

Welcome to

Training on “Disability Inclusive Data Collection through the Washington Group Questionnaire (WGQ).”

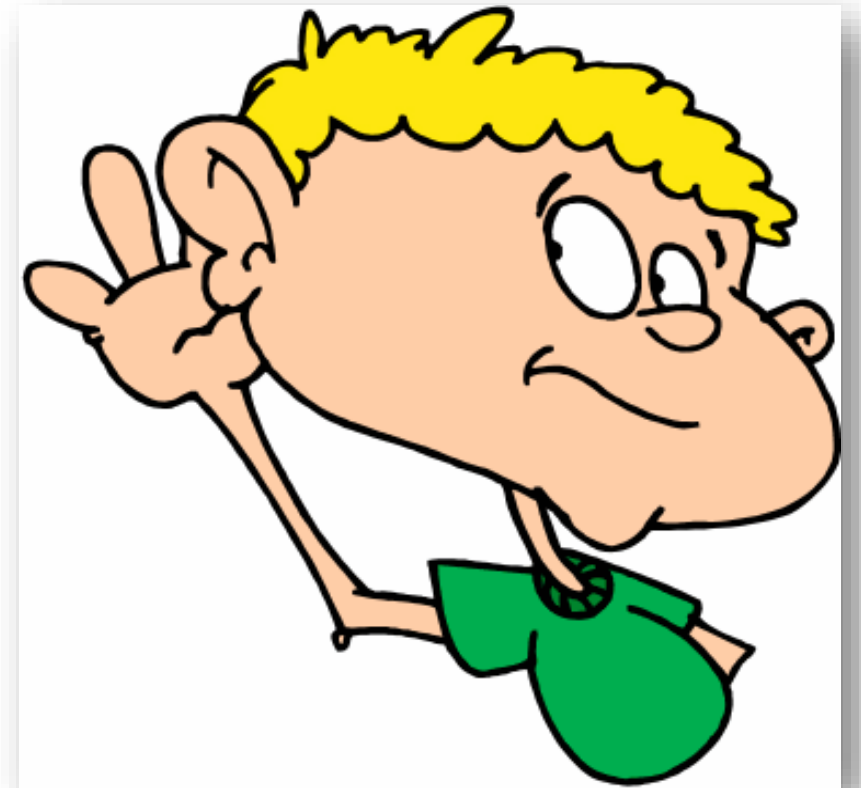
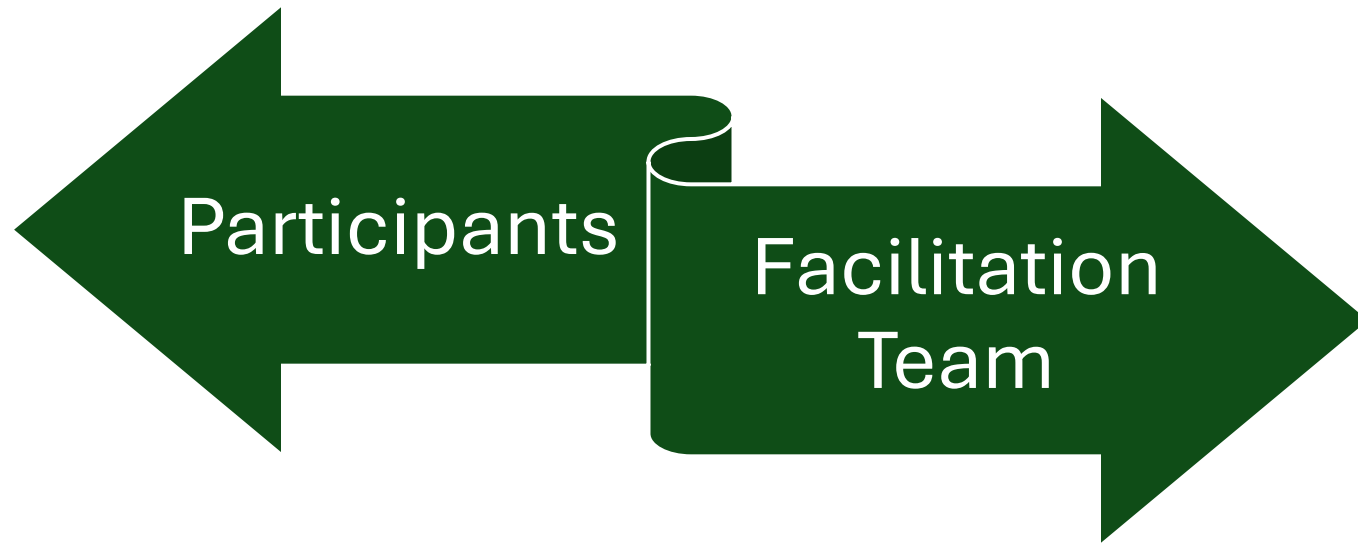
Conducted by:

CDD and CBM Global

Date:

09, October 2024

Introduction







?

Training Expectation



Training Pre-Test

Objective

Understand the basic concept of disability , Types of Disability

Session 01

**Disability Orientation and Types
and Model**

Presented By:

**Sk. Golam Mohiuddin
Inclusion officer, CDD**

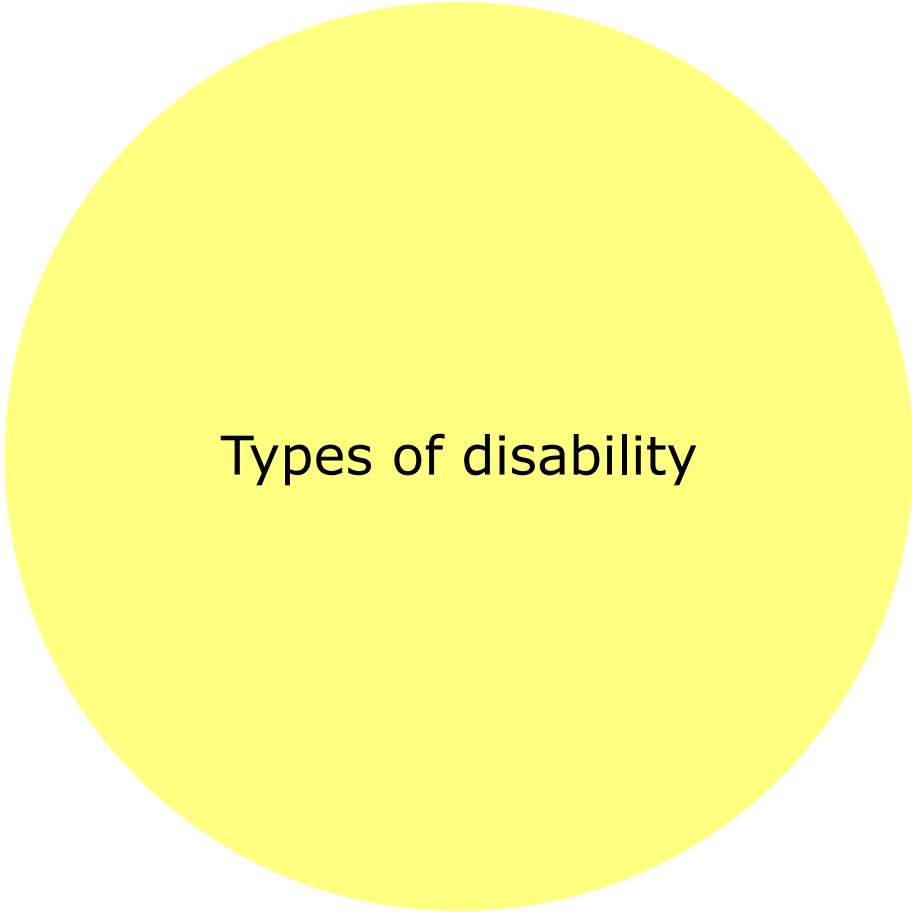
**What is
Disability
?**



INTRODUCTION TO DISABILITY



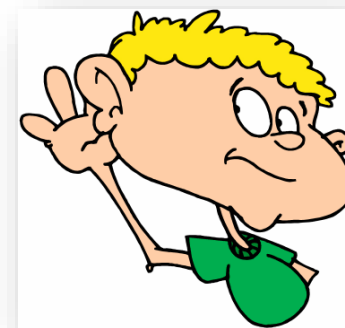
Understanding
disability



Types of disability

Disability and Persons with Disabilities...

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- (UN CRPD, Preamble-e)
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. (UN CRPD, Art.1)



Impairment x Barriers = Disability

প্রতিবন্ধী ব্যক্তির অধিকার ও সুৰক্ষা আইন, ২০১৩

“প্রতিবন্ধিতা” অর্থ যেকোন কারণে ঘটিত দীৰ্ঘমেয়াদী বা স্থায়ীভাবে কোন ব্যক্তির শাৰীৰিক, মানসিক, বুদ্ধিগত, বিকাশগত বা ইন্দ্রিয়গত ক্ষতিগ্রস্ততা বা প্রতিকূলতা এবং উক্ত ব্যক্তির প্রতি দৃষ্টিভঙ্গিগত ও পরিবেশগত বাধার পারস্পরিক প্রভাব, যাহার কারণে উক্ত ব্যক্তি সমতার ভিত্তিতে সমাজে পূৰ্ণ ও কাৰ্যকর অংশগ্রহণে বাধাপ্ৰাপ্ত হন;



UNCRPD

- Physical Disability
- Intellectual Disability
- Psychosocial Disability
- Sensory Disability

Types of Disability....

As per the RPPD Act-2013:

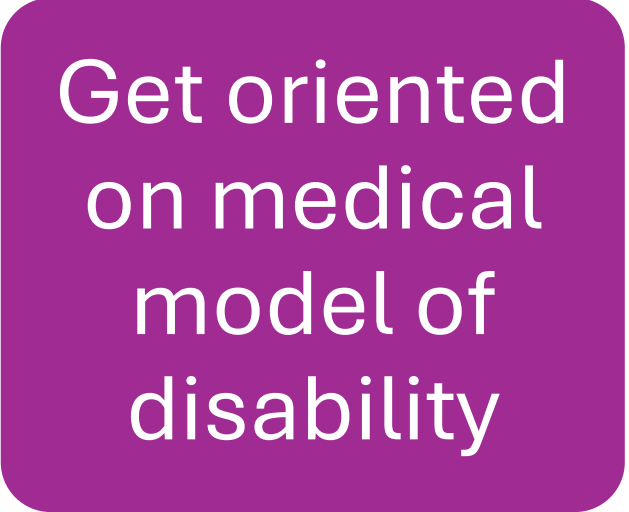
- Autism
- Physical disability
- Mental illness leading to disability
- Visual Disability
- Speech Disability
- Intellectual Disability
- Hearing Disability
- Deafblindness
- Cerebral Palsy
- Down Syndrome
- Multiple Disabilities
- Others

Models of disability

Objectives

At the end of short session, learners shall:

Get oriented
on medical
model of
disability



Get oriented
on Social
model of
disability



Understand
the
implication



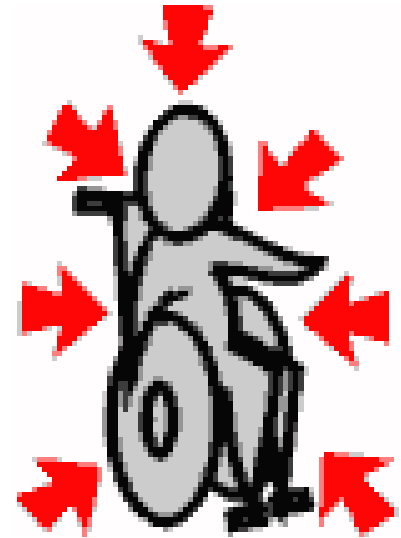
Charity Model of Disability

- Sees people with disabilities as victims of their impairment.
- Their situation is tragic, and they are suffering.
- Consequently, they need special services, special institutions, etc., because they are different.
- Sometimes people with disabilities themselves adopt this concept, in which case they usually feel “unable” and have a low sense of self-esteem.



Medical Model of Disability

- Believes that disabled people are ‘abnormal’ or sick, or in need of treatment to fix them so that they can become as ‘normal’ as possible. This implies that disabled people are in some way ‘abnormal’
- Puts energy and resources mainly into trying to cure the disabled person. This pushes disabled people into the passive role of patients.
- In this model, the person in question has to change, not the society or the surrounding environment. Does not try to remove discriminatory barriers or change society’s attitudes or behaviors.
- Places control with doctors and professionals who make decisions about disabled person’s bodies.



Rights Model of Disability

- Believes that disability as an important dimension of human culture, and affirms that all human beings, irrespective of their disabilities, have certain rights that are inalienable—are the preferred models for disability inclusion.
- This model also believes that:
 1. Impairment does not hinder human rights capacity
 2. The human rights model values impairment as part of human diversity





THANK YOU



HEALTH BREAK



Objective

Understand the meaning of Inclusion, Barriers & Enablers

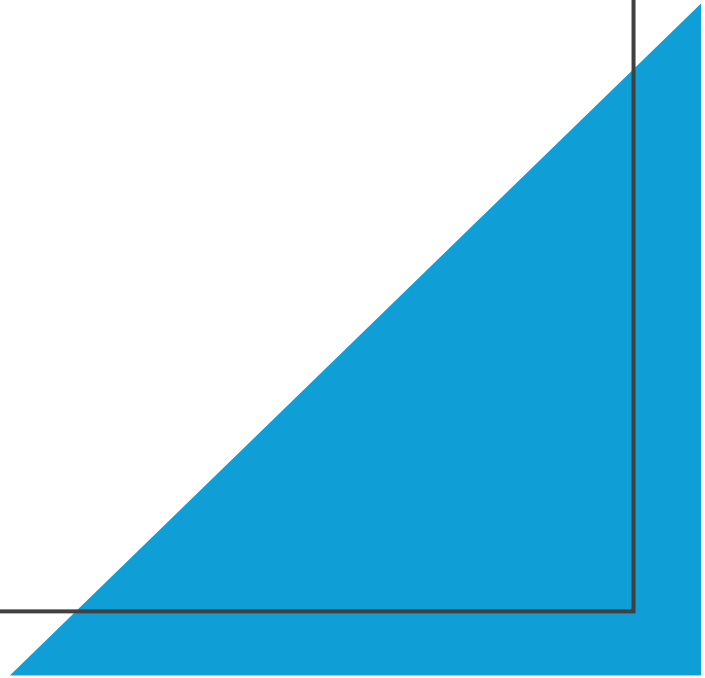
Session 02

Barriers & Inclusion

Presented By:

**Md. Abdul Hai
Inclusion officer, CDD**

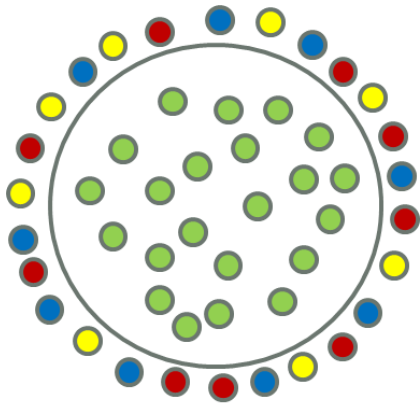
What comes to your mind when you hear the term “disability inclusion”?



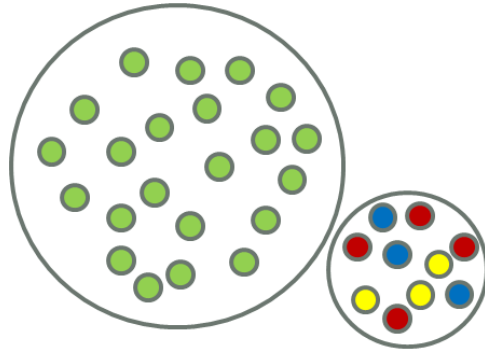
Inclusion



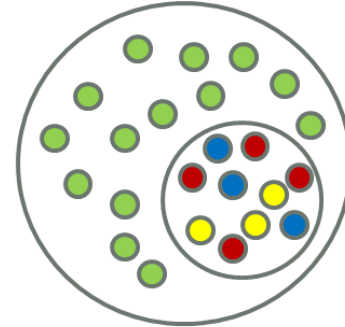
Is achieved when ALL persons **meaningfully participate** in all **their diversity**, when their **rights** are **promoted**, and when **disability, age and gender related concerns** are **addressed**



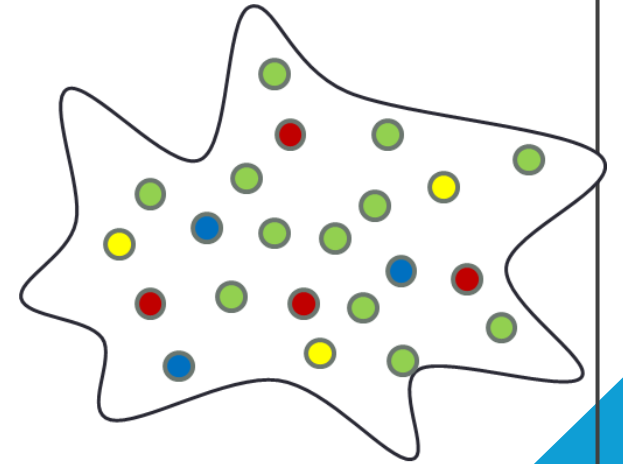
Exclusion



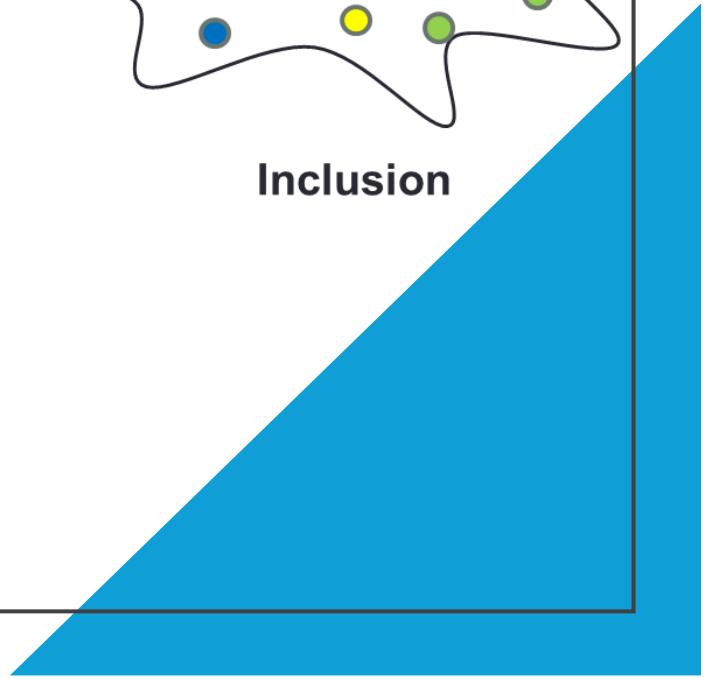
Ségrégation



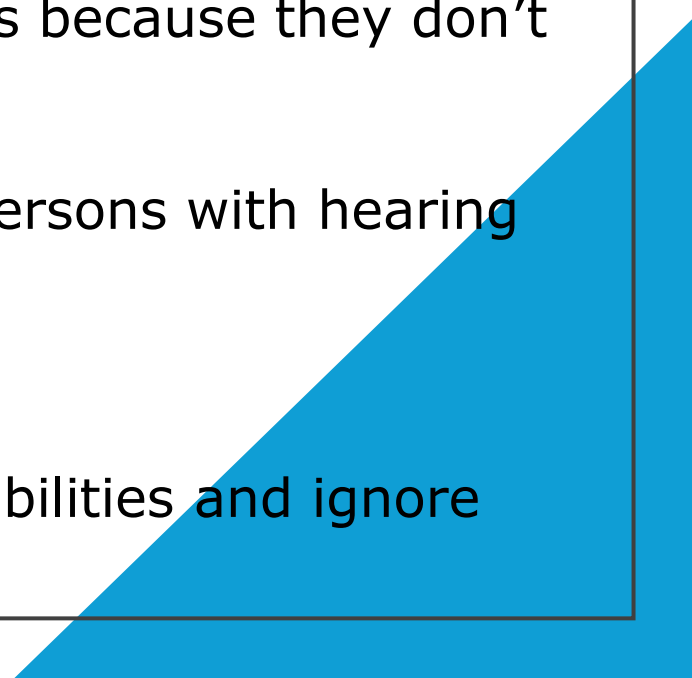
Intégration



Inclusion



Examples of exclusion

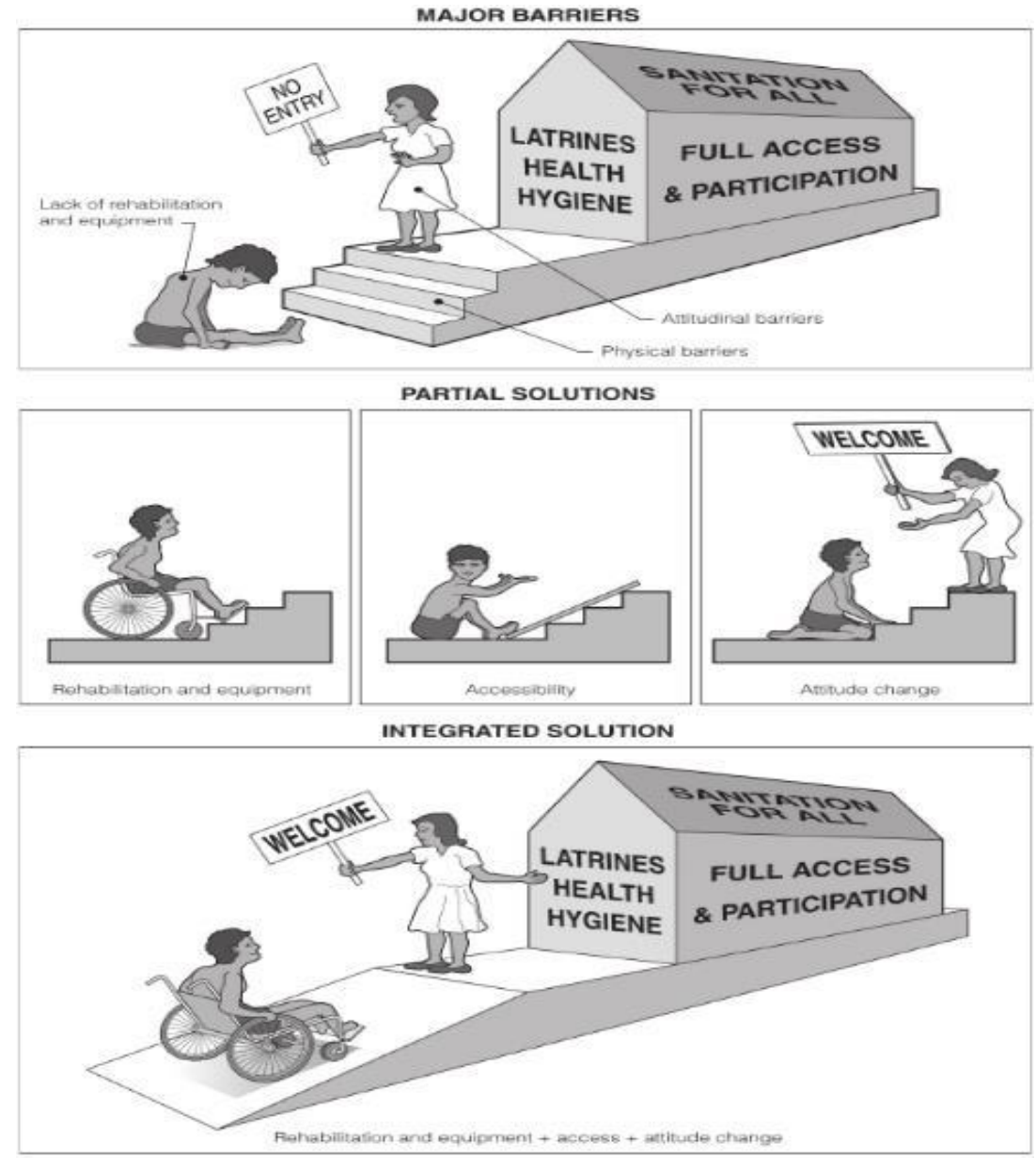
- Excluded from participation because persons with disabilities are considered not able to understand, don't have an opinion, or can't communicate
 - Children with disabilities are hidden by their families and may not get vaccination or go to school
 - Persons with disabilities are not aware of available services because they don't receive accessible information
 - Feedback system is not accessible (eg, only hotlines) so persons with hearing impairments can't provide feedback or complains.
 - Facilities are not accessible
 - Staffs doesn't want to receive referral of persons with disabilities and ignore their needs
- 

- **DISCUSSION: 10 mins**
- **Please share any other form of exclusion of persons with disabilities exist in the humanitarian response**

• Barriers to Inclusion

- Attitudinal barriers
- Physical/ environmental barriers
- Institutional barriers
- Communication barriers

**Impairment + Accessible environment
= Inclusion**



Physical Barriers	Institutional Barriers	Communication Barriers	Attitudinal Barriers
<p>1. Relatively easy to identify once your are aware</p> <p>2. Faced by persons with disabilities, especially those with limited mobility trying to access:</p> <ul style="list-style-type: none"> Schools Health centres Transportation Toilets & Showers Housing Places of worship 	<p>1. Segregate persons with disabilities in many areas:</p> <ul style="list-style-type: none"> Legal system Employment laws Education policies Social systems NGO policies! 	<p>1. A lack of information in different formats.</p> <ul style="list-style-type: none"> Information only in written format or only spoken Lack of sign language interpreters Lack of Braille or large print 	<p>1. Prejudice, discrimination and stigma</p> <p>2. Negative language reinforces prejudices</p> <p>Persons with disabilities may be assumed to be:</p> <ul style="list-style-type: none"> “Incapable , dependent” “Of low intelligence” “In need of a “cure” “Needing “special services”



Photo:
CBM

IMPAIRMENT
+
BARRIERS
=
DISABILITY



Photo: CBM

**REDUCING
BARRIERS**

**REDUCES
DISABILITY**



Objective

**Know the Communication Etiquette
Able to better communicate with the Persons with
Disabilities**

Session 03
Communication etiquette

Presented By:
Sk. Golam Mohiuddin
Inclusion officer, CDD

What is
Communication?

- **Communication is simply the act of transferring information from one place, person or group to another.**

What is
Etiquette?

- **The customary code of polite behavior in society or among members of a particular profession or group.**



Best approach

- The accepted terminology, ‘person with a disability’, puts the emphasis on the person, not the limitations or disability. Treat people as people.
- Above all, use common sense, be respectful, polite, considerate, offer assistance, communicate and don’t hesitate to ask questions.
- Treat all people in the same way you would wish to be treated yourself.



Preferred terms	Avoid
People with disabilities; child with a disability	disabled, handicapped, disabled child, abnormal, victim, suffering from, afflicted with
Person with an intellectual disability	Retarded, mentally defective, slow learner
Deaf person, sign language user, hard of hearing, Deaf community	Hearing impaired, the Deaf, Deaf and dumb, mute
Person with a psychosocial disability, mental health issue	Mentally ill, crazy, schizophrenic,
Wheelchair user	Wheelchair bound, confined to wheelchair
Person who is blind, person with low vision, person with vision impairment	The Blind, Person without sight, person with visual impairment
Has (a health condition), experience, lives with	Suffers from, afflicted with, victim of
Do you have any access requirements?	Do you have a disability?

What to do: People who use aids to move around

- Always ask a person using a wheelchair, if he or she would like help before helping.
- Your help may not be needed or wanted.
- Don't hang or lean on a person's wheelchair.
- If your conversation last more then a few minutes think about sitting down with them



What to do: People who have Hearing Impairment

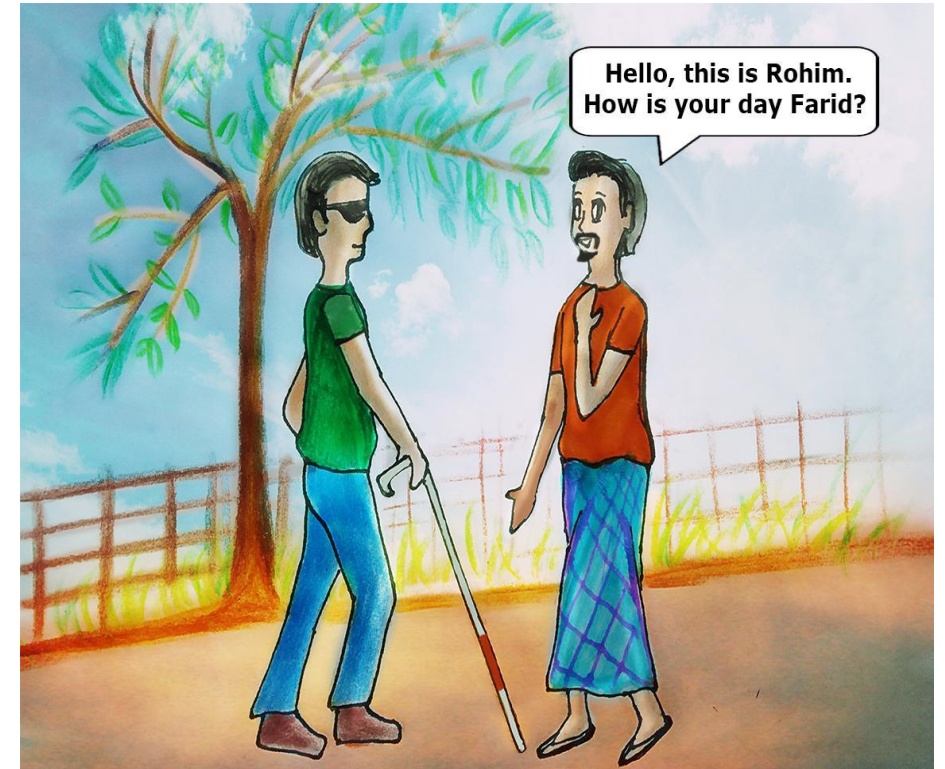
- Always make eye contact with the person you are talking to.
- Face the person you are talking to and speak slowly and clearly. Do not yell at them.
- Be flexible
- Pencil and paper, if communication breaks down
- Speak to the person, not their interpreter



**Speak to the person with impairment
not to their interpreter/s.**

What to do: People who have a Vision Impairment

- Always let the person know that you are there.
- When conversing in a group, remember to identify yourself and the person to whom you are speaking
- Use the persons name you are speaking to and speak directly to them
- Be descriptive when giving directions.



What to do: People who have a Speech Disability

- Do not finish their sentence for them. Allow them time to say everything they want to say.
- Must be patient.
- Do not make fun of them or copy their speech.
- Never act like you know what a person is saying.
- Ask the person to repeat or rephrase or offer them a pen and paper or use sign language.



What to do: People who have an Intellectual Disability

- Write down things on paper to help them remember it.
- Be patient, flexible, and supportive.
- If a person still does not understand what you are saying, try to say it in a different way.
- Use multiple way(s) to learn them



What to do: People who have a Intellectual Disability

- Repeat what you say or try a different way of saying.
- Keep instructions simple.
- Use pictures.
- Close contact is required, While sharing instructions



Lunch Break



Orientation on Disability Data Collection: Washington Group Short Set- Enhanced

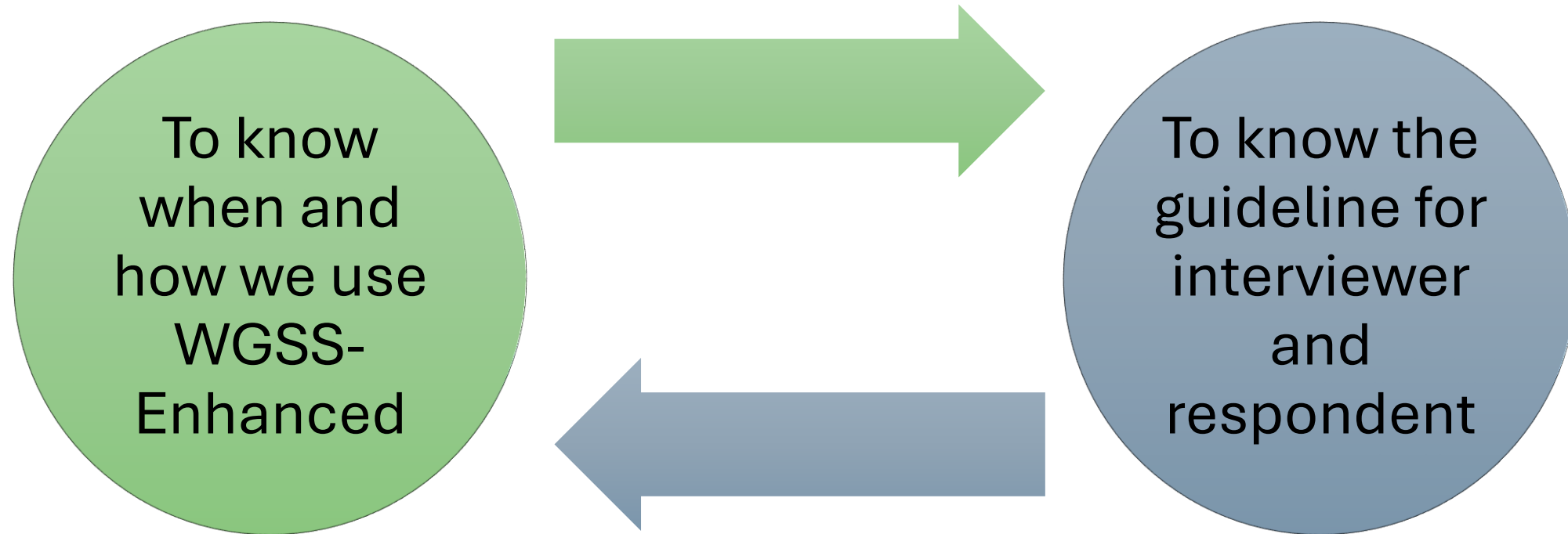


Bringing hope, dignity and meaning to life



Presented by: Md. Abdul Hai
- Inclusion Officer (CDD)

Learning Objectives:



Do any of these people have a disability?



Identifying disability – HOW?



Can't just ask staff (data collectors) to observe who are people with disabilities



Identifying disability – HOW?



Can't just ask someone: "Do you have a disability?"

Because of:

- Stigma
- Risk of causing discrimination
- Everyone has different definitions of 'disability'
- Only a medical professional can diagnose

Identifying disability – HOW?



Could work with DPOs or the disability service providers and use a snowball sampling method

BUT

- This approach may only identify people with disabilities that are already connected and may miss additional people hidden in communities.
- This approach may also miss people who have newly acquired an impairment during the disaster/conflict situation

Identifying disability – HOW?



Use a “functioning” approach and ask questions about the level of difficulty people have doing various activities (or functions), which indicate they have a disability

= the **Washington Group Questions**

Washington group CUT OFFS

- Persons will be considered “with disability” if the response to at least one of the six questions is **“a lot of difficulty”** or **“cannot do at all”**
 - This is the cut off recommended by the UN Washington Group
 - Everyone else will be regarded as “without disability”





Bringing hope, dignity and meaning to life



Washington Group Question

SETS OF QUESTIONS

Children:

- Child Functioning Module
- 2-4 Yrs & 5-17 Yrs

Adults:

- Short Set of 6 questions
- **Enhanced Short Set – short set plus 6 extra questions on upper body mobility, anxiety and depression**
- Extended set- 37 questions

1. Do you have difficulty **seeing**, even if wearing glasses?

2. Do you have difficulty **hearing**, even if using a hearing aid?

3. Do you have difficulty **walking or climbing steps**?

4. Do you have difficulty **remembering or concentrating**?

5. Do you have difficulty (with **self-care** such as) washing all over or dressing?

6. Do you have difficulty **communicating**, for example understanding or being understood?

1. No difficulty

2. Yes, some difficulty

3. **Yes, a lot of difficulty**

4. **Cannot do not at all**

Upper Body Activities

7. Do you have difficulty raising a 2 liter bottle of water or soda from waist to eye level?

1. No difficulty
2. Yes, some difficulty
3. Yes, a lot of difficulty
4. Cannot do not at all

8. Do you have difficulty using hands and fingers, such as picking up small objects, for example, a button or pencil, or opening or closing containers or bottles?

Anxiety

9. How often do you feel worried, nervous or anxious?

1. **Daily**
2. Weekly
3. Monthly
4. A few times a year
5. Never

10. Thinking about the last time you felt worried, nervous or anxious, how would you describe the level of these feelings?

1. A little
2. **A lot**
3. Somewhere between a little and a lot

Depression

11. How often do you feel depressed?

1. **Daily**
2. Weekly
3. Monthly
4. A few times a year
5. Never

12. Thinking about the last time you felt depressed, how depressed did you feel?

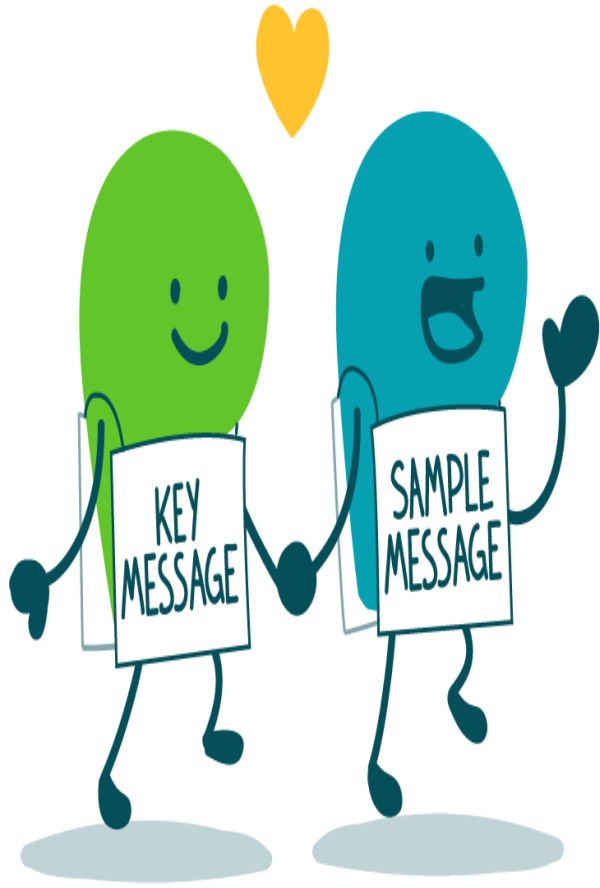
1. A little
2. **A lot**
3. Somewhere between a little and a lot



Bringing hope, dignity and meaning to life



HOW TO ASK THE WASHINGTON GROUP QUESTIONS



Ask with respect:
Interviewees should be treated with respect, and the questions should be asked with dignity.



Don't use the word disability:
Never mentioned
– especially to
introduce the
questions.



Read the questions exactly:

Questions are asked exactly as they are written, including the response categories.



**Don't change
the questions**



Don't give examples:

Repeat the questions if needed, and move on to the next question if the person does not understand.

HOW TO ASK THE WASHINGTON GROUP QUESTIONS:FOR ENUMERATORS



**Don't make
observations**



**Don't translate
on the go**



Asking the questions to a proxy



Bringing hope, dignity and meaning to life



Washington Group Interviewer Guidelines

Respondents

- Respondents do not need to be literate, although, depending on age, maturity and cognitive ability.
- When a respondent cannot answer questions for any of the reasons listed above, a proxy respondent for that person can be interviewed.

Tips on Interviewing People with Certain Kinds of Disabilities

- Interviewing People with Hearing Disabilities
- Interviewing People with Physical Disabilities
- Interviewing People Who Are Blind or Partially Sighted
- Interviewing People with Communication Disabilities
- Interviewing People with Cognitive, Learning or Intellectual Disabilities
- Interviewing People with Emotional or Mental Health Disabilities

**Mock test on WGQs- Short set/
Enhanced Set**



Training Post-Test



A vibrant, multi-colored paint splatter background. The splatters are in shades of purple, blue, cyan, green, yellow, orange, and red, with some black and white speckles. The text "Thank You!" is overlaid in a bold, white, sans-serif font with a slight drop shadow.

Thank You!