



**UNPRPD** MPTF  
Partnership on the Rights of Persons with Disabilities



**UNITED NATIONS  
CAMEROON**

# SITUATIONAL ANALYSIS OF THE RIGHTS OF PERSONS WITH DISABILITIES

## CAMEROON



**COUNTRY REPORT 2021**



# SITUATIONAL ANALYSIS OF THE RIGHTS OF PERSONS WITH DISABILITIES IN **CAMEROON**

COUNTRY REPORT

**About UNPRPD:**

The United Nations Partnership on the Rights of Persons with Disabilities (UNPRPD) is a unique partnership that brings together UN entities, governments, OPDs and broader civil society to advance the rights of persons with disabilities around the world.

The Partnership was created to foster collaboration between its members and complement their work around disability inclusion through UN Joint programming. The Partnership operates through a Multi-Partner Trust Fund (MPTF) established to channel resources for participating UN organizations (PUNOs).

The UN entities participating in UNPRPD are ILO, OHCHR, UNDESA, UNDP, UNESCO, UNICEF, UNFPA, UN Women and WHO. Other UNPRPD members include the International Disability Alliance and the International Disability and Development Consortium (IDDC).

The main contributors to the UNPRPD MPTF are Australia, Finland, Norway, Sweden, United Kingdom.

**Acknowledgements:**

This report was written by the UNCT in Camroon with collaboration from partners including OPDs, UN agencies, and local colleagues. Technical support was provided by the UNPRPD Technical Secretariat throughout the process.

**Disclaimer:**

The data and information presented in the report are based on the situational analyses conducted at the country level and were drafted by the UN country teams. Methodology for data collection included a desk review of relevant literature, key informant interviews and focus groups, stakeholder mapping exercises and consultative workshops with key stakeholders. The UNPRPD has not edited the report or verified the findings for accuracy. This report does not necessarily reflect the position of the UNPRPD.

## **Acronyms and Abbreviations**

**AIDS:** Acquired Immuno Deficiency Syndrome

**ANSCAM:** Association Nationale des Sourds du Cameroun

**ARMP:** Agence de Régulation des Marchés Publics

**CCA:** Common Country Assessment

**CAPIEMP:** Teacher Grade One Certificate Examination

**CBC:** Cameroon Baptist Convention

**CEDAW:** Convention on the Elimination of All Forms of Discrimination Against Women

**CERSOM-COBICERSOM:** Centre d'Education Spécialisée et de Réhabilitation des Sourds et Malentendants

**CONRHA:** National Committee for the Rehabilitation and Socio-economic Reintegration of Persons with Disabilities

**CRC:** Committee of the Rights of the Child

**CRPD:** Convention on the Rights of Persons with Disabilities

**COSP:** Conference of State Parties

**CUAPWD:** Coordinating Unit of Associations of Persons with Disabilities

**DCO:** Development Cooperation Office

**DPO:** Disabled Persons Organizations

**DPI:** Disabled Peoples International

**EOI:** Expression of Interest

**GBV:** Gender based Violence

**HDPN:** Humanitarian-development-Peace Nexus

**HSS:** Health Sector Strategy

**ICT:** Information and Communications Technology

**ICDR-Cameroon:** Canadian Disability and Rehabilitation International

**IDA:** International Disability Alliance

**IJSA:** Initiative des Jeunes Sourds pour l'Auto-développement

**INGO:** International Non-governmental Organizations

**LNOB:** Leaving No one Behind

**MINAS:** Ministry of Social Affairs

**MINEDUB:** Ministry of Basic Education

**MINEFOP:** Ministry of Employment and Vocational Training

**MINESEC:** Ministry of Secondary Education

**MINFOPRA:** Ministry of Public Service and Administrative Reforms

**MINPROFF:** Ministry of Women's Empowerment and the Family

**MOH:** Ministry of Health  
**MIPROMALO:** Mission for the Promotion of Local Materials  
**NDS:** National Development Strategy  
**NGO:** Non-governmental Organizations  
**OPD:** Organizations of Persons with Disabilities  
**PM:** Prime Minister  
**PWD:** Persons with Disabilities  
**SDG:** Sustainable Development Goals  
**SERP:** Socio-economic Response and Recovery Plan  
**SOF:** Strategic Operational Framework  
**SRH:** Sexual Reproductive Health  
**TOR:** Terms of Reference  
**UPIAS:** Union of the physically Impaired Against Segregation  
**UN:** United Nations  
**UNCT:** United Nations Country Teams  
**UNDIS:** United Nations Disability Inclusion Strategy  
**UNSDCF:** United Nations Sustainable Development Cooperation Framework.  
**UNESCO:** United Nations Education Scientific and Cultural Organization  
**UNFPA:** United Nations Population Fund  
**UNHCR:** United Nations Human Rights Office of the High Commissioner  
**UNHCR:** United Nations High Commission for Refugees  
**UNPRPD:** United Nation Partnership on the Rights of Persons with disabilities.  
**UNPRPD MPT:** United Nation Partnership on the Rights of Persons with Disabilities Multi-Partner Trust Fund.  
**UNSDCF:** United Nations Sustainable Development Cooperation Framework  
**VNR:** Voluntary National Review  
**WHO:** World Health Organization

# TABLE OF CONTENTS

|   |    |
|---|----|
| Acronyms and Abbreviations.....   | 1  |
| Executive Summary.....  | 6  |
| I. Background of the study.....   | 8  |
| A. Purpose of analysis.....   | 8  |
| B. Introduction to Disability in Cameroon.....  | 8  |
| II. Approach.....   | 11 |
| A. Guiding Principles.....  | 11 |
| B. Methodology Used.....  | 11 |
| C. Scope and Limitations.....   | 12 |
| III. Findings:.....   | 14 |
| A. Stakeholder and Coordination Analysis.....   | 14 |
| ➤ Ministry of Social Affairs.....   | 14 |
| ➤ National Coordination Mechanism - CONRHA.....   | 14 |
| ➤ Coordination amongst Associations of Persons with Disabilities.....   | 14 |
| ➤ Faith based organizations, International NGOs and Donors.....   | 15 |
| ➤ Stakeholder and coordination mapping on disability inclusion within the United Nations (UN) System in Cameroon..... | 15 |
| B. Equity and non-discrimination.....   | 16 |
| C. Inclusive Service Delivery.....  | 18 |
| ➤ Disability assessment and referral services.....  | 18 |
| ➤ Disability support services.....  | 20 |
| ➤ Mainstreamed services.....  | 20 |
| D. Accessibility.....   | 22 |
| E. CRPD-Compliant Programming and Budgeting.....  | 22 |
| F. Accountability and Governance.....   | 24 |
| ➤ Inclusive evidence and data gathering systems.....  | 24 |
| ➤ Accountability mechanisms.....  | 25 |
| G. Disaster risk reduction and emergency response.....  | 28 |
| IV. Analysis – Gaps and opportunities for disability inclusion.....   | 28 |
| V. Key Recommendations.....   | 32 |
| Bibliography.....   | 33 |
| VI. ANNEXES.....  | 35 |

## Executive Summary

This comprehensive situational analysis for persons with disabilities in Cameroon, engages national stakeholders in the contextual factors affecting the implementation of the provisions of the Convention of the Rights of Persons with Disabilities (CRPD) and inclusive Sustainable Development Goals (SDGs). This document is meant to inform wider planning within the country, including national and UN joint programs for a thorough inclusion of persons with disabilities in development processes.

Although disability inclusion has been included in various programs' and projects' targets, and is a cross-cutting issue in the 2030 Agenda for Sustainable Development, efforts need to be stepped up to ensure that the goals and targets are effectively achieved for persons with disabilities in line with the CRPD standards. The methodology of this analysis is mainly qualitative and made use of methods including literature review of secondary sources as well as focus group discussions and key informant interviews to obtain primary data/information. The research uses an interpretative analysis of the information to assess the CRPD preconditions whose absence inhibits the promotion of the rights of persons with disability in Cameroon.

The research found that the key challenges to CRPD implementation are:

- Insufficient knowledge and capacities (technical, material and financial) of right holders (Persons with disabilities and OPDs), duty bearers (Government institutions) and development partners in implementing three key CRPD preconditions: accessibility, non-discrimination and inclusive service delivery within the framework of development programs and sectoral strategies in Cameroon.
- Weak implementation of accessibility, non-discrimination and inclusive service delivery for persons with disabilities in the following key domains of development: health (SDG 3), education (SDG 4), employment (SDG8) (economic empowerment), infrastructures (physical and public services) – including ICT (SDG 9), and in political participation (SDG 16).

In light of these challenges, stakeholders that were consulted proposed the following:

- Strengthen the knowledge and implementing capacities (financial, human, material and technical capacities) of right holders (Persons with disabilities and OPDs), duty bearers (whole of government approach) and development partners (UN Agencies) on implementing three CRPD preconditions: accessibility, non-discrimination and inclusive service delivery within the framework of development projects in Cameroon, delivered through the SND 30, sectoral development strategies and the UNSDCF.
- Ensure accessibility, non-discrimination and inclusive service delivery for persons with disabilities in the revision (where relevant) and implementation of sectoral strategies in the following domains: health (SDG 3), education (SDG 4), employment (SDG8) (economic

empowerment), infrastructures (physical and public services) – including ICT (SDG 9), and in political participation (SDG 16).

In terms of further analysis, this research suggests an in-depth study of prevailing budgetary processes in Cameroon and how disability inclusive expenditure could be clearly earmarked in public expenditures. It also suggests an analysis of engaging private sector and also informal sector analysis for disability inclusive employment and economic empowerment.

## 1.0 Background of the study

### Purpose of analysis

This comprehensive situational analysis on disabilities in Cameroon is **a detailed research undertaken on the challenges faced by the country in safeguarding the rights of persons with disabilities**. The research analyses the limitations in the implementation of Cameroon's legal dispositions for persons with disabilities which continually allow or encourage their marginalization.

Beyond analysis, this report equally has both policy and programming purposes. **Its findings are meant to guide multi-stakeholders<sup>1</sup> on developing and implementing disability-inclusive policies and programs**, targeting the most urgent needs and priorities for accelerating CRPD implementation, providing advocacy and strengthening accountability in view of achieving sustainable disability-inclusive development in Cameroon.

### Introduction to Disability in Cameroon

A review of some statistics collected by Cameroon's Ministry of Social Affairs (MINAS) in 2008 and published in 2010 on disabilities in 47 institutions offering special education in the ten Regions of Cameroon registered 3,992 institutional based persons with disabilities: 1,552 physically disabled; 883 hard of hearing; 281 visually impaired; 106 persons with intellectual disability; 1,070 mixed of visually impaired, autistic, hard of hearing, etc.).

If one takes into account the Multiple Indicator Cluster Survey (DHS-MICS) carried out in 2011, it is highly probable that these statistics have increased over time. **It estimates the disabled population of Cameroon at 5.4% of the total population** (Institute of National Statistics, 2011).

According to the Cameroon Health Strategy plan 2016 - 2027, sensory disabilities (3.5%) are the most common, followed by motor disabilities. (1.5%). The prevalence of disabilities varies in regions across the national territory. The regions have been classified accordingly in three major groups, namely:

- **High prevalence regions** including the South and Littoral Regions of the country (10 to 11%)
- **Average prevalence regions** including the Centre, North-west, West, Far North Regions (6-7%)
- **Low prevalence regions** which include the South West, East, North, Adamawa Regions (3-5%).

To place Cameroon's disability and disability inclusion profile in a global context, 15% of the world's population, or one billion people, are persons with disabilities. 80% of persons with disabilities live in developing countries which include Cameroon (World report on disability, 2011).

---

<sup>1</sup> The multi-stakeholders referred to in this report include OPDs, other civil society organizations (national and international), the government, United Nations Agencies, donors and development institutions and the media etc.

Cameroon is a signatory of the CRPD and its optional protocol but it has not ratified these instruments. Nonetheless, the country has its national legal framework for disability inclusion codified by two key instruments: **Law N° 2010/002** of 13 April 2010<sup>2</sup> on the protection and promotion of persons with disabilities and **Law N° 2018/6233/PM** of 26 July 2018<sup>3</sup> fixing the modalities of application of law N°2010/002 of 13 April 2010 on the protection and promotion of disabled persons.

The CRPD on its part recognizes **no formal definition of disability** (Article 2 of CRPD). Guidance on its meaning is however, provided in paragraph (e) of the Convention’s preamble:

*Recognizing that disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others.*

Furthermore, article 1 of the CRPD provides non-exhaustive **guidance on the meaning of the terminology ‘persons with disabilities’** – the people in whose favor the CRPD should operate in the following terms: *Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments, which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.*

On its part, **Law No. 2010/002 defines a person with disability as** “Any person who is unable to provide by himself or herself all or part of the necessities of a normal individual or social life, due to a physical or mental deficiency”. While this definition converges with that of the CRPD on the notion of impairment, it differs from it in that it pays less focus on interactive barriers in the environment which inhibit full participation and autonomy of persons with disabilities. Law No. 2010/002 equally implies that there is something “normal” which is not defined.

Article 3 of Law No. 2010/002 spells out explicitly **the recognized categories of disability in Cameroon** as follows:

The physical disability, intellectual disability and the poly - disability.

#### **1 - Physical disability comprised of:**

- **Motor disability**

---

<sup>2</sup> [https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/11/Cameroon\\_-\\_protection-and-promotion-of-persons-with-disabilities.pdf](https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/11/Cameroon_-_protection-and-promotion-of-persons-with-disabilities.pdf)

<sup>3</sup> <https://www.spm.gov.cm/site/sites/default/files/promotion%20personnes%20handicap%C3%A9es.pdf>

- **Sensory disability: blind, visually impaired, deaf, deaf-mute, mute, hearing impaired.**

**2 - Intellectual disability**, comprised of persons with the following conditions: retarded, autistic, cerebral palsy mongoloid, micro and macrocephaly, psychiatric and epileptic diseases.

It is worth underlining that the **provisions of Law No. 2010/002 are coherent with the principles of the CRPD**, particularly: non-discrimination, equality of opportunity, accessibility, respect for inherent dignity, individual autonomy, full and effective participation and inclusion in society, respect for difference and acceptance of persons with disabilities. However, the law does not mention some CRPD cross-cutting issues such as equality between men and women and the respect for the evolving capacities of children with disabilities as the CRPD does.

**Although Cameroon has not ratified the CRPD at the time of the drafting of this report (October 2021), it has done so for a number of other Human Rights Treaties**, both international and regional that bind the country on the universal respect of human rights and non-discrimination for all. These include, the International Covenant on Civil and Political Rights (ICCPR); the International Covenant on Economic, Social and Cultural Rights (ICESCR); the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW); the Protocol to the African Charter on Human and People’s Rights relating to women’s rights in Africa (Maputo Protocol).

Similarly, the Constitution of Cameroon<sup>4</sup> as well as its primary Development Documents – Vision 2035 and the National Development Strategy 2030 (SND 30)<sup>6</sup> emphasize inclusion and non-discrimination as fundamental principles.

The CRPD is articulated on the principle of inclusion of persons with disabilities in all facets of life on an equal basis with others. The UN Disability Inclusive Strategy (UNDIS 2018, p. 2)<sup>7</sup>, **defines the term**

**‘disability inclusion’ as follows:**

*the meaningful participation of persons with disabilities in all their diversity, the promotion and mainstreaming of their rights into the work of the organization, the development of disability-specific programs and the consideration of disability-related perspectives, in compliance with the Convention on the Rights of Persons with Disabilities (CRPD).*

Disability inclusion requires the development and implementation of a consistent and systematic approach to participation in all areas of policy, programming and operations within countries. Unfortunately, in Cameroon, while there are a host of legal and policy measures that have been taken for the protection and promotion of persons with disabilities and which are analyzed in this research, **implementation challenges and bottle-necks of these policies have left persons with disabilities**

<sup>4</sup> <https://www.prc.cm/en/multimedia/documents/6285-loi-n-96-06-du-18-01-1996-revision-constitution-1972-en>

<sup>5</sup> <https://www.lse.ac.uk/GranthamInstitute/wp-content/uploads/laws/1816.pdf>

<sup>6</sup> [http://bibliotheque.pssfp.net/livres/NATIONAL\\_DEVELOPMENT\\_STRATEGY\\_2020\\_2030.pdf](http://bibliotheque.pssfp.net/livres/NATIONAL_DEVELOPMENT_STRATEGY_2020_2030.pdf)

<sup>7</sup> [https://www.un.org/en/content/disabilitystrategy/assets/documentation/UN\\_Disability\\_Inclusion\\_Strategy\\_english.pdf](https://www.un.org/en/content/disabilitystrategy/assets/documentation/UN_Disability_Inclusion_Strategy_english.pdf)

**exposed to structural societal discrimination.** The goal of this situational analysis is, in part, to examine in detail, these implementation challenges that lead to structural discrimination faced by persons with disabilities in Cameroon.

Regarding the international development agenda, Cameroon as a member State of the United Nations is committed to Agenda 2030 and the Sustainable Development Goals (SDGs). 17 targets of the SDGs explicitly refer to persons with disabilities (World report on disability, 2011). Disability inclusion is founded on human rights and inspired by the values of dignity, inclusion, equality and the ethic of solidarity. The United Nations Convention on the Rights of Persons with Disabilities (UN CRPD) and the Agenda 2030 for Sustainable Development Goals (SDGs) reflect these values, but have yet to be realized by the majority of people with disabilities around the world, including in Cameroon.

## 2.0 Approach

### Guiding Principles

**The principles used for this research are guided by the UNPRPD MPTF’s overarching vision** which is for the rights of persons with disabilities to be respected, protected and fulfilled in order to enable their full and effective participation in society.

According to the UNPRPD MPTF guidelines, **three cross-cutting approaches** should be intrinsically considered and applied across UNPRPD MPTF structures, processes, and programs. This will ensure full and meaningful participation of all persons with disabilities. These approaches include:

- Full and effective participation of persons with disabilities;
- Inclusion of marginalized and underrepresented groups of persons with disabilities;
- Gender equality and advancing the rights of women and girls with disabilities.

Furthermore, this research is articulated on **an analysis of the CRPD preconditions** (equality and non-discrimination, accessibility, inclusive service delivery, CRPD-compliant budgeting and financial management, governance and accountability) **in view of determining the degree to which they are mainstreamed or constrained in Cameroon’s developmental landscape.** This enables the identification of the pre-conditions needing the most urgent attention. The impact of the extent and limits of the CRPD preconditions on the disability-inclusiveness of SDGs in the Cameroonian context are analysed, with priority given to OPDs to indicate the SDGs for which disability inclusion must be urgently prioritized in the Cameroonian context.

### Methodology Used

This research uses a qualitative methodology. Within the spectrum of qualitative research techniques<sup>8</sup>, content and discourse analysis are used in this research as they enable a pragmatic, less-scientific and easy understanding of the challenges of disability inclusion, protection and promotion for stakeholders in the Cameroonian context.

Regarding the sources of data, both primary and secondary sources have been used. Secondary data and information used for the research purpose include existing conventions, laws, frameworks, policies, national and sectoral development strategies, circulars, reports from Government, OPDs, CSOs, International Organizations, credible web resources etc.

Primary data and information, were obtained through focus group discussions and key informant interviews. Prior to the focus group discussion and interviews, an induction training on the Preconditions of disability inclusion was organized with the different categories of stakeholders from 22-26 May 2021, in order to enable all participants (OPDs, CSOs, Government and UN Agencies) have a clear understanding of the CRPD and the situational analysis process.

After the induction training, focus group discussions were held with OPDs and CSOs on the one hand from 26 to 30 July 2021 and on the other hand with government agencies and United Nations Agencies from 01 to 07 August 2021. The questionnaire used was developed and transmitted by UNPRPD MPTF and was contextualized by the project implementation team in Cameroon. The questionnaire was shared in advance with participants for them to prepare their answers and share with their colleagues/team members particularly for the OPD federation, OPDs, CSOs, Government Agencies and UN Agencies. With the use of the questions in the questionnaires, participants highlighted the key challenges to disability inclusion in Cameroon. This was debated by all participants and recommendations were unanimously adopted under the facilitation of the consultant.

Considering Covid-19 restrictions on the number of persons to be physically present per event, 51 OPDs and 64 CSOs participated at distance and gave feedback to the questionnaire, some of which were channeled through the Inclusive Platform for Disabilities<sup>9</sup>. 25 resource persons from government Agencies and 15 resource persons from UN agencies were interviewed and/or participated in the focus group discussions guided by the UNPRPD contextualized questionnaire.

### **Scope and Limitations**

Thematically, the scope of this research report is guided by UNPRPD's guidelines on the situational analysis in achieving the following:

---

<sup>8</sup> Content analysis can be defined as “an interpretive and naturalistic approach. It is both observational and narrative in nature and relies less on the experimental elements normally associated with scientific research (reliability, validity and generalizability) (from **Ethnography, Observational Research, and Narrative Inquiry, 1994-2012**). Cf. <https://www.publichealth.columbia.edu/research/population-health-methods/content-analysis>

<sup>9</sup> This platform is a federation of over 200 OPDs and CSOs specialised on disability inclusion.

- Providing information on a **broader perspective on the situation** of persons with disabilities;
- Supporting a **high-level analysis of the legislative and policy context** regarding equality and non-discrimination, inclusive service delivery, accessibility, CRPD-compliant budgeting and financial management and accountability as well as its impact on the inclusiveness of development frameworks for persons with disabilities;
- Producing **information and recommendations to inform** the UNPRPD (and other) **disability inclusion programming** in Cameroon.

**Geographically, the scope** of this analysis is **national** within the Cameroonian context. OPDs/CSOs that were consulted come from all regions of the country to share their perspectives on measures taken to protect, promote and include their participation within the country. Government officials were carefully selected from the Central Administrations to share experiences and perspectives on the challenges of implementation of laws and policies regarding disability inclusion. UN Agencies' projects and program specialists (UN WOMEN, UNDP, OHCHR, HCR, UNESCO, UNFPA etc.) were also chosen from their national headquarters to share perspectives and experiences based on the programs which they implement throughout Cameroon.

Some limitations were faced within this research as follows:

- With Covid-19 restrictions, the Government put a limit of 50 people per gathering or activity. As a result of this, the number of persons physically admitted for the induction training and consultations was limited than would have been the case. Prior to each consultation, fast-track explanations of key terminologies and the pre-conditions had to be made to participants who could not attend the training and this was time-consuming;
- Some government agencies, OPDs, and CSOs were represented by different persons for the induction training on the one hand and the disabilities consultation workshops on the other hand. This increased the burden of the consultations as explanations of the pre-conditions and CRPD-specific terminologies had to be made again for new participants at the consultation workshops;
- There were severe difficulties in getting a good consultant to pilot the situational analysis process and this made the process drag on longer than expected. It will be a good idea for UN PRPD to constitute a database of consultants.
- Some participants complained that the questions provided by UNPRPD were extremely lengthy and exhausting and the process of transitioning from issues-priorities-log framework was not clear. This process should be simplified.
- Some key stakeholders such as the Ministry of Public Works did not honor the invitation for the induction training nor the consultation workshop. Although efforts were made to have

relevant answers to questions that pertain to their mandate through in-person interviews, it was not as effective as it would have been had they attended the consultation workshops.

### **3.0 Findings:**

#### **3.1 Stakeholder and Coordination Analysis**

##### **Ministry of Social Affairs**

In the case of Cameroon, **the Ministry of Social Affairs (MINAS) is the principal government Agency** mandated to monitor the implementation of policies aimed at protecting, promoting and empowering persons with disabilities. To fulfill its mandate, the decree organizing MINAS instituted a **Department of Persons with Disabilities and the Elderly** as the principal entity on disability-inclusion within the county.

##### **National Coordination Mechanism - CONRHA**

Cognizant of the fact that MINAS cannot achieve this mandate alone, the Office of the Prime Minister through Law N° 2018/6233/PM of 26 July 2018, pertaining to the application modalities of the Law No. 2010/002 on the protection and promotion of persons with disabilities, set up the **National Committee for the Rehabilitation and Socio-economic Reintegration of Persons with Disabilities (CONRHA)**.

This committee is in fact the primary platform, chaired by the Minister of Social Affairs and mandated to facilitate the coordination of efforts of various stakeholder (OPDs, CSOs, UN Agencies, Development Partners, Government Agencies, and Private sector) for the benefit of, and with the participation of, persons with disabilities.

**CONRHA is an advisory body**<sup>10</sup>, which, in a concrete way, assists the Government in the elaboration and supervision of national policy for persons with disabilities. The coordination platform gives its opinion on any technical question concerning disability-inclusive policies, proposes measures to promote the full participation of persons with disabilities in the economic, cultural and social facets of society.

CONRHA also advises on measures to raise awareness, inform and educate the community on the rights and specific needs of persons with disabilities and promotes the inclusion of the disability approach in policies, sectoral development programs and projects of the law.

##### **Coordination amongst Associations of Persons with Disabilities**

**There is no national official recognized coordination platform of OPDs in Cameroon.** OPDs have been working hard to improve their coordination efforts and ameliorate their collective advocacy. The

---

<sup>10</sup> Some OPDs criticized CONRHA for being a very weak coordination platforms whose advisory recommendations are hardly ever implemented and CONRHA has no power to forceful implement its own recommendations.

path for them has been challenging yet hopeful. The culmination of their effort is the creation of a renowned entity (of a CSO character) called **National Platform for Organizations of Persons with disabilities in Cameroon (NPOPD)** / Plateforme Nationale des Organisations de Promotion des Personnes Handicapees du Cameroun.<sup>11</sup>

The platform currently has 101 registered organizations. They include OPDs and CSOs focused on disability inclusion. The platform engages in activities such as advocacy, collection of data for genuine statistics on persons with disabilities and special needs, as well as development and implementation of inclusive programs nationally.

While this platform is the most popular, there are several other platforms here and there in the different towns and regions of the country which bring together varied numbers of OPDs and CSOs. Some of these include the Coordinating Unit of Associations of Persons with Disabilities (CUAPWD) which serves as a network for associations of persons with disability and other stakeholders in the North West Region of Cameroon.

### **Faith based organizations, International NGOs and Donors**

There are various faith based organizations in Cameroon which play a very important role in support services particularly in the domains of health and education. These include the Baptist convention, Catholic mission, Presbyterian mission and even the Council of Muslim Dignitaries. International NGOs such as SightSavers, are also engaged in advocacy and support services for persons with disabilities. International donors such as The Canadian International Centre for Disability and Rehabilitation (ICDR-Cameroon) collaborate and coordinate their activities with local entities and platforms such as the CUAPWD here-above mentioned. Some of the domains in which they collaborate include education, advocacy workshops, research and studies etc.

**The global trend observed is that these coordination mechanisms are simply ad-hoc and not structured or institutionalized. However there is good practice in that OPDs are always at the core of the elaboration, implementation and monitoring of the projects undertaken by these stakeholders.**

### **Stakeholder and coordination mapping on disability inclusion within the United Nations (UN) System in Cameroon**

It must be underscored that **disability inclusion is a core aspect of UN Cameroon programming principles articulated in the pledge to “leave no one behind and support the most vulnerable first” in development processes.** All 18 UN Agencies in Cameroon<sup>12</sup>, working towards the achievement of the SDGs in the country adhere to this pledge and its components, including disability inclusion. In 2020, a capacity building initiative on UN programming principles was organized by United Nations

---

<sup>11</sup> The original name in French of the platform.

<sup>12</sup> <https://cameroon.un.org/fr/about/our-team>

Country Team, (UNCT), and facilitated by the UN Development Coordination Office (DCO), for designated UN agencies and Government ministries to mainstream the principle of leaving no one behind including persons with disabilities within the framework of the elaboration of the United Nations Sustainable Development Cooperation Framework, (UNSDCF).

So far **disability inclusion in UN analysis and joint programming** mechanisms such as the Common Country Assessment (CCA) and UNSDCF **has been monitored by the UN working group on Human Rights** chaired by the Representative of the United Nations Centre for Human Rights and Democracy for Central Africa which is the sub-regional unit for Central Africa of the Office of the High Commissioner for Human Rights (OHCHR). **There is no specific UN working group dedicated exclusively to disabilities inclusion.** The United Nations Resident coordinator office has an assigned disabilities focal point person. Some of the activities taken by the UN Human rights group pertaining to disability inclusion include the assessment of accessibility of existing UN premises to persons with disabilities, formulation of recommendations thereof and monitoring of ensuing action.

### **3.2 Equity and non-discrimination**

As underscored by UNPRPD guidelines, the first step for equality and non-discrimination for persons with disabilities is their official recognition as a protected group at national and sub-national levels<sup>13</sup>. The constitution of Cameroon materializes this disposition in its preamble in the following terms: “The Nation shall protect and promote the family which is the natural foundation of human society. **It shall protect** women, the young, the elderly and **the disabled.**” Furthermore, Article 18.4 of the constitution underlines that: “**the disabled shall also have the right to special measures of protection in keeping with their physical and moral needs.**”<sup>14</sup>

To appreciate some of these special measures, one has to **consult Law No. 2010/002.**

In the domain of employment for instance, article 38 of the Law states that:

Article 38.1: **Persons with disabilities** who have completed vocational or educational training **shall benefit from preferential measures, in particular the age exemption for recruitment to public and private public and private jobs in comparison with able-bodied persons**, when the position is compatible with their condition.

Article 38.2: **For equal qualifications, priority in recruitment is given to the disabled person.**

Article 38.3: **In no case, can disability constitute a reason for rejecting a job application nor serve as a basis for discrimination.**

---

<sup>13</sup> <https://unprpd.org/sites/default/files/library/2020-08/Annex%202%20UNPRPD%204th%20Funding%20Call%20Preconditions%20to%20disability%20inclusion%20ACC.pdf>

<sup>14</sup> <https://ihl-databases.icrc.org/ihl-nat/0/7e3ee07f489d674dc1256ae9002e3915/%24FILE/Constitution%20Cameroon%20-%20EN.pdf>

Similarly, in the domain of housing, article 34 of Law No. 2010/002 underscores that the State, decentralized territorial authorities and civil society shall take preferential measures for the access of persons with disabilities to social housing.

While these legal provisions are laudable, OPDs indicated that they are sometimes violated and usually several disabled persons are not informed about them. It is for this reason that UN PRPD guidelines, emphasize the need for protections in place to prevent and address disability-based stigma and discrimination and to promote equality and non-discrimination, as well as measures to raise awareness to foster respect for the rights and dignity of persons with disabilities.

Law No. 2010/002 uses the *stick* approach to punish violators as per Article 45 in the following terms: **Any school, vocational and university establishments, employers or managers of such establishments or managers of companies who discriminate in the admission, recruitment or remuneration of disabled persons shall be are punished by an imprisonment of three (3) to six (6) months and a fine of 100,000 FCFA (200 USD) to 1,000,000 FCFA (2000 USD) or one of the two penalties only.**

Within the framework of this research, Less than 20% of interviewed OPDs/CSOs indicate that persons with disabilities are knowledgeable on the non-discriminatory and equity legal provisions in Cameroon; less than 15 % of them were convinced that persons with disabilities are sure about the legal procedures to undertake in situations where they experience discrimination; less than 10% of them estimate that any positive outcome can result from legal actions pertaining to acts of discrimination against persons with disabilities before the law.

All OPDs consulted underscored that it is very difficult to find a lawyer or legal specialist who was knowledgeable on disability law, including CRPD provisions or even willing to defend them before the law in relation to cases of discrimination.

Therefore, while the legal instruments in force in Cameroon have non-discrimination and equity provisions in defense of persons with disabilities, the scarcity of knowledgeable legal specialists as well as the ignorance of the law and demotivation of the right holders (persons with disabilities) provide perpetuating breeding grounds for discrimination against persons with disabilities.

**An analysis of discrimination against persons with disabilities in the Cameroonian context would be incomplete if it didn't take into account traditional beliefs and superstitions preconceptions which underpin stigmatization particularly in rural areas.** A research carried out in 2018 by Brigitte Rohwerder, Institute of Development Studies, in some African countries including Cameroon, indicates that misconceptions about the causes of disabilities resulting from cultural or religious beliefs have led to the population blaming disability on misdeeds of ancestors, parents and the person with disability, supernatural forces such as demons/spirits, and witchcraft<sup>15</sup>. This is especially the case for intellectual

---

15 <https://www.ids.ac.uk/publications/disability-stigma-in-developing-countries/>

disability for which there is a severe level of ignorance in Cameroon. For this reason, persons with disabilities are considered a shame to the family and the community, they face discrimination in accessing mainstreamed services and their social interactions for a fulfilled living experience are compromised.

### **Case study: Political Participation and non-discrimination of persons with disabilities in political and public life**

There is very limited participation of persons with disabilities, particularly women, in governing institutions at local and national levels. Some figures shed light on the state of affairs: there is no person with disabilities in Cameroon's National Assembly, and only one man with a disability sits in the Senate as an alternate senator. At the local level, (2.4%) of the local councils included people with disabilities, which also included one female. There is a disability focal point parliamentarian at the National Assembly. OPDs consulted indicated that they refer to this person for advocacy purposes but that his powers have proven limited in advocating for the ratification of the CRPD and advancing disability rights.

The outcomes of the consultation with OPDs, as well as a 2016 study, helped identify the following as the main barriers to political participation of persons with disabilities both as voters as well as representatives:

- Insufficient access to information, caused by inaccessible oral and written means of communication;
- Negative perceptions which falsely assume that persons with disabilities are unable to make any significant contribution to the society. This engenders discrimination and marginalization.
- Unequal access to quality education;
- Lack of employment opportunities: most of the participants had limited access to training opportunities, and as a result, many are under skilled and consequently not employed, without adequate financial means;
- Inaccessible physical premises.

## **3.3 Inclusive Service Delivery**

UN PRPD guidelines underscore that service delivery for persons with disabilities must adopt a twin track approach with both mainstreamed and disability-specific targeting of services to ensure inclusion of persons with disabilities. Inclusive service delivery is categorized into three dimensions: **Disability assessment and referral services, Disability support services and Mainstreamed services**

### **Disability assessment and referral services**

A disability assessment and referral system is intended to identify the kind and extent of disability a person has, to receive information about their disability, and to ensure that they are referred to

appropriate supports and services in their communities. In Cameroon, this role is mainly played by the specialized centers of the Ministry of Social Affairs who, in collaboration with specialized health centers such as the handicap centre of Etoug-Ebe in Yaounde determine the type and degree of disability and confer a disability card<sup>16</sup> to persons with disabilities, entitling them to a host of services and preferences, provided for by the law.

The disability card is an important initiative such as big deal in Cameroon because according to Article 2 of **Law N° 2018/6233/PM** only persons with disabilities in possession of a National disability Card and who can prove to be at a Permanent Potential Incapacity (IPP) rate greater than fifty percent (50%) can benefit from special support measures. Such measures include preferential treatment in public and private transport, in particular, reduction in transport fare; priority during embarking and disembarking; reserved seats from customs taxes, and education with the possibility of a scholarship.

However there are critical issues with disability assessment, conferment of the disability card and referral services in Cameroon. OPDs interviewed voiced how difficult it has been for some persons with disabilities in remote areas where social centers are inexistent to have access to the disability card. Furthermore, according to OPDs/OSCs, more than 40% of disabled persons are unaware about assessment and referral services, including how to get possession of the disability card.

In fact, MINAS, whose mission is to provide social support to individuals, has only 32 social welfare services in health facilities across the country. However, given the magnitude of needs, the number of social workers remain qualitatively and quantitatively insufficient. Indeed, geographical and financial access to health services is limited as seen in the fact that out-of-pocket payment is the main health financing method, which is a problem for the PWDs who are often amongst the poorest in Cameroon. On another note, the paper type disability card has been so easy to falsify. There have been information of some persons falsifying it to unduly benefit from provisions meant only for persons with disabilities. It is for this reason that the Ministry of Social Affairs recently signed an Agreement with the General Delegation for National Security (DGSN), which is the authority in charge of producing biometric identity documents to produce biometric disability cards that will be almost impossible to falsify<sup>17</sup>.

---

16 The required documents to be issued a disability card are the following :

- 01 Medical certificate of disability
- 01 Photocopy of the National Identity Card or birth certificate
- 02 complete photos showing the disability (for visible disabilities)
- 04 photos 4cmx4cm
- 01 Certified certificate of residence
- 01 Handwritten request addressed to the Regional Delegate of MINAS c/o the Head of the social center closest to your area of residence.

17 <https://www.cameroon-tribune.cm/article.html/36527/fr.html/informatisation-de-la-carte-dinvalidite-le-minas-la-dgsn-se-donnent-la>

### **Disability support services**

Disability support services refer to the provision of help or assistance necessary for persons with disabilities to carry out regular activities and participate in society. These disability support services encompass a wide range of formal and informal interventions, including personal assistance, mobility aids, assistive devices and technologies, supportive decision-making, communication support (such as sign language or guide interpreters), and community services. The overarching goal of disability support services is the achievement of autonomy.

**The Director of the Department of Persons with Disabilities and the Elderly indicated during the consultation workshops that Government provides disability support services to persons with disabilities** through the Ministry of Social Affairs and its local social centres. MINAS generally provides mobility aids and assistive devices. MINAS also has a health facility specialized in the rehabilitation of the physically disabled. Furthermore, some physiotherapy and physical rehabilitation services in some health facilities under the Ministry of Public Health are operational and support persons with disabilities. OPDs and CSOs at the consultation workshops acknowledged MINAS' support as several of them had either witnessed the provision of such services or even supported the Ministry in channelling the support. Furthermore, **a big source of disability support services are international NGOs and faith based organisations.**

Nonetheless, **demand for disability support services largely supersedes supply.** Public expenditure on disability support services via MINAS' budget is usually limited and support from non-State actors is sporadic and contingent on several external factors. The implication is that several persons with disabilities do not have access to disability support services. For instance, an analysis of the situation of visually impaired children in the town of Maroua, Far North of Cameroon, revealed that less than 8% of them had access to assistive devices such as braille and stylus. OPDs indicated that the delegations of the Ministry of Social Affairs and of Basic Education whom they approached in that part of the country indicated that they didn't have sufficient funds to cover all needs.

### **Mainstreamed services**

Persons with disabilities should have equal access to services that are inclusive and not segregated. They require access to the same services as persons without disabilities, such as education, vocational training, health, access to justice, emergency services, social protection, recreational services, etc. These services need to mainstream disability inclusion and identify structures, plans, and measures to ensure they are available, accessible, adequate, and affordable for persons with disabilities.

Mainstreamed services are nascent and insufficient in Cameroon. **In the domain of education for instance,** the government through the Ministry of Basic Education very recently set up a pilot of 69 inclusive education schools in which classes are simultaneously given to both students with disabilities and without disabilities. Inclusive education is a step away from the specialized education system, still prevalent in Cameroon where students with disabilities were segregated from students without

disabilities. Inclusive education requires teachers to have specialized skills and in which the State must invest.

The difficulties faced in guaranteeing mainstream services in Cameroon stem from the insufficiencies of disability support services. As per UNPRDP guideline, mainstreamed services need to link with disability support services to ensure full access to all persons with disabilities. For example, access to sign language interpreters to appear in court, access to community-based support mechanism to evacuate in an emergency, or access to an appropriate wheelchair and advice on how to use the wheelchair in order to attend school. **The issue with disability support services** in Cameroon is that in addition to being insufficient, they tend to be more **focused on tangible aspects such as assistive devices and pay less attention to intangible support which are key to mainstreaming services such as supportive decision-making, communication support** (such as sign language or guide interpreters), and community services etc. **Disability support services** are a precondition to living and fully participating in the community on an equal basis with others, and without this support, persons with disabilities face exclusion from accessing services, participating in society, institutionalization, and neglect.

*Case study: Inclusive service delivery in the Education sector*

In general, integrated service delivery in the education sector calls for a single inclusive education system, which meets the need of students with disabilities and those without. Cameroon has some good practices in in this regard as exemplified by the joint circular letter No. 34/06/LC signed on 2 August 2006 by the Ministers of Secondary Education and Social Affairs aiming at facilitating the enrolment of children with disabilities or born to poor disabled persons in public secondary schools. This also exempts these children from the payment of registration fees in such establishments.

As such measures require prior identification of beneficiaries, MINAS and MINESEC issued on 14 August 2007, a circular referring to the identification of children with disabilities or born to poor disabled parents. The circular specified that, "*a report must be submitted on 15 October of every year, providing data on pupils attending examination classes and on any practical difficulties that they might encounter in connection with State examinations as a result of a deficiency*". This identification process, constitutes a positive discrimination measure aimed at meeting the needs of disabled children. These reports are submitted every year but have not yet been consolidated and published for the year 2021.

Despite these measures taken for public schools, it must be indicated that the quality of specialized services that they provide are usually limited. Not all children with disabilities can benefit from education offered in public schools; consequently, **some parents are forced to send their children to private specialized schools that are very expensive**. There is also evidence of tangible inequalities in accessing various competitive entrance examinations. Some OPDs have condemned the fact that the government has not adopted a quota policy for admission of persons with disabilities in competitive entrance examinations.

### 3.4 Accessibility

Accessibility refers to the extent to which products, systems, services, environments, and facilities can be used by people with diverse requirements, needs, characteristics, and capabilities to achieve their goals in certain contexts. The CRPD requires States to take appropriate measures to ensure that persons with disabilities have access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public and to remove barriers and obstacles to accessibility.

Regarding accessibility in the physical environment, article 33 of the Law No. 2010/002 mentions in its first paragraph that **Public and private buildings and institutions open to the public must be designed to facilitate access and use by persons with disabilities.** Cognizant of the existence of non-compliant infrastructure at the time of its entry into force, article 33.2 mentions that **at the time of their renovation or during important transformations, existing public or private buildings and facilities open to the public shall be designed to facilitate access and use by persons with disabilities.** The article further emphasizes that the **authorization to build or operate is subject to compliance with the provisions of paragraphs 1 and 2 above.**

While these provisions are strong and laudable, they have been violated time and again. **There are recently constructed ministries for instance, built by the Government itself, that neither have ramps nor elevators to facilitate access to persons with motor disabilities.** Therefore, while the law has some of these laudable provisions, they are not always applied.

Accessibility for persons with disabilities is equally seriously compromised in the domains of communication and information. For instance, there are no dedicated sign language interpreters in the different public institutions (Ministries, schools, public centres etc.) to support the deaf. Sign interpreters are almost never used even for public information instances including the main news on the public TV where key information is communicated, except on some very rare occasions for weather information. OPDs consulted complained about the non-publication of very important legislation and information in braille.

### 3.5 CRPD-Compliant Programming and Budgeting

CRPD-Compliant Programming and Budgeting must be ensured at two levels; **financial planning and monitoring** on the one hand and **regulation and support for the additional costs of disability** on the other hand.

First, regarding financial planning and monitoring, governments must use public finance management and budgeting system to foster accessibility and non-discrimination across sectors. In addition, public resources should be used to ensure universal access to services, and budgeting decisions should also be made in close consultation with persons with disabilities, in a manner that does not contradict CRPD standards, such as segregated education services.

In the case of Cameroon, in view of concretizing the provisions on infrastructural accessibility codified in Law No. 2010/002, a joint communiqué was signed between the Ministry of Social Affairs and the Public Contracts Regulatory Agency (ARMP) on 08 April 2009 to emphasize the obligations incumbent on project owners and delegated project owners regarding the minimum specifications for disability accessibility in all publicly contracted infrastructure. A guide was even produced to assist and enlighten public and private stakeholders on the standards for accessibility in physical infrastructure. However, as previously indicated, despite these policy measures there are multiple deviances, which continue to exclude persons with disabilities. Several public services including health, administration, information and communication, Universities etc. do not have dedicated budgeted support services.

Furthermore, OPDs indicated that they have never been convened for consultations on public finance. The Ministry of Finance in its public finance committee sessions nonetheless convenes a civil society representative who represents the broader interest of civil society including on issues of disability. Perhaps a better structuring (coordination) of OPDs could leverage their bargaining power to earn a sit at the table.

The representatives of the Ministry of Finance who took part in the induction training and the consultation workshops indicated that there are no specific processes, guidelines or recommendations to mainstream disability inclusion in public budgets.

Secondly, regarding **regulation and support for the additional costs of disability**, direct costs or expenditure due to having a disability, such as the cost of purchasing a wheelchair, accessing therapies, or hiring a sign language translator, and indirect costs, such as lower levels of income, limited access to education, must be regulated and factored into policy, programs, and planning, so that services are accessible to persons with disability, thus decreasing the need for persons with disabilities to bear the burden or be excluded outright due to these additional costs.

The direct costs are taken into account through the budgets of the Ministry of Social Affairs and the Ministry of Basic Education which occasionally offer assistive devices to persons with disabilities. Unfortunately, these budgetary lines on disability are not enough to cover disability needs nationwide. Furthermore, there are very limited (inexistent) budgeted disability support services such as sign language interpreters in public institutions including ministries, hospitals and universities etc. which would could help reduce the burden (cost) on persons with disabilities.

The direct cost due to disability is very high for persons with disabilities in Cameroon. Most persons with disabilities cannot provide for their own assistive devices. According to APPIPDA, their school

children with hearing difficulties cannot afford hearing aids and the institution has just one braille board and a stylus.

As a developing country (Middle income), Cameroon is struggling to allocate its resources for the achievement of its development goals. This is further complicated by financial malpractices such as embezzlement of public funds and limited transparency and accountability. Consequently, public expenditure for disability inclusion is almost insignificant and it appears that persons with disabilities are not [yet] at the top of the Government's priority.

### **3.6 Accountability and Governance**

As per UN PRPD guidelines, accountability and governance refer to Governments' obligations to ensure that they have the appropriate governance and accountability systems in place to implement the CRPD through a triple approach which includes **systems to collect information**, including statistical and research data to inform policies; **national implementation and monitoring systems**; and **effective coordination across sectors**.

The primordial issue with Cameroon is that it falls within the realm of countries that have signed but not ratified the CRPD. **The reasons for not ratifying the convention are unclear.** Neither the representatives of the Ministry of Social Affairs (Department of Persons with Disabilities) nor those of the Ministry of Justice at the induction workshop and consultative retreats could explain why the CRPD is not ratified.

The initiative to ratify signed international instruments in Cameroon has to be taken by the Presidency of the Republic (Executive) which requests authorisation to ratify from the lower and upper houses of the legislative powers (National Assembly and Senate). One staggering observation is that Cameroon already faces very complex difficulties in implementing the provisions of its national disability inclusive legislation which are not as demanding as those of the CRPD. There could be a concern at the higher levels of governance that ratifying the CRPD without prior address of preconditions and tackling of implementation bottle necks could lead to another host of unimplemented provisions.

#### **Inclusive evidence and data gathering systems**

Macro data on persons with disabilities in Cameroon is quite outdated as it was made available from the third General Census of Population and Housing of Cameroon published in 2010.<sup>18</sup> The government has been facing logistics and financial challenges to undertake a 4<sup>th</sup> General Census of Population and Housing which has been planned in the pipeline for several years.

---

18 <http://www.bucep.cm/index.php/fr/recensements/3eme-rgph>

Nonetheless, the National Institute of Statistics occasionally carries out surveys and sometimes in collaboration with different ministries and departments (health, education, employment etc.). They use the Washington Group of Questions and disaggregate data by disability. While surveys of this type provide some relevant data, they are usually limited in scope and method. Because of these limitations, data on persons with disabilities are scarce, not harmonized and easily contested. The representative of the National Institute of Statistics at the consultation retreats for this situational analysis recognized this issue and underscored the need to support the institute financially and technically to get good, disaggregated data on the situation of persons with disabilities.

At the moment, data on disability is diffuse and non-disaggregated by geography amongst other aspects. This renders the use of the data for planning and programming purposes problematic. To harmonize the data collection methodologies, make the data readily available and use the data concisely for policy purposes, the Ministry of Social Affairs in collaboration with the World Bank is in the process of launching a database entitled “Unified Social Registry” with disaggregated data on socially vulnerable groups including persons with disabilities.<sup>19</sup> A representative from the Department of National Solidarity and Social Development of the Ministry of Social Affairs underscored that once operational, this database will provide geographically disaggregated data on disabilities right down to the level of councils.

### **National Accountability mechanisms**

National accountability mechanisms for monitoring CRPD implementation and making complaints on rights violations are really important.

#### **THE MANDATE OF MINAS AND MINISTRIES’ DISABILITY FOCAL POINTS:**

In the case of Cameroon, the responsibility to monitor the implementation of policies pertaining to disability rights lies primarily with MINAS and its Department of Persons with Disabilities and the Elderly. A number of ministries have disabilities focal points such as the Ministry of Economy, Planning and Regional Development who bring any disability specific matter to the attention of their minister with recommended action. There is no specific inter-governmental mechanism for disability within government and this is a serious gap.

#### **THE CAMEROON HUMAN RIGHTS COMMISSION**

Another very important mechanism for protecting human rights (including disability rights) in the Cameroonian context is the Cameroon Human Rights Commission (CHRC) whose role is to protect and promote human rights in Cameroon. The CHRC processes requests and denunciations relating to alleged human rights violations through self-referral or facts brought to its attention that constitute serious, recurrent or systemic violations of human rights. The **CHRC’s is composed of 13 members**

---

<sup>19</sup> <http://timesnews2.info/reportage-atelier-minas-banque-mondiale-sur-le-registre-social-unifie-au-cameroun/>

**of which one must be a representative of persons with disabilities.** However, this person is appointed by the President of the Republic and not elected. **Some OPDs expressed the opinion that appointment by the executive rather than an election means that this person who sits on their behalf at the CHRC doesn't feel totally accountable to them** as much as s/he does to the executive power and might not represent their interests properly particularly if these interests differ from that of the executive power.

The CHRC is de facto a complaint mechanism as it may be seized ex officio and may also be referred to by any natural or legal person, by means of a written or verbal request containing a brief description of the alleged violation. The procedure for the examination of applications before the CHRC are governed by its internal regulations and the Commission may have recourse to any expertise necessary for the accomplishment of its missions. As per article 7 of Law No. 2019/014 of July 19, 2019 to establish, organize and operate the Human Rights Commission of Cameroon, the CHRC can undertake any of the following actions amongst others to promote and protect human rights:

- refer any cases of human rights violations to the Minister of Justice;
- use dialogue, mediation and conciliation between the parties in non-repressive matters;
- provide legal assistance, in accordance with the laws in force;
- request the competent authorities to put an end to the human rights violations;
- intervene, if necessary, before any jurisdiction as *amicus curiae*. In this case, a written request is addressed to the President of the competent court before any decision on the merits.

In 2020, the CHRC received 927 complaints, 566 complaints were handled and 1,010 letters sent (to 363 administrative authorities, 344 persons, 263 Civil Society Organisations and 40 companies). While this research was not able to assess what proportion of these complaints pertained to disability rights and the nature of their outcome, several OPDs indicated that they had referred violation of disability rights to the CHRC. For instance, the CHRC was referred to with the case of a parent whose child was discriminated against in a school admission case. The parent requested that the child with intellectual disability be admitted despite his age being higher than the maximum admission age in line with the special provisions for persons with disabilities. The school refused to yield to this request and the parent referred the matter to the CHC and sued the State.

However, OPDs recognise that the CHRC does not focus solely on rights pertaining to disability inclusion but to all human rights in general.

The CHRC is equally de facto an advisory entity. As per section 40 of Law No. 2019/014 of July 19, 2019, the Commission shall prepare reports, which may be annual, special or thematic comprising recommendations and opinions of the Commission. These are addressed to competent authorities such as the President of the Republic, the President of the Senate, the President of the

National Assembly, the Prime Minister, the President of the Constitutional Council, the First President of the Supreme Court, the Ministers in charge of Justice, Territorial Administration and External Relations, as well as to any other administration concerned.

These reports are a very important mechanisms for bringing the authorities attention to key action that can be taken to improve the rights of persons with disabilities in Cameroon. For instance on page 142 of its 2017 report on the state of Human Rights in Cameroon, the CHRC highlighted the following condemnations and recommendations pertaining to persons with disabilities in the following terms:

“ The relevant Treaty Bodies condemned the: stigmatisation of persons with disabilities, weak inclusive education, problems related to employment, access to public utilities, buildings, roads and means of transportation.

Recommendations include: - providing medical services for persons with disabilities, –

The enforcement of the decree implementing Law no. 2010/002 of 13 April 2010 pertaining to the promotion and protection of persons with disabilities, the ratification of the Convention on the Rights of Persons with Disabilities.”<sup>20</sup>

**Participants at the consultation workshop indicated that a very low proportion of OPDs and persons with disabilities are knowledgeable about the complaints mechanisms of the CHRC as well as the administrative, civil and criminal processes accessible to them.**

#### *Universal and regional reporting*

Claimants must exhaust all domestic remedies before making a complaint at international complaints mechanism. Most international and UN Treaty Bodies, such as the CRPD Committee, require States to sign up to the complaints mechanism through an Optional Protocol. Cameroon therefore does not report to the CRPD committee as the country has not ratified the convention. Nonetheless, the country presents to a number of universal and regional bodies that in part address the rights of persons with disabilities at a more general level. These include the Universal Periodic Review (UPR) to the Human Rights Council regarding its records on human rights in general and specifically to its ratified instruments<sup>21</sup> which include several commitments including those pertaining to the rights of persons with disabilities.

Cameroon equally presents its National Periodic Reports to the African Union Commission every after two years regarding its record on the African Charter on Human and People Rights (ACHPR). The limit with some of these instruments is that they are generally superficial on the rights of persons with disabilities as these are not their main object of focus. The ACHPR for instance only mentions the protection of persons with disabilities once in the following terms of Article 18.4 “The aged and **the**

---

20 <http://www.cndhl.cm/sites/default/files/EDH%202017bon%20version%20anglaise.pdf>

21 [https://tbinternet.ohchr.org/\\_layouts/15/TreatyBodyExternal/Treaty.aspx?CountryID=30&Lang=EN](https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Treaty.aspx?CountryID=30&Lang=EN)

**disabled** shall also have the right to special measures of protection in keeping with their physical or moral needs.”<sup>22</sup>

Regarding SDG reporting on their implementation and inclusiveness on an international stage, Cameroon also reports on its Voluntary National Review on the SDGs at the United Nations High Level Political Forum. In this report, the country indicates progress made on several SDGs for different categories of vulnerable persons, including persons with disabilities. The VNR was lastly carried out in 2019.<sup>23</sup>

The sole progress pertaining to the rights of persons with disabilities reported in the VNR is the setting up of 68 pilot inclusive primary schools which has increased the quality of education for pupils with disabilities.<sup>24</sup>

#### **Disaster risk reduction and emergency response.**

The civil society in host communities could play a significant role in the acceptance and integration of refugees and internally displaced persons in general, and those with disabilities in particular. The participation of the refugees and IDPs with disabilities themselves in the design and implementation of projects to their benefit could create a sense of ownership and responsibility.

There is little evidence of systematic engagement of OPDs and persons with disabilities in humanitarian response delivery. The OPDs from the English speaking North West and South West regions consulted in the course of the research for this report described facing physical, attitudinal, and institutional barriers to inclusion in decision-making processes, despite their desire to be more involved in humanitarian action. Humanitarian agencies that could do better at including OPDs in their consultations and program delivery include OCHA, Plan International, NRC, DRC and Doctors without Borders.

## **4. Analysis – Gaps and opportunities for disability inclusion**

The overarching gaps and opportunities emerging from the findings are:

### **a) Diffuse responsibilities and coordination at government level leading to weak “whole of government” implementation of disability inclusive policies**

While coordination of efforts for the promotion and protection of persons with disabilities is led by Government through MINAS, there is a general impression that this is simply a MINAS affair, even within government. The few other Ministries which appear to give some consideration to disability inclusive policies are those of the education and health sectors. The others are somewhat lukewarm.

The **following gaps** explain some of the reasons why most of the ministries do not prioritize the rights of persons with disabilities are the following:

---

22 <https://www.achpr.org/legalinstruments/detail?id=49>

23 [https://www.thecommonwealth.io/wp-content/uploads/2020/08/CAMEROON\\_VNR\\_2019.pdf](https://www.thecommonwealth.io/wp-content/uploads/2020/08/CAMEROON_VNR_2019.pdf)

24 Idem, p. 38.

- CONRHA’s decisions lack force. They are emitted as recommendations and not instructions. As a result, ministries can decide whether to implement them or not. In fact, ministries do not consider themselves compelled to implement the “so called recommendations” from a consultative/coordination mechanism.
- Inadequate communication, orientation, instruction and sectoral policy from the higher levels of the executive: office of the prime minister and presidency which fall short of rendering disability inclusion mandatory in all sectors of development. Participants at the consultation workshop firmly underlined that it would be better for CONRHA sessions to be presided by the Office of the Prime Minister rather than by the Ministry of Social Affairs in order to create a government-wide impulse and interest.
- Unavailability of up-to-date and accurate disaggregated data on persons with disabilities to inform ministries with facts on disability needs within their respective development sectors.
- Some ministries, (especially those in charge of infrastructure (public works), communication and information technologies, education, health, labor and economy) fall short of implementing CONRHA’s recommendations simply because they lack knowledge and technical capacity regarding the implementation of measures to promote disability inclusion in their respective development sectors.

**b) Detrimental infighting, weak inter-OPD coordination and limited financial capacity leading to weak advocacy, monitoring and accountability on the implementation of disability inclusive policies**

While there is no national officially recognized coordination platform of OPDs in Cameroon, the Inclusive Platform for Organizations of Persons with disabilities in Cameroon, which is a coordination effort amongst OPDs/CSOs had been plagued in recent years by so much infighting. The former head of this platform was accused by most members of only using the platform for his personal gains and not undertaking the necessary advocacy which members were asking him to do. This led to lack of trust in the platform and its leadership. Several OPDs/CSOs withdrew their membership from it.

Infighting is detrimental for OPDs since it shifts their focus away from their key role of “watch dog” on the implementation of disability inclusive policies.

In addition, there are several coordination mechanisms of OPDs here and there which only go a long way to weaken coordination, accentuate competition. Coupled with the weak financial capacity of OPDs and their coordination mechanisms, infighting only saps their capacity for collective advocacy, monitoring and accountability on inclusion.

The **main gap (reasons)** leading to weak intra-OPD coordination are the following:

- OPDs have limited financial, human, material and managerial capacities. They also have weak knowledge on the CRPD and weak technical capacities on the different approaches to advance disability rights in Cameroon (advocacy, mediation, influencing, legal proceedings etc.);

Despite this gap, **there is opportunity** to strengthen intra-OPD coordination for the following reasons:

- The recent election of a new bureau of the Inclusive Platform for Organizations of Persons with disabilities has encouraged OPDs/CSOs that had quit the platform because of alleged mismanagement of the former leadership to regain hope and interest in coordinated inter-OPD action.
- The positive social interactions between OPDs during the CRPD induction training and consultation workshops as well as their passion and commitment to defend their rights and collaborate amongst themselves to advance their welfare is an opportunity to build on. For example, following the CRPD consultation workshops, an OPD CRJAC travelled over 1,314 km from the capital city - Yaounde (Centre region) to Maroua (Far North Region) where they collaborated with another OPD – APPIPDA by providing 200 white canes to the visually impaired.

**c) Strong anti-discriminatory legal provisions are curtailed by lack of knowledge by right holders and duty bearers, limited legal specialists and cultural perceptions**

The Cameroon's anti-discriminatory legal provisions pertaining to persons with disabilities are relatively strong. However, they are not always implemented due to some gaps:

- Ignorance of the law is its first level of violation and that is the case in Cameroon. The limited knowledge of society on the legal non-discriminatory provisions related to persons with disabilities stems in part from inadequate communication on the law. The law must be communicated in simple and innovative ways for it to be understood.
- Secondly, there are insufficient monitoring and legal enforcement mechanisms for disability inclusion within public institutions such as the CHRC. Also, monitoring and legal enforcement within ministries, schools, hospitals etc. are insufficient. There is also insufficient support to OPDs' coordination organs to monitor implementation of disability inclusion. Even within the judicial system (courts – first instance, appeal and supreme), there is also a deficiency of legal specialists on disability law to protect and defend the rights of persons with disabilities.

**d) Limited political participation of persons with disabilities reinforced by limited accessibility and insufficient inclusive services, discrimination**

There principal gaps which account for the limited participation of persons with disabilities in Cameroon have been identified as follows:

- Insufficient legal provisions by ELECAM to ensure a more significant participation of persons with disabilities in political leadership positions;<sup>25</sup>
- Insufficient access to information, caused by an inaccessible oral and written means of communication; [Accessibility]
- Unequal access to quality education [Accessibility/inclusive services]
- Lack of employment opportunities: a majority of persons with disabilities have limited access to training opportunities, and as a result, many are under skilled and consequently not employed, without adequate financial means.
- Inaccessible physical premises in many public infrastructure.
- Negative perceptions which falsely assume that persons with disabilities are unable to make any significant contribution to the society. This engenders discrimination and marginalization. [Discrimination]

**e) Complex and unknown processes on assessment and referral services leading to exclusions and inaccessibility to legally due support**

Assessment and referral services are essential in ensuring that persons with disabilities are identified and have access to the support services that are required to ease their integration in society. However in Cameroon, the process for assessment and referral services are complex and not always well known leaving many persons with disabilities discouraged and excluded.<sup>26</sup>

The following gaps depict the situation:

- Insufficient clarity on the assessment and referral system.<sup>27</sup> Even with the imminent introduction of biometric disability card through the MINAS-DGSN agreement, there will be need to streamline the process and make it easier while properly communicate on the modalities for obtaining this card.
- Insufficient inclusive educational opportunities for persons with disabilities. The 69 pilot schools at Primary level is clearly insufficient.
- Insufficient inclusive employment incentives and policies for persons with disabilities;

---

25 OPDs have been strongly advocating for a revision of the electoral code and electoral procedures which will compel the Elections body- ELECAM to admit electoral lists for municipal elections only if they have at least one person with disabilities. So far their advocacy has been unsuccessful.

26 Confer Annex A, p. 44 on the difficulties faced by Pelagie (a young girl with disabilities) to establish a disability card and access disability support services.

27 Confer Annex 1 for a story on the difficulties experienced by a PWD in relation to the assessment and disability system.

- Insufficient financial budgeting processes that can take account of disability support services and accessibility in view of reducing the financial burden on persons with disabilities;

## 5. Key Recommendations

1. The UN and its development partners should support CONRHA in organizing at least three working sessions per year<sup>28</sup> and getting its decisions to be adopted by the Office of the Prime Minister and/or the Presidency and formulated thereafter as instructions to be implemented by all other ministries in all sectors of development.
2. The UN and development partners should support the ministries of public works, communication and information technologies, education, health and employment in undertaking surveys for disability statistics.
3. The UN and development partners should support the National Institute of Statistics and the Census Bureau (BUCREP) in ensuring that the planned 4<sup>th</sup> Census on Population and Housing mainstreams best practices for obtaining disability disaggregated data.
4. The UN and development partners should provide financial, human, material and managerial support to the two principal Inclusive Platforms of OPDs in order to strengthen their contributions to advancing disability rights in Cameroon.
5. The UN and development partners should support the government and OPDs in developing simple and innovative ways of communicating the non-discriminatory provisions of the CRPD to the public, schools and hospitals in order to combat stigmatization and exclusion.
6. The UN and development partners should support the CHRC and the legal personnel of the courts in monitoring and enforcing mechanisms for disability inclusion. The UN and development partners should equally strengthen legal aid CSOs' capacity in monitoring disability inclusion and defending the rights of persons with disabilities whilst creating a network of disability-inclusion right defenders and legal experts.
7. The UN and development partners should support ELECAM in ensuring a more proactive registration of persons with disabilities as candidates and voters in national and local elections. The UN and development partners should also support ELECAM in implementing disability-inclusive policies for a more significant ascension of persons with disabilities to political leadership positions.<sup>29</sup>

---

<sup>28</sup> CONRHA currently holds once a year which participants at the workshop deemed insufficient.

<sup>29</sup> OPDs have been strongly advocating for a revision of the electoral code and electoral procedures which will compel the Elections body- Elecama to admit electoral lists for municipal elections only if they have at least one person with disabilities. So far their advocacy has been unsuccessful.

8. The UN and development partners should support the national media outlets (Cameroon Radio Television and Cameroon Tribune Daily) in publishing in accessible formats for all persons with disabilities and support the Ministry of Communication in publishing official texts in accessible formats.
9. The UN and development partners should support the Ministries of Secondary Education in setting-up pilot inclusive education within schools as the government is currently doing at the level of basic education.
10. The UN and development partners should support the Ministry of Employment and Vocational Training as well as business incubators in developing training and employment opportunities for persons with disabilities. The UN should equally support the Ministry of Employment and Vocational Training in undertaking an analysis of the most effective approaches for disability inclusive employment by the private sector and also through self-employment of persons with disabilities in the informal sector. The reason being that the informal sector is way larger than the formal sector in Cameroon.
11. The UN and development partners should provide support to the Ministries of Public Works and of Public Contracts in enforcing the circulars and guides pertaining to disability inclusion when building public infrastructure.
12. The UN should support the Ministry of Social Affairs in carrying out campaigns aimed at eliminating negative perceptions which falsely assume that persons with disabilities are unable to make any significant contribution to the society.
13. The UN should support the Ministry of Social Affairs in streamlining, simplifying and clarifying the disability assessment and referral systems in Cameroon. The UN should equally support the Ministry of Social Affairs in properly communicating on the process for obtaining the biometric disability card.
14. The UN should support the Ministries of Economy and of Finance in undertaking an analysis on best practices for mainstreaming disability inclusion in budgetary and public expenditure processes in Cameroon.

## **Bibliography**

- Boyco D., Elbers W. & Auma Okwamy A., 2019. How inclusive is the disability movement? The case of North-West Cameroon. <https://www.barriersfree.org/uploads/media/5d679721c909a>
- Cameroon, (1983). Law No. 83/13 of 21 July 1983 laying down conditions for the protection of disabled persons. Yaounde: The National Assembly.

- Cameroon, (1983). Law N°.83/013 of 21 July 1983 relating to the protection of handicapped persons. Yaounde: The National Assembly.
- Cameroon, (1998). Law No. 98/004 of 14 April 1998 to lay down guidelines for education in Cameroon. Yaounde: The National Assembly.
- Cameroon, Ministry of Social Affairs (2008). L'accessibilité des personnes handicapées aux infrastructures et édifices publics ou ouvertes au public: Guide pratique et mode d'emploi.
- Cameroon, MINESUP (2015). Prise en Compte des personnes handicapées dans le système éducatif Camerounais. Yaounde: Ministry of Higher Education.
- Cameroon, (2010). Law No. 2010/002 of 13 April 2010, relating to the protection and welfare of persons with disabilities. Yaounde: The National Assembly.
- Cameroon, (2011). Law No. 2011/018 of July 2011 relating to the organization and promotion of sports and physical activities. Yaounde: The National Assembly.
- Cameroon, (2018). Decret No. 2018/6233PM du 26 Juillet 2018, Fixant Modalités d'application de la loi No. 2010/002 du 13 avril 2010 portant protection et promotion des personnes handicapées
- Hallahan, D.P., Kauffman, J.M., & Pullen, P.C. (2012). *Exceptional learners: An introduction to special education*. Boston: Pearson.
- Islay, M. et al., 2020. Multidimensional poverty and disability: A case control study in India, Cameroon, and Guatemala. Elsevier Public Health Journal.
- KD4, 2018. Study on Disability stigma in developing countries conducted by the Brigitte Rohwerder Institute of Development Studies. K4D.
- Jolley E, Lynch P, Virendrakumar B, Rowe S, Schmidt E., 2017. Education and social inclusion of people with disabilities in five countries in West Africa: a literature review. Disability and rehabilitation.
- Mandrilly-John A., 2010. Disability and the media: how disability is dealt with in the West African media - Burkina Faso, Mali, Niger, Senegal, Sierra Leone and Togo.
- OHCHR, 2019. Special Rapporteur on the rights of persons with disabilities General Assembly at its 74th session. <https://www.ohchr.org/en/issues/disability/srdisabilities/pages/srdisabilitiesindex.aspx>
- Opoku E; & Moitui, J. N., 2015. Towards an Inclusive Society in Cameroon: Understanding the Perceptions of Students in University of Yaounde II about Persons with Disabilities. Disability, CBR & Inclusive Development.
- Opoku et al., 2016. Lives of persons with disabilities in Cameroon after CRPD: Voices of persons with disabilities in the Buea Municipality in Cameroon.
- Perini F., 2014. *African Disability Forum: A New Opportunity For Africans With Disabilities*. <http://www.globi-observatory.org/african-disability-forum>

Powell, R.G., & Powell, D.L. (2010). *Classroom communication and diversity: Enhancing instructional practice*. New York: Routledge.

Sicat L. J., 2018. Drawdisability: Storytelling and Drawing As Tools For Inclusion

Sightsavers, 2018. The participation of men and women with disabilities in political life in Cameroon:

**<https://research.sightsavers.org/wp-content/uploads/sites/8/2019/07/Baseline-report-on-political-participation-in-Cameroon-French-translation.pdf>**

UNICEF, 2016. The Washington Group/UNICEF Module on Child Functioning. UNICEF.ORG.

UNESCO, 2021. Building Disability Inclusive Education through Data. UNESCO, Bangkok

UNESCO, 2017. Education For Persons With Disabilities (UIS Fact sheet No 40) UNESCO.

UNO, 2015. Report of the Inter-agency and Expert Group on Sustainable Development Goal Indicators (E/CN.3/2016/2) UN digital Library.

UNSD, 2016. Disability statistics and measurement: National experiences and opportunities for the 2030 Agenda for Sustainable Development.

**<https://www.un.org/development/desa/disabilities/issues/statscomm>**

UNSDG, 2021. Development Partnership Framework Joint Work Plans 2016-2018. Annual Joint Work Plans Menu of Results; UNDP.

UNSDG, 2020. UN Country Team Accountability Scorecard on Disability Inclusion. UNO.

UNSDG, 2017. UNCT Serbia Annual Coordination Profile. UNO

Villamero, Jr. R., 2018. Disability and The Diplomatic Community: A Panel Discussion.

**<http://www.globi-observatory.org/disability-and-the-diplomatic-community-a-panel-discussion>**

Virendrakumar B. et al., 2018. Disability inclusive elections in Africa: a systematic review of published and unpublished literature. *Disability & Society*.

### **Online sources**

[http://www.minas.cm/images/Documents/Legislation/loi\\_2010\\_protection\\_%20personnes\\_handicapees.pdf](http://www.minas.cm/images/Documents/Legislation/loi_2010_protection_%20personnes_handicapees.pdf).

[https://cameroon.un.org/sites/default/files/2020-01/RNDH%202019\\_0.pdf](https://cameroon.un.org/sites/default/files/2020-01/RNDH%202019_0.pdf)

**[https://www.un.org/development/desa/disabilities/wpcontent/uploads/sites/15/2019/11/](https://www.un.org/development/desa/disabilities/wpcontent/uploads/sites/15/2019/11/Cameroon-decree-of-application-2010-Law-English-version.pdf)**

**[Cameroon-decree-of-application-2010-Law-English-version.pdf](https://www.un.org/development/desa/disabilities/wpcontent/uploads/sites/15/2019/11/Cameroon-decree-of-application-2010-Law-English-version.pdf)**

## **ANNEXES**

## **I. Some challenges recounted by persons with disabilities**

### **II. Email from Pelagie, member of the OPD “Handicapée et fiers” [Translated from French as “Proudly disabled”] on the tediousness of establishing a certificate of disability and having a disability card.**

I suffer from paraplegia (paralysis of the lower limbs). In 2021, I decided to update my national disability card in order to acquire a biometric one. I was given regarding the list of documents I need to provide in order to have one issued:

- 1) an unstamped request addressed to the regional delegate of social affairs
- 2) a medical certificate
- 3) a certificate of residence
- 4) a copy of the CNI
- 5) Two passport photos 4x4.

I put together the file. I went to the social center of Yaoundé 5 to submit it. My file was not accepted because:

- 1- I was asked to replace the classic medical certificate that I introduced in the file by a special medical certificate issued by an approved center, in this case the National Center for Disabled Persons of Etoug-ébé. I called Etoug-ébé to find out more before going there. I was told that :
  - If I am still in possession of the booklet established 10 years ago which contains my patient ID number, the new certificate will be free;
  - Without this booklet I would have to pay 500 francs (1 USD);
  - Without the ID and the booklet, I would have to pay 4000 francs (8 USD).

Surprised, I asked what the money would be used for, since the certificate costs just 1000 francs and the special one is supposed to be free. I was told that it was a "file opening fee". Not being in possession of this amount, I gave up.

- 2- I was asked to attach a certificate of residence instead of the location map and the Electricity invoice that I had put on it. I was asked to photocopy a form of this certificate of domicile. To have it signed by the district chief who attests that I reside in the district he administers. Then to have it signed by the divisional officer, who should attest that the chief of the district who signed it is indeed in his administrative locality.

Considering my situation of person with reduced mobility, moving in wheelchair, to meet all these persons just to have 2 signatures in order to validate only 1 document of all the file, seemed tedious to me.

Later, I was further informed that before the certificate is issued, I would have to undergo an investigation to assess my vulnerability. And I was told that I would have the old model of card, because the biometric and computerized cards are not yet available.

### **III. Email from Joy, Teacher based in Maroua, Far North of Cameroon and Leader of the Association for the Promotion and Insertion of Persons Living with Disabilities and Minority Groups (APIPDA) in Cameroon on the educational challenges faced by Children with disabilities in that part of the country.**

The conditions under which children with visual and hearing impairment study in the Far North Region is a call for concern.

Firstly, we do not have any braille or sign language interpreter in any of the primary or secondary inclusive schools in the region. A few private primary school initiate children in the use of braille and sign language. There are no transcribers in secondary schools. This explain why is very difficult for the teachers to correct the assignment of these students. The script of the visual impairment children are corrected only during the continuous assessment or final year exams.

For the hearing impaired, no one has ever tried to sign to them. They simply take the notes of their friends and copy in their own books and at their private time. They have to study on their own from form one to upper sixth if they choose to study.

Another call for concern is that of didactic materials. We do not have any computer adapted to the need of the visual impaired students in all the inclusive schools. The visual impaired students do ICT only in theory and no practical.

Secondly, with the arrival of the COVID-19 pandemic, the condition of studies become complicated since the hours for join classes have been reduced. Most teachers teach online or give assignment. But it is impossible for the visual impaired students to do the assignment since it is not in braille and more often than not the assignment are send online. Most of them do not have access to android phones, tape recorders or megaphones that are very vital tools for the education of any visual impaired person.

Slate and status and braille papers are not only unavailable but also very expensive. We do not have even a single book in braille in all these schools and not even any past GCE papers in braille. The visual impaired students only feel what the question look like in the day of the exams or depends on their friends for assistance.

Also culture and prejudice has a lot of impact in the lives of persons living with Disabilities in the far north region. The culture first do not encourage western education. Not to even talk of the education of a child born with a Disability. Special needs education is very expensive. Many parents having children with Disabilities do not see the need of forgoing the family's income for a child born with a disability. Secondly, many people here see disabilities as punishment from God. Others simple see it as people who are unclean and do not merit living among people. It is important to know that we study in order to be able to insert ourselves in the society. In the far north region, this is far from being true with the visual and hearing impaired.

Visual and hearing impaired that are educated find it difficult to find jobs. Employers find it difficult to recruit them. They see only the impairment and forget about other potential. Secondly, the method that most companies call for opportunities is through writing and pasting on their notice board that is discriminatory to the visual impaired. Beside an educated visual impairment person cannot write a complaint or an application in braille and deposit in a law court or anywhere and it is accepted.

Sign language is a language just like English and French. But a hearing impaired person cannot express himself in any office in sign language and is safe. What I mean is that until our society will decide to be inclusive, braille and sign language will have no place because it does not save the learners. All shows that much has been done but much is still to be done in the far north region as long as inclusion is concerned.

#### **IV. Email from Modika .F.Hilda, Co-Founder Social Change and Establishment Centre for Youths and Disabled Persons (SCECYDPs), OPD based in Buea, South West concerning the implementation challenges of the provisions of the 2010 Law and some suggestions.**

##### **1. Health**

- As a person with disability, when sick, there is a department in the hospital (General hospitals only) known for affairs concerning them( Social Action Service Unit)
- You have to meet the chief of service, who will then issue a note or intervene on behalf of persons with disabilities by giving instructions on how to handle them reduced their money as well as treat them for free. This is done only when you must have obtained your disability Card. We need to know that, drugs are not for free. Also, during this period, food is free after you must have followed the right procedures.

##### **Suggestions**

- Emphasis can be made through media to educate the public more about this health facilities;
- Health workers can get to the suburb to identify persons with disabilities and their conditions while working with the Social Affairs on disability production cards;
- A document should be produce and sent to all sectors of life with special emphasis laid on knowing some of their rights and how it has being violated.

##### **2. The Right to Education**

- The law states that, PWDs need to have subsidized education. A decree was passed by the president for government primary schools to be free for persons with disabilities while secondary is subsidized. This means, you either pay part or partial of the school fees required.
- The above is effective only when, the person with disability is coming from a center like Bulu Blind or has gone through his or her training at the primary level and wants to further their education only in a government school.
- If your father or mother is a handicap, you have the right to benefits from this subsidized education.
- What is the procedure?

##### **Provide these documents**

- Photocopy of your birth certificate
- Disability card (Photocopy)
- Photocopy of your progress report
- A hand written application to the delegate of Social Affairs or the chief of Social Center
- The chief of Center has the right to follow-up after the child must have indicated his/her school interest (government schools only)

- The delegate of Social Affairs or Chief of Center will have to send a note to the schools and then made an appointment to meet with the principals and indicate the number of children who wants to enroll for the academic year.
- When the school must have gone through the files and selection is made, admission letters are sent to inform them of their status.

N.B: In some cases, when you must have written the application letter, combine the docs (photocopy and send to the human rights office).They will then intervene in case Social Affairs takes no action.

- You have the right to write an application for a free hostel while the Social Service visas the letter. You need to identify the type of disability you have in order for them to allocate you a suitable hostel

### **Suggestions**

- Shuffle buses should take note of specific disability cases
  - Specialized centers need to be in place to train teachers on specific disability cases;
  - Techniques to be adapted and adopted to the learning abilities of persons with disabilities of different kind need to be made available;
  - Computers need to be installed with talking programs and devices for facilitating learning;
  - There is need for data collection on persons with disabilities (various types);
  - Prices of didactics materials for PWDs need to be harmonized;
  - There is need for skillful teachers who are able to deliver training of braille. SCECYDPs has competent teachers such as: Mr. Ako Henry Eta and Mr. Lyonga Paul Mbella.
  - There is need for elevators especially at the higher education center. In the absence of elevators, buildings should have ramps;
  - Also, campus should be provided in facilitating specific disability cases like the visually impaired and those on wheelchairs in accessing the infrastructures or classroom;
  - There should be an app or a talking device to indicate or permit a visual impaired to get on track. Even those on wheelchairs need to install device to regulate the wheelchairs for easy access transportation.

### **3. Employment**

- Persons with disabilities have the right to be employed. Before they need to be employed, they should be trained in different sectors that suit their interests.
- They should be allowed to go for vocational training and centres to be train and empowered. Special attention is needed for those who are willing to carry on with the training i.e. necessary facilities
- There are some jobs that their disabilities does not permit them to do
- There is need for a normal salary as non-disabled persons
- The government has a socio-economic committee which is there to help persons with disabilities to be social and Economic empowered

### **Procedures**

-When looking for a job, persons with disabilities need to have

- A photocopy of your disability card
- An Application Letter
- A CV

- Some documents from the labour office informs PWDS on their rights and what to do in case of violation.

#### **Suggestions**

- PWDS should be treated equally that is, those who are skilled and unskilled;
- Government should bring out statistics on the various jobs choices and support policies for their placement in rightful positions based on their skills e
- Persons with disabilities need to be trained;
- A contract form needs to be made available with a lawyer following issues pertaining only to persons with disabilities. This is going to stop exploitation and violation of their rights.

#### **4. Political Affairs**

- Persons with disabilities have the right to take part in election

#### **Suggestions**

- A door to door sensitization can be in order to educate persons with disabilities on the importance of election and the role they can play;
- Assigning persons living with disabilities to also be members to moderate election at polling stations;
- Mobile units for the production of voter' cards can be implemented to ease voting of PWDS;
- Preference should be given to them during voting or pooling stations because of their disabilities;
- During elections, voting cards and materials can be done in Braille to facilitate the visual impaired (Biometric Cards);
- Strengthen accessibility to polling station;
- A particular department should be created for persons with disabilities especially at the venue of ID card production;
- Encourage and motivate persons with disabilities to join politics.



**UNPRPD**

Partnership on the Rights of Persons with Disabilities

[www.UNPRPD.org](http://www.UNPRPD.org)



Follow us on Twitter @unprpd