

Mainstreaming marginalized groups in development: role of civil society organizations (CSOs)?

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Abstract: *Marginalization of the elderly, children, women and people living with HIV/AIDS is a global phenomenon while being extremely severe in areas which are less developed. It is imperative for Civil Society Organizations to integrate them in every aspect of their activities. In this background, this paper assessed the role of Civil Society Organizations in mainstreaming the marginalized groups in the society. Disability is a major challenge when discriminatory social structures are being discussed. Persons with disability as a monolithic group can be challenging since they are diverse in terms of additional identity markers such as class, race, gender and age groups. Civil Society Organizations need to take this groups into consideration for the above mentioned reasons. This can be done best by integrating their interests and needs into the organizations' policies and considering them throughout the project cycle. HIV and AIDs as a health status have social impacts surpassing physical infections and weakening immunity system. These social impacts emanate from the attitudes and thinking held and developed by societies. In some cases, people living with HIV or AIDS have been rejected by their loved ones and their communities, unfairly treated in the workplace, and denied access to education and health services. Therefore, there is a need to have policies which direct the organizations' work which would in turn trickle down into planning at the community and institutional levels as well as setting of monitoring and evaluation indicators. Children are the large group in our communities excluded from decision making and as a result marginalized from most development activities both as a beneficiary and a stakeholder. It is essential to involve children in decisions which directly or indirectly affect them since it is their right to participate. Their participation should also be result oriented in providing child friendly services as well as ensuring child protection. Elderly people are another group of marginalized and there is a need for CSOs to ensure their health, water and sanitation as well as food security programs include concerns of the elderly in societies. In many parts of the world, we find groups which are excluded from the society as a result of their occupation. It is important to include those marginalized on the basis of their occupation in the works of Civil Society Organizations as the main objective since they occupy the lowest strata of societies.*

Key Words: Marginalized Groups; Development; Civil Society Organizations; Mainstreaming

Background

Marginalization of different groups are highly structural which are deep-rooted in the hierarchies and relations among different groupings of a society that different organizations – both governmental and non-governmental – face the challenge of not being able to surpass them easily rather they end-up trapped in them and overlook the marginalized groups in both their planning and operation. Moreover, marginalization tends to be impinged as a process or set of processes rather than a static condition which entails its dynamism (Smith, 2000).

Development initiatives in poorer sections of the world are not distributed equally. This is as a result of some portions of the society being placed at a prior tier to receive social goods while others placed at the lower strata and hence the distribution tends to weigh towards one

side. Elderly, children, women as well as People Living with HIV/AIDS (PLWHA) are among the socially excluded groups in developing countries for traditional and historical reasons. Marginalization of the elderly, children, women and PLWHA is a global phenomenon while being extremely severe in areas which are less developed and even worse in Sub-Saharan Africa. This is linked to the lack of economic amenities available as well as the low literacy level which is 59% for adults and 70% for the youth. The percentage for adult literacy is below 50% in Benin, Burkina Faso, Chad, Ethiopia, Guinea, Haiti, Liberia, Mali, Niger, Senegal and Sierra Leon (UNESCO, 2013).

As the above mentioned groups of people are highly excluded and the poorest in developing societies, it is imperative for CSOs to integrate them in every aspect of their activities as their main objective is to assist the poorest in societies. Hence this paper assessed how the CSOs are working for the mainstream of marginalized groups in the society.

1. Mainstreaming Persons with Disability (PWD) in Development

Societies have their own groupings with which distributions of tangible and intangible goods are made with. Here, some group of people tend to be more dominant in controlling both soft and hard power which entails ownership over material goods as well as decision making power in communities. In this process, other portions of the society are mostly disregarded and excluded from development initiatives. Persons with disability are among the people excluded at the lowest strata of societies. This section intends to clarify the challenges that PWD face and how CSOs could better include them in their programming.

Disability is a major challenge when discriminatory social structures are being discussed. Regarding persons with disability as a monolithic group can be challenging since they are diverse in terms of additional identity markers such as class, race, gender and age groups. Thus specific groups of persons with Disability might be more susceptible to discrimination than others depending on the context.

Disability has been defined in different ways. Some of the legal documents such as the United Nations (UN) Convention on the Rights of Persons with Disabilities define it as a physical or mental impairment which substantially limits one or more of such person's major life activities a record of having such an impairment; or being regarded as having such an impairment. It is also important to understand what is meant by discrimination of persons with disability. Here National Disability Authority's (NDA) publication of the UN convention on the Rights of Persons with disabilities put it as:

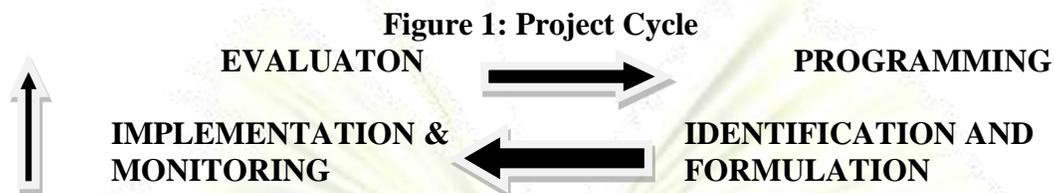
'Discrimination on the basis of disability – means any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including denial of reasonable accommodation' (NDA, 2006). Oliver, M. (1996) has more positive understanding as to responsibilities of different institutions concerning how services delivered by them should be fine-tuned to the needs of persons with disabilities. Hence, he mentioned that all the things that impose restrictions on disabled people; ranging from individual prejudice to institutional discrimination; from inaccessible buildings to unusable transport systems; from segregated education to excluding work arrangements and so on. Further, the consequences of this failure do not simply or randomly fail on individuals but systematically upon disabled people as a group who experience this failure as discrimination institutionalized throughout society.

In many countries, children with disabilities are excluded from school for one reason or another. One major reason herein is, in communities whose majority has not been educated, children with disabilities are regarded as a curse and they end-up hidden away from the community. Looking at it at the institutional level, this might be because of the issue of prioritization from the government as well as other development partners whereby these institutions prioritize scarce funding to children without disability. Moreover, it is very common to see schools without the facilities or teaching staff to include children with disabilities.

CSOs need to take persons with disability into consideration for the above mentioned reasons. This can be done best by integrating their interests and needs into the organizations' policies and considering them throughout the project cycle. Accordingly, identification of the problem, preparation of proposal, the review process, implementation as well as evaluation needs to integrate the challenges of people with disabilities as one of the cross cutting issues under the project.

Mainstreaming issues of persons with disabilities

CSOs can best ensure that their development include PWD if they design and indorse a mechanism to ensure every part of the project cycle is conducted in a manner to incorporate the challenges they face. Here, European Commission's tool is instrumental for incorporating the perspectives of PWD.



Source: European Commission, Make Development Inclusive: how to include the perspectives of persons with disabilities in the project cycle management guidelines of the EC

(i) Programming;- This is where a situation analysis is undertaken as to the socio-economic indicators and of national and donor priorities. Its purpose is to identify the sector needs as well as frameworks of intervention. It is important to integrate a disability perspective during the programming phase to ensure that the situation analysis will be more comprehensive, improving the possibilities for creating a programme framework that addresses poverty alleviation in an inclusive equitable manner. This is mainly about acquiring quantitative and qualitative data on the disability situation and making use of it. Identifying and consulting with stakeholders in the disability sector is important and can be done through;

- Having an overview of the stakeholders in the disability sector
- Obtaining an understanding of what the role for the various stakeholders
- Including stakeholders from the disability sector in civil society dialogue on an equal basis with other actors

The World Bank (2007) puts the following systematic questions in place to be made use of while conducting assessments.

Social diversity and gender

- Are there differences in needs among subgroups of the disabled (indigenous groups, religious or ethnic affiliation, socioeconomic strata)?

- Who are the most socially excluded disabled?

Institutions, rules and behavior

- What are formal and non-formal institutions that prevent or promote PWD participation?
- To what extent do PWDs participate in formal and non-formal institutions?
- Are there any opportunities to promote PWD participation through the formal and non-formal institutions that are present in the project area?
- What other venues can the project promote for participation of the people with disability at local and national level?

Stakeholders

- Who are the stakeholders in the project? Do they support or oppose the project?
- Does the project threaten the interests (actual or perceived) of certain stakeholders, especially the disabled?
- What are the potential conflicts among stakeholders that the project might include?

Social risk

- Will people with disability formally in the project?
- Is there a likelihood of elite capture among the disabled?
- Are there any significant local, regional or national risks related to disability?
- What measures can be taken to minimize or avoid these risks?

(ii) Identification and Formulation

It is important to incorporate people with disabilities here since there is an increased chance that the projects / programmes will address issues of concern to people living in poverty and that access to project benefits will be equitable. The inclusion of disability perspectives in the identification and formulation phase can be done through:

- The participation of disability stakeholders (in particular the participation of representative organizations of persons with disabilities or other organizations active in the disability sector)
- The inclusion of specific activities developed for reducing physical, institutional and social barriers that persons with disabilities face
- The reflection of these activities in the budget

(iii) Implementation and Monitoring

The purpose here is to monitor the project which already included a disability perspective both in terms of activities and budgets. Apart from addressing the needs of the disabled, including a disability perspective here assists in gathering evidence of the impacts achieved.

(iv) Evaluation

The purpose of the evaluation phase is to 'make an assessment, as systematic and objective as possible, of an on-going or completed project, programme or policy, its design, implementation and results.

2. Mainstreaming Persons with HIV and AIDS in Development

Human, Immunodeficiency Virus (HIV)/ Acquired, Immunodeficiency Syndrome (AIDS) has been a headache for countries around the world for decades. Much is improving in terms of health services and treatments of the disease from time to time as a result of new medical developments and better financial sources dedicated for treatment. HIV is a virus that attacks immune system of the human body. The immune system gets weak through time, in medical terms this is explained by the CD4 cells dropping significantly. A normal person is expected to have CD4 cells of 600-1500 per cubic milliliter of blood and if the CD4 cells drop below 200 the body cannot operate at all. This situation is called AIDS (Canadian HIV/AIDS Clearinghouse, 2001).

Human beings despite their sex, age, sexual orientation or ethnic background have a chance of being affected by HIV/AIDS. The virus can be transmitted from one person to the other through blood, semen, vaginal fluid and breast milk. Some groups are however more exposed to getting HIV than other. An example here is women who are exposed to getting the virus for natural as well as social reasons of being denied decision making powers and generally having lower positions in societies. The most common way to get HIV/AIDS is unprotected sex while the other one is sharing a needle (blood transfusion). However, the disease is not transmitted through sneezing, coughing, eating with the person or even sharing toilet seats or bed sheets. 1/3 to 1/4 of HIV positive mothers give the virus to their children during pregnancy or birth while if treated there is 2/3 less chance for HIV positive mothers to give the disease to their children when they deliver (The Patient Education, 2011).

There is no cure found for HIV and AIDS so far. However, there are medications available to slow-down the progression and improve quality of life for people living with HIV/AIDS (PLWHI). The treatment focuses on suppressing the virus and improving the patient's immunity to diseases which is called Highly Active Antiretroviral Therapy (HAAT). The kind of treatment depends on the viral load in the patient's blood. There are about 3.3 million people who have either HIV or AIDS around the world (UNAIDS, 2012)

HIV and AIDS as a health status have social impacts surpassing physical infections and weakening immunity system. These social impacts emanate from the attitudes and thinking held and developed by societies. In some cases, people living with HIV or AIDS have been rejected by their loved ones and their communities, unfairly treated in the workplace, and denied access to education and health services. However, such acts are morally unacceptable, against overall human rights standards and most importantly worsening the situations of PLWHA.

Sigma, in its generic meaning is defined as the holding of derogatory social attitudes or cognitive beliefs, a powerful and discrediting social label that radically changes the way individuals view themselves or the way they are viewed by others (Smart, 2004). HIV and AIDS based stigma is a significant challenge since it discourages patients to expose themselves which might in turn discourage HIV positives from getting health services. Discrimination is an action based on a pre-existing stigma; a display of hostile or discriminatory behavior towards members of a group, on account of their membership to that group (ibid).

HIV and AIDS based stigma has a number of sources which have to do the perceptions instigated in societies. The sources of HIV and AIDS stigma and discrimination interact with preexisting fears about contagion and disease. Early AIDS metaphors such as death, horror, punishment, guilt, shame and otherness have exacerbated these fears, reinforcing and legitimizing stigmatization and discrimination (Parker and Aggleton, 2002).

Marginalization of PLWHA also accompanies the very sources of stigma and discrimination on the basis of HIV and AIDS. Assuming CSOs are established and operating with the central objective of protecting the poor and marginalized parts of the society, it is important if not a necessity to mainstream HIV and AIDS as a crosscutting issue to be integrated throughout the programming. The advantage of mainstreaming HIV and AIDS in CSOs is multifaceted since it would result in integrating PLWHA into the programs and projects as well as result in the creating an 'AIDS competent Society' where people are well informed about what causes of HIV/AIDS and make decisions accordingly.

Approaches to Mainstreaming PLWHA in development programming

The marginalization of PLWHA persists in various social structures starting with the lowest tiers of the society. This is also witnessed in the CSO environment which operates within the existing social structures. Internal capacity of CSOs to mainstream HIV and AIDS is evident to incorporate issues which are important. Accordingly, before an organization starts HIV/AIDS mainstreaming activities in projects there is a need to ask the following questions (Cabungo and James, 2005).

- Is there an institutional policy which enables us to mainstream HIV/AIDS in to the programs and projects?
- Does the organization possess HIV/AIDS responsive planning at both institutional and community level?
- Is the staff well equipped with education to address concerns which have to do with HIV/AIDS?
- Did the organization conduct any research to identify HIV/AIDS related concerns from the staff and community sides?
- Are our monitoring and evaluation indicators tailored to respond to issues of HIV/AIDS?
- Are we able to do any advocacy work on HIV/AIDS?
- Do we have any networks with other CSOs, the grassroots and government to ensure deeper impacts of mainstreaming HIV/AIDS in to the programme?

An organization which lacks the policy to mainstream HIV and AIDS internally would have a hard time of incorporating it in its programming and operation which would mostly be donor driven in character. Therefore, there is a need to have policies which direct the organizations' work which would in turn trickle down into planning at the community and institutional levels as well as setting of M&E indicators which are tailored to assess the impact of mainstreaming HIV and AIDS in our specific projects. On the other hand according to STOP AIDS NOW! Publication, if the organization is internally strong to do HIV/AIDS mainstreaming, it is likely to have various qualities which would facilitate programs' efficiency in mainstreaming HIV/AIDS.

A policy for mainstreaming HIV and AIDS into our programming broadly involves assessing both internal and external environment for mainstreaming HIV and AIDS, identifying existing challenges with HIV/AIDS mainstreaming, setting objectives, potential activities to narrow the gap between the existing situation and the objective as well as integrating HIV/AIDS mainstreaming indicators in the monitoring and evaluation system.

Community led right-based approach as a tool to mainstream PLWHA

The Community led right – based approach is highly comprehensive in its approach to include PLWHA by creating an AIDS competent society. It has been fine-tuned to CSOs and applied practically by ACORD. In this approach the community itself will be encouraged and supported

to bring AIDS competence. Here, it is believed through promoting the role of the community by which HIV/AIDS can be mainstreamed fully into sustainable and relevant development plans. In order to ensure the community spearheads in the move to competence, there needs to be an ongoing learning, action and reflection, challenging problems and making the best use of available opportunity by the CSOs. The community led right-based approach intends to place the CSOs as a facilitator to make the community lead by ensuring the following general tasks are accomplished.

- ***Increasing the participation of PLWHA as well as other marginalized groups*** in decision-making processes of the community concerning the required AIDS competence
- ***Supporting the development of partnerships*** among different portions of the communities, service providers, policy makers and donors to achieve change within a relatively shorter span
- ***Backing new and existing networks*** between the community, CSOs, policy makers and service providers to facilitate the sharing of noble ideas and opportunities from one actor to the other.

3. Mainstreaming Children in Development

Children are the large group in our communities excluded from decision making and as a result marginalized from most development activities both as a beneficiary and a stakeholder to development initiatives. Children are easy to discount and marginalize due to lack of voting power, certain invaluable life skills and complete education. Children can be set aside as an afterthought. To adults, it is easy to say ‘they will adapt’ when making decisions that affect children’s lives. And still, children will grow up to become adults and vibrant members of the society.

There are various age references given by legal frameworks while defining the child. The United Nations Charter on the right of the Child (UNCRC) defines the child as a human being below the age of eighteen years unless under the law applicable to the child, majority is attained earlier (Otika, 2013). Every year about 130 million children are born and many of them face rights violations such as physical, sexual violence and neglected by the society. In less developed societies, the girl child is forced into early marriage.

Provision, protection and participation have been acknowledged as major purposes to be fulfilled and respected for children by the UNCRC and the African Charter on the Rights and Welfare of the Child (ACRWC). Otika (2013) suggested the following mechanisms of integrating child protection into the works of CSOs.

- Design independent child protection policies in the organization
- Design child specific programs aiming to achieve child development
- Take part in policy advocacy to bring about policies and strategies that are child friendly
- Take part in management of cases of violence against children by networking with other CSOs

According to Cambodian Organization for Children and Development (COCD, 2012), CSOs need to have a child protection policy to ensure all children associated with their programs are cared for in an environment where they are safe, protected and where their development needs are appropriately addressed. The policy will likely achieve the following objectives.

- To raise awareness of child rights among staff, children, families and communities

- To support staff to undertake the care and protection of children and to set a good example to others
- To prevent child abuse from happening by ensuring that CSO staff follow the set standards and create child safe environments
- To ensure that where child abuse does occur, damage to the child is minimized and appropriate action is taken to care for and rehabilitate the child
- To work within the national legal environment and contribute to efforts of child protection

A child protection policy can also be assisted by having a child protection focal person who ensures that the policy is implemented and also suggest ways of including child protection cautions into the project cycle.

Child participation is broadly defined as the meaningful engagement of children in all issues which affect their lives. According to the International Save the Children Alliance, Child participation is defined as (Save the Children, 2013);

Having the opportunity to express a view to influence decision-making and achieve change. Children's participation is an informed and willing involvement of all children including the most marginalized and those of different ages and abilities in any matter concerning them either directly or indirectly. Children's participation is a way of working and an essential principle that cuts across all programs and takes place in all arenas – from home to government, from local to international levels.

It is essential to involve children in decisions which directly or indirectly affect them since it is their right to participate. Every effort must be taken to ensure that all children including those with special needs have access and opportunities to participate. Child participation should be meaningful rather than having a set of activities of consulting children for the wrong reasons. In many instances development actors are observed while they consult children for manipulation which involves imposing the adult's thoughts on the children as if it was their own. Others use involvement of children in their projects for the purpose of decoration since they believe having children around would make their project attractive. Tokenism is also another way of involving children in projects. This is about getting inputs from children without the real intent of using it. All these tires of participation are not what we should be aiming at rather while involving children in the projects it has to be in a meaningful and effective manner.

Importance and benefits of participation to children

- Helps to identify their key concerns
- Critical to designing programmes specifically tailored to them
- Provides children with a greater sense of ownership and responsibility, especially in programme development
- Develops life skills including empowerment, self-esteem and self confidence
- Enhances democracy and the democratic process
- Increases sensitivity to perspectives and needs of others – develops competencies such as cooperation, tolerance and collaboration
- Promote group responsibility – sharing experiences and solutions
- Exposure to social networks, skills and enjoyment
- Preparation for leadership
- Creates positive relationships among children

- It inculcates a sense of patriotism among the children

Ideally children should be involved in every aspect of programming starting from its situation analysis through the monitoring and evaluation. Here, their participation should be meaningful where by the children are consulted and their inputs affect the process of designing, implementing and evaluating projects. Their participation should also be result oriented in providing child friendly services as well as ensuring child protection. The following can be performed on the programming.

Situational analysis – Get the views and opinions of children in a participatory assessment process. Design research tools and execute projects in a way that will ensure effective and meaningful involvement of children, such as in study samples, designing child sensitive research questions, accounting for differing groups of children etc.

Planning – Children must be involved in the planning of all activities upfront, be consulted by their representatives and allowed to present their views to organizations, local government councils etc.

Implementation – This involves moving children from the periphery to the center of project/programme implementation. Children should be supposed to realize the goals they set for themselves and to democratically elect a committee to oversee the project/programme activities, such as raising awareness on children's rights amongst their peers and the community.

Monitoring and evaluation – It is critical to make children part of the monitoring and evaluation framework. Define project/programme success or lack of it using parameters and views expressed by children.

4. Mainstreaming Elder People in Development

The elderly are defined differently from one country to another. The definitions mostly include the age of functionality and retirement. Most developed countries take 65 years as a cut off point for the elderly while countries in the developing world tend to differ. The UN takes 60+ as a cutoff point to define the elderly. Nevertheless, the 60+ cutoff points has not been a point of consensus for various reasons. It is suggested that in Africa those who are above 50 or maximum 55 should be referred to as an elderly, the reason being low life expectancy in the continent. The age referred to as the elderly, using retirement as a point of reference, in Africa ranges from 50-60, depending on the setting, the region and the country.

The ageing process is mainly biological while the constructions of the society as to who is ageing or not is also important. In the developed world chronological time matters to identify the elderly mostly being between 60 and 65 while old age in the developing countries is correlated to the activities people can perform. In this regard, rather than setting an age limit societies in developing countries relate old age to discontinuity of active contribution.

There is a need for CSOs to ensure their health, water and sanitation as well as food security programs include concerns of the elderly in societies since they are believed to have specific set of vulnerabilities and needs in relation to their age impacting their capacity to engage in various activities of income generation.

5. Mainstreaming those marginalized on the basis of occupation

In many parts of the world, we find groups which are excluded from the society as a result of their occupation. They are mostly called 'hunter groups' or 'occupational castes' (like smiths, potters and tanners). They are mostly identified as endogamous occupationally hereditary

groups. There are numerous list of negative perceptions forwarded against these group. Some are considered as impure and culturally 'polluting', they are usually excluded from social interaction with the dominant group and public meetings organized for making decisions. This results in spatial, economic, political, social and cultural segregation.

The marginalized live in the less preferred areas, occupy the outskirts of markets and are not expected to attend major social events. Moreover, the marginalized produced objects for their patrons and the smiths repair apparatuses throughout the year while being paid only after harvest if production is abundant. They are also excluded from leadership positions, apart from a brief honeymoon period after the 1974 revolution, as the dominant groups are not willing to be represented by the marginalized and in some instance they were even denied food aid (Pankhurst and Freeman, 2001).

It is important to include those marginalized on the basis of their occupation in the works of CSOs as the main objective of these organizations is to support those groups which occupy the lowest strata of societies. Accordingly CSOs should;

- Have policies and strategies to enable them include issues of groups marginalized on the basis of their occupation, the minimum aim of these strategies being 'do no harm' while the maximum 'transformative'.
- Train staff with an objective of clarifying the need to include the issues of those marginalized on the basis of occupation in programming
- Include the major concerns for those marginalized in their occupation under situation analysis or needs assessment stages of projects
- Ensure projects are implemented in a manner which is sensitive to those marginalized on the basis of their occupation as well as bringing more gains to them
- Monitoring and evaluation tools and processes should be well-equipped to capture the progresses made by projects in addressing the issues of those marginalized on the basis of occupation in societies
- Involve and project those who are marginalized on the basis of occupation in the programming process.

Conclusion

Development initiatives in poorer sections of the world are not distributed equally. This is as a result of some portions of the society being placed at a prior tier to receive social goods while others placed at the lower strata and hence the distribution tends to weigh towards one side. To overcome such situation, the ideal situation for CSOs would be to include issues of People Living with HIV/AIDS, Persons with Disability, Children, the Elderly and Occupational minorities. However, because of lack of resources both in terms of funding as well as human resources we may be forced to prioritize some issues of mainstreaming than others. While prioritizing, the overall of our organization as well as existing plans and strategies should lead.

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