with disabilities, including support for formation and strengthening of women-led OPDs and women taking leadership roles within OPDs. Gender-focused programs and activities should also consider approaches to strengthening inclusion of women with disabilities.

It is acknowledged that this analysis uses a binary approach to gender, based on the data that is available. While there is an X category which may include people with other gender identities, this also captures people for whom gender has not been recorded. The review is not aware of other ANCP data which could provide information on people with disabilities who have diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC). However, it is generally recognised that people with diverse SOGIESC often face marginalisation and discrimination; so, where this identity intersects with disability, it is likely that people with disabilities with diverse SOGIESC face increased barriers to inclusion within ANCP projects. Further investigation into the experiences of people with disabilities with diverse SOGIESC within ANCP can inform specific approaches which could promote their inclusion.

Age differences within participants with disabilities

Based on aggregated figures of all adults with disabilities, compared with all children with disabilities, rates of inclusion for adults with disabilities were substantially higher than rates for children with disabilities, as shown in Table 3.

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22   This uses the original 2019–20 data, which includes outlier projects as described above.
23   See for example James, 'Missing Voices: The inclusion of women with disabilities within gender programming and women's movements', CBM, November 2023.

Table 3   Share of direct participants who are adults or children with disabilities

Year	Share of direct adult participants who are adults with disabilities	Share of direct child participants who are children with disabilities
2019–20[24]	8.12 %	5.80 %
2020–21	2.24 %	1.28 %
2021–22	2.65 %	1.48 %
2022–23	3.03 %	1.18 %

It is expected that a greater proportion of adults with disabilities would be recorded, given that disability prevalence increases with age, so these results may not represent a significant disparity. However, it is notable that absolute rates of inclusion of children with disabilities, as a proportion of all child participants in ANCP programs, are also low – below 1.5 per cent for the past three years.

There may be several factors contributing to this. Informants noted challenges with engaging with OPDs on projects focused on children and youth. As most OPDs are made up of and represent adults, they may not have a particular focus on or knowledge of inclusion of children with disabilities. One child-focused organisation noted that this made it more difficult to engage with OPDs, as priorities were not aligned and OPDs did not necessarily recognise how engagement on child rights and child protection might enhance their work. This lack of OPD advice and support may in turn impact effectiveness of targeting children with disabilities.

There are also challenges in identifying disability in children and young people. One OPD identified that in some locations there is shame or stigma around having a child with disabilities: as a result, they may be kept at home and not sent to school, and they are not easy to locate within communities.

An organisation which ran programs targeting young children noted there were specific issues around disaggregation by disability for children, as they found it harder to measure disability in this group and conditions such as developmental delays were not well-understood by staff or partner agencies. Government systems also did not necessarily disaggregate data on children well, or indeed at all in some cases, leading to lower reported rates where this data was relied upon by ANCP projects.

Given these challenges, it would be useful to **identify opportunities to share learnings on inclusion of children with disabilities across ANCP agencies and consider approaches to provision of tailored technical support on this for child-focused agencies.**

Recommendation 1: Strengthening reach to under-represented and marginalised groups

NGOs to implement strategies to increase the proportional and meaningful inclusion of women and girls with disabilities; and strengthen approaches to inclusion of people with stigmatised or severe impairments, children with disabilities; and people with disabilities with diverse SOGIESC. Measures could include:

- Target inclusion of women and girls with disabilities within gender programs and activities; and support strengthened engagement of women and girls with disabilities in OPDs.
- Investigate the experiences of people with diverse SOGIESC, including specific approaches to strengthening inclusion.
- Share learnings and providing technical support on inclusion of children with disabilities.
- Undertake more intensive efforts to engage people with a wider variety of impairments and address stigma and discrimination, noting this can require additional resources.

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24   This uses the original 2019–20 data, which includes outlier projects as described above.

3.1.2 Performance against ANCP disability indicators

Key findings: Indicator data results relating to disability support services and training (G06 and G09) are not useful in providing insights into performance across ANCP.

Disability awareness and inclusion training activities are concentrated in a few agencies, which may indicate opportunities to expand this as a core activity.

Provision of disability support services and training in delivery of disability support services (G06 and G09)

Indicators G06 and G09 are focused on disability support services. While access to services is one of the preconditions for inclusion, it is likely these activities would largely take place in projects with a *principal* disability marker; however, even within such projects there are not high numbers of people being reached by such activities. Little judgement can be made about the adequacy of performance in these areas based on this information without more detailed context; they are useful more to provide headline figures.

Disability awareness and inclusion training (G08)

Indicator G08 shows reported performance on delivery of more general disability training at between 1.35 and 3.3 per cent. However, this is concentrated in a few agencies: for example, just five NGOs reported 78 per cent of the total training delivered against this indicator in 2022–23. This suggests performance could be strengthened for many agencies.

Table 4　　Summary or performance against disability inclusion indicators G06, G08, and G09 over review period

	# people receiving disability support services (G06)	# of people trained in disability awareness and inclusion (G08) and as a % of total participants		# of people trained in disability support services (G09)
2019–2020	22,485	227,052	1.92 %	2,018
2020–2021	22,349	120,261	1.35 %	4,047
2021–2022	15,032	180,407	3.3 %	6,401
2022–2023	11,721	105,891	1.79 %	4.667

One smaller agency noted that having access to ANCP-approved or endorsed training materials would be helpful in rolling out training with partners and project participants. Increased dissemination of learning materials and sharing of resources appropriate to specific contexts or countries, could also strengthen performance on training. There is also potentially a strong role for OPDs, as experts on lived experience, to deliver sensitisation and awareness training on disability within local contexts. However as discussed further below, other challenges including resourcing impact their ability to play this role.

Engagement with OPD partners across ANCP projects (G07)

Key finding: Engagement with OPDs has increased overall, but more than two-thirds of projects, including 56 per cent of projects with a *principal* disability marker, are still not reporting engagement with OPDs.

NGOs record the number of OPDs they engage with by project (indicator G07), from which the review calculated the number of projects engaging with at least one OPD. Over the previous four years, this increased from 20 per cent to 30.8 per cent of projects, as seen in Table 5. The rate of change has slowed since 2020–21. Only seven out of 16 (44 per cent) of projects with a *principal* marker on disability reported an OPD partner in 2022–23.

Table 5   Engagement with OPDs

Year	No. of projects engaging with at least 1 OPD	Percentage of projects engaging with at least 1 OPD	Total number of OPD partners within ANCP
2019–20	87	20 %	1,370
2020–21	108	27 %	834
2021–22	112	29 %	643
2022–23	124	30.8 %	527

In 2022–23, agencies collectively engaged with a total of 527 OPDs. However, these were heavily concentrated in a small number of agencies. Eighty-five per cent of the OPD partnerships for that year were reported by just eight agencies, typically large and/or disability-focused NGOs. Of the 25 smallest agencies, just five reported OPD partnerships in the most recent year studied. While this is partly explained by the lower numbers of projects these agencies operate, it also indicates challenges particularly for smaller agencies in engaging with OPDs: smaller agencies expressed willingness to partner with OPDs but found it difficult to implement.

The drop in the total number of OPD partners across ANCP was also heavily influenced by a small number of outliers agencies with fluctuating numbers of reported partnerships. For instance, in 2020-21, more than half of all OPD partnerships across ANCP were reported by only two agencies (CBM Australia and ALWS); and the drop between this and the next year can be entirely accounted for by the drop in reported numbers from these two agencies (noting there was also significant fluctuation from other large agencies).

OPDs also identified that sometimes NGOs choose to work with disability service providers – in at least a few cases, service providers appear to have been incorrectly reported by NGOs as OPD partners, suggesting there is sometimes confusion about what constitutes an OPD. While partnerships with service providers can be important in strengthening disability equity, they should not be a substitute for OPD partnerships.

The fact remains that more than two-thirds of projects are still not reporting engagement with any OPDs, despite the International Development Policy's stated commitment to Australia supporting an active role for OPDs at all stages of the development program. Performance varies widely across organisations, and this indicator also tells us little about the quality of engagement, noting that OPD engagement should be informed by strong contextual analysis and partnership principles. Further discussion of the factors influencing OPD partnerships and the challenges experienced are discussed in Section 3.5, including recommendations. However, the introduction of an indicator measuring number of organisations of persons with disabilities receiving capacity-building support (Tier 2 indicator 10, within Australia's International Development Policy Performance and Delivery Framework), may assist to influence improved practice related to engaging with OPDs.

3.1.3   Variations across sectors, geographic areas and implementing partners

The scale of the current review did not allow for detailed analysis of quantitative evidence on the basis of sector and country. Some interview responses suggested that there may be some advantages for sector-focused agencies in terms of promoting disability inclusion. Having a focus on a single sector may streamline the approach to disability equity, for example by allowing development of resources that are relevant to multiple programs.

In terms of geographic variation, the sheer scale and diversity of ANCP means that agencies are implementing across dozens of countries in multiple regions. This means that the practices needed to implement disability inclusion in particular contexts and regions will differ widely, adding to the challenges in building capacity across ANCP. Agencies noted that a key facilitator for inclusion at project level was availability of information about local context and organisations on disability. The survey of agencies also identified that policy and institutional context within the country of implementation is a key constraint on practice. Some areas have particular challenges which were identified – for instance, the geography and

widely dispersed populations in Pacific Island countries means there can be higher transport and other costs involve in engaging with people with disabilities.

This diversity of contexts is coupled with a very diverse range of ANCP organisations – from those implementing a few projects in a single context, for whom ANCP makes up the majority of the organisation's funding, through to very large organisations that are part of global federations. What works for large agencies may be impractical for small agencies; what is effective in densely populated urban contexts may not be effective in remote and sparsely populated islands. The current focus on aggregated data within ANCP program-level reporting tends to conceal wide variations across organisations, such as some agencies having many OPD partners and others none; and reported percentages of participants with disabilities varying from 0 to 23 per cent amongst agencies.[25]

3.1.4   Variation by principal, significant, and not-targeted markers

Key finding: The number and proportion of projects with a *principal* or *significant* disability marker increased from 2021–22 to 2022–23. Overall performance on disability equity is very different for projects with different markers, and stronger for those with a *principal* marker in particular.

ANCP projects are classified according to the OECD (Organisation for Economic Co-operation and Development) DAC markers (Development Assistance Committee). The markers were adjusted to align with DFAT's DAC reporting requirements in 2021–22, therefore data from previous years is not directly comparable. Projects are classified according to their focus on disability, namely *principal*, *significant*, or *not targeted* (see Table 6).

In 2022–23, 69 per cent of projects were marked as *significant*, an increase from 63 per cent the previous year. A large majority of projects are now actively targeting disability (combined figures for both *significant* and *principal* of 73 per cent in 2022–23). Projects marked *not targeted*, while not meeting the threshold for a *significant* focus, may still be incorporating disability inclusion approaches. For instance, many *not targeted* projects reported reaching participants with disabilities, sometimes at higher-than-average rates. Some agencies in interviews expressed lack of clarity regarding what constitutes a *significant* focus, although this did not seem to be widespread.

It is still important for projects marked as *not targeted* to collect quantitative and qualitative information on performance against the disability indicators G.06 to G.09 – at present it appears to be optional, as some record data and some do not. This ensures that the progress of these projects on disability is still captured, and that systems do not inadvertently promote a lack of focus on disability equity amongst these projects, rather than encouraging them to work towards strengthening inclusion.

Analysis shows that percentage of participants with disabilities reported by a project was strongly linked to the project's approach to disability, as seen in Table 6. Those projects with DAC markers of *not targeted* have a mean rate of participation by people with disabilities of two per cent over the past two years, while those with *significant* marker have a rate of five per cent and four per cent respectively – more than double. For projects with a *principal* marking, the rate is much higher again – 40 per cent and 24 per cent respectively in 2021–22 and 2022–23, or at least six times that of *significant* projects. In the most recent two years projects with *significant* marker were categorised as either Mainstream or Twin-track; rates of inclusion were higher for those marked twin track.

Categorisation of projects was different in the previous two years; however, the data also shows that in 2019–20 and 2020–21, *not targeted* projects had a much lower rate of participation (one per cent and two per cent respectively). Projects that reported a mainstreaming approach had rates almost as low (two per cent and three per cent); but those which took a twin-track approach again had much higher participation rates (14 per cent and 11 per cent respectively). This was supported by qualitative evidence: several agencies reported that having disability-specific measures within a project tended to also drive performance and practice across mainstreaming, by supporting building of expertise and momentum. An

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25   2022–23 figures.

explicit twin-track approach could be promoted to agencies as a strategy to strengthen performance across projects with a *significant* marker.

It is not surprising that those projects which are specifically targeting people with disabilities have higher rates of inclusion than those which don't target them. However, the level of difference in reach: a twelvefold difference of two per cent versus 24 per cent in the most recent year studied – indicates that an important strategy for improving overall ANCP reach to people with disabilities is to increase the number of projects with a *principal* marker for disability. Only four per cent of projects had disability as a principal focus in 2022–23. By its nature, this would lead to increases that are concentrated in specific projects, rather than mainstream improvement across ANCP, so it should only be one strategy amongst several – although indirectly this could also drive learning and performance more broadly.

Similarly, the difference in participation seen in *not targeted* versus *significant* is at least partly to be expected – those projects which report a significant focus on disability achieve better outcomes in terms of reaching participants with disabilities, as well as OPD engagement, than those that do not target disability. Nevertheless, measures to increase the number of projects with *significant* markers is another strategy to strengthen inclusion. It may drive practice by prompting projects to consider ways to lift practice beyond this threshold, and also encourage a focus on disability within reporting and evaluations.

The Joint Call for Action on Disability Equity from Australian NGOs, the Australian Disability and Development Consortium (ADDC) and Australian Council for International Development (ACFID) calls for a target of 10 per cent of Overseas Development Assistance (ODA) allocated to initiatives with disability equity as a principal objective by 2030.[26] While this review takes no view on that specific target, taking a view across the ANCP portfolio, DFAT can look at measures including targets, which could increase the number of projects with principal and significant disability markers. Respondents perceived that the use of targets for gender equality focused programming had been successful in driving improved practice, and that there is potential for this for disability equity and inclusion.

Recommendation 2: Targeting disability inclusion

DFAT to introduce ANCP portfolio measures to promote an increase in the total number of ANCP projects with *principal* and *significant* DAC markers on disability. This could include support for disability-specific measures, targets, tailored technical advice, and support for design processes.

Good Practice Example 1: Ensuring projects achieve a 'significant' marker as a method to drive disability performance

World Vision Australia (WVA) has an internal policy of ensuring that all ANCP projects achieve a significant marker as a minimum standard. The agency has instituted internal support including a dedicated ANCP disability advisor, and reviews designs with partner agencies to strengthen these and bring them to a significant level as required.

This is one of a number of measures instituted to strengthen disability practice, including developing its own minimum standards and guidance on disability inclusion as well as gender equality. WVA has seen an increase in the average percentage of project participants who are people with disabilities from two per cent in 2019–20 up to four per cent across the following three years.

Minimum internal standards on disability have put a focus on disability and helped to build experience and capacity within programs and implementing partners. This in turn is also supporting performance within non-ANCP projects. The approach has taken time and resources however and has required extra funding by WVA.

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26   Joint Call for Action on Disability Equity, https://www.addc.org.au/get-involved/joint-call.

Table 6   Number and proportion of projects by disability marker over the review period, and comparison of mean proportion of total participants that are recorded as having a disability

Disability Marker	2019–2020		2020–2021		2021–2022		2022–2023	
	# (%) of projects	Mean participants with disabilities	# of projects	Mean participants with disabilities	# of projects	Mean participants with disabilities	# of projects	Mean participants with disabilities
Not targeted	69 (16 %)	1 %	68 (17 %)	2 %	126 (32 %)	2 %	110 (27 %)	2 %
Targeted	15 (4 %)	25 %	14 (3 %)	22 %				
Mainstream	261 (16 %)	2 %	234 (58 %)	3 %	163 (42 %)	3 %	186 (46%)	3 %
Twin-track	76 (61 %)	14 %	90 (22 %)	11 %	83 (21 %)	9 %	90 (22%)	7 %
Significant[27]	2 (0.5 %)	21 %			246 (63 %)	5 %	276 (69 %)	4 %
Principal	2 (0.5 %)	53 %			20 (5 %)	40 %	16 (4 %)	24 %
Total	425		406		392		402	

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[27] For 2021-22 and 2022-23, projects with a *significant* marker were further divided into Mainstream and Twin-track.

3.2   Accuracy of data

Key findings: Disaggregated individual data is likely to be underestimating the number of participants with disabilities. Other data reported against indicators are likely to be broadly accurate but may not be providing relevant information about disability inclusion. Given the diversity of programs and partners, aggregation of data across ANCP does not give nuance or insight into the challenges and achievements at organisational level, or for organisations of particular characteristics such as size.

3.2.1   NGO views on disaggregated data accuracy

Over two-thirds (68 per cent) of survey respondents felt that the data collected in their organisation's ANCP projects was likely to either somewhat or significantly, underestimate the number of participants with disabilities. This is illustrated in Figure 1. There are a range of factors cited by agencies that are likely to be influencing data underestimation.

ANCP agencies reported a very wide range of methods to collect disaggregated data on participants with disabilities

The most commonly reported method by survey participants was self-identification, followed by use of the Washington Group Short Set (WGSS) and interview respondents noted that there was considerable variation in data collection methods within their programs. With the exception of use of the WGSS, the most frequently used methods (self-identification by individuals, observing participants, and estimating) are recognised as **likely to be inaccurate, may not identify people with a range of disabilities including invisible impairments, and are most likely to underestimate prevalence**.

Respondents to the survey of ANCP agencies reported a very wide range of methods to collect disaggregated data on participants with disabilities. Most respondents reported multiple approaches being used (noting this includes reporting across multiple projects), as shown in Figure 2. A majority of respondents (63 per cent) reported four or more separate methods. Interviewed agencies also reported using multiple methods, for a variety of reasons. For example, the WGSS questions might be trialled in one project or activity or be embraced by one partner but not another. This means that the quality of data may vary even across projects implemented by the same agencies, or potentially within projects for different activities.

Figure 1   NGO self-assessment of accuracy of project level data

How accurate do you think your project-collected data on participants with disability is?

Don't know
3%

Varies
9%

Accurate
20%

Significantly
underestimate
11%

Somewhat
Underestimate
57%
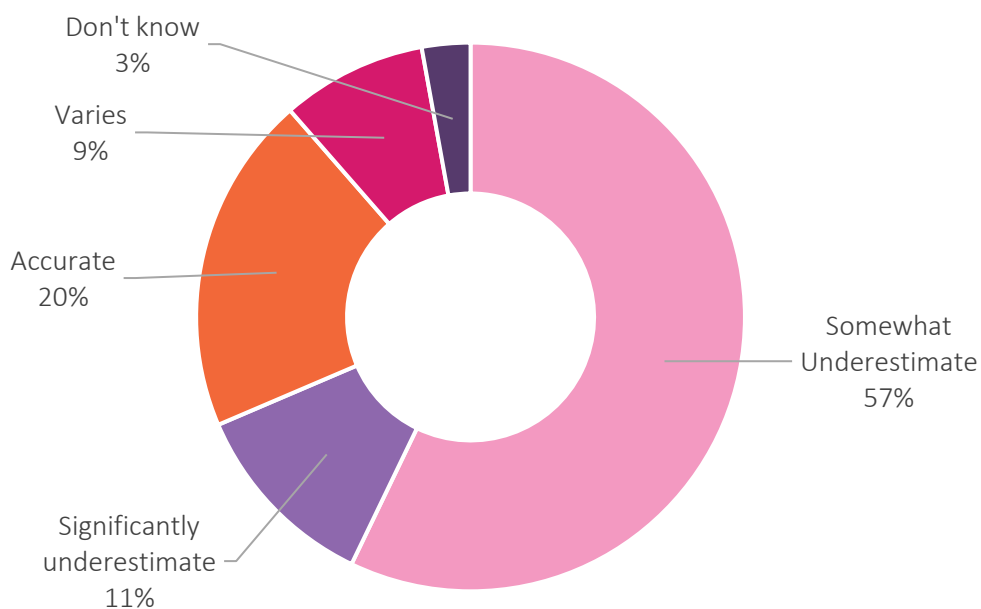
Figure 2   Data collection methods used by NGOs and partners

Number of data collection methods reported by each survey respondent

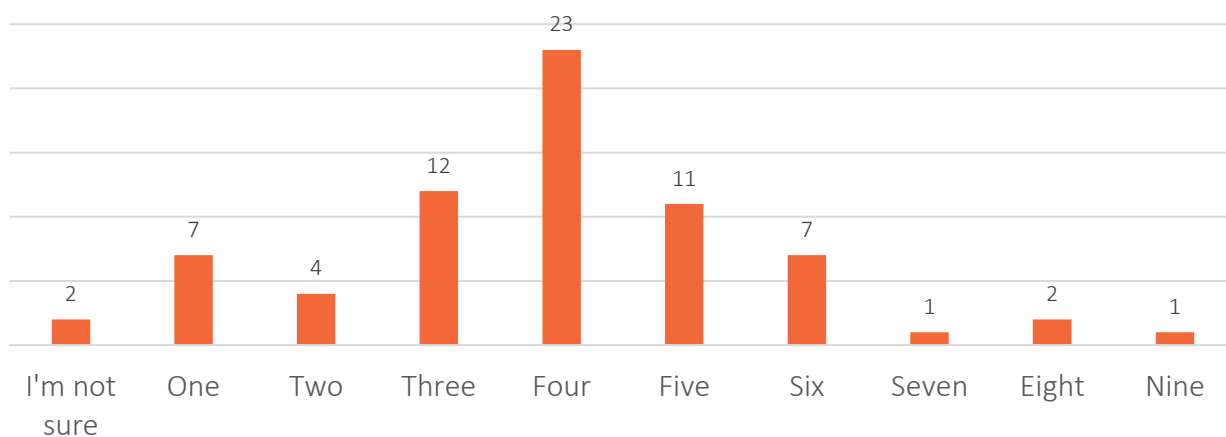| I'm not sure	One	Two	Three	Four	Five	Six	Seven	Eight	Nine
2	7	4	12	23	11	7	1	2	1

Figure 3 shows the most common methods used. With the exception of use of the WGSS, the most frequently used methods (self-identification by individuals, observing participants, and estimating) are recognised as likely to be inaccurate, and are most likely to underestimate prevalence. It is clear that across ANCP projects, and even across projects implemented by a single agency, data is unlikely to be easily comparable, and data quality is likely to vary widely.

Figure 3   Methods of data collection reported by survey respondents
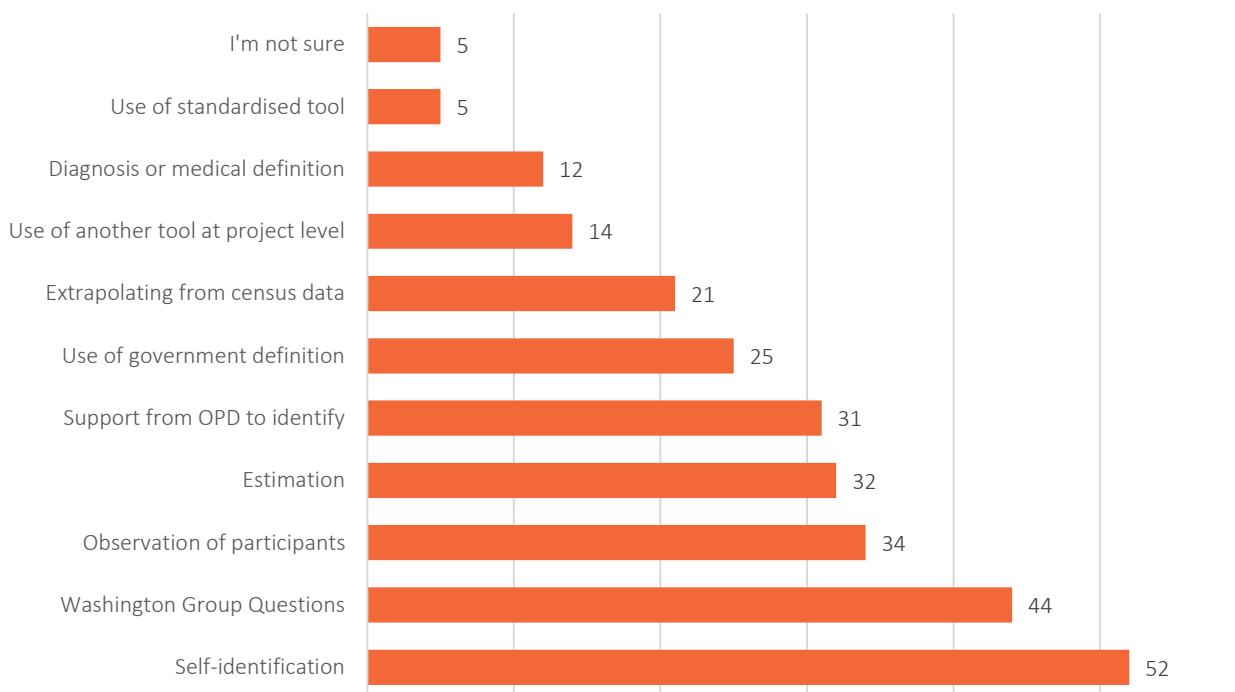
Limitations of government data sources

Multiple agencies noted that for many activities they may rely on data from government bodies, such as ministries of health or education. This applies particularly to health- and education-focused projects and agencies: for example, where projects are delivering capacity strengthening to health workers or teachers, or conducting screening and medical activities. As their activities are closely aligned with these systems, it is appropriate that they use government data rather than setting up a parallel approach; but commonly, these data sources do not systematically disaggregate by disability, meaning there is not accurate data available for reporting. Influencing government partners to change their data collection systems is a long-term process, with several agencies reporting this as difficult and time-consuming.

Agencies reported that is resulting in systematic under-reporting of disability prevalence amongst certain programs. To give one example, a large organisation with child-focused programs reported extremely low percentages of participants with disabilities for these programs, over the review period. The agency is aware that these figures are inaccurate, but relies on government partner information, and it is not realistic to implement a parallel system of data collection.

Stigma and discrimination

OPDs and NGOs cited the issue of people with disabilities being reluctant to identify themselves, or families to identify children with disabilities, due to stigma or shame around disability. This can influence reported numbers of participants with disabilities, as well as potentially reducing willingness to engage in project activities.

Fluctuations in data

Data may fluctuate based on changes in operation or activities. An example given was of a project that reported an unusually large number of participants for a particular year, due to refurbishing a health facility. Users of the health facility were counted as participants, and reported participants increased tenfold for that year. However, because no information was available on their disability status, they were all reported as people without disabilities; so, the reported percentage of participants with disabilities was only 10 per cent of the previous year's figure. On paper this looked like a decline, but did not in fact indicate any decline in performance.

3.2.2 Availability of qualitative data on disability inclusion has been limited

Until recently, there has been no dedicated space on APRs for projects to include qualitative information on disability inclusion. Agencies noted it was therefore difficult to record extra information on disability, due to strict word limits in APRs, and DFAT also noted this limitation. Example of contextual information they felt would be useful included: noting that a government partner was already working with an OPD and so the project did not want to duplicate this work; or noting that a non-ANCP funded portion of a larger project was engaging with OPD/s.

It is understood a section for qualitative responses is being added to the APR template as of 2023–24. This should collect information from all projects, including those with a DAC marker of '*not targeted*' on disability. Consideration should be given as to how this information will be reviewed and shared. NGOs reported a strong desire for more examples of good practice and learnings from other agencies, and qualitative reporting in APRs could provide an important source of such learning.

Recommendation 3: Collection and use of data

ANCP MEL modifications to include streamlining and refining of data collection, moving beyond a focus on disaggregated participant data and including strengthening the collection of qualitative data, to ensure meaningful information on disability is gathered from all projects regardless of their disability marker. Measures could include:

- Review and revise current disability indicators, including considering removal of indicators G.06 and G.09.
- Add Tier 2 indicator 10 'Number of organisations of persons with disabilities (regional/national/ state/local) receiving capacity building support' to the ANCP indicator set, in line with reporting requirements under Australia's International Development Policy Performance and Delivery Framework.
- Ensure quantitative and qualitative information is collected from all projects, regardless of disability marker, and used to assess progress on meaningful inclusion of people with disabilities.
- Provide strengthened guidance on approaches to disaggregation by disability within ANCP projects, including where accurate or consistent data is not available.
- DFAT to collate and lead on disseminating good practice examples and learnings from Annual Performance Reports, mid-term reviews and evaluations, including in collaboration with the ANCP Community of Practice and ACFID Disability Community of Practice.

3.3 Adequacy of disability equity and inclusion performance

> **Key findings:** NGOs are strongly committed to strengthening disability inclusion across the portfolio. Inaccuracy and underestimation within data makes it difficult to assess real levels of inclusion. However, some groups, including women and girls with disabilities and those with stigmatised or complex impairments, are not benefiting at the same rate as others. Children with disabilities are not being reached at the same rate as adults with disabilities, which may be explained by age-related prevalence rates.
>
> Engagement with OPDs, while increasing, is still relatively low and is an area of risk that needs to be addressed.

3.3.1 There is clear effort across ANCP to improve disability equity and inclusion performance

Informants from sectoral agencies said they had observed a shift over the past five years on disability equity. Several years ago, the main focus of most NGOs was getting disability onto the agenda; whereas now informants perceived that focus had shifted to how to effectively achieve disability inclusion, including program implementation, partnerships with OPDs and measuring impact.

Broadly in line with the findings based on SmartyGrants data, qualitative evidence suggests that most NGOs are gradually but steadily increasing their efforts to include people with disabilities in their ANCP portfolio; and have a genuine interest in and commitment to disability equity. Interviewed NGOs, as well as those that engaged in ACFID CoP discussions, all raised specific and extensive measures to promote and address disability inclusion within their projects, looking at appropriate approaches for particular sectors, groups and contexts; while also reflecting in detail on challenges and learnings.[28] These vary widely across agencies and sectors, but example of common measures include: developing and implementing disability strategies, both at NGO level and within specific countries; developing internal tools and guidance; employing disability focal points or resource officers at project or NGO level; rolling out tools for data collection including the WGSS; developing approaches to address stigma and promote a rights-based approach amongst communities; engaging with OPDs at project level; and focusing on disability equity in monitoring and evaluation, including developing tools and templates to help support monitoring visits and conversations with implementing partners. Several agencies noted that they had taken intentional approaches to building up capacity on disability inclusion within their organisation and in individual projects.

> **Good Practice Example 2: Intentional building of organisational and partner capacity**
>
> UnitingWorld, a multi-sectoral faith-based NGO, recognised that there was a need to intentionally strengthen the organisation's disability equity and inclusion approaches. A decade ago, the agency had worked to promote inclusion across its ANCP portfolio, including a cross-cutting project focused on strengthening child protection and disability inclusion capacity amongst ANCP partners. But focus on disability had gradually waned, including due to organisational energy being focused on safeguarding measures, and then the impact of COVID-19. Several evaluations post-COVID-19 highlighted gaps in practice. Projects were conducting focus groups with people with disabilities to identify issues they faced, but there was a need to dig deeper and work to identify and address specific barriers. A focus on disability also aligned strongly with UnitingWorld's values and focus on marginalised people.
>
> UnitingWorld reviewed its design template to strengthen approaches to disability. It introduced independent appraisal of new project designs, to assess whether there is sufficient mainstreaming on disability. Several projects have also introduced disability-specific measures. While engagement with OPDs had not historically been strong in some countries, the agency has built partner awareness of the importance of engaging with and empowering people with disabilities directly. Relationships are being

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28   A possible limitation of this finding is that agencies were not selected at random for interview, and excludes small agencies with a very narrow country or sector focus.

developed with OPDs the community level across the portfolio. Data collection is also being strengthened to improve understanding of impact and reach, including trialling use of the WGSS.

One key issue identified was stigma around disability at a grassroots level, particularly for children with disabilities, which was impacting engagement with children and their families in project activities. As UnitingWorld works largely through church partners, tools were developed to use theological approaches to address stigma and negative attitudes towards children and adults with disabilities within project communities.

The agency considered that partners had come a long way in the past three years, but that disability equity is still a journey that they are walking together. UnitingWorld will continue its work to grow and strengthen approaches.

Accreditation Assessors

DFAT accreditation assessors interviewed for the review considered that ANCP organisations were gradually improving their practice on disability equity over time. They had observed mixed performance across agencies, which included both occasional 'standout performers', isolated examples of very poor performers, and most organisations in the middle showing moderate and improving performance.[29] Strong practice examples cited included development of policies and program manuals, and strong senior leadership helping to build capacity and focus within an organisation. They also noted however that given how important the accreditation process is, agencies may be inclined to present a positive view of their practice, rather than having incentives to have constructive discussions about the challenges they face.

The accreditors considered that poor practice was more often seen amongst smaller organisations, which was linked to fewer staff and resources to focus on disability equity. They suggested that newer organisations, including those which may be accredited at base level, were likely to have had less opportunity to build up an understanding of disability equity. Those with a very narrow or niche focus may have less engagement within the development sector, and therefore had less access to resources, practice ideas and training. This is not, however, to suggest that all agencies with these characteristics have poorer performance: many smaller agencies report higher than average rates of participants with disabilities.

Accreditors also observed that poor performance on disability equity for a particular agency, as assessed through accreditation processes, was often coupled with issues in other areas – suggesting an overall lack of practice standards within the agency rather than a particular weakness on disability.

Good Practice Example 3: Enhancing accessibility of financial literacy training programs

Good Return, an ANCP agency with a focus on financial empowerment and microfinance, has worked to promote disability inclusion within its projects in a number of ways. To better reach and support people with disabilities, one project works with microfinance institutions (MFIs) to train staff on delivery of financial education to people with disabilities. It provides support to MFIs to develop tailored financial products targeted at people with disabilities and their families. It also partners with OPDs to build their capacity to deliver financial education and coaching to their members, supporting people with disabilities to access these tailored financial products.

The agency has developed publicly available online resources for Cambodian MFIs including a Guide to Disability Inclusion for Financial Service Providers, in both English and Khmer language. There is also an e-module on Disability Awareness in Khmer, and video case studies of clients with disabilities who have received tailored microfinance loans.

For delivery of training-of-trainers course on financial capability, the curriculum has been adapted to improve accessibility and support learners with disabilities, such as those with vision impairments. Trainers work to identify learners with disabilities and support them to access the materials. Projects are now looking at ways to support those with other impairments, such as those with speech impairments or

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29   While other evidence collected in the review has not been attributed to specific informants, in this case the three interviewed accreditors agreed to have comments attributed to them. This recognises the unique role that accreditors play in assessing NGO performance, and the importance of their perspective.

who are Deaf or hard of hearing. However, it is sometimes challenging to get specific advice on technical aspects of accessibility. The project is also using the WGSS Questions at baseline and endline surveys and finds that partners typically need a lot of support on use and interpretation of the data that is produced.

In reflecting on partnerships with OPDs, Good Return notes that progress is at different levels within the countries where they are implementing. Despite strong performance in one country, these learnings don't necessarily translate well to another context, given different stakeholders and cultural backgrounds. The agency is finding it is quite resource-intensive to roll out in a new location.

https://www.rifacademy.org/disability-inclusion

3.3.2   Is the rate of participation of people with disabilities adequate?

The average reported rate of inclusion of people with disabilities across ANCP – around 2.4 per cent in 2022–23 – is quite low, given average estimated prevalence of disability is 16 per cent worldwide. While exact prevalence will vary across communities and countries, if 2.4 per cent of participants in ANCP projects are people with disabilities, this would suggest that around 85 per cent of people with disabilities are not being reached.

It is important to note that in some target groups, the expected number of people with disabilities will be smaller than this. Disability prevalence increased with age. Where programs target children, expected prevalence would be considerably lower than 16 per cent; and programs targeting young people or working-aged people might also expect overall disability prevalence to be lower than 16 per cent. Additionally, even reliable methods of estimating prevalence such as the WGSS often produce figures significantly below the 16 per cent benchmark that are still valid.[30] Nevertheless, the low reported rate of inclusion, if accurate, would suggest there are some ongoing challenges in promoting disability equity within ANCP.

There is however significant evidence that reported data underestimates the true percentage of people with disabilities included in ANCP – including a large majority of agencies reporting they believe this is the case. Data is also collected by agencies in very different ways, meaning that information from different projects may not be comparable. It is difficult however to quantify what the level of underestimate is, and therefore also difficult to be definitive as to whether performance is adequate. Based on qualitative evidence collected for this review (NGO and key informant interviews), progress is strong, and inclusion is increasing, but marginalised groups including women and girls with disabilities, people with stigmatised or complex impairments, and potentially children with disabilities, are not participating at the same rate as others. Several NGOs as well as OPDs acknowledged that projects were less successful in reaching certain groups, particularly those with psychosocial impairments or multiple impairments, and people with disabilities living in remote areas. People with physical impairments were generally cited as easiest to identify, and the group for whom it was easiest to address barriers to inclusion.

It was beyond the scope of the review to identify whether participation and engagement by people with disabilities is meaningful. However, it should be noted that disaggregated data does not tell us anything about the quality or type of engagement that people with disabilities; and should be used in combination with other data sources to give a more nuanced picture of performance.

3.3.3   Is engagement with OPDs adequate?

Engagement of OPDs in ANCP projects is increasing. Agencies showed strong understanding of the importance of such partnerships, and many are working towards improving the number and quality of their partnerships. **But ultimately, almost 70 per cent of projects still do not report partnerships with OPDs.** Given the importance of OPDs as leaders and partners on disability-inclusive development, this achievement does not seem adequate. Performance is varied, however: the partnerships that are in place are strongly skewed towards larger and/or disability-focused NGOs, while smaller agencies are less likely to report formal partnerships.

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30   Mont D (2019) 'Differences in Reported Disability Prevalence Rates: Is something wrong if I don't get 15%?', Washington Group on Disability Statistics.

Given the importance of engagement of OPDs in ANCP projects, barriers and facilitators are discussed in further detail in Section 3.5. It is important to note that the limited number of partnerships does not seem to indicate unwillingness by NGOs to partner with OPDs; rather, it reflects the complexity of establishing and maintaining meaningful partnerships, the costs and commitment required, the limited capacity of OPDs to engage with partners including due to resource constraints, and the existence of constraints within the structure of ANCP (discussed further in Section 3.4.8).

3.4 What do ANCP partners, DFAT, OPDs, and other stakeholders identify as key factors impacting disability equity within the program?

The review identified a wide range of challenges and facilitators for disability equity within ANCP. Given the breadth and complexity of the ANCP program, this is unsurprising. There is no 'magic bullet' needed to progress disability equity in ANCP, but rather incremental change – many factors can support this, but these vary widely across organisations, countries, contexts, and sectors.

3.4.1 Key barriers and facilitators for disability inclusion

Figure 4   Barriers to disability inclusion

Respondents to the survey were asked to select up to four barriers to disability inclusion they considered as the most significantly impacting their ANCP portfolio. These are shown in Figure 4. The most commonly cited included stigma and discrimination at the community level (50 per cent); lack of budget to support disability inclusion (47 per cent); and limited capacity on design and implementation (47 per cent). This was followed

by challenges in measuring impact (31 per cent); lack of staff training and capacity-building (30 per cent); and lack of ability or commitment for projects to partner with OPDs (26 per cent). These issues, as well as others that were cited as facilitators or supports for inclusion, are considered below – given the importance of OPD partnerships, this is discussed in more depth in Section 3.5.

3.4.2   Stigma and discrimination

Despite this being the most-commonly identified challenge within the survey, relatively little information was provided about issues of stigma and discrimination. Several NGOs did mention that stigma is an issue impacting both identifying people with disabilities and reaching them through project activities. Stigma is likely to contribute to difficulty reaching multiple marginalised groups, including women and girls with disabilities, and people with psychosocial or intellectual impairments. OPDs similarly identified that cultural attitudes around disability contribute to these groups often being excluded. These groups can also be less well-represented by OPDs or less likely to be members.[31]

The impact of local attitudes and beliefs on disability inclusion highlights the importance of understanding and analysing local contexts, in successfully progressing disability inclusion within ANCP projects. This indicates that particular focus should be given to engaging and including marginalised groups, including people with psychosocial and intellectual impairments, including addressing stigma and supporting self-representation through OPD development and capacity-building.

3.4.3   Funding challenges

Almost all NGOs interviewed identified funding as a challenge. Only one stated it was not a current barrier for them in implementing disability equity. Agencies noted that meaningful disability inclusion typically required many different and often costly activities, including engagement with OPDs and providing appropriate remuneration, reasonable accommodation, ensuring accessibility of services, conducting training, and conducting intensive activities such as house-to-house visits and long-term engagement with marginalised and isolated communities. Where populations are widely spread or in remote areas, including in the Pacific and areas of Africa, transport and logistics for reaching outer islands or villages is expensive.

Some cited activities they would like to do but could not afford, such as learning exchanges, delivery of disability-specific activities, and provision of assistive devices. Internal resources such as a disability advisor was another potentially high-cost activity. OPDs noted that limited funding means that involvement in project or consultations of people with disabilities with greater mobility and independence is often prioritised, leaving out those with more severe impairments. Agencies felt that the costs of inclusion were a program-level issue that needs to be addressed within ANCP, not just at project levels.

Funding was a particular issue for extremely small ANCP organisations, which may have very few sources of funds other than ANCP, very few staff, and smaller numbers of projects overall from which to potentially pool funds for technical support or a focal person. One noted that even small amounts (circa $5k – $10k) would allow projects to better engage with OPDs, conduct further training etc.

There will always be multiple demands on ANCP funds, and requests from NGOs for greater funding are not new. It does need to be recognised within ANCP that disability inclusion is often expensive. An emerging challenge is likely to be reaching those who are most marginalised and excluded, which will in many cases require specific measures and more intensive approaches, with associated higher costs. It is also likely that additional requirements and expectations will emerge from the forthcoming Disability Equity and Rights Strategy.

3.4.4   NGO and partner capacity

Agencies typically showed a strong and intentional commitment to building up disability inclusion capacity within their own organisation, as well as supporting their implementing partners. This was often guided by

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[31]   See for example Banks et al (2023), 'How representative are organisations of persons with disabilities? Data from nine population-based surveys in low- and middle-income countries, *Disability and Society*, 1-17.

policies and strategies, development of tools, and delivery of ongoing training and capacity-building. Agencies were generally reflective on their own practices, recognising both successes and areas where they were still developing approaches. It was noted by several agencies that capacity-building on disability equity is not a one-time activity, but an ongoing process which needs focus and to be reinforced over time, including when key staff leave.

One informant with long-term knowledge of the disability and development sector observed that knowledge on disability equity, particularly around best practices and what is most effective in addressing challenges, is still emerging. This person's view was that varying performance did not indicate that NGOs were failing, but rather that learning is still emerging across the diversity of ANCP sectors and programming approaches, and NGOs need to integrate this across differing contexts. This contrasts with the view of some DFAT informants, who expressed that agencies should know by now how to progress disability inclusion and felt that challenges suggested a lack of commitment – a perspective which is not borne out by this review.

Partner capacity

For partner organisations, it was noted by NGOs that gaps in capacity on disability inclusion was a frequent challenge. This often varied across geographic areas and projects, even for the same ANCP NGO. While many partners are enthusiastic and engaged on disability and have strong local knowledge, there are some for whom even understanding of concepts of disability are still emerging areas. Understanding of mainstreaming approaches was sometimes challenging, while implementing complex tools such as the WGSS could take considerable time and support. DFAT's clearly articulated support for disability inclusion and strong requirements, helped to drive discussions with partners and promote good practice amongst partners that may have some reluctance to prioritise disability.

Agencies which partnered with larger organisations, such as microfinance agencies and banks, noted that their ability to influence such partners around disability was often limited. If they wanted to promote disability equity, they needed to look for partners with a socially oriented outlook. It is also likely to be challenging to significantly influence government partner practice within the lifespan of an ANCP project.

Several agencies mentioned the pressure of competing priorities on both NGOs and their partners, particularly though not exclusively for smaller NGOS. This included the need for a strong focus on gender and climate change, and gradually increasing requirements for cross-cutting issues. While agencies agreed that all of these areas were important, they noted that it also stretched project resources and budgets, and often required significant capacity-building and support for implementing partners. There was a sense that things are changing frequently. Small agencies noted that it was particularly difficult for them to be across all issues, with limited staff and often small ANCP budgets. One suggestion was a staged approach: rather than multiple new strategies and requirements being released at a similar time, agencies being given time to focus and build capacity in one cross-cutting area before needing to increase their understanding of changing requirements in another.

3.4.5   Measurement challenges

As discussed in Section 3.2, there are reservations about the accuracy of reported disaggregated data. Agencies are aware of challenges in their data collection systems and approaches. Through interviews and surveys, they raised a range of issues which impact on the collection of accurate data.

Conservative approaches

The requirement to disaggregate data on participants by disability has driven progress in this area, including improved understanding of tools and approaches. Paradoxically, this may also be leading to lower reported rates. In previous years, disaggregation using estimates may have been acceptable; but with greater awareness of the need for accurate data collection, some agencies have reported being more conservative in their reporting. This can lead, for example, to reporting of no people with disabilities in situations where no data is available, even where it is known that some people with disabilities are included.

Several agencies noted challenges in supporting partners to collect data, including use of validated tools such as the WGSS. They noted that partner agencies were at different stages, with some having the skills and confidence to use WGSS, while others were still receiving training and support. Some expressed reservations as to whether the intensive support needed to implement WGSS or other detailed tools was effective, in terms of the value of the data then generated.

Shift to capacity-building activities

Sectoral moves towards localisation and a focus on local capacity may be driving a shift towards capacity-building activities, rather than direct delivery in communities (although the review did not examine quantitative evidence on the extent of any shift). Multiple agencies noted that carrying out training or capacity-building activities can result in lower reported reach on disability.

For instance, if an education sectoral project works directly with students to deliver inclusive education directly in schools, then a large number of students with disabilities are likely to be counted. However, if the project instead carries out training of teachers on inclusive education, the teachers are the direct participants, and therefore reporting will only capture the percentage of participating teachers with disabilities. This number is likely to be low, for reasons such as lack of access to education and barriers within the education system to people with disabilities becoming teachers. Therefore, reported participants with disabilities would appear low, but this may not be reflection on the quality or disability focus of the project. This also highlights the need for improved use of qualitative data to better measure impact.

This may be a transitional period in ANCP, where data systems are still being established and agencies are slowly building their own and partner capacity. It suggests there is a need for guidance as to how to report on disability in situations where accurate data is not available. There is also need for further support in developing and implementing approaches to data disaggregation; however, given competing priorities on disability, a focus on data collection should not come at the expense of capacity-building in other areas. Disaggregated data should be considered just one of many tools that can be used to understand progress and impact on disability within ANCP, but **specific guidance on approaches to reporting on disability prevalence, in situations where accurate or consistent data is not readily available, would be useful.**

> **Good Practice Example 4: Institutionalising the WGSS within projects**
>
> WaterAid Australia, a medium-sized agency with a focus on provision of water, sanitation and hygiene (WASH), is well-progressed on disability equity and has a GEDSI-focused role in each of its projects in Asia and the Pacific. It has introduced the WGSS in all contexts within its projects, including ANCP-funded projects. However, the agency noted that there was a continuing need for follow-up and support to partners, particularly when GEDSI staff moved on. The impact of fewer monitoring visits during COVID-19 also impacted partner capacity.
>
> When monitoring seemed to be identifying less people with disabilities engaged within its projects, WaterAid provided ongoing refresher training, checked translations of the WGSS and worked with partner staff to understand the challenges. It also adjusted the cut-off point used within the WGSS to those with 'some difficulty', which seems to identify participants with disability more in line with expected prevalence. This has helped partners strengthen their data collection processes, recording participation of people with disabilities at around 10 per cent. However, WaterAid recognises the need to provide ongoing support to its partners, for meaningful and effective use of the WGSS Questions.

3.4.6   Technical advice and support

Multiple agencies referenced the importance of technical advice on disability equity in driving practice, most commonly provided by CBM Australia's Inclusion Advisory Group (IAG). Several agencies funded their own technical partnerships with the CBM IAG which provided specific inputs including support on development of policies and tools, design support, and development of mainstreaming and disability-specific activities. These were strongly valued: an occasional drawback mentioned was that external technical advisors may lack

knowledge of specific contexts or communities, which limited the usefulness of their advice at project level. Smaller agencies noted that it was more difficult for them to fund technical support.

The tailored disability equity clinics, funded by ANCP and run by CBM Australia in 2023, were often mentioned as a useful source of technical advice. They were well-attended with 353 participants, and 70 participants then engaged in the clinics (including several small agencies, perhaps reflecting the challenges for smaller NGOs in finding funds for technical advice). There was strong appetite for further support of this kind. Activities and networking through the ADDC were also mentioned as a source of advice and support.

Recommendation 4: Resourcing and support

DFAT to recognise the different resourcing challenges faced by agencies, in particular smaller agencies, and explore options to expand centralised funding and technical and capacity-building support for disability equity across the ANCP portfolio. Measures could include:

- Make additional funding available for small- and medium-sized ANCP agencies for disability inclusion, where strong initial progress has been achieved and need for further activities to expand inclusion is demonstrated.
- Ensure that agencies have sufficient funding to meet additional requirements on disability equity which may emerge from the forthcoming International Disability Equity and Rights Strategy.
- Explore mechanisms to prioritise small agencies in provision of ANCP-funded or low-cost technical advice.
- Improve generation and sharing of sector- and context-specific resources and good practice examples and tailored technical support.
- Develop ANCP-approved training materials on disability equity that could be rolled out by agencies with partners and project participants.

3.4.7   Networking and collaboration

At the sectoral level, there was strong enthusiasm for opportunities for learning and collaboration on disability equity, such as the recently convened ACFID Community of Practice (CoP) on Disability Equity. Agencies were generally eager for more opportunities to share resources and learning around disability equity. (Some smaller agencies, while still keen in principle, expressed caution around additional demands on their time given small numbers of staff.)

There was a general feeling that information on disability inclusion within ANCP was not always well-shared, either by agencies themselves or by DFAT, drawing on reporting and evaluations from ANCP projects. One sectoral informant suggested that there was a need for more proactive and centralised identification of good practice by DFAT from reporting. With further qualitative information about disability now being collected within APRs, this provides an opportunity for appropriate sharing of both good practices and challenges reported.

Several agencies also mentioned the role of DFAT Posts in promoting collaboration and sharing of learning at a country level, where ANCP NGOs may not otherwise have much engagement with each other, including supporting engagement with in-country OPDs. This is discussed further in Section 3.4.9 below.

3.4.8   ANCP structures and requirements

Agencies identified several issues within the structure of the ANCP program that could act as either barriers or facilitators to disability equity.

Timeframes

NGOs reported that an annual funding cycle means there is limited time and opportunities for in-depth engagement on disability at the design phase in particular. It can also be difficult to establish meaningful partnerships with OPDs and community members with disabilities over project life cycles, particularly given related issues of appetite for risk. The potential for partnerships and funding to end following a three-year project can also potentially damage long-term relationships with OPDs, who can feel that projects or partners are not sufficiently committed to working together. Projects which have multiple phases have more potential for ongoing engagement, but uncertainty about budgets in future years can also be a constraint.

Appetite for risk

Several agencies mentioned that ANCP has a 'low appetite for risk', and there is an expectation that strong results can be reported within a yearly framework. Engagement with OPDs in particular is usually a long-term process, and there may be a risk that outcomes aren't achieved within a year cycle from activities centred on OPDs. Some agencies reported choosing non-ANCP funding streams for their work with OPDs for this reason.

Reporting requirements

One smaller agency commented that changing reporting requirements caused difficulties, as with limited staff it was harder for them to retrospectively gather information. An example was requirements for monitoring on the 'pass-down' funds to be provided to local partners, which the agency felt was not clear at the time of introduction.

Targets for disability inclusion

Agencies noted that DFAT's clear prioritisation of disability equity, and associated requirements for projects, were generally helpful in progressing disability. Some respondents described having disability as a donor requirement as helpful in signalling to in-country partners the importance of disability. Moves towards localisation put greater control over projects into the hands of local partners; and many agencies implement through in-country offices which have autonomy over priorities and designs. While increased local control over design is positive, if disability is not a priority for these partners, this can make it more difficult for ANCP NGOs to encourage disability. Where it is a requirement to receive funding, this incentivises action. Disability requirements can also help to drive practice, by providing an impetus for training, capacity-building etc.

Some DFAT interviewees expressed concern or scepticism at NGOs advocating for DFAT to increase targets and standards. However, there was a general agreement amongst agencies and sectoral informant that gradually strengthened requirements are helpful. A minority view was also present, which noted that increased requirements would further stretch their resources, and therefore did not necessarily favour such measures at this stage.

3.4.9   The role of DFAT Posts in supporting disability inclusion within ANCP

Post capacity on disability equity

Interviews were held with several DFAT Posts across Asia and Africa. Feedback from Posts themselves, as well as NGOs based on their interaction with Posts, indicated that capacity on disability equity varied widely between Posts. One reported very strong practice, based on proactive development of Post capacity (see Good Practice Example 5). Some also reported a strong enabling environment at the Post, provided through the support of the disability focal point; they held activities such as roundtables focused on disability, provided training to NGOs, and felt confident in monitoring disability within ANCP monitoring visits. The influence of sectoral staff and senior staff was important in driving practice.

Other Posts reported a more limited understanding of and capacity on disability even among focal points, including limited understanding of some key disability concepts. They found assessing disability within ANCP, monitoring progress, and reporting on data challenging. They still looked for opportunities to raise awareness on disability, but did not feel confident in their approaches. Factors influencing this included the

need for the Post to monitor projects across a wide geographical area, lack of access to technical support, and insufficient resourcing at Post level for engagement with partners and monitoring of projects.

The findings on variable Post capacity aligned with the perspectives of NGOs, who reported varying experiences with Posts on disability within ANCP. Where Posts were active in engaging with ANCP partners, for instance bringing them together in roundtables, agencies found this helpful as a way to connect with other projects in the same country. Activities on disability were reported to be quite limited, often sandwiched between other activities, however, were considered very useful when they did occur. One agency reported that receiving targeted Post feedback on a plan was useful. Other NGOs reported more negative experiences or limited engagement – for example, trying to engage with a Post and requesting feedback from a project review, without getting any response.

NGOs also felt there was a role for Post in helping to provide information relevant to the local context, which could help to inform project design. The diversity of ANCP means that general resources and information may not be sufficient to inform practice in particular contexts: information around the local disability sector, attitudes and understanding of disability, and government policies and processes were particularly referenced by agencies as being valuable in supporting their work.

Project performance on disability

There was some correlation between Posts reporting their own capacity on disability was limited, and their view of capacity within ANCP project. For example, a Post which identified challenges in their own practices, also noted that relatively few ANCP agencies were partnering with OPDs, and that local partner capacity on disability was often limited. This is not necessarily suggesting a causal relationship between low Post capacity and low project performance: there may be factors such as country-level understanding on disability that influences both. Conversely, the Post which reported very strong practice also considered that this was flowing through into improved project-level performance on disability.

Other activities mentioned that could drive ANCP project performance on disability equity included:
- training for partner organisations
- improved access to technical advice such as that provided by the DID4All Helpdesk
- strengthened engagement with OPDs
- greater active engagement with partners on designs, including influencing AD plans.

Good Practice Example 5: Long-term approaches build Post capacity on disability

One DFAT Post in Asia has proactively developed its capacity on disability equity over the past 10 years. This seems to be driven particularly by an individual champion of change, who has promoted practice on disability as well as gender, and allocation of resources.

The Post developed a GEDSI strategy, which was implemented through measures including annual plans, training for staff, and accessing technical support through the DID4All helpdesk. This meant a focus on disability was institutionalised across the Post, including in oversight of ANCP projects. Engagement happened at multiple points including monitoring, design support and thematic work.

The Post considered that Posts play a vital role in driving disability within ANCP projects. It reported that activities were supporting partners to develop capacity on disability, and the Post was seeing improved focus and practice on disability by ANCP partners. Partners were also actively involving the Post in design processes, including disability components.

There seem to be opportunities to better document and share learnings from this approach. For instance, the disability strategy had not been widely circulated or shared with other Posts.

Engagement across Posts

All Posts interviewed agreed that engagement with other Posts on ANCP, including on disability, would help to strengthen capacity, cross-learning, and practice. They noted that there is some ad hoc engagement, but

that if this were more institutionalised it would provide support and networking opportunities. This included engagement with other Posts with similar contexts and size of ANCP programs to share practices and learnings. The existing Disability Focal Point network was reported to meet infrequently – Posts recommended building momentum of this network and meeting more regularly.

These connections could extend beyond ANCP and involve connections with other DFAT projects such as sharing of training resources and information about the local context on disability. Such cross-program links could also help the ability of Posts to link ANCP partners with other funding or capacity-building opportunities on disability.

> ### Recommendation 5: DFAT Posts
>
> Where feasible, DFAT Posts to take on an increased role in promoting disability equity in key countries, supporting connections between ANCP agencies and national OPDs, sharing local resources and context information, and providing opportunities for agencies to collaborate and share learnings. Taking on this role may require additional resources, and participation of Post personnel in knowledge development and in sharing good practice and learning.

3.5   Good practice and challenges in partnerships with OPDs

Partnering with local organisations is a key approach for ANCP projects; and the central role that must be played by OPDs in all development activities and programs is widely recognised. Article 4 of the CRPD sets out the responsibility of governments to 'closely consult with and actively involve persons with disabilities … through their representative organisations' in 'the development and implementation of legislation and policies' to implement the CRPD as well as other decision-making processes relevant to people with disabilities. Despite this central role, as seen in Section 3.1.2, only 30.8 per cent of ANCP projects engaged directly with OPDs as partners in 2022–23.

There are particular issues relating to OPDs partnerships, as summarised by one OPD interviewee: because of their small size and capacity challenges in areas required by donors and partners, OPDs are often not involved as formal partners in projects or asked to engage in design processes. Yet without such experience, it is difficult for OPDs to increase their capacity and strengthen their practice. This becomes a vicious cycle for many organisations. However, there are also examples of successful OPD–NGO partnerships within ANCP that have worked to build OPD capacity.

3.5.1   Support for small and grassroots OPDs

While the OPDs interviewed were quite varied, some were small grassroots organisations which had been formed in the last few years, usually with support from the ANCP NGO partner either to form or to grow substantially. One respondent noted that smaller OPDs often have strong community-level engagement, links with people with disabilities, and knowledge of local disability issues, making them important links between projects and communities. By their nature, such organisations also often have limited funding, low capacity and small numbers of staff, with volunteers often playing a central role. This means they often don't have the organisational strength that is expected by donors: the respondent felt that donor requirements didn't really understand or fit with the characteristics of OPDs.

Most interviewed NGOs noted that ANCP requirements created challenges in engaging with smaller OPDs in particular. In order to formally partner with an organisation within an ANCP project, there are significant compliance requirements including for safeguarding, policies and procedures, and financial management. These are of course important requirements; however, the impact is that many OPDs are effectively not eligible for formal financial partnerships with ANCP NGOs. This tends to result in non-financial partnerships (involving payment for services or inputs rather than core funding), which are more likely to be focused on services or specific inputs that the OPD can provide, rather than strengthening and supporting OPDs. It can limit the extent of the partnership, hampering both the value of engagement to the OPD as well as the contribution to inclusion within project activities. These challenges also mean that measures such as the

$10,000 'pass-down' funding for local partners being piloted within ANCP, are not necessarily reaching OPDs. Data from 2022–23 indicates that only one OPD was a recipient of this funding, along with one disability service provider.

Several NGOs interviewed conducted capacity-building with partner OPDs to support development, but this required significant investments of time and money, often over several years. There are examples with DFAT, including the Amplify-Invest-Reach Partnership between DFAT and women's rights organisations, which offer learning on assumption of risk and support for compliance to enable support to small and fledgling organisations and networks.

3.5.2   OPD capacity-building

All OPDs emphasised the need for and usefulness of capacity-building approaches, in their partnerships with NGOs. There were several examples of success in capacity-building support provided by the NGO, which helped to support small OPDs in particular in developing and expanding, breaking the vicious cycle of low capacity leading to limited engagement by NGOs. These included:

- **Organisational support**, including helping the organisation to formalise (sometimes from an existing self-help group), developing policies and procedures, registering the organisation, developing financial systems, and sometimes establishing an office with facilities such as furniture.
- **Administrative support** such as report-writing, project management, use of video and photo technology, events training, and leadership training.
- **Sectoral support**, including improving understanding about the sectors focused on by the project or NGO (e.g. WASH, livelihoods).
- **Support on disability capacity**, including building an understanding of rights-based approaches, the CRPD, national legislation, advocacy etc.
- **Networking support**, including providing opportunities to engage with other organisations, government partners, local authorities etc, so OPDs can share their concerns and advocate for inclusion.
- **Logistical support**, such as assistance to attend meetings and events, or to access remote communities through joint field trips or support with travel.

Identifying priorities for capacity-building should be led by the OPD, rather than focusing on the needs of the ANCP project, NGO or implementing partner. Capacity-building also does not only need to be external or come from NGOs or partners. OPD networks can also provide opportunities for larger and more established OPDs to mentor and support smaller ones. The review did not identify specific examples of this approach; however, some disability-focused programs may support this: if so, such approaches could be shared with ANCP partners and guidance developed for supporting and enhancing OPD – OPD links. Other opportunities may exist in linking OPDs and people with disabilities with organisations involved in self-representation and self-advocacy (e.g. women's rights organisations) to share learnings and approaches. NGOs and their in-country implementing teams are encouraged to **develop approaches to OPD partnerships which include an explicit focus on capacity-building and empowerment.**

> **Good Practice Example 6: Supporting an OPD representing women with disabilities in the Pacific**
>
> A strong example of OPD–NGO partnership is the collaboration between Vanuatu OPD Women I Tok Tok Tugeta Sunshine (WITTT Sunshine) and ActionAid Vanuatu. This initiative started with just five women in 2018 when WITTT Sunshine members attended the first National Convening hosted by ActionAid, which brought together 70 women leaders to discuss the impact of climate change and the role of women in humanitarian action. With long-term support from the ANCP program, WITTT Sunshine members have organised and mobilised around climate change, expanding the network to include 1,000 women with disabilities across five islands.
>
> ActionAid has played a key role in supporting these women in their self-led mobilisation efforts, helping with data collection, capacity building, deepening their understanding of the CRPD, disaster response, early warning, preparedness, and disaster risk reduction. The project has also created opportunities for meaningful engagement in climate change activities, particularly for women with disabilities. This has empowered women to take part in and influence climate change discussions at community, national, and international levels, including participation at the Asia Pacific Ministerial Conference on Disaster Risk Reduction in Australia.
>
> WITTT Sunshine has reported that the partnership with the project has significantly strengthened the ability of women with disabilities to advocate for themselves. The OPD has engaged with government stakeholders on issues such as violence against women with disabilities and has built connections with larger OPDs for referrals to counselling and support. The project has also improved the OPD's capacity to reach and network with women in remote areas, using established networks and logistical support.
>
> This partnership has also built the capacity of ActionAid in disability programming within the areas of crisis and climate change. Enhanced understanding of the needs of women with disabilities has led to more inclusive approaches, especially in engaging women with different impairments and fostering trust.
>
> One key factor in the success of this partnership was the time invested. WITTT Sunshine emphasised that working with marginalised groups, such as women with disabilities, requires time to build relationships, trust, and confidence. Strong leadership from ActionAid Vanuatu and a long-term commitment to the partnership were also crucial to its success.

3.5.3   High demands for OPD engagement

Several OPDs, as well as NGOs, noted the issue of multiple requests to single organisations for engagement with separate ANCP projects across multiple sectors. This is in addition to requests from other programs. For small OPDs in particular, meeting large numbers of requests can be unrealistic given their number of staff and capacity. It can also serve to shift OPD priorities to those of the projects and partners, rather than their own identified priorities or those of their members, due to reliance on funding which can come from partnering with ANCP projects. This is a particular issue in the Pacific, where often very small OPDs represent people of varying impairments across wide geographic areas.

This should not be a reason to avoid engagement with OPDs. Rather, there is a balancing act to ensure this is not extractive and considers the capacity of potential OPD partners. Engagement needs to be strategic and involve a genuine partnership, where the needs and priorities of both organisations are met. OPD involvement in ANCP projects also should not become a substitute for in-house capacity and resourcing on disability, but rather a complement to it. Longer-term, ANCP should consider how the program's operation can support new and emerging OPDs, to diversify the number of organisations and the groups that they represent (including different impairment groups and women with disabilities).

NGOs also mentioned that mapping of existing OPD partnerships at a country level, and networking between projects, would help to improve visibility of multiple requests and support streamlining of engagement.

3.5.4 Length of engagement

The NGO engagements which OPDs perceived as meaningful were typically **long-term partnerships**, which focused on engagement throughout a project rather than for specific tasks or inputs. Both NGOs and OPDs noted that engagement and support of OPDs takes time. This is not only due to the grassroots nature of many of these organisations, but the fact that people with disabilities have often experienced systematic marginalisation. For instance, they may have missed out on education, not have fluency in majority languages used by donors and partners, or not have a strong knowledge of donor requirements. The organisations themselves may lack basics such as an office or technology.

Long-term partnerships allowed the types of capacity-building identified above; and were described as 'meaningful' by OPDs. They were considered to have greater impact on project reach to people with disabilities, as well as being beneficial for the OPDs. They also provided a level of certainty with regard to funding. However, by itself, length and depth of engagement does not guarantee that partnerships support meaningful participation by and empowerment of an OPD and its members. For some of the OPDs interviewed, their role seemed closer to service providers for the ANCP project, rather than the partnership providing them with opportunities to significantly grow and develop.

OPDs were largely <u>unsatisfied</u> with NGO engagements that involved only short-term engagement, usually provision by the OPD of a specific input such as training or data collection with little autonomy or influence over the activity. These interactions were considered tokenistic by OPDs, potentially driven by the need for NGOs to report a connection with an OPD rather than a genuine desire for partnership. OPDs nevertheless felt that they needed to follow the timetable and requirements of the NGO, or risk losing the opportunity (including seeing funding go instead to non-OPD agencies such as disability service providers). One OPD reported that when they were asked to carry out services rather than engage in a partnership, they had little opportunity for influence. Even if they felt a different activity or focus would have greater benefit to local people with disabilities, they were not able to provide advice, and their local knowledge was not respected. Short-term activities also typically meant that only activity funding was provided, rather than core funding.

In one case an initial service-provision agreement morphed into a partnership – so such engagement can potentially be entry-points to more meaningful relationships. They may be ways of 'testing the water' for both parties around the potential for partnerships. But where a longer partnership does not eventuate, and power to set priorities and timelines remains with NGOs, OPDs felt disillusioned and disempowered.

3.5.5 Types of engagement

OPDs reported a variety of roles that they played in ANCP projects, in addition to capacity-building activities. Approaches varied widely across projects, and included:

- **Identifying and engaging with local children and adults with disabilities**, conducting home visits, and supporting them to engage with mainstream project activities; and in some cases, directly delivering mainstream activities to people with disabilities.
- Supporting **training and capacity-building** on inclusive sectoral activities, e.g. WASH, disaster preparedness.
- **Supporting and monitoring health screening**, including identifying people who may have disabilities, and distribution of aids and devices.
- Advising NGO partners on appropriate ways to engage with and support people with disabilities.
- Involvement in **evaluation** processes.
- **Engaging OPD members directly** in livelihood activities supported by the project.

While it is difficult to measure impact of OPD engagement, both OPDs and NGOs considered that active involvement by OPDs in projects helped to strengthen disability inclusion practices and led to improved engagement with people with disabilities in project activities.

It was also considered more **challenging to include people with certain impairments** – in particular people with psychosocial impairments, intellectual impairments, and those with severe or multiple impairments. By contrast, inclusion of people with physical impairments was more common and often considered more straightforward.

3.5.6   Funding

All OPDs mentioned challenges relating to funding, which had impacts both for their own organisations and for the costs of inclusion. Key issues included:

▪ **Insufficient funding or limitations in types of funding**, this included OPDs only receiving funding for activities and not for core operational costs; or funding not being provided for costs of participation for OPD staff such as travel, support persons etc. It was perceived that sometimes NGOs did not have good understanding of the real costs of participation, which could in turn mean only people with greater independence or mobility were able to engage. Without core funding, OPDs may have to lay off staff and are hampered in developing their organisation, building capacity, and reaching people with disabilities in other areas or communities.

▪ **Access to funding sources**, including competition for funds amongst organisations meaning OPDs were unlikely to receive funding due to their capacity limitations, and limited knowledge of sources of funding. Where funding was controlled by NGOs rather than available for OPDs to access directly, this sometimes led to uneven partnerships as NGOs could set the terms of engagement.

▪ **Costs of reaching people with disabilities**, with funding sometimes being insufficient for inclusion activities within projects, including reasonable accommodation, funding for assistive devices or referrals.

▪ **Funds for disability inclusion going to other organisations**. Sometimes NGOs choose to work with service providers rather than OPDs, either because they are unclear on the difference or saw benefits in these engagements. OPDs felt that scarce disability funding should be provided to them, instead of (or as well as) service providers.

NGOs also noted the impacts of funding constraints on their ability to engage meaningfully with OPDs. For very small NGOs and those with base accreditation in particular, funding is a clear barrier to long-term OPD partnerships. One extremely small NGO noted that despite a strong motivation to engage with OPDs, their ANCP project budgets were simply not sufficient. They did not feel it was fair to strongly pursue an OPD partnership without having the capacity to offer core funding.

3.5.7   NGO capacity

In some situations, OPDs cited the influence their involvement had on the capacity of the implementing NGO and/or local partner. This included training on the CRPD, and advice on connecting and communicating with people with different impairments.

Others reported that they felt some organisations did not understand disability equity well, such as understanding a rights-based approach or ensuring accessibility within their own practices. This sometimes also meant the agencies did not understand the role of OPDs or how to engage with them. Approaches such as employing people with disabilities directly within projects, and allocating resources for disability inclusion, were cited as ways to support improved NGO practice.

Recommendation 6: OPD Engagement

DFAT to work with NGO ANCP managers and OPDs to develop an approach to supporting and strengthening partnerships between OPDs and NGOs, to promote long-term meaningful engagement. Measures could include:

▪ Examine and address the impact of compliance requirements for different types of OPDs.
▪ Support cross-ANCP OPD partnerships which include an explicit focus on capacity-building and empowerment.
▪ Support the needs and priorities of OPDs, including adequate core funding.
▪ Support new and emerging OPDs, including those which represent women and girls with disabilities and more complex or stigmatised impairments.
▪ Increased NGO understanding of the role of OPDs and the distinction between OPDs and service providers.

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4.   Summary Conclusions

This review finds that NGOs demonstrate a strong commitment to disability inclusion and equity in their ANCP projects and their work more broadly. The concerns about falling performance based on primarily quantitative data are not borne out by this review. Low participation rates can certainly be improved but must be seen in the context of a range of challenges to data accuracy. Further, participation data, while important on its own is not a sufficiently strong indicator of performance.

The review shows areas for development include specific strategies to reach women and girls and developing approaches to reach the most marginalised groups including those with stigmatised or complex impairments. Engagement with OPDs, while increasing, is still relatively low. This is central to meeting CRPD requirements as well as good practice for disability equity and inclusion and is a priority area to be addressed. Doing so will also require attention to the internal mechanisms of ANCP and the application of DFAT integrity and compliance policies.

All of this requires resourcing, and resourcing needs are likely to increase with the anticipated ambition of the forthcoming disability equity and inclusion policy. It is unrealistic to assume that all ANCP NGO partners will be able to develop the necessary internal capacity to meet these resource requirements. ANCP-portfolio wide approaches that acknowledge and respond to the diversity of ANCP patterns and their contexts are needed. This also signals the need for increased resourcing in DFAT including in Posts, with some aspects of this being centralised or available cross-portfolio. These strategies are needed to elevate practice beyond the first plateau of having disability equity and inclusion acknowledged and responded to as an integral component of all NGO programming; towards ensuring full equity and inclusion for all people with disabilities within ANCP projects.

Annex 1   Methodology

The review methodology was designed to inform findings with practical application relevant to the key review questions, drawing on the experience and expertise of sampled Australian NGOs and organisations of people with disabilities (OPDs). Data processes included collation and analysis of performance data included in DFAT's SmartyGrants information system, an ANCP partner survey, and semi-structured interviews with Australian NGOs, DFAT, technical advisory and coordination bodies, and OPDs.

Review guiding questions

The review was structured to respond to five guiding questions as per the below:

1. What does the data tell us about recent trends in performance on disability inclusion within the ANCP?

   (a) What variations can be identified across sectors, geographic areas and implementing partners?

   (b) Is the performance on disability inclusion adequate, based on established good practice and expected population with disabilities?

   (c) How confident are we in the quality and relevance of the data collected on disability performance?

2. What do ANCP Partners, DFAT, OPDs, and other stakeholders identify as the key factors driving the observed trends?

   (a) What are the challenges to effective disability inclusion?

   (b) What are the institutional (strategy, capacity, networks, resources), and contextual factors?

3. What are good practices and innovations in how Australian NGOs and their implementing partners are addressing disability inclusion in their ANCP projects at different stages of the project cycle (resourcing, project and partner selection, analysis, OPD engagement and capability development, design, implementation, intersectionality, and monitoring, evaluation and learning)?

4. How can disability inclusion and its measurement be strengthened in ANCP?

5. How can good practices and lessons be shared, both in and outside of the ANCP?

OPD oversight and advice

A fundamental principle of disability-inclusive development practice and research is that people with disabilities are meaningfully included in these processes, including having the power to influence direction and critique approaches. People with disabilities and their representative organisations bring expertise from their own experiences and those of their members.

To centre this principle, the review Pacific Disability Forum (PDF) provided high-level comments on the final draft of the review framework including the research questions and methodology. An advisory consultant from the Indonesian disability movement, Ms Ida Putri, was engaged to provide advice and review of content. However, this should not be taken as their endorsement or otherwise of the findings.

Interviews were conducted with representatives from six OPDs from across the Pacific, Asia and the Middle East, which are current or recent partners within ANCP programs (involved either with a single project, or in some case multiple projects). Written feedback was received from an additional two OPD partner, and a further interview was conducted with two OPDs from Asia, which had not been recently engaged in ANCP projects, but have experience with other DFAT investments and work closely in providing capacity-building to small OPDs.

Sampling

The eight Australian NGOs selected for in-depth interviews represent 13.5 per cent of the organisations as at 2022–23.

A purposive sampling method was used, where cases (NGOs) were selected based on their relevance to the purpose of the review and likelihood of contributing insights across a range of scenarios. The sampling

process involved assigning a portfolio size score to the ANCP Australian NGOs according to their sum number of projects in 2021–22 and 2022–23 and value of ANCP received. Five NGOs that did not receive ANCP funding in both 2021–2022 and 2022–2023 financial years were excluded. Based on this score, NGOs were grouped in three bands (rank 1–18, 19–36, 37–55) roughly corresponding to small, medium, and larger portfolios, from one small, three, medium, and four large cases were identified. This process was intended to ensure that portfolio size was not limited to budget, noting that a large number of smaller projects can bring implementation and management complexities that are different to those in smaller numbers of large projects. One base accreditation agency (Assisi Aid Projects) was added on DFAT advice, meaning a total of eight NGOs were interviewed.

Sampled agencies are included in Table 7.

Table 7   Matrix of characteristics of sampled NGOs

Organisation	Portfolio size score	Sectors	Countries
ActionAid	41	Humanitarian, climate change, gender, livelihoods	Cambodia, Kenya, Vanuatu, Uganda, Indonesia, Palestinian Territories, Philippines, Bangladesh, Myanmar
Assisi Aid Projects[32]	5	Economic development, education, gender	Nepal, India, Indonesia
Australian Lutheran World Service (ALWS)	39	Rural development, education, gender, food security, disability education	Indonesia, Nepal, Myanmar, Burundi, South Sudan, Kenya, Somalia, Nepal
Good Return[33]	16	Microfinance	Cambodia, Solomon Islands, Nepal
UNICEF Australia	46	Health, education, early childhood development, maternal and child health, child protection, governance	Cambodia, PNG, Solomon Islands, Lao PDR, Timor-Leste, Sri Lanka
UnitingWorld	33	Education, livelihoods, health, DRR, disability, gender, WASH	Sri Lanka, Zimbabwe, Indonesia, India, PNG
WaterAid Australia	29	WASH, disability, climate change	Cambodia, PNG, Timor-Leste, Cambodia
World Vision Australia	55	Economic development, rural development, food security, microfinance, maternal and child health, WASH, environment, climate change, education, gender	Sri Lanka, Solomon Islands, Indonesia, Cambodia, Bangladesh, Myanmar, Uganda, Iraq, Vanuatu, PNG, South Sudan, Lao ODR, Burundi, Rwanda, Ethiopia, Timor-Leste, Kenya DRC, Nepal

Data collection

Three data collection processes were used.

1. Existing document and data review: Project level descriptions and quantitative performance data outputs from DFAT's SmartyGrants information system for the financial years 2019–20, 2020–21, 2021–22, and 2022–23 was collated and analysed. This was firstly to inform the selection of the Australian NGO for in-depth interviews as per the above, and secondly to identify trends against the ANCP common indicators[34] as relevant to review question 1. Data relevant to sampled NGOs were further investigated at a project level to understand their ANCP portfolios, including projects with principal vs significant disability inclusion markers.

A very focused document review was completed, limited to DFAT ANCP guidance and reporting (including templates, Investment Monitoring Reports (IMRs), snapshot reports, previous disability-focused evaluations and reviews, relevant accreditation summary information for sampled NGOs, and ANCP evaluations), as provided by the review manager or other DFAT informants. The document review was used to inform the interviews, and confirm some of the findings, but was not a substantial part of the review process.

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32   Note Assisi was the only base accredited agency included
33   Formerly World Education Australia Limited
34   DFAT (2020) ANCP Indicators – Guidance.

2. ANCP partner survey: An online survey was distributed to all current ANCP Australian NGOs for completion by ANCP project managers, coordinators, or technical advisers with ANCP roles. Multiple responses were possible from each organisation as the survey was intended to capture project-level, rather than organisational-level, perceptions.

Seventy separate responses were received to the survey, representing 46 different ANCP agencies. This represents responses from 78 per cent of the 59 agencies that received ANCP funding in 2023–24. However, only 52 per cent of the 25 agencies categorised as small (based on budget and number of projects) responded to the survey, whereas 78 per cent of medium and 100 per cent of large agencies responded. Agencies with base accreditation were also less likely to respond (56 per cent, versus 80 per cent of those with full accreditation).

Multiple responses from single agencies were encouraged where this gave information about different sets of projects; the most responses received from a single agency was five. This means that **the number of responses to each question does not represent a percentage of total agencies**. The varying size of the ANCP portfolios of each agency also means that the number of responses does not represent an even spread across projects – e.g. some agencies with only five or fewer total ANCP projects have given one response, as have some agencies with more than 15 projects. Nevertheless, the responses give an indication of the experiences across a wide range of ANCP agencies, operating in varied sectors and contexts, and with different implementation approaches.

3. Key informant and group interviews: Representatives from sampled NGOs were interviewed using a semi-structured format. Interviews focused on issues including organisational approaches to inclusion; internal capacity and resourcing; capacity of partner organisations; funding; engagement with OPDs; effectiveness of programming; data collection; networking; reporting and regulation; and engagement with DFAT. Additional key informant interviews were held with representatives of DFAT and other coordination and advisory groups, as well as OPDs (see Table 8).

Qualitative data from interviews was reduced and organised according to primary themes that correspond to each part of the review questions. Content analysis, guided by established metrics of pre-requisites for and good practice in disability equity and inclusion,[35] was then used. This analysis paid attention to the consistency of particular responses and information across the different data sources.

Limitations of the review

The review is not an exhaustive analysis of disability inclusion performance across the ANCP but maximises learning with future practical application as per the intent of the review. A decision was made, informed by the scope and allocated resources and timeframe, not to sample in-country implementing partners other than OPDs. This also reflects recognition that it would not be possible to adequately sample these organisations to be confident of the cross-applicability of inputs given the large variation in the nature of these local partners, their relationships with the Australian NGOs, their context and sector.

The consultants also recognise that they are non-disabled people from Australia, and that their perspectives on the findings will be impacted by their culture, background and life experiences – which will differ widely from most people with disabilities in ANCP target communities. Inadvertently, the consultants may have missed or underemphasised some findings that are most relevant and important to people with disabilities. As discussed above, numerous approaches were taken to address this risk; nevertheless, this limitation is acknowledged, and some recommendations speak to the ongoing need to support the central role of people with disabilities and OPDs in all aspects of development programming.

The sampling approach ensured coverage of a range of organisations and portfolios. This, and the qualitative focus of the data collection, allows logical rather than statistical generalisations where there is sufficient consistency in the insights of the NGOs and other key informants.

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35   These included: application of a human rights approach, leadership by and engagement of people with disabilities, partnerships with OPDs, collection and use of disaggregated data, and provision of reasonable accommodation.

Table 8   Interview respondents

Respondent type	Detail	Total interviews
Sampled Australian NGOs	See Table 7	8
ACFID Communities of Practice	Disability Equity Community of Practice and ANCP Community of Practice, including representatives from: – Act for Peace – Australian Disability and Development Consortium (ADDC) – Australian Lutheran World Service – ASHM Health – CARE Australia – ChildFund Australia – CBM Australia – The Fred Hollows Foundation – Global Mission Partners – International Women's Development Agency (IWDA) – Mary MacKillop Today – MSI Asia Pacific – Murdoch Children's Research Institute (MCRI) – Vision 2020 Australia	2
Sectoral stakeholders	– Australian Council for International Development (ACFID) – Australian Disability and Development Consortium (ADDC) – CBM Australia International Advisory Group (IAG)	3
OPDs[36]	– Interviews with representatives from six Asian OPDs: four partnering with ANCP agencies, and two engaging with smaller OPDs and the sector – Interviews with representatives from one Middle Eastern OPD – Interviews with representatives from one Pacific OPD – Written comments from two further Pacific OPDs	7
DFAT	– NGO Program and Partnerships Section – Gender, Disability, and Social Inclusion Branch – Hanoi Post representatives – Harare Post representative – Kathmandu Post representative – Phnom Penh Post representatives	4
Assessors involved in ANCP Accreditation of Australian NGOs	– Interview with two Assessors – Written comments from one further Assessor	1

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36   Given the relatively small number of OPDs participating and small size of some OPDs, names and countries have not been listed in order to preserve anonymity.

Annex 2 Further exploration of participation data

Analysis of available SmartyGrants data suggests that contrary to information reported in ANCP Snapshot reports, **there is in fact not a recorded decline in this indicator**. Recalculated figures suggest that the reported percentage of people with disabilities reached by ANCP projects has **instead stayed broadly stable or increased slightly over this period,** at around 1.8 – 2.6 per cent. The differences in the figures are shown in Table 9.

Table 9   Reported vs recalculated data on ANCP participants with disabilities

Year	Initially reported percentages of total ANCP participants with disabilities[37]	Recalculated percentages of total ANCP participants with disabilities
2019–20	8.0 %	1.8 – 3.2 %[38]
2020–21	5.8 %	2.1 %
2021–22	2.9 %	2.6 %
2022–23	2.4 %	2.4

The reasons for these differences are twofold:
- Analysis of SmartyGrants data appears to show different percentages than those reported previously, for 2020–21 and 2020–22
- The impact of a very small number of outlier projects on data in 2019–20.

Recalculated data

The review calculated the percentage of participants with disabilities across ANCP, based on raw SmartyGrants data. Using these figures, the percentages calculated for 2020–21 and 2021–22 were lower than the figures publicly reported for these years in the respective ANCP Performance Snapshot documents.[39]

It is not known why there is a difference in this data – this could warrant further investigation, to determine whether the Snapshot figures used a different measurement process or there is some other reason for the discrepancy. It may also be worth reviewing the accuracy of other reported data on disability in the Snapshot reports, such as the percentage of people with disabilities reached within particular sectors.

The impact of outlier projects

The reported headline figure for 2019–20 was eight per cent of participants being people with disabilities. However **this rate was greatly inflated by the impact of a small number of projects**, which reported both very high overall participant numbers, and a high proportion of these as people with disabilities. The high rate of overall participants was due to counting of indirect participants, but which was standard at the time in ANCP report but was then phased out.

One project in particular contributed to this result: ANCP17-PRG10010-PRJ134, Integrated Control of Neglected Tropical Diseases in Nigeria Phase Two, implemented by CBM Australia. This project reported over **4.8 million participants, nearly 41 per cent of all ANCP participants** that year, against a budget of only $307,000. It also reported that 15 per cent of these participants, or over 723,000, were people with disabilities. This is **77 per cent of all reported participants with disabilities** for the entire ANCP program that year.

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37   These figures were drawn from the 'ANCP Performance Snapshot' from relevant years.

38   The figure of 1.8 per cent excludes all CBM data from both total participants and participants with disabilities; the figure of 3.2 per cent excludes only these figures from the outlying project (ANCP17-PRG10010-PRJ134, Integrated Control of Neglected Tropical Diseases in Nigeria Phase Two).

39   Previously known as 'ANCP Partnership for Recovery and [year] Highlights'.

This project included Mass Drug Administration (MDA) activities which reached very large numbers of indirect participants. ANCP guidance at the time was to report indirect participants, which was changed around 2020–21. CBM has advised that accordingly, reporting for these activities has changed and those who receive medication within MDA activities are now not included in participant counts, meaning that **figures before and after this change are not comparable**. In addition, while the fact that the project reached a large percentage of participants with disabilities is positive, it is certainly an **outlier and tells us little** about the overall impact for ANCP on people with disabilities in that year.

Other CBM Australia projects in 2019–20 also had relatively high number of participants, as well as reported percentage who were people with disabilities – again likely due to reporting of indirect participants. In total, CBM Australia reported 45.1 per cent of the total ANCP participants for that year across the entire program, and **88 per cent of all participants with disabilities**, however received only 4.2 per cent of the total ANCP budget. In the following year with indirect participants excluded, this dropped to just six per cent of total participants and **37 per cent of participants with disabilities**.

If we exclude the single Nigerian MDA-focused project from the 2019–20 data, the rate of participants who are people with disabilities across ANCP **for that year is 3.2 per cent.** If we exclude all CBM projects for this year**, the rate is 1.8 per cent.** While it is difficult (and unnecessary for this report) to calculate exactly the impact of outliers, it is clear that the reported figure of eight per cent, while technically correct, did not give a realistic measure of ANCP reach on disability in that year; and **the figure using data that is more comparable to subsequent years is somewhere between 1.8 and 3.2 per cent**. This indicates either a modest decline or modest increase, against 2022–23 figures.

The impact of CBM Australia projects on overall figures

It is worth noting briefly that across the study period, CBM Australia's overall reported participants with disabilities constituted a significant proportion of the total ANCP figures. In 2020–2021, CBM Australia projects accounted for 37 per cent of the total participants with disabilities; 21 per cent in 2021–22; and 30 per cent in 2022–23. This is unsurprising, given the organisation's focus on people with disabilities. However, if further analysis is undertaken in future, this could be reviewed both with and without CBM data (as well as any other agencies noted as outliers) to understand performance across other organisations.