

## Tool: Disability sensitive indicators for the Health and rehabilitation sector

*A reminder about definitions used is available at the end of this section*

### In general

If our goal is to include disability in development cooperation, we need to establish disability sensitive indicators. Disability sensitive indicators will be used in combination with:

- Disability sensitive targets
- Disability disaggregated data/ sources of information which are disability sensitive

This tool gives a selection of possible indicators that could be adapted for individual situations depending on the sector and the context. The authors are aware of the crucial nature of indicators; the need to harmonise with other countries, not to increase the burden of work for governments, etc.

*These indicators are presented as a list of options to be used or adapted as and when necessary as disability components and targets are introduced to various projects and sectors.*

### Sample disability sensitive indicators for the health and rehabilitation sector

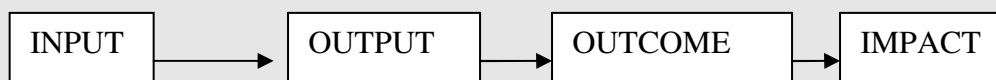
*This does not take health insurance issues into consideration*

Type/level of indicator	Sample disability sensitive indicators
<b>Input</b>	Expenditure on making health services accessible to persons with disabilities Expenditure on health, employment, education and social rehabilitation services for people with disabilities Expenditure on training for health professionals at all levels in disability related healthcare and rehabilitation Investment in disability-inclusive health information systems
<b>Output</b>	Number of or % health facilities accessible to person with disabilities Health information systems inclusive of disability disaggregated data National health related rehabilitation service in place Services for development of assistive devices and technologies

	<p>designed for persons with disabilities in place</p> <p>Number of staff trained (both initial and continuous training) in rehabilitation</p> <p>Number of health professionals trained in disability awareness and ethical standards of care for people with disabilities</p>
<b>Outcome</b>	<p>Health information collected, analysed and reported is disability disaggregated</p> <p>% of people with disabilities with access to health care and programmes</p> <p>% of women with disabilities with access to health care and services in the field of sexual and reproductive health</p> <p>% of people with disabilities with access to health-related rehabilitation services</p> <p>% of people with disabilities with access to assistive devices and technology</p> <p>% of people with disabilities with access to population based health programmes</p> <p>Number of children with disabilities with access to early identification and prevention and services designed to minimise the impact of disability/ impairment</p> <p>Health and health related rehabilitation services are reachable to all population groups (including people living in rural areas)</p> <p>Health and health related rehabilitation services are affordable to all population groups (including people living in rural areas)</p> <p>Health and health related rehabilitation services are physically accessible to all population groups (including people living in rural areas)</p>
<b>Impact</b>	<p>Information is available on access for people with disabilities to the health sector enabling better planning of inclusive health services</p> <p>Persons with disabilities have the same health status as others in the population</p>

**REMINDER - INPUT / OUTPUT / OUTCOME / IMPACT**

While different classifications for indicators exist, we use here the typology suggested by the European Commission<sup>1</sup>.



<sup>1</sup> Guideline for the use of indicators in country performance assessment, December 2002

**Input indicators**- the financial, administrative and regulatory resources provided by government and donors, dedicated to achieving our disability sensitive targets (within the overall goal of disability inclusive project management)

e.g.: Investment in disability inclusive health information systems

**Output indicators**- measure the immediate and concrete consequences of the measures taken and the resources used:

E.g.: National health related rehabilitation service in place

**Outcome indicators**-measures the results at the level of beneficiaries- access to, use of and satisfaction with the above outputs; this is not an actual measurement of quality of life as such, but gives a strong indication:

E.g.: % of people with disabilities with access to population based health programmes

**Impact indicators**- the consequences of the outcomes, or the measurement of key dimensions of well being- for example, good health, literacy, etc

Eg: Information is available on access for people with disabilities to the health sector enabling better planning of inclusive health services People with disabilities have